

**Survey
Research
Office**

ILLINOIS
SPRINGFIELD

Christian County 2018 Community Health Need Assessment Survey

Conducted by the University of Illinois Springfield Survey Research Office on behalf of Taylorville Memorial Hospital and the Christian County Health Department

Thank you very much for taking time out of your day to take this survey. The data gathered through this survey will help Taylorville Memorial Hospital and the Christian County Health Department identify and address health and quality-of-life issues in your community.

This set of questions is for analysis purposes only. This information will not be used to identify you as a participant. The information is important to ensure that we have responses from all members of your community.

In what year were you born? _____

Do you consider yourself Hispanic or Latino/a?

- Yes No

Do you consider yourself....Please check all that apply.

- White
 Black or African American
 Asian
 Native Hawaiian or Pacific Islander
 American Indian or Alaska Native
 Other, please specify: _____

What is your gender?

- Male Female Other, please, specify: _____ Prefer not to say

What is your disability status?

- Do not have a disability Have a disability

What is your highest level of education?

- Less than high school Some college
 Some high school 4 year college degree
 High school diploma or equivalent More than 4 year college degree
 Trade or technical school beyond high school

What is your zip code? _____

Please provide us with your household's income last year before taxes:

- Less than \$20,000 \$20,000-40,000 \$40,001-60,000 \$60,001-80,000 \$80,001- \$100,000 More than \$100,000 Retired Prefer not to say

From the following options, please rank these health problems (1-6) that have a significant impact on your community, with 1 having the most impact, 6 having the least impact.

- _____ Cancer
- _____ Diabetes
- _____ Obesity
- _____ Mental Health
- _____ Substance Abuse – Drugs
- _____ Sexually transmitted diseases

Do think residents of Christian County have difficulty gaining access to medical care?

- Yes No

If yes, please select from the list below what obstacles make it difficult to receive medical care (*Please check all that apply*).

- Lack of transportation
- No insurance/underinsured
- Unable to pay co-pays/deductibles
- No doctor or provider available
- Lack of timely appointment availability
- Language barriers

How would you rate the health of Christian County?

- Very healthy Healthy Somewhat healthy Not very healthy

Please list any health problems that we may have missed.