



Madison County Community Health Assessment Survey

For all residents and people who work in Madison County

Madison County Health Department is beginning its 5-Year community health assessment process. Citizen input is important to us! Please complete the following survey. Also, encourage your family, friends, neighbors, and co-workers to complete the survey by visiting www.madisonchd.org.

We appreciate your help!

- 1. What do you feel are the most urgent health-related concerns in Madison County?**
(Please list up to 5)

- 1.
- 2.
- 3.
- 4.
- 5.

- 2. Please rate the following on a scale of Very Important to Not Important at All as they relate to accessing health care in Madison County.**

	<u>Very Important</u>	<u>Important</u>	<u>Neutral</u>	<u>Not Important</u>	<u>Not Important at All</u>
Accessibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accountability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location of services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge or use of services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of doctors and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited programs and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of specialists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost of prescription drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Difficulty navigating the health system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Office hours for appointments are not convenient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____					

3. What keeps people in Madison County from being healthy? (Check all that apply)

- Lack of caring and concern about being healthy
- Limited or no affordable healthy fresh foods and recreation
- Not feeling worthy or good about yourself
- Limited or no social activities and places
- Lack of motivation or initiative
- Not enough jobs or employment opportunities
- Lack of personal value for a healthy lifestyle
- High levels of stress and not knowing how to handle stress
- Lack of personal responsibility
- Unsafe communities
- Decreased sense of community
- Too much "wired society", technology, and electronic communication
- Lack of or poor communication skills
- Air, water, and/or soil that is polluted
- People not making healthy choices
- An attitude that health is not important or a priority
- Lack of personal money for your family to have a healthy lifestyle
- Decrease in money for organizations and health programs
- Don't know what services, programs, and resources are available
- Services and programs are hard to access
- Limited community awareness of health problems and how to prevent them
- Limited or no health education for parents and the community
- Limited or no health education for students throughout their school years
- Lack of involvement in health by the church/faith-based community
- Lack of involvement and focus by local politicians on the health of residents and their communities
- Too many liquor stores and restaurants serving unhealthy food choices
- Not enough parks, playgrounds, sidewalks, walking distance to libraries and grocery stores
- Other _____

4. Please rate the following health-related issues on a scale of Most Urgent to Not a Problem.

	<u>Most Urgent</u>	<u>Urgent</u>	<u>Somewhat Urgent</u>	<u>Least Urgent</u>	<u>Not a Problem</u>
Access to Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poverty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance use/abuse (alcohol, tobacco, other drugs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexually Transmitted Diseases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teen Pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Quality/Environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. What would motivate you to become involved (or more involved) in improving health in Madison County? (Check all that apply)

- Do my part for myself, my family, and my community
- Get involved in a local committee to work on a health issue
- Get involved in a countywide committee to work on a health issue
- Write letters and make calls to people who make policies and rules
- An emergency in my family or a family/friend affected by a health issue
- To help kids and youth learn to make healthy choices
- To help make changes in my community to the physical surroundings such as building parks and playgrounds, getting sidewalks put in, getting healthy fresh food stands, making a safe community, etc.
- Getting involved with groups in my community to make a difference
- Other _____

Please tell us about you (Optional Questions)

AGE: 14-24 25-44 45-64 65 and over

GENDER: Male Female

RACE: Black White Other _____

EDUCATION LEVEL: Less than High School
 High School/GED
 Associate's Degree/Trade School
 Bachelor's Degree
 Master's Degree or Higher

ZIP CODE: _____

INSURANCE STATUS: (Check all that apply)

- I have good health insurance
- I have health insurance but high deductibles and costs
- I have no health insurance
- I have Medicare
- I have Medicaid
- I have All-Kids for my child/children
- Other _____

Please return survey by August 8, 2010 to:

IPLAN
Madison County Health Department
101 E. Edwardsville Road
Wood River, IL 62095