

# 2020 Community Health Assessment

## Community Themes and Strengths Assessment

### Black Hawk County, Iowa



COMMUNITY HEALTH ASSESSMENT & COMMUNITY HEALTH IMPROVEMENT PLANNING

*Our community works together so all people have equitable opportunities and resources to lead healthier, more fulfilled lives.*

Black Hawk County Public Health

May 2020

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## Community Themes and Strengths Assessment

MAPP (Mobilizing for Action through Planning and Partnerships) is a community-wide strategic planning process for improving public health, as well as an action oriented process to help communities prioritize public health issues, identify resources for addressing them, and taking action. MAPP provides a framework, guidance, structure, and best practices for developing healthy communities. Black Hawk County Health Department, in collaboration with community stakeholders, is using the MAPP process to develop a community health assessment and community health improvement plan. This process was initiated in March of 2019 when representatives from the National Association of County & City Health Officials (NACCHO) led community stakeholders through a training and visioning process for Black Hawk County. The MAPP process is comprised of four assessments to understand the health issues and needs of the community.

The Community Themes and Strengths Assessment (CTSA) is one for the four assessments that focuses on the important issues to the community, quality of life, and the resources that can be leveraged to improve health. The assessment primarily relies on qualitative data, and a variety of methodologies can be used to collect the data. Typically the assessment will consist of multiple data collection methods, however, there are no set guidelines on what methods to use or how many should be used.

### Method

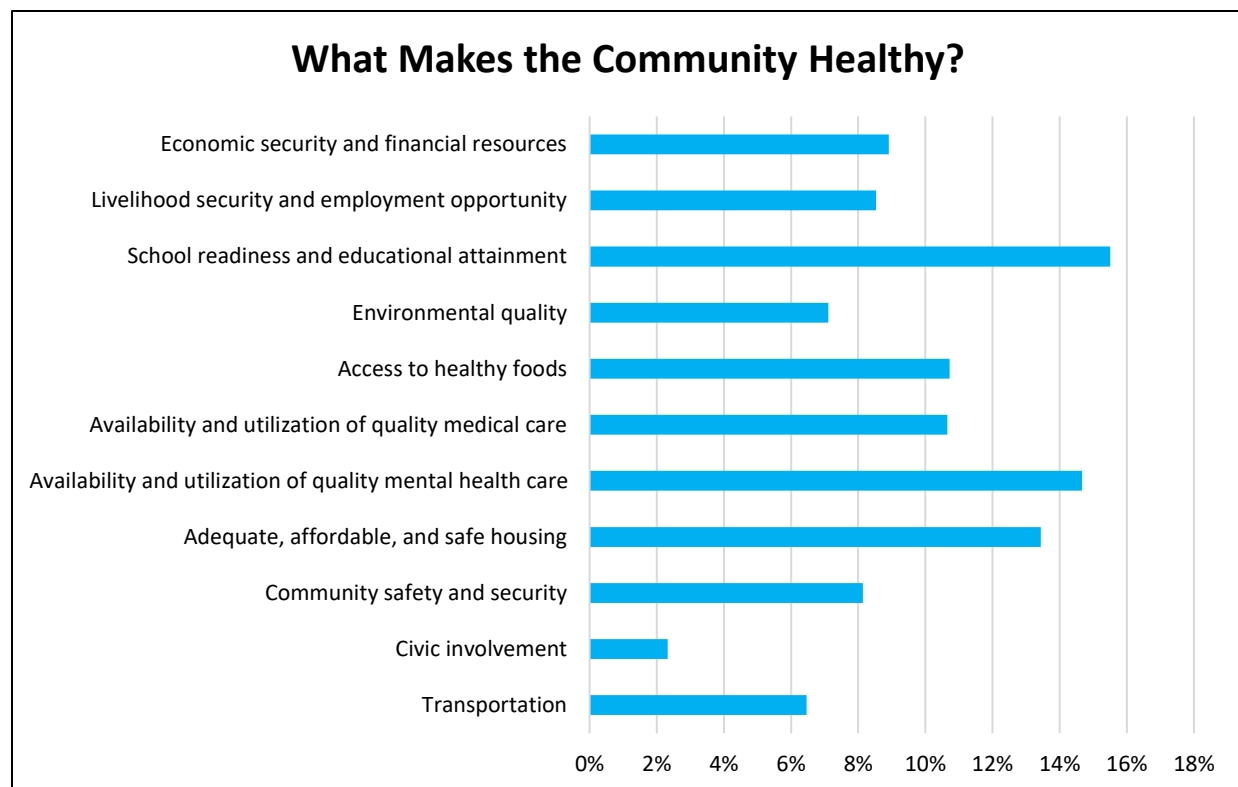
The Community Themes and Strengths Assessment was completed in Black Hawk County using two methodologies, a community survey and sticker boards. The community survey was developed, and administered in partnership with UnityPoint, Mercy One, Cedar Valley United Way, EMBARC, UNI-Center for Educational Transformation, UNI-School of Business, Black Hawk County Gaming Association, and Peoples Community Health Clinic. The survey consisted of 41 questions that asked respondents about the overall health of the community, what factors were important in being healthy, their personal health habits, and demographic questions. The survey was administered through Survey Monkey, and distributed by partners through their social media accounts and organizational websites. The survey was first released in January 2019 and was open until June 2019. While the partnership was satisfied with the number of responses received for the survey, there were concerns that the responses were not representative of the community. The respondents were predominately from the white middle class community, with the African American community being particularly under-represented.

Additional efforts were taken to obtain responses from under-represented communities. To obtain responses from the African American community, the health department partnered with local African American churches. Paper versions of the survey were given to each congregation for their members to complete, and the completed surveys were returned to the health department for data entry. To obtain responses from the Newcomer community the health department worked with The Ethnic Minorities of Burma Advocacy and Resource Center (EMBARC). EMBARC worked with community health workers to translate the survey into several languages, and then administered the surveys through in-person interview with newcomers. EMBARC then provided the data from the interviews to the health department to be combined with the rest of the survey data.

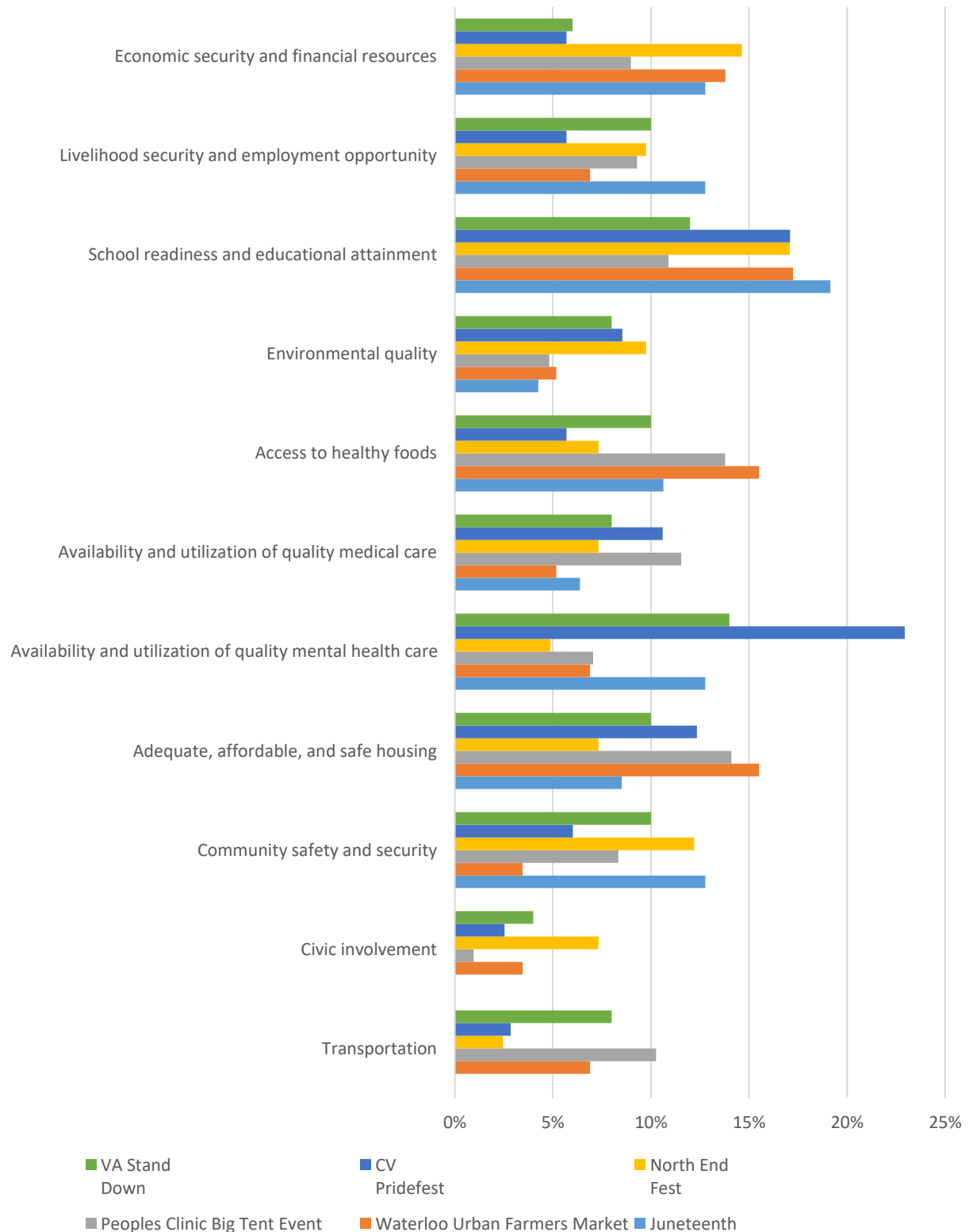
The sticker boards were used to supplement the community survey in identifying the factors that people felt makes the community healthy. The sticker boards were administered at six community events during the summer and fall of 2019, including Juneteenth, Waterloo Urban Farmers Market, Peoples Clinic Tent Event, North End Fest, Cedar Valley Pridefest, and Veteran’s Stand Down. The sticker board had one question at the top of the board “What makes a community healthy?” and several options down the left-side of the board. Participants were given three stickers, and asked to place the stickers on the board next to the top factors that make a community healthy. For participants that wanted to select a factor that wasn’t on the sticker board there was an “Other” board where participants could write in factors. Any following participants could also vote for factors written on the “Other” board. Following each event, the number of stickers under each factor were tallied and recorded, and a fresh sticker board was used for each event.

## Sticker Board

The top answers for the combined survey responses were school readiness and educational attainment, availability and utilization of quality mental health care, and adequate, affordable, and safe housing. CV Pridefest and VA Stand Down participants had the highest proportion of people choosing mental health utilization and quality. CV Pridefest had the most participants overall (38%) which may have skewed the data away from the smaller events. The three events that had 50 people or less (Juneteenth, North End Fest, and VA Stand Down) had the top answers of school readiness and educational attainment, community safety and security, and adequate, affordable, and safe housing.



## What Makes the Community Healthy?



# Community Survey

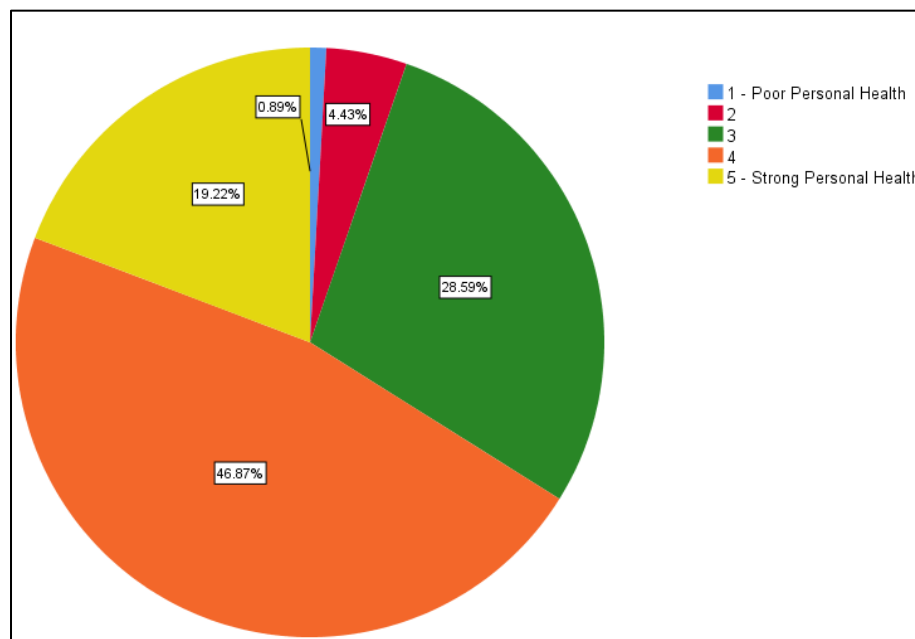
## Individual, Family, and Community Health

The first questions asked on the survey were related to health of individuals, families, and community. This includes rating personal and community health, identifying health problems and behaviors, and healthcare utilization. There were 16 questions in this section.

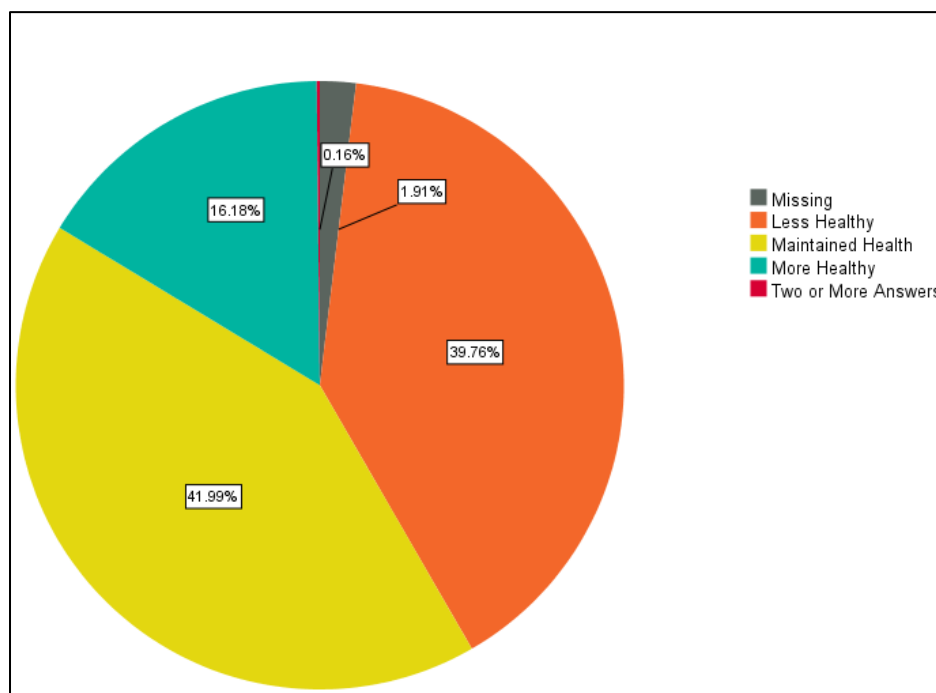
## Health Ranking

The survey participants believed that the health of their community in the last 5 years was between maintaining their health and becoming less healthy. Only 16.2% of the respondents reported that their community had become healthier. Asian and Black/African American participants viewed their community as becoming healthier compared to other racial and ethnic groups. A separate question was asked later in the survey to rate personal health. Almost 2/3 of the participants rated they had strong personal health (reporting a 4 or a 5 out of 5). This trend was true for all racial and ethnic groups beside Two or More Races, which had only 50% report having strong personal health.

**Self-Ranking of Personal Health**



## Perceived Community Health Rating of the Last 5 Years



### Health Problems and Concerns

The participants were asked to select the top 3 factors needed to have a healthy community. 'Access to health care', 'jobs and healthy economy', and 'access to nutritional foods' were the top choices. These answers differed slightly from the sticker board answers ('school readiness and educational attainment', 'availability and utilization of quality mental health care', and 'adequate, affordable, and safe housing'). Comparing the sticker board to the survey is informative, but the discrepancies between the question asked and the answers provided should be considered. In the survey, affordable and safe housing was reported as a top environmental threat, and mental illness was reported as a top problem in the community.

The proportion of participants indicating access to healthcare was 66.4%. Proportions ranged from 47.2% for Black/African Americans and 72.4% for Whites. One interesting finding was the answer 'clean environment.' Although only 17.3% responded that this was a need, 39.5% of the Asian respondents and 35.2% of the Black/African Americans chose this as a top factor compared to only 12.3% of the Whites.

The top health problems reported in the community were obesity, mental illness, and diabetes. Over 65% of the White respondents indicated that obesity and mental illness were top problems, but less than 20% of the Asian and Black/African American participants rated these as top problems. Over 65% of the Asian and Hispanic participants chose diabetes as a top problem, but only 33.4% of the White

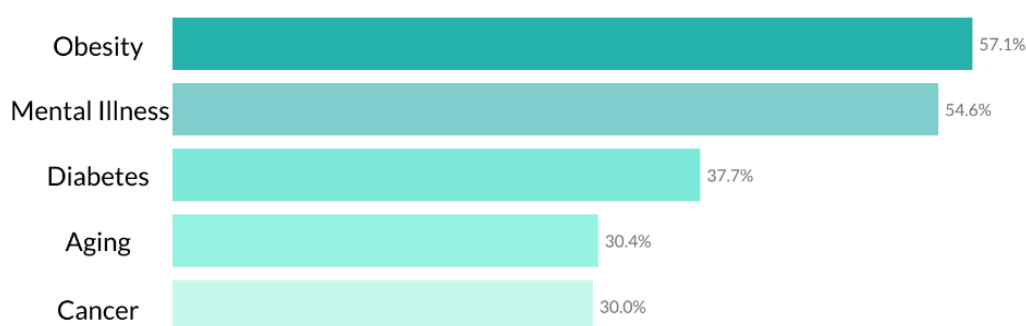
participants felt that way. High blood pressure had a similar distribution with over 60% of the Asian and Black/African Americans selecting it, and less than 20% of the White population did the same.

A similar question was asked later in the survey, but it was altered to the top 3 health concerns for children. Answers for this question were more dispersed with the highest proportion at 35.2%. The top answers were poor parenting skills, access to mental health services, and living environment. The only remarkable difference in racial ethnic category proportions was that 56.7% of Two or More Races believed that living environment was a top health concern, while other racial ethnic categories ranged from 10% to 31%.

### Top Factors Needed for a Healthy Community



### Top Health Problems in the Community



### Healthcare Utilization

Health care utilization questions asked about annual health exams, oral health exams, and eye exams for participants and their children (if applicable). Each question had a yes or no answer. The total proportion indicating they had an annual health exam was 85.7%. Those selecting no were 53.7% White, 28.4%



Black/African American, and 17.9% other (other racial ethnic groups combined to help de-identify the data). 94.5% of participants with children took them to an annual health exam. Those that indicated no were 47.1% Black/African American, 35.3% White, and 17.6% other.

74.5% of participants reported they see a dentist at least once per year. The proportion of participants that reported they do not regularly see a dentist were 48.6% White, 41.4% Black/African American, and 10.0% other. Participants with children were asked about taking them to a dentist and an eye exam. 92% of parents said they took their child to see a dentist regularly, and 83.5% took them to see an optometrist for an eye exam regularly. The parents that did not take their children to an oral health exam at least once a year were 56.3% Black/African American, 33.8% White, and 9.9% other. The parents that did not take their children to an eye exam at least once a year were 28.9% Black/African American, 50.7% White, and 20.4% other.

### Child and Adult Insurance Status

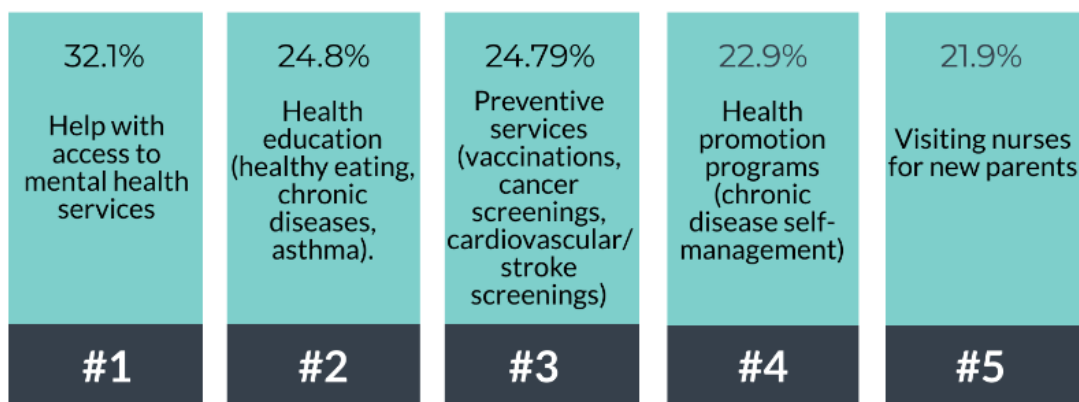


### Health Behaviors

The part of this section was related to behavior. The top risky behaviors of adults were alcohol abuse, illegal drug use, and physical inactivity. The racial ethnic distribution for this question was relatively even. A slightly higher proportion of Whites selected physical inactivity than other racial ethnic groups. Almost all racial ethnic groups, excluding Two or More Races, had a higher proportion select alcohol abuse than Whites. An interesting discovery was that Asian and Black/African American participants believed that driving while drunk or high was more important than physical inactivity.

Top behaviors participants want to improve are getting more physical activity, drinking more water, eating more fruits and vegetables, and decreasing stress. The barriers that the participants saw to achieving a healthier lifestyle were lacking motivation, not enough time, and other priorities getting in the way. The survey then asked what activities would help the participants overcome these barriers for a healthy lifestyle. The top rated activities were affordable wellness and fitness facilities, more fresh food and produce available, and having additional recreational paths in the community.

## Top Public Health Services Desired in the Community



### Mental Health

The second set of questions asked on the survey were related to mental health. This includes symptoms, behaviors, and childhood traumas. There were 8 questions in this section, which utilized multiple choice and select all that apply.

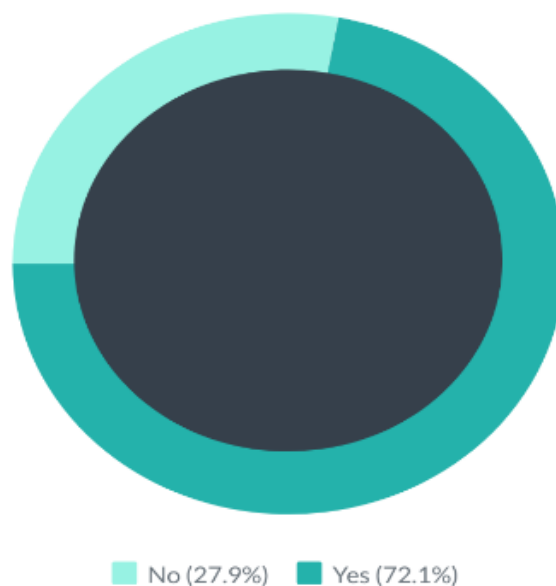
Participants were asked to describe their stress level and mental health. 68.4% described their mental health as happy and able to manage the stresses of everyday life. 9.3% have mental health issues and are receiving help. The individuals that are not receiving help for their mental health issues did not do so because they felt ashamed talking about personal issues, it was too expensive, or they had unsuccessful past services. The activities that positively affect mental health were relationships, exercise, and sleeping habits. The activities that negatively affect mental health were poor sleeping habits, poor exercise, financial stress, and poor diet.

The survey asked individuals if they had experienced childhood traumas and if it affected their adult life. The top traumas reported were parents separated or divorced, emotional abuse, and poverty. These traumas affected racial and ethnic groups similarly. The top effects of these traumas were lowering self-esteem, influencing relationships, and their overall mental health. These symptoms were found across all racial and ethnic groups beside Asian. Only 27.9% of the respondents that indicated that they had childhood trauma are receiving support or counseling for the trauma.

## Top Reasons for not Receiving Mental Health Services



## Individuals Receiving Support for Childhood Trauma



## Environmental Health and Preparedness

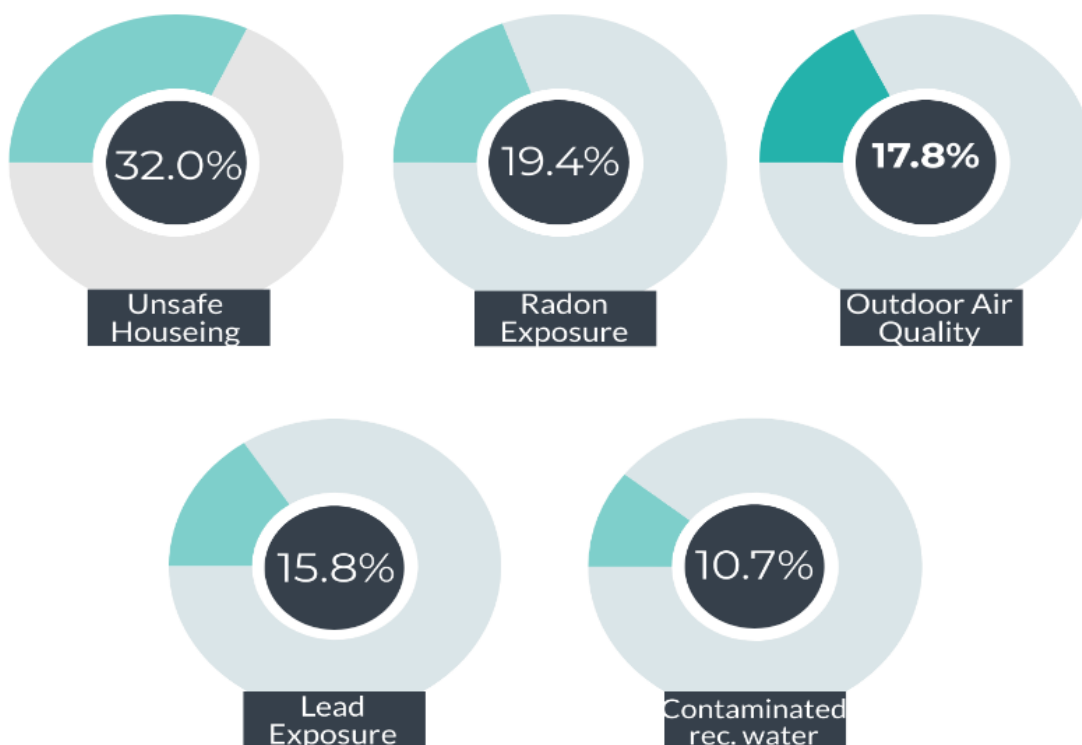
Environmental health questions on the survey pertained to perceived environmental health threats and preparedness activities. There were 4 questions in this section, with one question broken down making it 5 total questions.

The first question in this section asked participants to select environmental threats they feel threaten their community. The top answer choices were unsafe housing, radon exposure, and outdoor air quality.

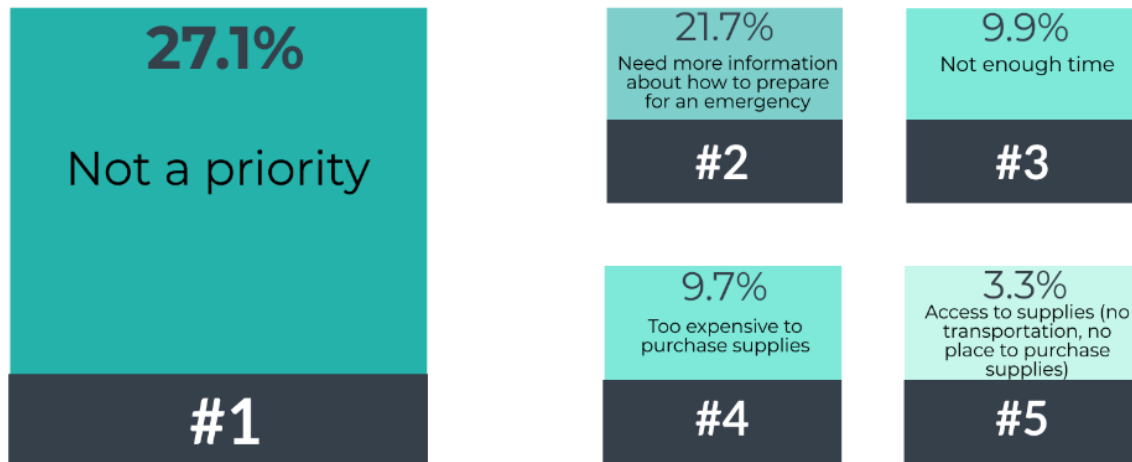
A similar question conducted by EMBARC asked their participants what they feel the biggest threat to the community was. This question had different response options and was considered too different to merge together with the previous mentioned question. The top answers for this question were unsafe housing, flooding basements, and contaminated lakes and rivers.

The level of preparedness in the community for a natural or man-made disaster was a relatively even split between yes and no (Yes = 49.1%, No = 47.2%, I Don't Know = 3.7%). The follow-up question to this asked if the participants did any preparedness activities. The top answers for this were owning a cellphone charger, owning a first aid kit, signing up to obtain real-time alerts for disasters, and owning a weather radio or flashlight. When this question was broken down by race it showed that the White population had a higher proportion of individuals that owned a cellphone charger (95.8% compared to other races = 55.3%-80.0%) and had a first aid kit (72.1% compared to other races = 30.8%-53.3%). Participants did not indicate they practiced fire drills at home (18.7%), practiced tornado drills at home (22.8%), or keep a list of current medications and important paperwork for each family member (20.3%). The top barriers that were identified for being prepared in an emergency included that it wasn't a priority, not educated on how to prepare, and not enough time.

### Top Environmental Threats in the Community



## Top Barriers for Being Prepared for a Disaster/Emergency



## Demographics

The age of the participants was normally distributed, with a majority of participants from the age ranges of 30-59. A majority of the participants were White (73.8%) and Black/African American (18.5%). All other races were combined to account for 7.6% of the survey participants. The proportion of participants that immigrated (12.9%) came from countries including Bosnia, Burma, Liberia, Mexico, Republic of Congo, and Southern Asia.

Most participants were college graduates or advanced degree holders (58.4%), or graduated high school with some college education (37.2%). Only a small amount of participants had less than a high school education (<5%).

Participants were asked about their insurance status as well as their child's (if applicable). Almost all the respondents said they had insurance (97.4%) or that at least one of their children were insured (98.2%). Those that did not have insurance for themselves were mostly Black/African American (74.5%). Further, a majority of individuals that did not have insurance for at least one child were Black/African American (58.8%).

Family's gross annual income before tax differed drastically between racial and ethnic groups. This comparison was apparent for the Black/African American population vs the White population. The White population had a median salary range of \$75,000-\$99,000, while the Black/African American population had a median salary range of \$30,000-\$49,000.

The final question on the survey asked the participants if they received services from any local organization. 26.5% of participants indicated they received some kind of service. Of these services, food assistance (33.7%) and health care services (18.5%) were the most common.

## Appendix

### Survey Tool

Community Health Survey

Welcome to the 2019 Community Health Needs Assessment! Thank you for participating in this important work. All information you provide is completely anonymous and strictly confidential.

If a question does not relate to you, skip to the next question.

### Tell Us About the Health of You, Your Family, and Community

1. Do you feel people in this community are healthier, less healthy, or have maintained health over the last five (5) years?

- ☐ More Healthy
- ☐ Less Healthy
- ☐ Maintained Health

2. What do you feel are the top three (3) most important factors for a healthy community?

- ☐ Access to health care (example: family doctor, hospital, other health services)
- ☐ Affordable housing
- ☐ Access to transportation
- ☐ Arts and cultural events
- ☐ Clean environment
- ☐ Race relations
- ☐ Jobs and healthy economy
- ☐ Safe place to raise children
- ☐ Schools
- ☐ Access to nutritional foods
- ☐ Access to physical activity or exercise
- ☐ Low crime/safe neighborhoods
- ☐ Child abuse prevention
- ☐ Domestic abuse prevention
- ☐ Access to mental health services
- ☐ Parks and recreation
- ☐ Religious or spiritual values
- ☐ Family life
- ☐ Access to transportation

3. What do you feel are the top three (3) health problems in your community?

- ☐ Aging (arthritis, hearing/vision loss, dementia, etc.)
- ☐ Asthma
- ☐ Cancer
- ☐ Diabetes
- ☐ Heart disease/stroke
- ☐ High blood pressure
- ☐ Infectious disease
- ☐ Injuries (falls, car accidents, drowning)
- ☐ Obesity
- ☐ Sexually transmitted disease
- ☐ Premature birth
- ☐ Mental illness

4. What do you feel are the top three (3) risky behaviors relative to adult behavior in your community?

- ☐ Alcohol abuse
- ☐ Driving while drunk or high
- ☐ Dropping out of school
- ☐ Illegal drug use
- ☐ Not getting shots to prevent disease
- ☐ Not wearing a helmet on a bike or motorcycle
- ☐ Not wearing a seatbelt
- ☐ Physical inactivity
- ☐ Prescription drug abuse
- ☐ Texting or using a cell phone while driving
- ☐ Unprotected sex
- ☐ Use of tobacco, vaping, etc. use



5. What do you feel are the top three (3) health concerns relative to children's health in your community?

- ☐ Access to health care
- ☐ Access to mental health services
- ☐ Access to shots that prevent disease
- ☐ Affordable fresh foods
- ☐ Affordable health insurance
- ☐ Bullying
- ☐ Child care/day care availability
- ☐ Healthy diets
- ☐ Nutritious school lunch
- ☐ Physical activity opportunities
- ☐ Sexual behavior
- ☐ Screen time
- ☐ Structured, safe, or supportive living environment
- ☐ Substance abuse
- ☐ Not using child safety seats in a vehicle
- ☐ Access to dental care
- ☐ Poor parenting skills
- ☐ Access to maternal health care
- ☐ Access to family planning
- ☐ Access to well child care
- ☐ School absences

6. On a scale of one to five, rate your personal health.

1 - Poor Personal Health



2



3



4



5 - Strong Personal Health



7. Do you have an annual health exam?

☐ Yes

☐ No

### About Your Routine Annual Health Exams

8. Where do you go for an annual health exam?

- |  |  |
|--|--|
| <input type="checkbox"/> Medical provider/Doctor's office    | <input type="checkbox"/> Nonprofit or free clinic        |
| <input type="checkbox"/> Urgent care                         | <input type="checkbox"/> Alternative health/Chiropractor |
| <input type="checkbox"/> Emergency room                      | <input type="checkbox"/> Telehealth                      |
| <input type="checkbox"/> Mental health provider/Psychiatrist |  |
| <input type="checkbox"/> Other (please specify)              |  |

### Your Child/Children's Routine Annual Health Exams

9. Do you/your spouse take your child/children for an annual health exam?

- ☐ Yes
- ☐ No
- ☐ Doesn't Apply

### About Your Child/Children's Routine Annual Health Exams

10. Where do you/your spouse take your child/children for an annual health exam?

- |  |  |
|--|--|
| <input type="checkbox"/> Medical provider/Doctor's office    | <input type="checkbox"/> Nonprofit or free clinic        |
| <input type="checkbox"/> Urgent care                         | <input type="checkbox"/> Alternative health/Chiropractor |
| <input type="checkbox"/> Emergency room                      | <input type="checkbox"/> Telehealth                      |
| <input type="checkbox"/> Mental health provider/Psychiatrist | <input type="checkbox"/> Pediatrician                    |
| <input type="checkbox"/> Other (please specify)              |  |

### Additional Health Information

11. Do you go to the dentist regularly (1-2 times per year)?

- ☐ Yes  
☐ No

12. Do you/your spouse take your child/children to the dentist regularly (1-2 times per year)?

- ☐ Yes  
☐ No  
☐ Doesn't Apply

13. Do you have your child/children's eyes checked?

- ☐ Yes  
☐ No  
☐ Doesn't Apply

14. What three (3) healthy behaviors would you like to start or improve?

- ☐ Drink more water  
☐ Decrease stress  
☐ Eat more fruits or vegetables  
☐ Get more physical activity  
☐ Get shots/vaccines  
☐ Quit smoking, vaping, etc.  
☐ Reduce alcohol intake  
☐ Regular cancer screenings  
☐ Regular dental care  
☐ Regular annual checkups  
☐ Regular mental health counseling  
☐ Regular social interaction

15. What do you feel prevents you from being healthier? (Select all that apply.)

- ☐ Lack access to healthcare, medicine, or shots
- ☐ Lack motivation
- ☐ Lack knowledge about healthy choices
- ☐ Not enough time
- ☐ Nowhere to exercise
- ☐ Other priorities
- ☐ Physical health is too poor
- ☐ Lack access to healthy foods
- ☐ Unemployment
- ☐ Inadequate housing
- ☐ Lack access to transportation (a ride or your own vehicle)

16. What would help you or your family start or maintain a healthy lifestyle? (Select all that apply.)

- ☐ Additional recreational paths, trails, sidewalks
- ☐ Affordable wellness and fitness facilities
- ☐ Community physical activity programs (water aerobics, volleyball/basketball league, fitness class)
- ☐ Employee wellness programs
- ☐ Health education classes (Diabetes prevention/management, Heart Disease, Arthritis, Cooking, etc.)
- ☐ Local school wellness programs
- ☐ More fresh food and produce available
- ☐ Transportation to local fitness
- ☐ Transportation to food markets/grocery store
- ☐ Transportation to medical care

## Tell Us About Your Mental Health

**When we talk about mental health we mean emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps us determine how we handle stress, relate to others, and make choices.**

17. Which option describes your mental health?

- |   |   |
|---|---|
| <input type="radio"/> I am happy on a regular basis and am able to manage the stress of everyday life.  | <input type="radio"/> I struggle with loneliness, depression and/or anxiety and it impacts me often. I receive help to work through these issues, but do not take medication. |
| <input type="radio"/> I am usually happy and usually able to manage the stress of everyday life.  | <input type="radio"/> I have mental health issues, receive help and/or am on medication.  |
| <input type="radio"/> I am sometimes/often lonely, depressed and/or anxious and seek social activity to feel connected (i.e., go to church, volunteer, work out/exercise, etc.) | <input type="radio"/> I have mental health issues and have been arrested and/or been in a unit to receive treatment.  |
| <input type="radio"/> I struggle with loneliness, depression and/or anxiety. I hide it well and am not receiving help.  |   |

18. Are you currently experiencing any of the following? (Select all that apply.)

- |   |  |
|---|--|
| <input type="checkbox"/> Crying often   | <input type="checkbox"/> Hearing voices  |
| <input type="checkbox"/> Feeling hopeless or helpless   | <input type="checkbox"/> Thinking of harming yourself or others  |
| <input type="checkbox"/> Pulling away from people and usual activities                                    | <input type="checkbox"/> Inability to perform daily tasks like taking care of self, children, or getting to school or work |
| <input type="checkbox"/> Feeling numb   | <input type="checkbox"/> Inability to cope with daily problems or stress   |
| <input type="checkbox"/> Smoking, drinking, or using drugs more than usual                                | <input type="checkbox"/> Excessive anger, hostility, or violence   |
| <input type="checkbox"/> Feeling unusually confused, forgetful, on edge, angry, upset, worried, or scared | <input type="checkbox"/> Trouble sleeping  |
| <input type="checkbox"/> Yelling or fighting with family or friends                                       | <input type="checkbox"/> Unwanted distressing memories   |
| <input type="checkbox"/> Severe mood swings that cause problems in relationships                          |  |

19. What impacts your overall mental health in a positive way? (Select all that apply.)

- |   |   |
|---|---|
| <input type="checkbox"/> Exercise               | <input type="checkbox"/> Use of prescribed medication                                 |
| <input type="checkbox"/> Diet                   | <input type="checkbox"/> Counseling and/or psychiatric services                       |
| <input type="checkbox"/> Sleeping habits        | <input type="checkbox"/> Physical environment (Condition of home and/or neighborhood) |
| <input type="checkbox"/> Relationships          |   |
| <input type="checkbox"/> Other (please specify) |   |

20. What impacts your overall mental health in a negative way? (Select all that apply.)

- |   |   |
|---|---|
| <input type="checkbox"/> Physical environment (Condition of home and/or neighborhood) | <input type="checkbox"/> Difficulties with intimate relationships |
| <input type="checkbox"/> Poor exercise  | <input type="checkbox"/> Physical chronic health condition        |
| <input type="checkbox"/> Poor diet  | <input type="checkbox"/> Financial stress                         |
| <input type="checkbox"/> Poor sleeping habits   |   |
| <input type="checkbox"/> Other (please specify)                                       |   |

21. If you feel you could benefit from mental health services but are not currently receiving them, please select your reason(s) for not accessing those services. (Select all that apply.)

- |   |   |
|---|---|
| <input type="checkbox"/> Have tried mental health services and they were unsuccessful | <input type="checkbox"/> Services are too expensive                                     |
| <input type="checkbox"/> Have tried and takes too long to get an appointment          | <input type="checkbox"/> Lack of transportation   |
| <input type="checkbox"/> No insurance coverage  | <input type="checkbox"/> Feeling ashamed or uncomfortable talking about personal issues |
| <input type="checkbox"/> Other (please specify)                                       |   |

22. Did you experience any of the following trauma as a child? (Select all that apply.)

- |   |  |
|---|--|
| <input type="checkbox"/> Emotional abuse            | <input type="checkbox"/> Family member with mental illness |
| <input type="checkbox"/> Physical abuse             | <input type="checkbox"/> Domestic violence                 |
| <input type="checkbox"/> Sexual abuse               | <input type="checkbox"/> Parents separated or divorced     |
| <input type="checkbox"/> Substance abuse in home    | <input type="checkbox"/> Poverty                           |
| <input type="checkbox"/> Incarcerated family member | <input type="checkbox"/> Doesn't Apply                     |
| <input type="checkbox"/> Other (please specify)     |  |



### Tell Us About Your Trauma

23. Do you feel your childhood trauma has negatively impacted your adult life in any of the following areas? (Select all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> Physical health   | <input type="checkbox"/> Personal relationships |
| <input type="checkbox"/> Mental health   | <input type="checkbox"/> Parenting skills       |
| <input type="checkbox"/> Educational achievement                                   | <input type="checkbox"/> Substance abuse        |
| <input type="checkbox"/> Financial stability or ability to get and keep a good job | <input type="checkbox"/> Self-esteem            |

24. Did you or are you currently receiving support or counseling to address the trauma you experienced?

- ☐ Yes
- ☐ No

## Environmental Health

25. What do you feel are the environmental threats of your community? (Select all that apply.)

- ☐ Abandoned private wells
- ☐ Contaminated food supply
- ☐ Contaminated recreational water
- ☐ Lack of fluoride in drinking water
- ☐ Lead exposure
- ☐ Old septic systems
- ☐ Outdoor air quality (asthma triggers)
- ☐ Radon exposure
- ☐ Unsafe housing
- ☐ Unsafe drinking water
- ☐ Inadequate sewer systems

## Emergency Preparedness

26. Do you feel you/your family are prepared for a natural or man-made disaster?

- ☐ Yes  
☐ No

27. Which of the following emergency preparedness statements are true for you/ your family? (Select all that apply.)

- ☐ My family has a cell phone with a charger  
☐ My family has a first aid kit  
☐ My family has discussed a central meeting place  
☐ My family has made a contact list for emergencies (kids know how to call another family member and how to use 911)  
☐ My family has practiced a fire drill at home  
☐ My family has practiced a tornado drill at home  
☐ My family has a weather radio, flashlight, and batteries in our home  
☐ My family keeps a supply of bottled water and extra nonperishable food items on hand  
☐ My family keeps a list of current medications and important paperwork for each family member  
☐ My family has signed up to obtain real-time alerts and warnings for disasters

28. What prevents you from being prepared for an emergency? (Select all that apply.)

- ☐ Access to supplies (no transportation, no place to purchase supplies)  
☐ Not enough time  
☐ Too expensive to purchase supplies  
☐ Need more information about how to prepare for an emergency  
☐ Not applicable - my family is prepared for an emergency  
☐ Not a priority  
☐ Other (please specify)

## Public Health Services

29. What are the top three (3) public health services you would like to see in your community?

- ☐ Visiting nurses for new parents
- ☐ More citywide preparedness for natural disasters
- ☐ Free confidential STD/STI screening for all ages
- ☐ Health promotion programs (chronic disease self-management)
- ☐ Preventive services (vaccinations, cancer screenings, cardiovascular/stroke screenings)
- ☐ Health coaches for hypertension control
- ☐ Access to fresh fruits and vegetables
- ☐ Influenza shot clinics
- ☐ Health education (healthy eating, chronic diseases, asthma).
- ☐ Neighborhood wellness programs
- ☐ Help with access to medical care
- ☐ Help with access to mental health services
- ☐ Immunization information
- ☐ Oral health education
- ☐ Gap-filling dental care
- ☐ Help with access to dental care

### Tell Us About Your Background

#### 30. Age

- |                             |                             |
|-----------------------------|-----------------------------|
| <input type="radio"/> 0-18  | <input type="radio"/> 50-59 |
| <input type="radio"/> 19-29 | <input type="radio"/> 60-69 |
| <input type="radio"/> 30-39 | <input type="radio"/> 70-79 |
| <input type="radio"/> 40-49 | <input type="radio"/> 80+   |

#### 31. Gender

- |  |   |
|--|---|
| <input type="radio"/> Identify as Male       | <input type="radio"/> Male-to-Female                                  |
| <input type="radio"/> Identify as Female     | <input type="radio"/> Genderqueer Neither Exclusively Male nor Female |
| <input type="radio"/> Female-to-Male         | <input type="radio"/> Choose Not to Disclose                          |
| <input type="radio"/> Other (please specify) |   |

#### 32. Zip Code

#### 33. County

- |  |                                  |
|--|----------------------------------|
| <input type="radio"/> Allamakee              | <input type="radio"/> Grundy     |
| <input type="radio"/> Black Hawk             | <input type="radio"/> Hancock    |
| <input type="radio"/> Bremer                 | <input type="radio"/> Howard     |
| <input type="radio"/> Buchanan               | <input type="radio"/> Humboldt   |
| <input type="radio"/> Butler                 | <input type="radio"/> Kossuth    |
| <input type="radio"/> Cerro Gordo            | <input type="radio"/> Mitchell   |
| <input type="radio"/> Chickasaw              | <input type="radio"/> Winnebago  |
| <input type="radio"/> Fayette                | <input type="radio"/> Winneshiek |
| <input type="radio"/> Floyd                  | <input type="radio"/> Worth      |
| <input type="radio"/> Franklin               | <input type="radio"/> Wright     |
| <input type="radio"/> Other (please specify) |                                  |

34. Race/Ethnicity

- |   |   |
|---|---|
| <input type="radio"/> American Indian or Alaskan Native | <input type="radio"/> Native Hawaiian or other Pacific Islander |
| <input type="radio"/> Asian                             | <input type="radio"/> White or Caucasian                        |
| <input type="radio"/> Black or African American         | <input type="radio"/> Two or More Races                         |
| <input type="radio"/> Hispanic or Latino                |   |
| <input type="radio"/> Other (please specify)            |   |

35. Country of Origin (if immigrated in the last five years)

- |  |   |
|--|---|
| <input type="radio"/> Bosnia                 | <input type="radio"/> Mexico            |
| <input type="radio"/> Burma                  | <input type="radio"/> Republic of Congo |
| <input type="radio"/> Marshall Islands       | <input type="radio"/> Southern Asia     |
| <input type="radio"/> Other (please specify) |   |

36. Educational Level

- |  |  |
|--|--|
| <input type="radio"/> Some High School     | <input type="radio"/> College Graduate |
| <input type="radio"/> High School Graduate | <input type="radio"/> Advanced Degree  |
| <input type="radio"/> Some College         |  |

37. Health Insurance Status

- |  |  |
|--|--|
| <input type="checkbox"/> I am covered by private health insurance                  | <input type="checkbox"/> My child/ren is covered by health insurance, but I am not |
| <input type="checkbox"/> I am covered by employer provided health insurance        | <input type="checkbox"/> My child/ren is covered by health insurance               |
| <input type="checkbox"/> I am covered by Medicaid/Medicare                         | <input type="checkbox"/> No one in my family is covered by health insurance        |
| <input type="checkbox"/> I am covered by health insurance, but my child/ren is not |  |

38. Number of Adults Living in Your Home (including you)

39. Number of Children Living in Your Home

### Tell Us About Your Income

40. What is your family's gross annual income before taxes?

- |   |   |
|---|---|
| <input type="radio"/> Under \$15,000                | <input type="radio"/> Between \$75,000 and \$99,999   |
| <input type="radio"/> Between \$15,000 and \$29,999 | <input type="radio"/> Between \$100,000 and \$150,000 |
| <input type="radio"/> Between \$30,000 and \$49,999 | <input type="radio"/> Over \$150,000                  |
| <input type="radio"/> Between \$50,000 and \$74,999 |   |

41. Are you currently receiving services from any local organizations? (Select all that apply.)

- |   |   |
|---|---|
| <input type="checkbox"/> Food assistance                        | <input type="checkbox"/> Education assistance         |
| <input type="checkbox"/> Housing assistance (rental or shelter) | <input type="checkbox"/> Parent education services    |
| <input type="checkbox"/> Utilities assistance                   | <input type="checkbox"/> General financial assistance |
| <input type="checkbox"/> Child care assistance                  | <input type="checkbox"/> Health care services         |
| <input type="checkbox"/> All Other (please specify)             |   |