

English Impact Monterey County Survey

Welcome to the Impact Monterey County Community Survey

Impact Monterey County is a collaborative community planning effort. Working with you, your local nonprofits, businesses, and public agencies are trying to identify the most effective ways to improve our county. We all want Monterey County to be the best possible place to live; by taking this survey, you will be able to tell us what that looks like to you. Thank you for agreeing to participate!

Things to Keep in Mind:

- The survey should take you 15-20 minutes to complete.
- There are no right answers, nor are there any wrong answers. All you have to do is draw from your own experiences, views and perspectives.
- Your responses will remain anonymous. The survey will NOT collect any information that could identify you. Your responses cannot be linked with your name or email address. Results from this survey will only be presented in aggregate form.
- Your completed survey will help ensure we have input from a broad range of people in our community. The few questions about demographics are to help ensure all communities are represented.
- If there's a question you don't want to answer, just skip it and go on to the other questions.
- The survey submission deadline is October 31, 2014 at 5:00 p.m.

If you have any questions or need assistance with the survey, please contact **Zuleima Arevalo at zarevalo@csumb.edu**. For more information about Impact Monterey County, please go to www.impactmontereycounty.org.

Survey Instructions

Instructions for Paper Survey Participants:

Please complete the paper survey by circling or checking-off your selected choices and/or writing your answers in the comment boxes provided. Once you complete the survey, please give it to an Engagement Team member (if they are assisting you) or insert the survey into the self-addressed/stamped envelope provided and mail to: United Way of Monterey County, 60 Garden Ct # 350, Monterey, CA 93940.

If at any time you have questions or need assistance entering the information, please contact **Zuleima Arevalo at zarevalo@csumb.edu** and she will be happy to assist you.

Please tell us a little bit about yourself.

***1. Please tell us the zip code in which you live. (This question is required.)**

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2. What is your age?

- ☐ 0-17 Years
- ☐ 18-24 Years
- ☐ 25-29 Years
- ☐ 30-39 Years
- ☐ 40-49 Years
- ☐ 50-59 Years
- ☐ 60-69 Years
- ☐ 70- 79 Years
- ☐ 80-89 Years
- ☐ 90+ Years
- ☐ Choose not to answer

3. Please tell us what you like most about your community.

Employment Information

4. Are you currently employed?

- ☐ Yes
- ☐ No
- ☐ Choose not to answer

Employment Status

English Impact Monterey County Survey

5. Please tell us about your current employment status.

	Full-time	Part-time	Does not apply
Permanent employee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temporary or seasonal employee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-employed (work for myself)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Semi-retired and working	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other type of paid employment (please specify)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Please tell us about your benefits status.

- ☐ Employed with full benefits (including health, dental, vacation, sick leave, pension, etc.)
- ☐ Employed with some benefits (please specify)
- ☐ Employed without any benefits
- ☐ Other (please specify)

Comments:

Unemployment Status

English Impact Monterey County Survey

7. Please select which of the following reasons best describe why you are not currently working. (Please check all that apply.)

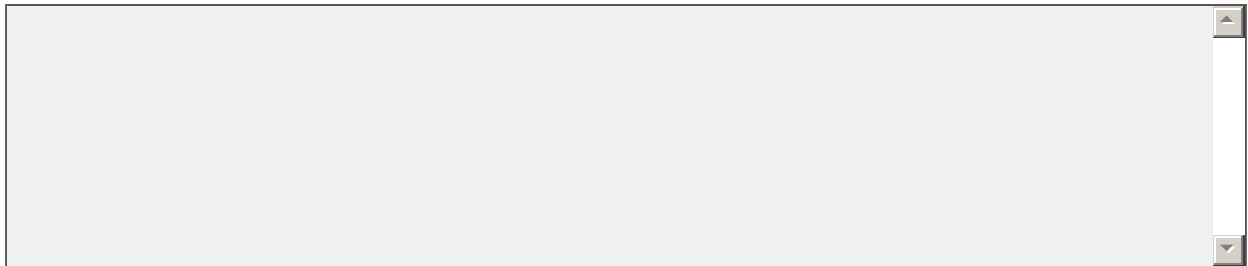
- ☐ Disability that limits my employment options
- ☐ Not able to find work because of my age
- ☐ Lack of education or job skills
- ☐ Laid off from my job
- ☐ Recent illness and/or hospitalization
- ☐ Retired, do not work for pay
- ☐ Student
- ☐ Temporarily not working, seeking employment
- ☐ Voluntarily not working
- ☐ Choose not to answer
- ☐ Other (please specify)

Education Information

English Impact Monterey County Survey

8. Please check the option that best describes your highest level of schooling.

- ☐ No schooling completed
- ☐ Elementary school (Grades 1 - 5)
- ☐ Middle school (Grades 6 - 8)
- ☐ High school (Grades 9 - 12) - No Diploma
- ☐ High school diploma or GED
- ☐ Trade school / certificate
- ☐ Some college credit - No Diploma
- ☐ Associate's degree (for example: AA, AS)
- ☐ Bachelor's degree (for example: BA, BS)
- ☐ Master's degree (for example: MA, MS, MSW)
- ☐ Professional degree (for example: doctor, dentist, lawyer)
- ☐ Doctorate degree (for example: PhD, EdD)
- ☐ Choose not to answer
- ☐ Other (please specify)



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9. If given the opportunity, what is the highest level of education you would like to achieve in your lifetime?

- ☐ I have already achieved the highest degree/level of education desired
- ☐ Elementary school (Grades 1-5)
- ☐ Middle school (Grades 6-8)
- ☐ High school (Grades 9 - 12) - No Diploma
- ☐ High school diploma or GED
- ☐ Some college credit - No Diploma
- ☐ Associate's degree (for example: AA, AS)
- ☐ Bachelor's degree (for example: BA, BS)
- ☐ Master's degree (for example: MA, MS, MSW)
- ☐ Professional degree (for example: doctor, dentist, lawyer)
- ☐ Doctorate degree (for example: PhD, EdD)
- ☐ Don't know
- ☐ Choose not to answer
- ☐ Other (please specify)

10. Are you currently enrolled in a school, college or other educational program?

- ☐ Yes
- ☐ No
- ☐ Choose not to answer

If currently enrolled in a school, college or other educational program:

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11. Please tell us what type of degree are you currently pursuing.

- ☐ High school diploma or GED
- ☐ Trade school/Certificate
- ☐ Associate's degree (for example: AA, AS)
- ☐ Bachelor's degree (for example: BA, BS)
- ☐ Master's degree (for example: MA, MS, MSW)
- ☐ Professional degree (for example: doctor, dentist, lawyer)
- ☐ Doctorate degree (for example: PhD, EdD)
- ☐ Other training program
- ☐ Does Not Apply
- ☐ Choose not to answer
- ☐ Other (please specify)

12. Please indicate if any of the following is an obstacle to your education:

	Yes, this is an obstacle	No, this is not an obstacle	Choose not to answer
Cost of education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family obligations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immigration status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work obligations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

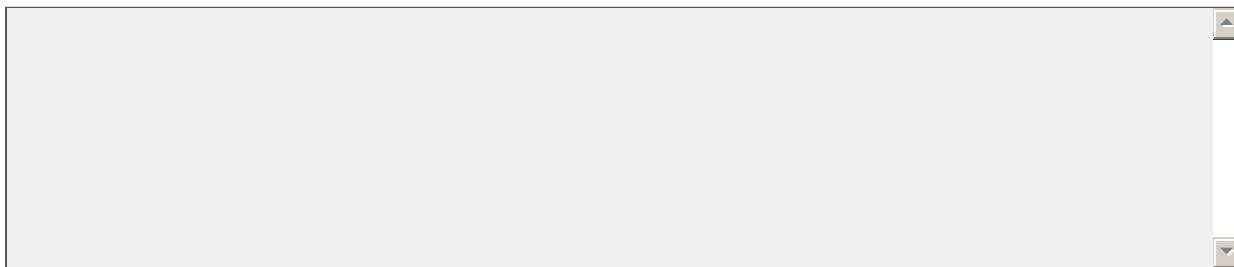
If Other (please specify)

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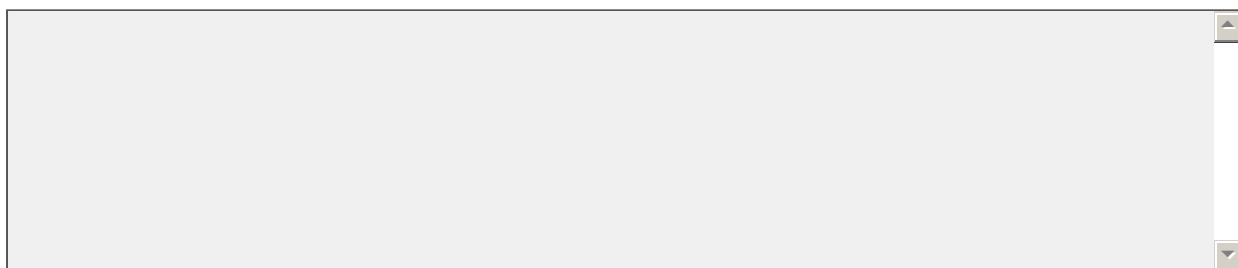
13. Please tell us which of the following motivates you to pursue your current educational goals. (Please check all that apply.)

- ☐ Better/more job opportunities
- ☐ Career advancement
- ☐ Change in career
- ☐ Higher income/more money
- ☐ More independence
- ☐ Lifelong learning
- ☐ Personal satisfaction
- ☐ Make a difference in the world
- ☐ Other

Other (please specify)

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14. Please tell us what could be done to improve educational opportunities in your community.

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If not currently enrolled in a school, college or other educational program...

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15. Please tell us why you are not currently enrolled in a school, college, or other educational program. (Please check all that apply.)

- ☐ I have already achieved the highest degree/level of education desired
- ☐ Cost of education
- ☐ Criminal record
- ☐ Do not feel well prepared for the next level of education
- ☐ Family obligations
- ☐ Immigration status
- ☐ No local options available in my area of interest
- ☐ Not interested in pursuing more education at this time
- ☐ Transportation
- ☐ Work obligations
- ☐ Choose not to answer
- ☐ Other

If Other (please specify)

16. Please tell us what could be done to improve educational opportunities in your community.

Military Information

English Impact Monterey County Survey

17. Please tell us if you have military experience.

- ☐ Yes
- ☐ No
- ☐ Choose not to answer

Military status

18. Please indicate your current military status.

- ☐ Active duty military
- ☐ Inactive status-retired
- ☐ Inactive status-reserve
- ☐ Inactive status-discharged
- ☐ Does not apply
- ☐ Choose not to answer
- ☐ Other (please specify)

19. Please tell us what factors would motivate you to stay in Monterey County after you complete your military service.

Parent or guardian

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20. Are you a parent or guardian (for example: grandparents) with primary responsibility for a child of any age?

- ☐ Yes
- ☐ No
- ☐ Choose not to answer

Children 3 years and under

21. Are you a parent or guardian of children 3 years and under?

- ☐ Yes
- ☐ No
- ☐ Choose not to answer

Daycare Information

22. Do any of your children attend a daycare center?

- ☐ Yes
- ☐ No
- ☐ Choose not to answer

Daycare Information

English Impact Monterey County Survey

23. What factors are most important to you in selecting daycare? (Please check all that apply.)

- ☐ Cost of daycare
- ☐ Safe pick-up/drop off system
- ☐ Friendly environment
- ☐ Helps children improve academically
- ☐ Hours of operation
- ☐ Kindergarten preparedness
- ☐ Location of daycare
- ☐ Parent/teacher conferences
- ☐ Staff experience and training
- ☐ Transportation services
- ☐ Choose not to answer
- ☐ Other (please specify)

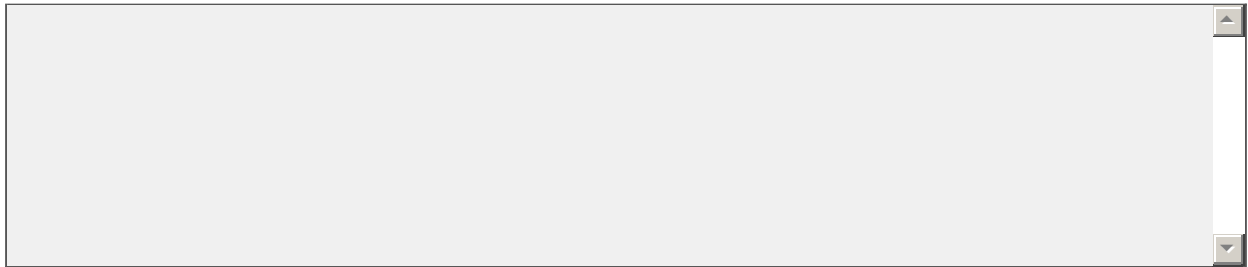
24. Please tell us how your community could best support families with young children.

Child not attending daycare center

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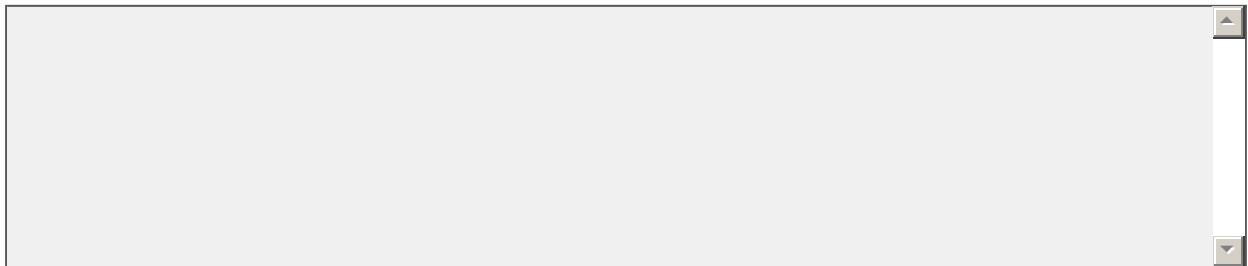
25. Who provides childcare for your child(ren)? (Please check all that apply.)

- ☐ Self
- ☐ Family member (paid)
- ☐ Family member (unpaid)
- ☐ Non-family member or friend (paid)
- ☐ Non-family member or friend (unpaid)
- ☐ Child Care/Day Care Center (paid)
- ☐ Family Child Care Home (paid)
- ☐ Choose not to answer
- ☐ Other (please specify)

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26. What are the main reasons your child is not attending daycare? (Please check all that apply.)

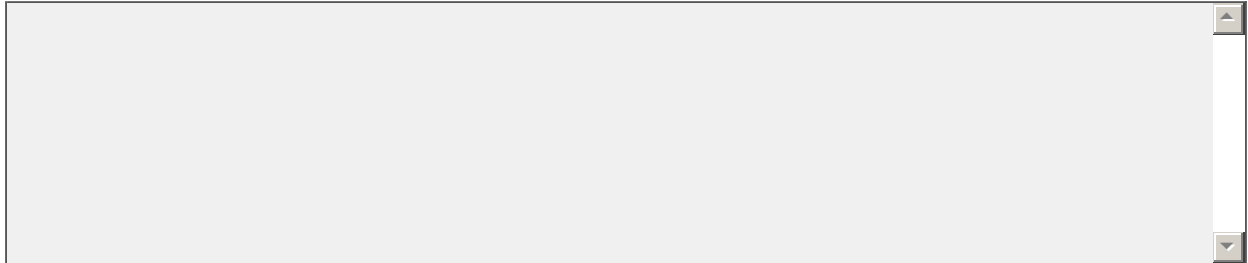
- ☐ Cost of daycare in my area is too high
- ☐ Lack of daycare options in my area
- ☐ Low quality daycare in my area
- ☐ Lack of transportation
- ☐ Child is too young
- ☐ Parent/guardian at home with child(ren)
- ☐ Choose not to answer
- ☐ Other (please specify)

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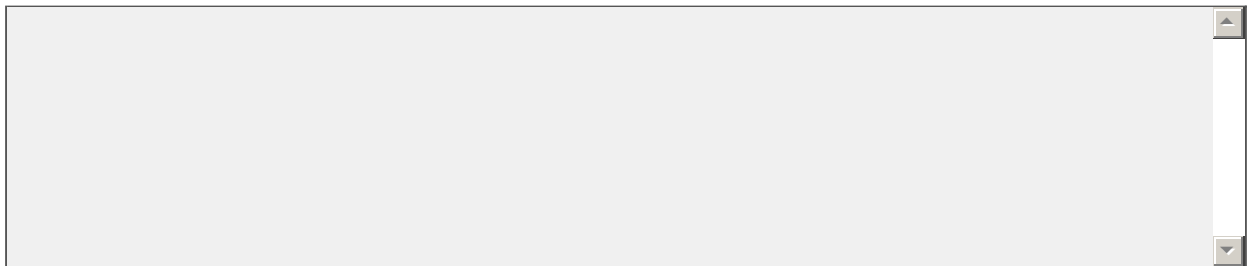
27. Would you like your child(ren) to attend daycare?

- ☐ Yes
- ☐ No
- ☐ Other (please specify)

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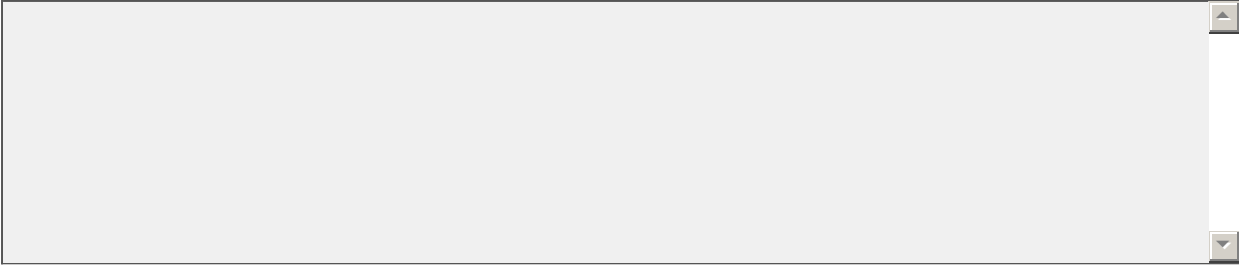
28. If you would like your child(ren) to attend daycare, what factors are most important to you in selecting daycare? (Please check all that apply.)

- ☐ Cost of daycare
- ☐ Safe pick-up/drop off system
- ☐ Friendly environment
- ☐ Helps children improve academically
- ☐ Hours of operation
- ☐ Kindergarten preparedness
- ☐ Location of daycare
- ☐ Parent/teacher conferences
- ☐ Staff experience and training
- ☐ Transportation services
- ☐ Other (please specify)

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English Impact Monterey County Survey

29. Please tell us how your community could best support families with young children.



Children 5 years and under

30. Are you a parent or guardian of children 5 years and under?

- ☐ Yes
- ☐ No
- ☐ Choose not to answer

Parent or guardian of child 5 years and under

31. Do any of your children attend preschool?

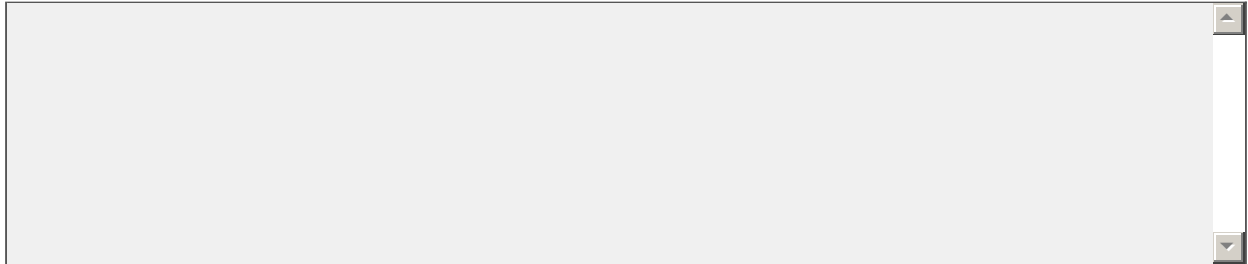
- ☐ Yes
- ☐ No
- ☐ Choose not to answer

Children not attending preschool

English Impact Monterey County Survey

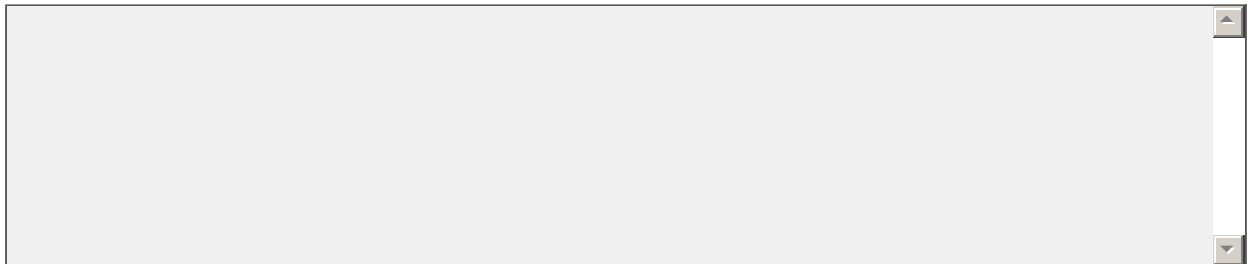
32. What are the main reasons your child(ren) are not attending preschool? (Please check all that apply.)

- ☐ Cost of preschools in my area is too high
- ☐ Lack of preschools in my area
- ☐ Low quality preschools in my area
- ☐ Lack of transportation
- ☐ Child is too young
- ☐ Parent/guardian at home with child(ren)
- ☐ Choose not to answer
- ☐ Other (please specify)

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33. Would you like your child(ren) to attend a preschool?

- ☐ Yes
- ☐ No
- ☐ Other (please specify)

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English Impact Monterey County Survey

34. If you would like your child(ren) to attend preschool, what factors are most important to you in selecting a preschool? (Please check all that apply.)

- ☐ Cost of preschool
- ☐ Hours of operation
- ☐ Location of preschool
- ☐ Kindergarten preparedness
- ☐ Parent/teacher conferences
- ☐ Transportation services
- ☐ Friendly environment
- ☐ Safe pick-up/Drop off system
- ☐ Helps children improve academically
- ☐ Staff experience and training
- ☐ Choose not to answer
- ☐ Other (please specify)

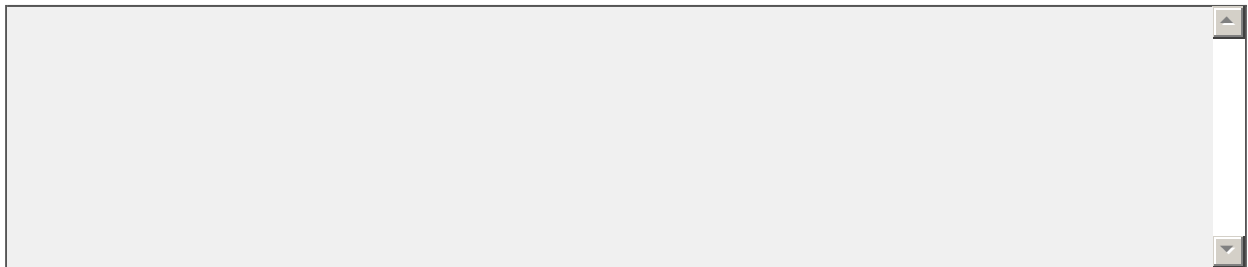
35. Please tell us how your community could best support families with young children.

Children attend preschool

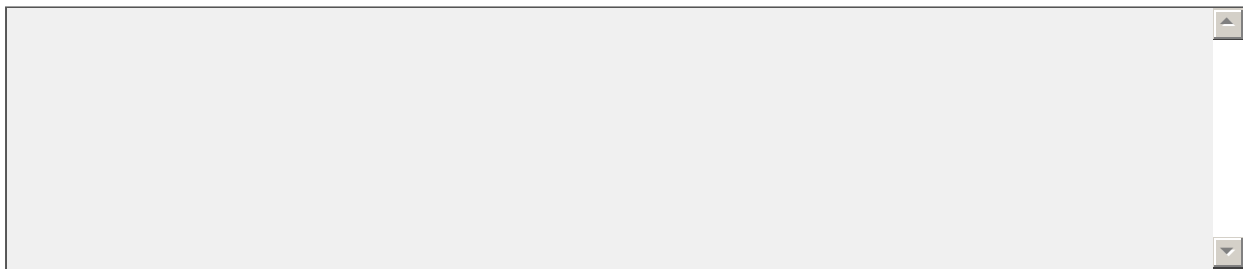
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36. What factors are most important to you in selecting a preschool? (Please check all that apply.)

- ☐ Cost of preschool
- ☐ Hours of operation
- ☐ Location of preschool
- ☐ Kindergarten preparedness
- ☐ Parent/teacher conferences
- ☐ Transportation services
- ☐ Friendly environment
- ☐ Safe pick-up/Drop off system
- ☐ Helps children improve academically
- ☐ Staff experience and training
- ☐ Choose not to answer
- ☐ Other (please specify)

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37. Please tell us how your community could best support families with young children.

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Grade of oldest or only child in school

To shorten the length of time for you to complete this survey, you are being asked to respond to the following questions *for only one child* (either your oldest or only child).

38. Please tell us in what grade is your oldest (or only) school-aged child.

- ☐ Kindergarten
- ☐ 1st grade
- ☐ 2nd grade
- ☐ 3rd grade
- ☐ 4th grade
- ☐ 5th grade
- ☐ 6th grade
- ☐ 7th grade
- ☐ 8th grade
- ☐ 9th grade
- ☐ 10th grade
- ☐ 11th grade
- ☐ 12th grade
- ☐ None of these options
- ☐ Other

Other (please specify)

Parent or guardian of child ages 6-18

39. What type of school did your oldest (or only) child attend last year?

- ☐ Private School
- ☐ Public School
- ☐ Charter School
- ☐ Home school
- ☐ Don't Know
- ☐ Choose not to answer
- ☐ Other (please specify)

40. Please tell us what you like most about your oldest (or only) child's school.

English Impact Monterey County Survey

41. Please tell us which of the following you agree or disagree with regarding your oldest (or only) child's school.

	Agree	Disagree	Don't Know
I feel welcome in my child's school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child has one or more teachers who are positive role models	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child enjoys being at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachers encourage my child's creativity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School is preparing my child well for the future	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachers care about my child's feelings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachers make learning exciting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachers help my child to improve academically	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child feels safe at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

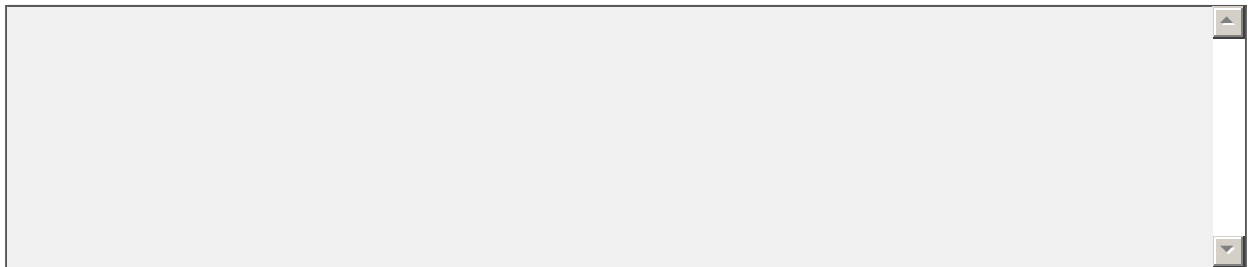
Other (please specify)

42. Please tell us what improvements you would like to see at your oldest (or only) child's school.

English Impact Monterey County Survey

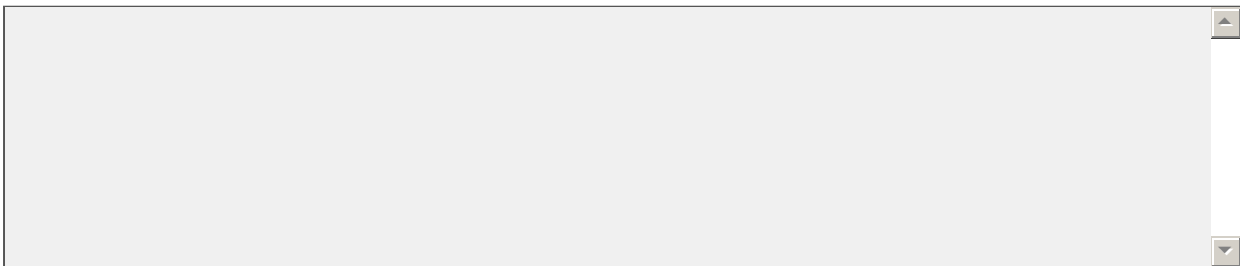
43. When thinking about the future of your oldest (or only) child, please tell us what is the highest level of education you would like her/him to achieve?

- ☐ Elementary school (Grades 1 – 5)
- ☐ Middle school (Grades 6 – 8)
- ☐ High school (Grades 9 - 12) - Diploma
- ☐ Trade school/Certificate
- ☐ Associate's degree (for example: AA, AS)
- ☐ Bachelor's degree (for example: BA, BS)
- ☐ Master's degree (for example: MA, MS, MSW)
- ☐ Professional degree (for example: doctor, dentist, lawyer)
- ☐ Doctorate degree (for example: PhD, EdD)
- ☐ Don't know
- ☐ Choose not to answer
- ☐ Other (please specify)

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Question for all respondents

44. Please tell us what could be done to improve educational opportunities in Monterey County.

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Income Information

English Impact Monterey County Survey

45. What is your current household income?

- ☐ Less than \$25,000
- ☐ \$25,000-34,999
- ☐ \$35,000-49,999
- ☐ \$50,000-74,999
- ☐ \$75,000-99,999
- ☐ \$100,000-149,999
- ☐ \$150,000 +
- ☐ Don't know
- ☐ Choose not to answer
- ☐ Other (please specify)

46. How many people live in your household?

- ☐ 1 (Self)
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8+
- ☐ Choose not to answer

English Impact Monterey County Survey

47. In the past year, how often were you able to pay for the following:

	Always	Almost always	Occasionally/ Sometimes	Almost never	Never	Does not Apply
Caring for aging parents and relatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Childcare/daycare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children's education (e.g. tuition, books, school supplies, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clothing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consumer/credit card debt (minimum monthly payment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health Insurance (monthly premiums)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Healthcare expenses (e.g. prescriptions/medicine, supplies, equipment, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Housing maintenance and other additional housing costs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monthly rent (If home owner please check "does not apply")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mortgage (if renter please check "does not apply")	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recreational and leisure activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student loans for yourself (tuition and other educational expenses)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Auto expenses (e.g. insurance, loan payments, maintenance, gas)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other transportation (e.g. bus, taxi, carpool)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Utilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

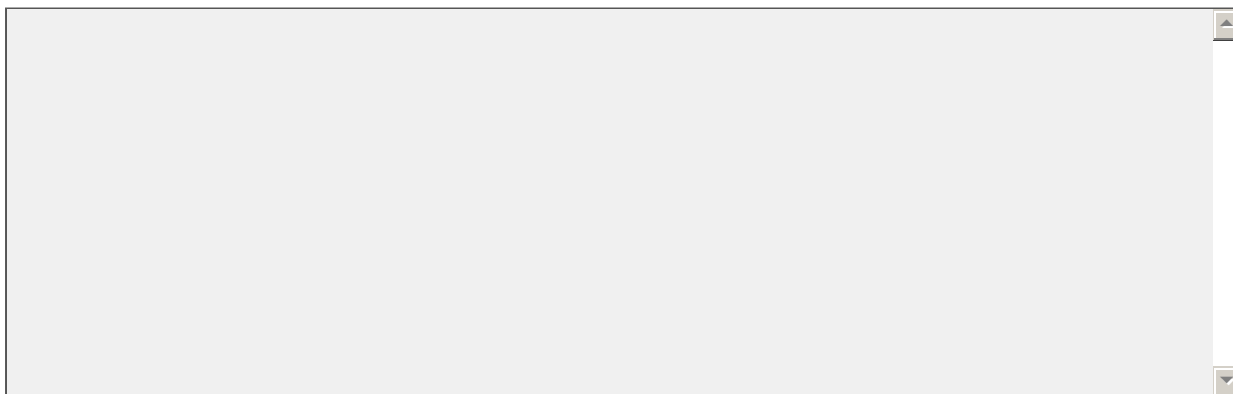
Other (please specify)

English Impact Monterey County Survey

48. How satisfied are you with your current financial situation?

- ☐ Very Satisfied
- ☐ Satisfied
- ☐ Unsatisfied
- ☐ Very Unsatisfied
- ☐ Don't Know
- ☐ Choose not to answer

49. Please tell us what could help you to become more financially secure in the future.



Community Health Issues

The following section asks you to share your thoughts about health issues in your community.

English Impact Monterey County Survey

50. Please tell us what you think are the most significant health problems facing your community. (Please check all that apply.)

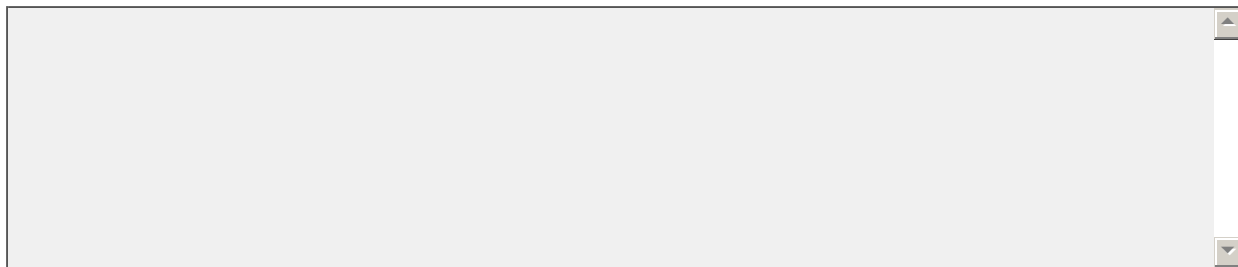
- | | |
|---|---|
| <input type="checkbox"/> Alcohol abuse (esp. underage drinking) | <input type="checkbox"/> Lack of nutritious food |
| <input type="checkbox"/> Anxiety disorders | <input type="checkbox"/> Lack of exercise |
| <input type="checkbox"/> Bullying among children and teens | <input type="checkbox"/> Lack of safe drinking water |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Overweight/Obesity |
| <input type="checkbox"/> Chronic illness | <input type="checkbox"/> Lack of needed medical care |
| <input type="checkbox"/> Child abuse | <input type="checkbox"/> Lack of needed dental care |
| <input type="checkbox"/> Elder abuse | <input type="checkbox"/> Lack of needed mental health care |
| <input type="checkbox"/> Dental/oral health problems | <input type="checkbox"/> Lack of affordable prescription medicines |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Pollution (please specify types below) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Post Traumatic Stress Disorder (PTSD) |
| <input type="checkbox"/> Domestic abuse/violence | <input type="checkbox"/> Sexual abuse or rape |
| <input type="checkbox"/> Drug abuse: Marijuana | <input type="checkbox"/> Sexually transmitted diseases (for example: chlamydia, gonorrhea, hepatitis C) |
| <input type="checkbox"/> Drug abuse: Prescription drugs | <input type="checkbox"/> Smoking (tobacco use, especially by youth) |
| <input type="checkbox"/> Drug Abuse: Other illegal "street" drugs | <input type="checkbox"/> Street (or gang) violence |
| <input type="checkbox"/> Heart disease | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Homicide | <input type="checkbox"/> Teen pregnancy/births |
| <input type="checkbox"/> Other (please specify) | |

51. Please tell us what could be done in your community to help teens delay pregnancy.

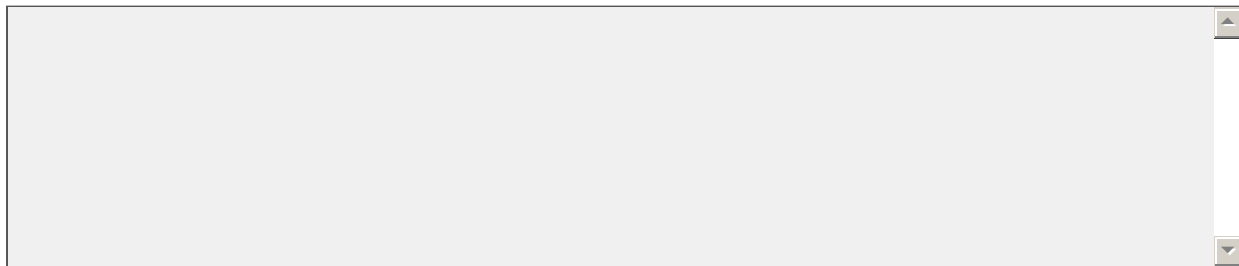
English Impact Monterey County Survey

52. Please tell us what helps (or would help) you to exercise regularly. (Please check all that apply.)

- ☐ A safe neighborhood
- ☐ Time spent with family or friends
- ☐ Sports field nearby my home
- ☐ Exercise classes nearby my home
- ☐ Team sports nearby my home
- ☐ Access to nature (for example: parks, beaches)
- ☐ To stay healthy as I age
- ☐ Enough free time
- ☐ Bike lanes, walking paths, streets with less traffic
- ☐ Cost of exercise classes or fitness center fees
- ☐ My physical appearance
- ☐ Staying healthy
- ☐ Choose not to answer
- ☐ Other (please specify)

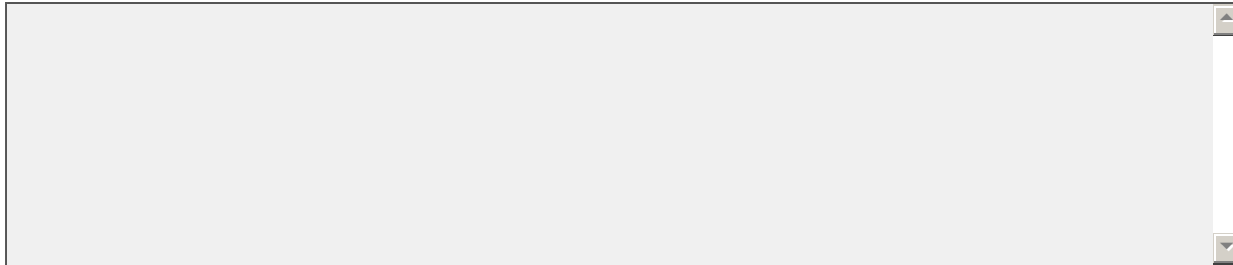


53. Please tell us what could be done in your community to address childhood obesity.



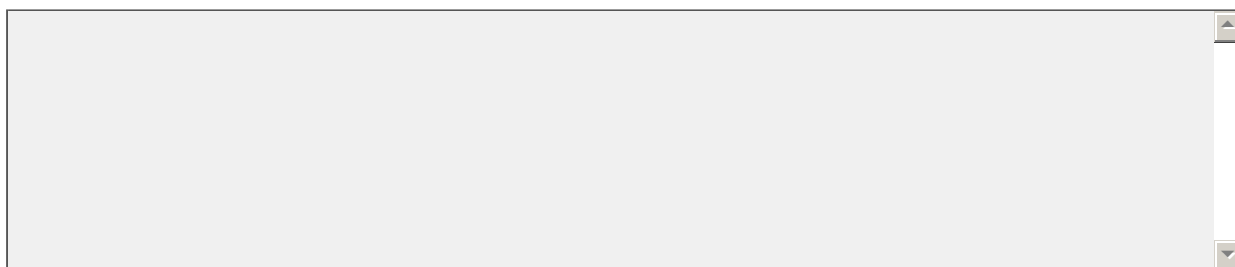
English Impact Monterey County Survey

54. Please tell us what could be done in your community to improve access to healthy foods.

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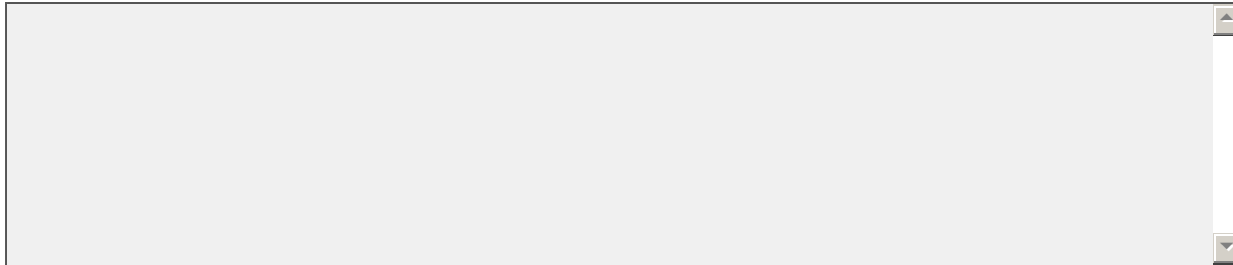
55. How do you usually get health information? (Please check all that apply.)

- ☐ Advice from nurse at doctor's office
- ☐ Contact family or friends for advice
- ☐ Community organization
- ☐ Health hotline (phone)
- ☐ Internet search
- ☐ Medical doctor/physician
- ☐ Nurse practitioner
- ☐ Non-physician health professional (for example: acupuncturist, chiropractor)
- ☐ Radio
- ☐ Social media (egs.Facebook, Web MD, You Tube, etc.)
- ☐ Television
- ☐ Other (please specify)

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English Impact Monterey County Survey

56. Please tell us what could be done to improve health in your community (related to any health issue that you care about).

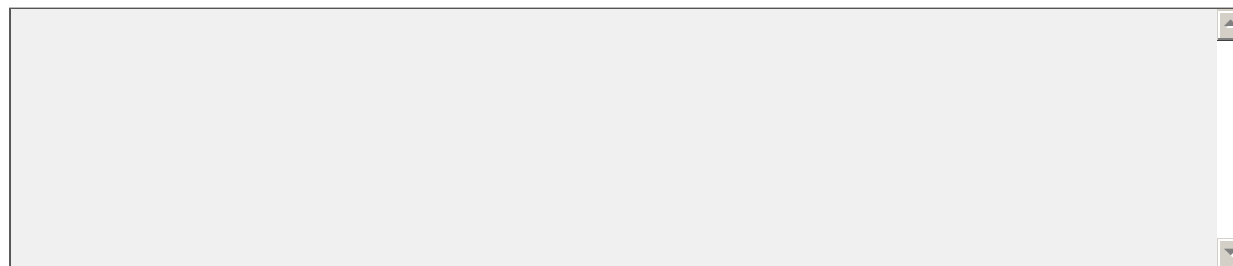
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Health Care Insurance and Services

57. Please indicate if you currently have health insurance and which type of insurance. (Please check all that apply.)

- ☐ I do not have health insurance. (I am uninsured.)
- ☐ I am insured through an individually purchased health insurance plan
- ☐ I am insured through my employer
- ☐ I am insured through Covered California (Health Benefits Exchange)
- ☐ I am insured through Medicare
- ☐ I am insured through Medi-Cal (Medicaid)
- ☐ I am insured through the Military
- ☐ I am insured, but don't know what type of insurance
- ☐ Choose not to answer
- ☐ Other

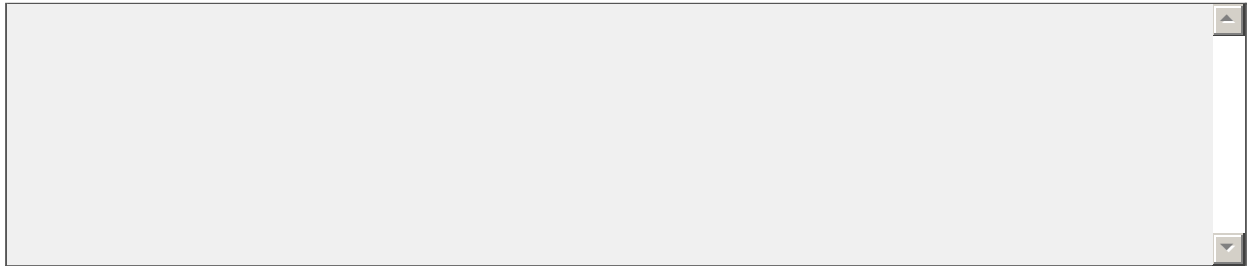
Other (please specify)

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English Impact Monterey County Survey

**58. If you are currently uninsured, please indicate the reason(s) for not having insurance.
(Please check all that apply.)**

- ☐ The person in family who had health insurance lost job or changed employers
- ☐ The person in family who had health insurance is no longer part of the family because of divorce, separation, or death
- ☐ Family member's employer does not offer coverage or not eligible for employer's coverage
- ☐ Lost eligibility for Medicaid
- ☐ Cost of health insurance is too high
- ☐ Don't need insurance
- ☐ Don't know how to get insurance
- ☐ Traded health insurance for another benefit or higher pay
- ☐ Can't get health insurance because of my immigration status
- ☐ Other (please specify)



59. If you currently have health insurance, please indicate if you are satisfied with the following:

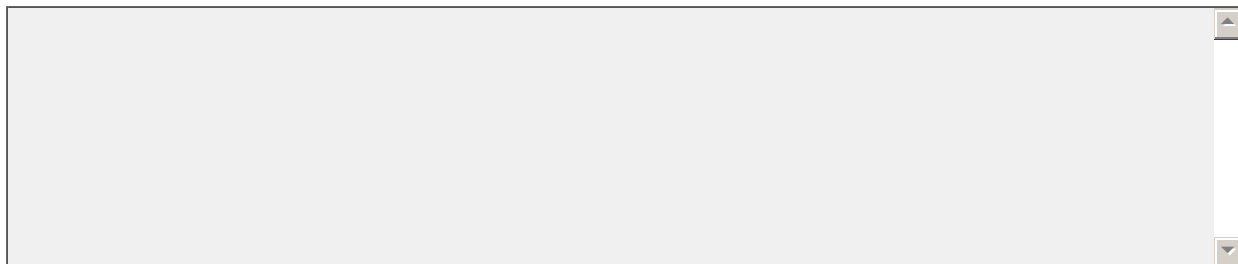
	Very Satisfied	Satisfied	Unsatisfied	Very Unsatisfied	Does not apply
Adequate coverage for my health needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate coverage for my family's health needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount of copays or deductibles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost of monthly or annual insurance premiums	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The selection of doctors and clinics that accept my insurance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Types of services covered by my insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

English Impact Monterey County Survey

60. Which of the following would increase your satisfaction with your doctor or clinic? (Please check all that apply.)

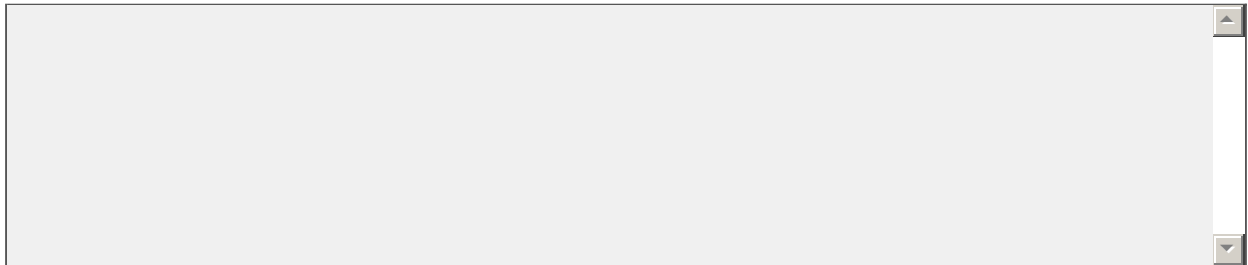
- ☐ Expand the days the doctor's office or clinic is open to include weekends
- ☐ Expand the hours the doctor's office or clinic is open to include evenings (later than 6:00PM)
- ☐ Reduce the amount of time I need to wait once I arrive for an appointment at the doctor's office or clinic
- ☐ Healthcare providers who speak my language
- ☐ Translation/interpretation services in my language
- ☐ Better health insurance coverage
- ☐ Doctor's office or clinic's willingness to accept different types of health insurance
- ☐ Accommodations for people with disabilities (for example: physical, vision or hearing impairments)
- ☐ Childcare/daycare
- ☐ Telehealth options (talk to a doctor over the internet)
- ☐ Transportation
- ☐ I am currently satisfied with my doctor or clinic
- ☐ I do not have my own doctor or clinic
- ☐ Other (please specify)



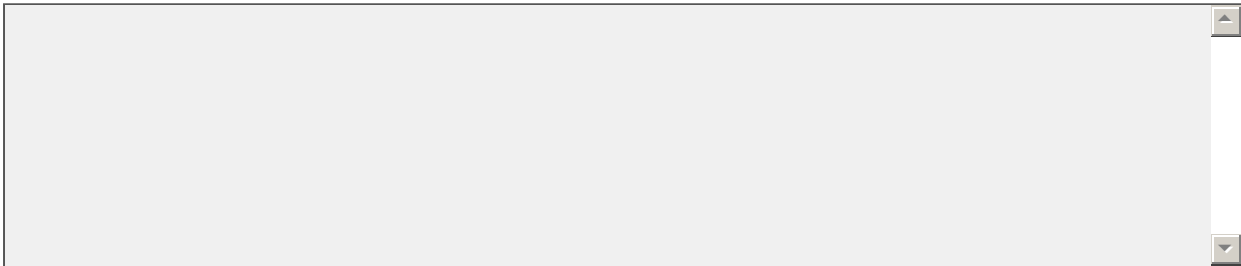
English Impact Monterey County Survey

61. Where do you go for general (non-emergency) healthcare services? (Please check all that apply.)

- ☐ A private doctor, medical group or clinic in Monterey County
- ☐ A private doctor, medical group or clinic in Santa Cruz County (including Watsonville)
- ☐ A private doctor, medical group or clinic in San Benito County
- ☐ A private doctor, medical group or clinic in San Luis Obispo County
- ☐ A private doctor, medical group or clinic in another county (please specify which county below)
- ☐ An emergency room in Monterey County
- ☐ An emergency room in Santa Cruz County (including Watsonville)
- ☐ An emergency room in another county (please specify which county below)
- ☐ Other (please specify)

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62. Please tell us what do you think should be done to improve access to healthcare services (for example: doctors, clinics, and hospitals) in your community.

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Community Safety

English Impact Monterey County Survey

63. In the past 12 months, have you or any member of your family (living in Monterey County) been threatened or harmed physically by someone in your community?

- ☐ Yes
- ☐ No
- ☐ Don't Know
- ☐ Choose not to answer

64. Please tell us what could be done to make your community a safer place to live.

Social Issues

65. In the past 12 months, have you or any member of your family (living in Monterey County) been treated unfairly by someone in your community based on any of the following? (Please check all that apply.)

	Yes	No	Don't Know	Choose not to answer
Age	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Class/Income status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Language	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Race/ethnicity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Religion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual orientation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

English Impact Monterey County Survey

66. Please tell us what could be done in your community to ensure fair treatment for all community members.

Independent Living

67. Please tell us what you are currently doing or plan to do to maintain independence as you age. (Please check all that apply.)

- ☐ Engage in activities to stay socially connected in my community
- ☐ Take a course or study to keep my mind active
- ☐ Downsize to a smaller and more affordable home
- ☐ Find information about how to stay independent as I get older
- ☐ Make changes to my house to allow me to remain in my home as long as possible
- ☐ Pay into a pension or retirement plan
- ☐ Save money to use as I get older
- ☐ Work past retirement age (65+ years)
- ☐ Maintain my health
- ☐ Don't Know
- ☐ I have not started planning for my retirement
- ☐ Choose not to answer
- ☐ Other (please specify)

English Impact Monterey County Survey

68. Please tell us which, if any, of the following are important retirement aspirations for you? (Please select all that apply.)

- ☐ Travelling
- ☐ Spending more time with friends and family
- ☐ Pursuing new hobbies
- ☐ Volunteering in my community
- ☐ Living abroad (outside the U.S.)
- ☐ Continue working in the same field
- ☐ Studying/learning for pleasure and personal enrichment
- ☐ Starting a new business
- ☐ None of the above
- ☐ Don't know
- ☐ Other (please specify)

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69. Please tell us how your community could help people remain independent and age well in Monterey County.

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Disability Information

English Impact Monterey County Survey

70. Do you or someone close to you in Monterey County have a disability that interferes with a major life function?

☐ Yes

☐ No

Disability Issues

71. Please tell us if you or someone close to you has a disability that interferes with one or more major life functions and if you provide care for them. (Please check all that apply.)

	This person has a disability	I provide care for this person	Does not apply
Self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My spouse or partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My parent or grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other family member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other non-family member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

72. Please tell us what major life functions are affected by their disability. (Please check all that apply.)

	Ability to manage activities of daily living	Ability to obtain/maintain housing	Ability to drive or take the bus	Ability to engage in social relationships	Ability to attend school or work
Self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My spouse or partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My parent or grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other family member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other non-family member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments

English Impact Monterey County Survey

73. Please tell us the living arrangement for those you have identified as having a disability. (Please check all that apply.)

	Lives in my home	Lives alone in their own home	Lives with a spouse or partner	Lives in a caregivers home	Lives in a licensed care facility	Lives in an unlicensed care facility	Other
Self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My spouse or partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My parent or grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other family member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other non-family member	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other

74. Please tell us how your community could best support family caregivers.

Neighborhood and Community

75. Please tell us what are the most serious concerns facing your community.

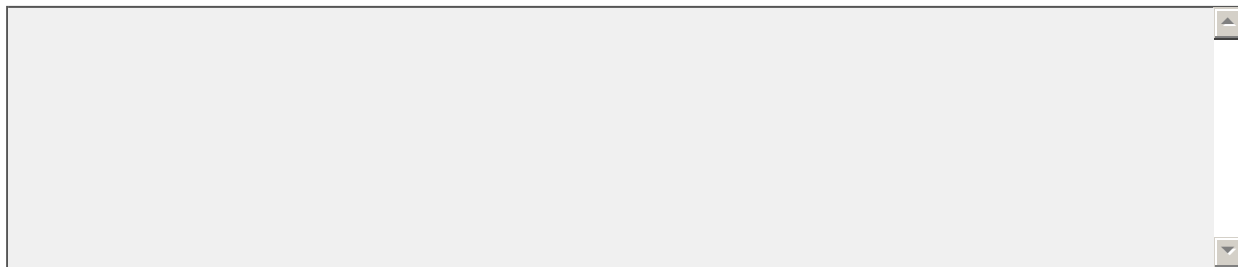
English Impact Monterey County Survey

76. Please tell us what could be done to make your community a better place to live.

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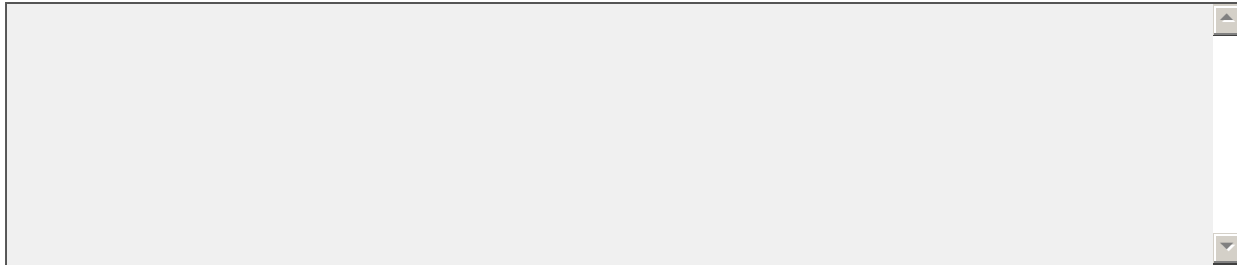
77. Please tell us how you share your opinions with your elected officials (e.g., City Council members or County Board of Supervisors). (Please check all that apply.)

- ☐ Attend an official City or County meeting
- ☐ Attend cultural community meetings
- ☐ Attend community meetings dealing with specific issues
- ☐ Attend official public hearings
- ☐ Attend regularly scheduled neighborhood meetings
- ☐ Contact the media (for example: radio, television, newspapers, etc.)
- ☐ Contact elected officials
- ☐ Get together with my neighbors
- ☐ Go to an official City or County government website
- ☐ Organize or join a group in your neighborhood
- ☐ Organize or participate in protests
- ☐ Participate in online blogs or email groups
- ☐ Send letters to the editor
- ☐ Serve on a City or County Board or Commission
- ☐ Write a letter to neighbors
- ☐ None of the above
- ☐ Choose not to answer
- ☐ Other (please specify)

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English Impact Monterey County Survey

78. Please tell us what could be done to improve communication between your community and local elected officials.

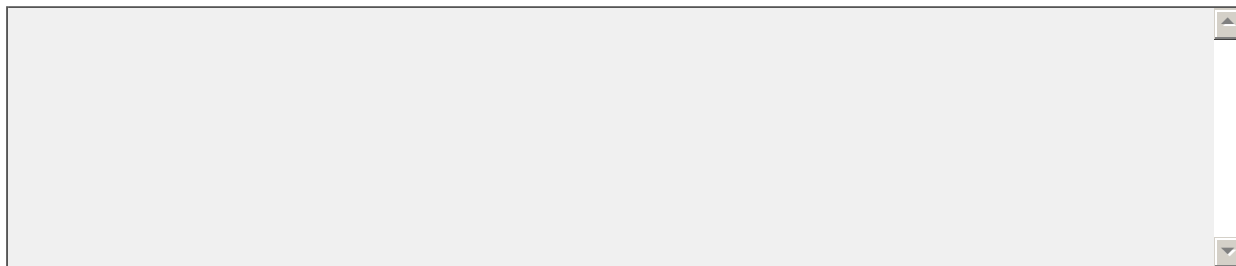
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Demographic Information

The following information will help us to better identify important issues for different community groups across Monterey County. We very much appreciate your taking a couple of minutes to complete a few final questions about yourself. Thank you.

79. Please tell us what gender you identify with.

- ☐ Female
- ☐ Male
- ☐ Transgender
- ☐ Choose not to answer
- ☐ Other (please specify)

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English Impact Monterey County Survey

80. Please tell us what race you primarily identify with. (Please choose only one)

- ☐ White
- ☐ Black or African American
- ☐ American Indian or Alaskan Native
- ☐ Asian Indian
- ☐ Chinese
- ☐ Filipino
- ☐ Japanese
- ☐ Korean
- ☐ Vietnamese
- ☐ Other Asian (for example: Hmong, Laotian, Thai, Pakistani, Cambodian, etc.)
- ☐ Native Hawaiian
- ☐ Guamanian or Chamorro
- ☐ Samoan
- ☐ Other Pacific Islander (for example: Fijian, Tongan, etc.)
- ☐ More than one race (please specify)
- ☐ Don't know
- ☐ Choose not to answer
- ☐ Other race (please specify)

If you answered "Other" or "More than one race" (please specify)

English Impact Monterey County Survey

81. Please tell us if you consider yourself to be of Hispanic, Latino or Spanish origin.

- ☐ No, not of Hispanic, Latino or Spanish origin
- ☐ Yes, Mexican, Mexican American, Chicano
- ☐ Yes, Mexican Indigenous (for example: Nahuatl, Yucatec/Maya, Zapotec, Mixtec, etc.)
- ☐ Yes, Central American (for example: Salvadoran)
- ☐ Yes, South American (for example: Peruvian)
- ☐ Yes, Puerto Rican
- ☐ Yes, Cuban
- ☐ Yes, other (please specify below)
- ☐ Choose not to answer

Other (please specify)

82. Please tell us how long have you lived in Monterey County.

- ☐ Less than 1 year
- ☐ 1-2 years
- ☐ 3-5 years
- ☐ 6-9 years
- ☐ 10-20 years
- ☐ More than 20 years
- ☐ I do not live in Monterey County
- ☐ Other (please specify)

THANK YOU FOR COMPLETING THE IMPACT MONTEREY COUNTY COMMUNITY

SURVEY!

We very much appreciate that you have taken the time to complete the Impact Monterey County Community Assessment Survey. Thank you for adding your voice to the conversation! We look forward to working together to identify our collective community aspirations and explore ideas for improving life in Monterey County.

Please consider asking people you know to take this survey too, so that we can collect as much community input as possible. All you have to do is forward the link in your email to your family, friends and neighbors or share it on FACEBOOK and TWITTER.

To stay involved and to learn more about what happens next with Impact Monterey County, please visit our website @ www.impactmontereycounty.org.

