

United Way Needs Assessment Survey

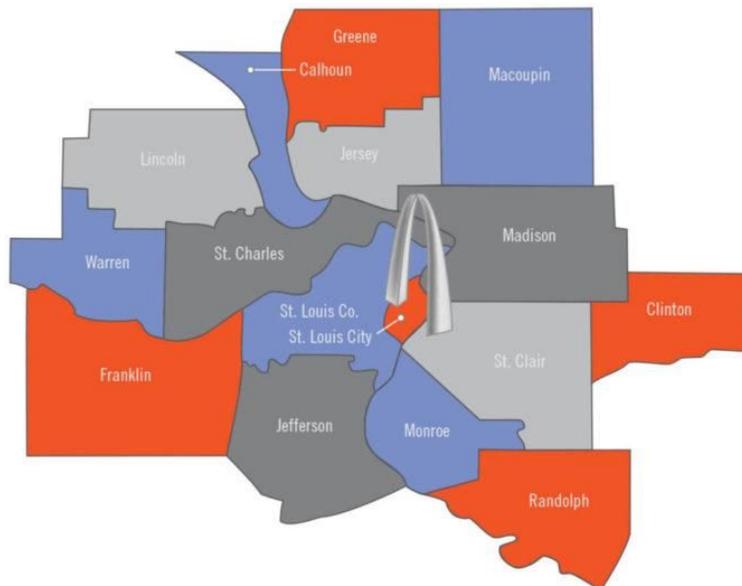
Introduction

Welcome to United Way's Community Needs Survey.

United Way of Greater St. Louis serves 16 counties in Illinois and Missouri with a population of nearly 3 million people. We support more than 160 partner agencies in helping as many people as possible live their best lives.

We are shifting our funding strategy to have a greater impact in our community. To support this effort, we are conducting this Community Needs Survey with residents across our service area. Your participation in this survey will help us better understand our community's challenges, needs and priorities. Collectively and anonymously, the responses from this survey will be shared in a public online data tool and a public report that highlights needs in each United Way service county and the region overall. Ultimately, survey responses will help inform realignment of our funding to better support our community.

United Way of Greater St. Louis Service Area



This survey is for adults 18 years of age and older. You do NOT have to participate in this survey. If you do participate, you are not required to answer any or all of the questions presented. There are no anticipated risks to participating in this survey. Additionally, no benefits will be afforded to an individual for participating. Responses to the survey will remain

anonymous and stored on a secure server; only aggregate results will be reported. The survey will take about 15 minutes to complete.

INITIAL QUESTIONS

Q1. Please check the group that includes your age.

- Under 18 years
- 18-24 years
- 25-39 years
- 40-49 years
- 50-64 years
- 65-74 years
- 75-84 years
- 85 years and over

Q2. What zip code do you live in?

SECTION 1 OF 3: YOU AND YOUR FAMILY

The questions below explore how, if at all, you and your family could use support in living your best possible life.

Q3. Imagine 25 years from now. Share one (1) word that represents your hopes for what your family will be then. What about your community? Our region?

My family will be... _____

My community will be... _____

My region will be... _____

Q4. What, if anything, do you worry about the most for you or your family/household?
Please answer in 5 words or less.

Q5. On most days, which of the following pictures most closely describes how you feel tackling day-to-day activities?

 <p><input type="checkbox"/> Uphill battle</p>	 <p><input type="checkbox"/> Struggle, but not alone</p>	 <p><input type="checkbox"/> Empowered</p>	 <p><input type="checkbox"/> Defeated</p>
<p><input type="checkbox"/> None of these options apply to me.</p>	<p><input type="checkbox"/> I prefer not to answer.</p>		

Q6. Thinking about the last 12 months, check the boxes below for all statements that were true for you or another member of your household.

- Drug or alcohol use resulted in emergency/urgent medical attention.
- Drug or alcohol use led to an encounter with police.
- Drug or alcohol use resulted in one day or more of missed school, work, or other duty.
- Drug or alcohol use led to withdrawal from typical activities, responsibilities, or hobbies.
- None these options apply to me.
- I prefer not to answer.

Q7. On most days, which of the following best describes your general mood?

 <input type="checkbox"/> Joyful	 <input type="checkbox"/> Scared	 <input type="checkbox"/> Sad	 <input type="checkbox"/> Angry
 <input type="checkbox"/> Content	<input type="checkbox"/> Other	<input type="checkbox"/> I prefer not to answer.	

Q7A. If you responded “scared,” “sad,” or “angry” to the previous question (Question 7), Are you currently working with a professional (counselor, therapist, coach, faith leader, etc.) to address challenges and improve your general mood?

- Yes
- No
- No, but I would like to.
- I prefer not to answer.
- Skip-- I did not respond with “scared”, “sad” or “angry” to the previous question.

Q8. For your household, please check any of the following bills that were unpaid or late one or more times in the last 12 months.

- Rent/Mortgage
- Childcare
- Gas/Electric
- School Tuition
- Student Loans
- Car Loan
- Telephone
- Internet
- Health Insurance
- Healthcare Bill (for an office visit, medical procedure, prescription, etc.)
- Other _____
- None of these
- I prefer not to answer.

Q9. If your neighbors were asked to share which bills were unpaid or late in the last 12 months, do you think they would have an answer that's similar to yours, or different from yours?

- Similar
- Different
- Too hard to say
- I prefer not to answer.

Q10. Thinking about the last 12 months, check the boxes below for all statements that are true for you.

- I went without food for more than a day. (Not including fasting or dieting)
- I was without clean, drinkable water for more than a day.
- I was without permanent, indoor shelter for more than a day.
- None of the above are true for me.
- I prefer not to answer.

Q11. Does your home have issues with any of the following? *Check all that apply.*

- Bugs, mice, or other pests
- Mold, mildew, lead, or other toxins
- Collapsing wall(s), roof, or other structural component
- Unclean or no water
- No heat or air conditioning
- Not enough bedrooms for your household members to sleep comfortably
- No electricity
- Other: _____
- My home does not have any of the above issues.
- I do not currently have a home
- I prefer not to answer.

Q12. If you have at least one child under the age of 18 living with you, check all of the following that apply to you.

- My child/children is/are enrolled in childcare or school.
- The childcare/school meets or exceeds our needs.
- The childcare/school is within a reasonable distance from my home for my family.
- The current cost of childcare/school is reasonable for my family's income.
- I have at least one child under the age of 18 living with me, but none of the above are true for me.
- I do not currently have at least one child under the age of 18 living with me.
- I prefer not to answer.

Q13. For your day-to-day activities, how do you typically get from one place to the next?

 <p><input type="checkbox"/> Bus/Public Transportation</p>	 <p><input type="checkbox"/> Walking</p>	 <p><input type="checkbox"/> Your Car or Truck</p>	 <p><input type="checkbox"/> Bike</p>
 <p><input type="checkbox"/> Wheelchair</p>	 <p><input type="checkbox"/> Carpool/Rideshare</p>	<p><input type="checkbox"/> Other</p> <hr/> <hr/> <hr/>	<p><input type="checkbox"/> I prefer not to answer.</p>

Q14. In your opinion, is your primary method of transportation good enough for your daily activities and lifestyle?

- Yes
- Sometimes
- Not really
- I prefer not to answer.

Q15. When facing hardships (i.e. financial, health, etc.), how do you most prefer to find help?

- Online Research (like websites, social media, etc.)
- Print Research (like newspapers, books, etc.)
- Speak with an important person in your life
- Contact an expert in the community
- None of the above.
- I prefer not to answer.

Q16. How did you feel the last time a person or organization offered help to overcome a personal hardship? *Please select up to 2.*

- Thankful
- Frustrated
- Embarrassed
- Relieved
- Empowered
- Other: _____
- None of these apply
- I prefer not to answer.

Q17. We are trying to identify the most important issues you face. Thinking about the last 12 months, please choose your top 1-2 greatest needs for each section. If your greatest need is not listed, please write it in.

Q17A. What, if anything, prevents you or your family from feeling safe and engaged? If your greatest need is not on the list, please write it in. *Select up to 2.*

- I don't have good relationships with others in my community
- There is no place close by to purchase the food I can afford
- There is no place to play or gather in my community
- There is not aging support for me or my senior family member(s)
- I am afraid I could be hurt by violence
- Other _____
- My community is safe and engaged
- None of these apply
- I prefer not to answer.

Q17B. What are your greatest basic needs? If your greatest need is not on the list, please write it in. *Select up to 2.*

- I worry that I will not have enough food to feed myself or my family
- I worry that I will not have stable, affordable housing
- I don't have a reliable way to get to day-to-day activities
- I don't have the clothing I need for myself and/or my family
- I need help dealing with legal issues (evictions, warrants, child support/custody issues, domestic violence, etc.)
- Other _____
- All my basic needs are met
- None of these apply
- I prefer not to answer.

Q17C. What are your greatest educational needs? If your greatest need is not on the list, please write it in. *Select up to 2.*

- I need affordable and quality childcare for my baby, toddler, or preschooler
- My school-age children need better opportunities to learn in school
- My school-age children need better opportunities to learn outside of school (after-school or summer programs, etc.)
- I need better opportunities for my own education
- Other _____
- I have no problems accessing quality education for myself or my family
- None of these apply
- I prefer not to answer.

Q17D. What, if anything, prevents you or your family from leading a healthy life? If your greatest need is not on the list, please write it in. *Select up to 2.*

- I can't afford to go to the clinic/doctor
- I need help to improve my or my family's physical health
- I need support for my or my family's mental health
- I or someone in my family have a disability and need better services
- I need support with my or my family member's substance abuse
- Other _____
- I have no health concerns
- None of these apply
- I prefer not to answer.

Q17E. What, if anything, prevents you from being financially secure? If your greatest need is not on the list, please write it in. *Select up to 2.*

- I need a job
- I need a better job
- I cannot handle a major unexpected expense
- I need help managing my finances
- I need help to launch my own business (programs, loans, etc.)
- Other _____
- I am financially secure
- None of these apply
- I prefer not to answer.

Q18. Which of the following, if any, are barriers to accessing the services and opportunities that you need to reach your personal/family goals? *Please check all that apply.*

- Access to transportation
 - Access to technology (internet, computer, phone, etc.)
 - Not sure where to go for help
 - Not feeling valued or welcomed at places I go to for help
 - Costs related to services or resources
 - Hours of availability don't fit my schedule
 - Other _____
 - No barriers
 - I prefer not to answer.
-

SECTION 2 OF 3: YOUR COMMUNITY

The questions below explore where you feel your community is thriving and where it's experiencing challenges.

Q19. Which of the following places best defines "community" to you?

- My street
- My neighborhood
- My town/my city
- My county
- Other _____
- I prefer not to answer.

Q20. If you have lived in your community for longer than 6 months, how would you describe changes in the general condition of your community?

- My community has improved a lot.
- My community has improved somewhat.
- My community has stayed about the same.
- My community has gotten somewhat worse.
- My community has gotten a lot worse.
- I prefer not to answer.
- I have lived in my community for fewer than 6 months.

Q21. How would you describe your community to someone who was considering moving there?

Q22. Of the following options, where do you think offers the best quality of life for you and your family?

- Your community
- Another community nearby
- A community outside the region
- I prefer not to answer.

Q23. Compared to others in my community, I think I'm doing...

- Much better
- A little better
- About the same
- A little worse
- Much worse
- Too hard to say
- I prefer not to answer.

Q24. Compared to other communities I know about, my community is doing...

- Much better
- A little better
- About the same
- A little worse
- Much worse
- Too hard to say
- I prefer not to answer.

Q25. In your opinion, how well do the following support families or individuals in your community?

	Provide a lot of support	Provide some support	Provide a little support	Provide no support	Too hard to say	I prefer not to answer.
Neighbors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nonprofits/charities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Local government	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Churches/faith-based communities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q26. The biggest issues my community faces are driven by...

- Factors mostly **within** my community's control that can be changed locally
- Factors mostly **not within** my community's control that will need action from others outside of my community to change
- A mix: some things my community can control, and some things my community can't control
- I prefer not to answer.

Q27. What do you believe needs to change today for everyone in your community to thrive?

SECTION 3 OF 3: ABOUT YOU

The following questions are being asked to understand how diverse (or limited) participation in this survey is across the region. Information in this section will inform where additional outreach and participation is needed.

Q28. Which of the following describes your household?

- I live alone.
- I live with at least one other adult and no children.
- I am the only adult in my household, and one or more children under the age of 18 live with me.
- My household includes at least one other adult and one or more children under the age of 18.
- I prefer not to answer.

Q29. Which of the following describes your current housing?

- I own the place I live in and have paid off my mortgage.
- I own the place I live in and make mortgage payments.
- I pay rent for the place I live in.
- I do not own the place I live in and I am not required to pay rent.
- I do not have a steady place to live in.
- I prefer not to answer.

Q30. Please check the box that best reflects your household income in the last 12 months.

- \$0
- \$1 - \$10,000
- \$10,000 - \$14,999
- \$15,000 - \$34,999
- \$35,000 - \$58,999
- \$59,000 - \$74,999
- \$75,000 - \$99,999
- \$100,000 - \$149,999
- \$150,000 - \$199,999
- \$200,000 or more
- I prefer not to answer.

Q31. Which of the following best describes your employment status?

- Employed, working fewer than 40 hours per week
- Employed, with one (1) job, working 40 hours or more per week
- Employed, with two (2) or more jobs, working in total 40 hours or more per week
- Student, also working
- Student, not working and not looking for work
- Student, not working but looking for work
- Not employed but looking for work
- Not employed and not looking for work
- Not able to work
- Retired
- I prefer not to answer.

Q32. What is the highest level of school you have completed?

- Less than a high school degree
- High school degree or GED
- Some college, professional training or trade school
- Associate/2-year degree
- Bachelor/4-year degree
- Graduate or Professional (M.A., J.D., etc.) degree
- I prefer not to answer.

Q33. We invite you to describe your identity in the way that feels truest to you. We've designed the following question to give you the most flexibility in doing so.

Please check all boxes that represent how you prefer to describe your identity. *You can select as many boxes as you want. You can also leave boxes empty. We encourage you to use the "Other" options as needed!*

- Female
- Non-binary
- Male
- Transgender
- Some Other Gender _____
- Black
- Brown
- White
- African-American
- American Indian
- Native American
- Caucasian
- Asian
- Pacific Islander
- Some Other Race _____
- Hispanic
- Latinx
- Some Other Ethnicity _____
- U.S. Born
- Non-U.S. Born
- Other _____

Thank you for participating in this survey. Please send completed surveys to:

United Way of Greater St. Louis
Attention: Emily Uzzle
910 N. 11th Street
St. Louis, MO 63101