

Community Input 2018

Aging and Disability Services, a division of Seattle Human Services Department, is gathering information to help older adults, adults with disabilities, and their caregivers live independently and connect to community resources. This survey should take no more than 10 minutes to complete.

1. How do you prefer to get information about services and community resources? Check top three choices.

- Brochures
- Call an information line or local organization
- E-mail
- Health care provider
- In person at a local organization
- Mail
- Newspaper
- Online/Website
- Radio
- Social media (Facebook, Twitter)
- TV
- None
- Other: _____

2. Where do you currently get information about services and community resources? Check top three choices.

- Community agency
- Faith-based organization
- Health care provider
- Online/Website
- Social media (Facebook, Twitter)
- TV
- Not applicable
- Other: _____

3. What are the challenges to living independently in your own home or setting of your choice? Check all that apply.

- Affordable food
- Affordable housing (rent/mortgage, utilities, etc.)
- Challenging or unsafe home environment (too many stairs, inaccessible shower, etc.)
- Lack of community services nearby
- Lack of family/friends support
- Personal care needs
- Medical needs
- Safety concerns (neighborhood crime, lack of street lights, bad sidewalks, increased traffic, etc.)
- Transportation
- Not applicable
- Other: _____

4. Which of the following best describes your situation?

- I do not or cannot drive.
- I drive sometimes but I do not currently own or have access to a vehicle.
- I own or have access to a vehicle that I drive but I may stop driving soon.
- I own or have access to a vehicle that I drive, and I will not stop driving for some time.

5. How easy or difficult is it for you to get to medical, dental, and other essential appointments?

- Very easy
- Easy
- Neither easy nor difficult
- Difficult
- Very difficult

6. How easy or difficult is it for you to get healthy food?

- Very easy
- Easy
- Neither easy nor difficult
- Difficult
- Very difficult

7. How easy or difficult is it for you to get to social, cultural, or religious activities?

- Very easy
- Easy
- Neither easy nor difficult
- Difficult
- Very difficult

8. Which of the following statements best describes your situation?

- There are no transportation options in my area for people who do not drive.
- I can get where I need to go. Transportation is not usually a challenge for me.
- I have a good understanding of transportation options in my area, but I cannot afford to use them.
- I can afford transportation, but I do not understand how to use it.
- I know about and can afford transportation, but I am not able to use it because of a disability.
- I know about and can afford transportation, but I choose not to use it for another reason (please explain): _____

9. Do you currently use community transportation programs such as volunteer transportation, Hyde Shuttles, Hopelink Medicaid Transportation, senior center shuttles, or similar services?

- Yes
- No
- Please describe any challenges you have with these services or why you do not use them: _____

10. In what ZIP code is your home located? (enter 5-digit ZIP code; for example, 98118 or 98124) _____

11. What types of activities or services do you currently use?
Check all that apply.

- Adult day care/health
- Caregiver support (caring for a family member or friend)
- Food bank
- Food or nutrition program (community kitchens, meal site, home-delivered)
- Health workshops/fitness classes
- In-home personal care (assistance with chores, bathing, meal preparation, medications, etc.)
- Senior or community centers
- Social worker/case manager (care and services coordination)
- Transportation
- None
- Other: _____

12. What types of activities or services do you think you will use in the future? Check all that apply.

- Adult day care/health
- Caregiver support (caring for a family member or friend)
- Food bank
- Food or nutrition program (community kitchens, meal site, home-delivered)

- Health workshops/fitness classes
- In-home personal care (assistance with chores, bathing, meal preparation, medications, etc.)
- Senior or community centers
- Social worker/case manager (care and services coordination)
- Transportation
- None
- Other: _____

13. Have you or someone you know needed help connecting to community services but have not been able to get it?

- Yes (please explain): _____
- No

14. What is your age?

- 17 or younger
- 18 to 29
- 30 to 39
- 40 to 49
- 50 to 59
- 60 to 69
- 70 to 79
- 80 to 89
- 90 or older
- I prefer not to answer

15. What is your gender?

- Female
- Male
- Other
- I prefer not to answer

16. What is your race/ethnicity?

- American Indian/Alaskan Native

- African/African American
- Asian/Pacific Islander
- Hispanic/Latino
- White/Caucasian
- Multi-racial/ethnic
- I prefer not to answer
- Other: _____

17. In what area of King County do you live?

- North King County
- East King County
- South King County
- Seattle
- I prefer not to answer
- Other: _____

18. What language do you speak at home? _____

19. Do you provide care or assistance to an adult with a disability or an older adult?

- Yes
- No
- Other: _____

Send completed surveys to:

ADS 2018 Survey
Seattle Human Services Department
PO Box 34215
Seattle, WA 98124-4215

Fax 206-684-0152
E-mail aginginfo@seattle.gov