

Maricopa Association of Governments would like your input to help determine service priorities for adults 55 years of age and over in Maricopa County. This survey will take 10-15 minutes to complete. When you are finished, please return your survey in the postage-paid envelope addressed to ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061. We greatly appreciate your time.

Are you at least 55 years old?

____ (1) Yes (Please continue with the survey.)

____ (2) No (Please give the survey to someone in your household who is at least 55 years old. If no one in your household is at least 55 years old, please discontinue the survey. The survey is only for residents at least 55 years old.)

1. Using a scale of “5 to “1” where “5” is “Extremely Important” and “1” is “Not Important” please indicate how important each of the following reasons were to your decision to live in Maricopa County. If you don’t know please circle 9.

<u>Reasons:</u>	<u>Extremely Important</u>	<u>Important</u>	<u>Neutral</u>	<u>Less Important</u>	<u>Not Important</u>	<u>Don't Know</u>
(A) Always lived in Maricopa County.....	5	4	3	2	1	9
(B) Close to friends and family	5	4	3	2	1	9
(C) Availability of social services	5	4	3	2	1	9
(D) Cost of living	5	4	3	2	1	9
(E) Availability of public transportation services	5	4	3	2	1	9
(F) Ease of getting around	5	4	3	2	1	9
(G) Availability of shopping	5	4	3	2	1	9
(H) Quality of housing	5	4	3	2	1	9
(I) Employment opportunities.....	5	4	3	2	1	9
(J) Quality of the year-round weather	5	4	3	2	1	9
(K) Level of taxation.....	5	4	3	2	1	9
(L) Low crime rate	5	4	3	2	1	9
(M) Quality and availability of health care services	5	4	3	2	1	9
(N) Combination of city/suburbs/county/rural areas	5	4	3	2	1	9
(O) Availability of arts and cultural amenities.....	5	4	3	2	1	9
(P) Excellent county to retire in	5	4	3	2	1	9
(Q) Quality of local government services	5	4	3	2	1	9
(R) Quality of neighborhoods	5	4	3	2	1	9
(S) Quality of the environment	5	4	3	2	1	9
(T) Availability of parks and open spaces	5	4	3	2	1	9
(U) Availability of recreation opportunities	5	4	3	2	1	9
(V) Raising my grandchildren.....	5	4	3	2	1	9
(X) Other: _____.....	5	4	3	2	1	9

2. Which FOUR reasons listed above in Question #1 will have the MOST impact on your decision to stay in Maricopa County. [Using the letters above in Question #1, please write in the letters below for your 1st, 2nd, 3rd and 4th choices, or circle 'NONE'.]

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

3. Please rate your overall satisfaction with the following services and activities available to adults 55 years of age or older in Maricopa County on a scale of 5 to 1 where 5 means "Very Satisfied" and 1 means "Very Dissatisfied." If you don't know please circle 9.

<u>How satisfied are you with:</u>	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
(A) Public transportation	5	4	3	2	1	9
(B) Public parks and trails	5	4	3	2	1	9
(C) Rent/utility assistance services	5	4	3	2	1	9
(D) Public and non-profit health clinics	5	4	3	2	1	9
(E) Active public recreation opportunities (i.e. fitness, golf, swimming, tennis, etc.)	5	4	3	2	1	9
(F) Recreation programs (playing cards drawing, dancing, etc.)	5	4	3	2	1	9
(G) Locations of programs.....	5	4	3	2	1	9
(H) Full-time employment opportunities.....	5	4	3	2	1	9
(I) Part-time employment opportunities.....	5	4	3	2	1	9
(J) Arts and cultural amenities	4	4	3	2	1	9
(K) Opportunities to volunteer for community services.....	5	4	3	2	1	9
(L) Financial planning programs	5	4	3	2	1	9
(M) Rent/utility assistance programs	5	4	3	2	1	9
(N) Availability of affordable housing.....	5	4	3	2	1	9
(O) Emergency shelters	5	4	3	2	1	9
(P) Senior center services	5	4	3	2	1	9
(Q) Senior center hours of operations	5	4	3	2	1	9
(R) Opportunities to meet people your own age.....	5	4	3	2	1	9

4. Which FOUR of the items listed above in Question #3 do you or members of your household who are 55 years of age or older CURRENTLY use or participate in the most often? [Please write in the letters below for your 1st, 2nd, and 3rd choices using the letters in Question #3 above, or circle NONE.]

1st Most
Often

2nd Most
Often

3rd Most
Often

4th Most
Often
NONE

5. In 10 YEARS FROM NOW, which FOUR of the services and activities listed above in Question #3 do you or members of your household who are 55 years of age or older think they will use or participate in the most often? [Please write in the letters below for your 1st, 2nd, and 3rd choices using the letters in Question #3 above, or circle NONE.]

1st Most
Often

2nd Most
Often

3rd Most
Often

4th Most
Often
NONE

6. The following are issues that you and members of your household who are 55 years of age and older may face as you grow older. Using a scale of "5 to "1" where "5" is "Very Concerned" and

“1” is “Not Concerned” please indicate how concerned you are with each of these issues. If you don’t know please circle 9.

<i>Issues that you may be concerned with as you grow older:</i>	Very Concerned	Concerned	Neutral	A little Concerned	Not at all Concerned	Don't Know
(A) Feelings of social isolation	5	4	3	2	1	9
(B) Personal health issues	5	4	3	2	1	9
(C) Outliving my financial resources.....	5	4	3	2	1	9
(D) Lack of respect from others.....	5	4	3	2	1	9
(E) Losing the ability to drive.....	5	4	3	2	1	9
(F) Not feeling safe	5	4	3	2	1	9
(G) Unemployment	5	4	3	2	1	9
(H) High housing costs.....	5	4	3	2	1	9
(I) Affordability of health care.....	5	4	3	2	1	9
(J) Health issues of spouse over 55 years of age.	4	3	2	1	9	
(K) Language barriers.....	5	4	3	2	1	9
(L) Feelings of abandonment from children	5	4	3	2	1	9
(M) Loss of insurance.....	5	4	3	2	1	9
(N) Losing the ability to be active in current recreation pursuits	5	4	3	2	1	9
(O) Lack of public transportation	5	4	3	2	1	9
(P) Not having the financial ability to retire.....	5	4	3	2	1	9
(Q) Being forgotten by public officials.....	5	4	3	2	1	9
(R) Depression.....	5	4	3	2	1	9
(S) Lack of worthwhile volunteer opportunities to engage in	5	4	3	2	1	9
(T) Inability to continue living in my home or apartment.....	5	4	3	2	1	9
(U) Other: _____.....	5	4	3	2	1	9

7. Which FOUR of the issues listed in Question #6 above are you most concerned with for yourself and members of your household who are 55 years of age or older? [Using the letters above in Question #6, please write in the letters below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

8. Which FOUR of the issues listed in Question #6 above are you most concerned for regarding ALL residents 55 years of age or older who live in Maricopa County? [Using the letters above in Question #6, please write in the letters or number below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

9. How knowledgeable do you feel you are regarding public and non-profit services that are available to adults 55 years of age and older?

- | | |
|----------------------------------|-----------------------------|
| _____ (1) Very knowledgeable | _____ (3) Not knowledgeable |
| _____ (2) Somewhat knowledgeable | _____ (4) Not sure |

Maricopa County's Future as a Place to Live Strongly
for Adults over 55 Should Include Agree Agree Neutral Disagree Disagree Don't Know

(A) A larger regional public transit system offering more frequent service and better connections to other buses, etc.....	5	4	3	2	1	9
(B) More social gathering places.....	5	4	3	2	1	9
(C) Services to understand medical information....	5	4	3	2	1	9
(D) Community centers open longer hours.....	5	4	3	2	1	9
(E) Improved public transportation	5	4	3	2	1	9
(F) Increasing volunteer opportunities for providing transportation	5	4	3	2	1	9
(G) Improved health care services	5	4	3	2	1	9
(H) More physical fitness opportunities	5	4	3	2	1	9
(I) Additional walking, biking, and hiking trails.....	5	4	3	2	1	9
(J) Additional services to check on seniors living alone.....	5	4	3	2	1	9
(K) Improved driver education programs	5	4	3	2	1	9
(L) Increased mentoring opportunities with younger generations	5	4	3	2	1	9
(M) Increased emphasis on safety.....	5	4	3	2	1	9
(N) Emergency programs for those who are bedridden	5	4	3	2	1	9
(O) Increased opportunities to volunteer	5	4	3	2	1	9
(P) Elimination of language barriers for health care services.....	5	4	3	2	1	9
(Q) One stop service centers in neighborhoods	5	4	3	2	1	9
(R) Reducing pricing for public/non-profit services	5	4	3	2	1	9
(S) Programs to reduce the risk of depression	5	4	3	2	1	9
(T) Alzheimer's Research Center.....	5	4	3	2	1	9
(U) Affordable housing.....	5	4	3	2	1	9
(V) Schools/colleges focused on lifetime learning.	5	4	3	2	1	9
(W) Other: _____	5	4	3	2	1	9

16. Which FOUR of the statements from the list in Question #15 above do you feel BEST represent YOUR VISION for the FUTURE of Maricopa County's services to adults 55 years of age or older? [Using the letters above in Question #15, please write in the letters below for your 1st, 2nd, 3rd, and 4th choices, or circle 'NONE'.]

1st. _____ 2nd. _____ 3rd. _____ 4th. _____ NONE

17. Thinking about the time you have lived in Maricopa County do you generally think the quality of life for persons 55 years of age or older in Maricopa County has gotten better, stayed the same or gotten worse?

_____ (1) Gotten better _____ (3) Gotten worse
 _____ (2) Stayed the same _____ (4) Not sure

18. If an additional \$100 were available to fund services for adults 55 years of age or older how would you allocate the funding? [Please be sure your total adds up to \$100.]

- \$_____ Improve the public transportation system
- \$_____ Improve community centers for social activities
- \$_____ Improve facilities and program spaces for recreation, trails, fitness and sports activities
- \$_____ Improve health care services for adults 55 and over
- \$_____ Improve financial support (rent and utility assistance, etc.)
- \$_____ Improve social services (in-home meals, home visitations, etc.)
- \$_____ Other: _____

\$ 100 TOTAL

19. How would you prefer to provide input to MAG regarding transportation plans and programs?

(Please check all that apply.)

- _____ Attend meetings or hearings in person
- _____ Via staffed information booth at a public event in my neighborhood
- _____ Email correspondence
- _____ Telephone
- _____ Social media sites
- _____ Letter correspondence
- _____ Via website

DEMOGRAPHICS (OPTIONAL)

20. How many years have you lived in Maricopa County_____ years

21. What is your age? _____ years old

22. How many persons living in your household (counting yourself), are?

- | | | |
|--------------------|------------------|------------------|
| Under age 10 _____ | Ages 25-34 _____ | Ages 55-64 _____ |
| Ages 10-19 _____ | Ages 35-44 _____ | Ages 65-74 _____ |
| Ages 20-24 _____ | Ages 45-54 _____ | Ages 75+ _____ |

23. Are you of Hispanic or Latin ancestry?

- _____ (1) Yes _____ (2) No

24. Which of the following best describes your race? (check all that apply)

- | | |
|----------------------------------|----------------------------------|
| _____ (1) African American/Black | _____ (4) Asian/Pacific Islander |
| _____ (2) White | _____ (5) Other: _____ |
| _____ (3) Native American | |

25. Would you say your total annual household income is:

- | | |
|--------------------------------|----------------------------------|
| _____ (1) Under \$25,000 | _____ (4) \$75,000 to \$99,999 |
| _____ (2) \$25,000 to \$49,999 | _____ (5) \$100,000 to \$149,999 |
| _____ (3) \$50,000 to \$74,999 | _____ (6) \$150,000 or more |

26. What is your highest level of education?

____(1) Less than high school

____(2) High school graduate or equivalent

____(3) Some college/Associates degree

____(4) Bachelor's degree

____(5) Graduate work

27. Please share any additional comments you feel are important to help the Maricopa County community in providing services to adults 55 years of age and older.

Thank you for your time!

Please Return Your Completed Survey in the Enclosed Postage Paid Envelope Addressed to:
ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061

Your response will remain Completely Confidential.
The address information on the sticker to the right will
ONLY be used to help identify areas with special interests.