Promise Neighborhoods Research Consortium (PNRC)

Survey of Current Supports for Successful Youth Development

Thank you for taking this survey. Your answers will help us better understand what is working well in your neighborhood, what is not working well, and what programs you would most like to see improved. Doing this survey is voluntary. If you do not want to answer a question, just leave it blank. The answers you give will remain private. Please make sure to read every question. Answer the questions completely and honestly, as no answers are right or wrong. Thank you very much for your help!

First, we are going to ask you a few questions about your neighborhood. For this survey, "neighborhood" refers to the area that is the focus of your community effort. For some communities this might be an area surrounding a school. For others it might be a region within a town, city, or county. Please be sure to get clarification from the organizers of the survey.

| Please be sure to get clarification from the organizers of the survey. | | | | | | | | |
|--|--|-------|---|--|--|--|--|--|
| 1. WI | 1. Which of the following describes your role in the neighborhood? (Please check all that apply) | | | | | | | |
| 0 | I live in the neighborhood | 0 | I am an employee of a government agency | | | | | |
| 0 | I am employed by the neighborhood | 0 | I am a policymaker | | | | | |
| | elementary school | 0 | I am a researcher | | | | | |
| 0 | I am a practitioner who works directly with children and families | 0 | I am a volunteer | | | | | |
| 0 | I am an employee of a community | 0 | Other (explain) | | | | | |
| Ü | service or non-profit agency | 0 | I don't know or it is not applicable | | | | | |
| 0 | I am a daycare or preschool provider | | | | | | | |
| If you | do NOT live in the neighborhood, please skip | to Qu | estion #4. | | | | | |
| Nu | How long have you lived in the neighborhood? Number of years Years | | | | | | | |
| • | ou have not lived in the neighborhood a year, h ghborhood? | ow m | any months have you lived in the | | | | | |
| Nu | mber of months Months | | | | | | | |
| 3. Do | you plan to move to a new neighborhood in the | e nex | t year? | | | | | |
| | O Yes | | O No | | | | | |
| 4. Are | e you a parent or guardian of a child who is 20 | years | or younger? | | | | | |
| | O Yes | | O No | | | | | |
| f you are NOT a parent or guardian of a child who is 20 years old or younger, skip to Question #8. | | | | | | | | |

| 5. | Hov | w many children (v | vho are 20 ye | ars old or your | ger) | do you | ı have? | | |
|----|--------------------------------|---|------------------|------------------|------|----------|---|-------------|--------------------------|
| 6. | . What AGES are your children? | | | | | | | | |
| | | Age of child #1 Age of child #2 Age of child #3 | | | | Α | ge of child a ge of child a ge of child a | #5 | |
| 7. | | at type(s) of babys | sitting or child | care arrangem | ents | do you | ı have for yo | our childre | en? <i>(Please check</i> |
| | | Goes to a day car Goes to childcare | | ome | 0 | | r your spou hildren duri | | takes care of |
| | 0 | We have a babys comes to our hom | itter or nanny | | 0 | | family, frier dren during | | ghbors take care |
| | 0 | Before-school car | e | | 0 | None | | | |
| | 0 | Afterschool care | | | 0 | Other | | | |
| | 0 | Goes to summer | orograms | | | | | | |
| 8. | Wh | ere can you get or t apply) | • | nple, onto the I | nter | net or V | Veb) on a c | omputer? | (Please check all |
| | 0 | My home | | | | | | | |
| | 0 | My workplace | | | | | | | |
| | 0 | Local library | | | | | | | |
| | 0 | Nearby school, c | ollege, univer | sity | | | | | |
| | 0 | Community center | er or commun | ity organization | า | | | | |
| | 0 | Other | | | | | | | |
| 9. | | w satisfied are you ghborhood? | with the follo | wing ADULT E | DUC | CATION | l and JOB s | services in | the |
| | | | Verv | | | | Verv | Don't | Does not |

| 9. | How satisfied are you with the following ADULT EDUCATION and JOB services in the |
|----|--|
| | neighborhood? |

| | Very Dissatisfied | Dissatisfied | Satisfied | Very Satisfied | Don't know | Does not exist in neighborhood |
|---|----------------------|--------------|-----------|-------------------|---------------|--------------------------------------|
| Job education, training, and placement services | 0 | • | • | • | 0 | • |
| Available jobs | 0 | 0 | • | • | O | O |
| Transportation to work | 0 | • | • | • | 0 | • |
| Opportunities to start small businesses | • | • | • | 0 | • | • |
| Financial education | 0 | 0 | 0 | 0 | 0 | 0 |

| | there any BARRIERS that prevent you from vices in the neighborhood? | using (| existing ADULT EDUCATION and JOB |
|------|---|---------|--|
| 0 | Yes | 0 | Don't know |
| 0 | No | 0 | I do not need these services |
| 10a. | If there are barriers, what are some of those | BARR | IERS? (Please check all that apply) |
| 0 | Services/programs are not helpful | 0 | No translation services available |
| 0 | Too hard to get to | 0 | No childcare available |
| 0 | Not open or available at convenient times | 0 | Staff are not friendly |
| 0 | Too expensive | 0 | I am uncomfortable or embarrassed to use |
| 0 | Takes too long to get the service or program | 0 | Other |

11. How satisfied are you with the following HEALTH and FAMILY SUPPORT services in the neighborhood?

| | Very Dissatisfied | Dissatisfied | Satisfied | Very Satisfied | Don't know | Does not exist in neighborhood |
|--|----------------------|--------------|-----------|-------------------|---------------|--------------------------------|
| Medical services | 0 | • | • | 0 | 0 | 0 |
| Dental care | 0 | • | • | O | 0 | • |
| Mental health services | 0 | • | 0 | 0 | 0 | O |
| Drug/alcohol abuse counseling or treatment | 0 | • | • | 0 | 0 | 0 |
| Family support and counseling (for example DHS) | | • | • | • | 0 | 0 |
| Churches and faith groups | | • | 0 | 0 | O | • |
| Neighborhood groups or clubs | • | • | • | • | O | • |
| Neighborhood-wide events | • | • | 0 | 0 | O | • |
| Directory, website, or call-in center with information about programs in your neighborhood | • | • | • | 0 | 0 | 0 |

| Too hard to get to No childcare available Not open or available at convenient times Staff are not friendly Too expensive I am uncomfortable or embarras | • | | | | | |
|--|---|--|--|--|--|--|
| Services/programs are not helpful Too hard to get to No childcare available Not open or available at convenient times Too expensive No translation services available No childcare available Staff are not friendly I am uncomfortable or embarras | | | | | | |
| Takes too long to get the service or program | No translation services available No childcare available Staff are not friendly | | | | | |
| 13. How satisfied are you with these items that help provide SAFE and HEALTHY LIFES | TYLES? | | | | | |
| Dissatisfied Dissatisfied Satisfied know | oes not exist in ghborhood | | | | | |
| Low-cost housing O O O O | 0 | | | | | |
| Police support, law enforcement, and crime prevention programs | O | | | | | |
| Playgrounds and parks O O O O | O | | | | | |
| Public transportation O O O | O | | | | | |
| Sidewalks and/or paths O O O | 0 | | | | | |
| Neighborhood grocery stores, food banks, or community gardens | • | | | | | |
| Stores with low-cost clothing or household items | O | | | | | |
| Are there any BARRIERS that prevent you from using the above items that provide SAFE and HEALTHY LIFESTYLES? Yes Don't know | | | | | | |

O No

O I do not need these services

| 14a. If there are barriers, what are some of those BARRIERS? (Please check all that | | | | | | at apply) | | | |
|---|--------|---|--|---------------------|---|--|---------------|--------------------------------|--|
| | 0 0 0 | Too hard to get Not open or avaitimes Too expensive | en or available at convenient pensive too long to get the service or | | 0 N 0 S 0 I a | No childcare available Staff are not friendly I am uncomfortable or embarrassed to use | | | |
| 15. | | v satisfied are you neighborhood? | ı with the follo | owing PAREN | ITING E | DUCATION a | nd SUPPC | ORT services in | |
| | | | Very Dissatisfied | Dissatisfied | Satisfie | d Very Satisfied | Don't know | Does not exist in neighborhood | |
| | | g education and for parents-to- | • | • | 0 | • | • | 0 | |
| sup | port f | g education and for parents of 0 to 2 years old | 0 | • | 0 | 0 | O | 0 | |
| Parenting education and support for parents of children 3 to 5 years old | | • | • | 0 | 0 | O | 0 | | |
| Parenting education and support for parents of children 6 to 12 years old | | • | 0 | • | 0 | • | O | | |
| sup | port f | g education and for parents of to 18 years old | 0 | 0 | 0 | • | O | 0 | |
| 16. | | e there any BARR PPORT services | | - | m using | existing PARE | NTING EI | DUCATION and | |
| | 0 | Yes No | | | | Don't knI do not | | e services | |
| 16a. | If th | nere are barriers, | what are son | ne of those B | ARRIER | S? (Please ch | eck all tha | at apply) | |
| Services/programs are not helpful Too hard to get to Not open or available at convenient times Too expensive Takes too long to get the service or program | | | venient | 0 N 0 S 0 I a | No childcare available Staff are not friendly I am uncomfortable or embarrassed to us | | | | |

17. How satisfied are you with the following CHILDCARE and SUPERVISED ACTIVITIES for children and youth?

| | Very Dissatisfied | Dissatisfied | Satisfied | Very Satisfied | Don't know | Does not exist in neighborhood |
|---|----------------------|--------------|-----------|-------------------|---------------|--------------------------------------|
| Day care for infants and toddlers, 0 to 2 years old | 0 | 0 | • | • | 0 | • |
| Day care or preschool for 3 to 5 year olds | • | O | • | • | O | • |
| Day care or preschool for 0 to 5 year olds with special needs | 0 | 0 | • | • | 0 | 0 |
| Supervised after school activities or sports for elementary students | 0 | 0 | • | • | O | 0 |
| Supervised after school activities or sports for middle school students | • | 0 | O | 0 | • | • |
| Supervised after school activities or sports for high school students | • | O | • | • | O | • |

| 18. | | Are there any BARRIERS that prevent you and your child from using existing CHILDCARE and SUPERVISED ACTIVITIES for children and youth in the neighborhood? | | | | | | | |
|------|---|--|---|--|--|--|--|--|--|
| | 0 | Yes | | | | | | | |
| | 0 | No | | | | | | | |
| | 0 | Don't know | | | | | | | |
| | 0 | I do not need these services | | | | | | | |
| 18a. | If there are barriers, what are some of those BARRIERS? (Please check all that apply) | | | | | | | | |
| | 0 | Services/programs are not helpful | 0 | No translation services available | | | | | |
| | 0 | Too hard to get to | 0 | Staff are not friendly | | | | | |
| | 0 | Not open or available at convenient | 0 | I am uncomfortable or embarrassed to use | | | | | |
| | | times | 0 | Other | | | | | |
| | 0 | Too expensive | | | | | | | |
| | 0 | Takes too long to get the service or program | | | | | | | |

19. How satisfied are you with the following YOUTH EDUCATION, PREVENTION, and SUPPORT in your neighborhood?

(Note: **Youth prevention** are those programs that help youth develop in positive ways and prevent problem behavior such as bullying, violence, drug and alcohol abuse, and suicide. **Mentoring** programs are those that match students with a mentor, "big brother/sister", or an older advisor/guide).

| | Very Dissatisfied | Dissatisfied | Satisfied | Very Satisfied | Don't know | Does not exist in neighborhood |
|--|----------------------|--------------|-----------|-------------------|---------------|--------------------------------|
| Elementary Schools | • | 0 | 0 | 0 | 0 | • |
| Prevention and support for children in elementary school | 0 | 0 | • | • | • | • |
| Mentor programs for children in elementary school | • | • | • | • | 0 | 0 |
| Middle Schools/Jr. High Schools. | O | 0 | O | 0 | O | O |
| Prevention and support for youth in middle school | • | • | • | • | 0 | • |
| Mentor programs for youth in middle school | • | • | O | • | O | O |
| High Schools | • | 0 | • | • | • | 0 |
| Prevention and support programs for youth in high school | 0 | 0 | • | • | O | • |
| Mentor programs for youth in high school | • | 0 | • | • | 0 | • |
| College preparation for youth | O | O | O | O | O | 0 |
| College support (scholarships, financing, mentoring) | • | • | • | • | • | • |
| Youth job opportunities | O | 0 | O | O | O | O |
| Church youth groups | O | O | O | 0 | O | O |

| 20. | | e there any BARRIERS that prevent you REVENTION, and SUPPORT services in | | | | | | | |
|-----|---|---|--------|--|--|--|--|--|--|
| | 0 | Yes | | O Don't know | | | | | |
| | 0 | No | | I do not need these services | | | | | |
| 20a | a. If t | here are barriers, what are some of thos | e BARR | IERS? (Please check all that apply) | | | | | |
| | 0 | Services/programs are not helpful | | | | | | | |
| | Too hard to get to | | | | | | | | |
| | 0 | Not open or available at convenient tir | nes | | | | | | |
| | O Too expensive | | | | | | | | |
| | 0 | Takes too long to get the service or pr | ogram | | | | | | |
| | No translation services available No childcare available | | | | | | | | |
| | Staff are not friendly | | | | | | | | |
| | 0 | I am uncomfortable or embarrassed to | use | | | | | | |
| | 0 | Other | | | | | | | |
| 0 | | ducation, training, and placement | | Public transportation Sidewalks and/or paths | | | | | |
| | | portation to work | 0 | Grocery store, food banks, community | | | | | |
| 0 | - | tunities to start small businesses | | gardens | | | | | |
| 0 | | cial education | 0 | Store with affordable clothing and | | | | | |
| 0 | Medica | al services | | household items | | | | | |
| 0 | Dental | services | 0 | Parenting education and support | | | | | |
| 0 | Drug/a | alcohol counseling or treatment | 0 | Day care | | | | | |
| 0 | Family | support and counseling | 0 | Schools (specify) | | | | | |
| 0 | Church | hes and faith groups | 0 | After school activities and sports | | | | | |
| 0 | Neighb | porhood groups or clubs | 0 | Prevention and support programs for youth | | | | | |
| 0 | Neighb | oorhood-wide events | 0 | Mentoring programs for youth | | | | | |
| 0 | Resou | rce directory, website, or call-in | 0 | Youth jobs | | | | | |
| | center | | 0 | Church youth groups | | | | | |
| 0 | Low-co | ost housing | 0 | Other | | | | | |
| 0 | Police | and crime prevention | 0 | Other | | | | | |
| 0 | Playgr | ounds and parks | | | | | | | |

| 22. | Please check TWO resources or services that you would like IMPROVED or DEVELOPEI the neighborhood? | | | | | | | |
|---------|--|----------|--|--|--|--|--|--|
| 0 | Job education, training, and placement | | | | | | | |
| 0 | Available jobs | 0 | Public transportation | | | | | |
| 0 | Transportation to work | 0 | Sidewalks and/or paths | | | | | |
| 0 | Opportunities to start small businesses | 0 | Grocery store, food banks, community | | | | | |
| 0 | Financial education | | gardens | | | | | |
| 0 | Medical services | 0 | Store with affordable clothing and household items | | | | | |
| 0 | Dental services | 0 | Parenting education and support | | | | | |
| 0 | Drug/alcohol counseling or treatment | 0 | Day care | | | | | |
| 0 | Family support and counseling | 0 | Schools (specify) | | | | | |
| 0 | Churches and faith groups | 0 | After school activities and sports | | | | | |
| 0 | Neighborhood groups or clubs | 0 | Prevention and support programs for youth | | | | | |
| 0 | Neighborhood-wide events Resource directory, website, or call-in center | 0 | Mentoring programs for youth | | | | | |
| 0 | | 0 | Youth jobs | | | | | |
| \circ | | 0 | Church youth groups | | | | | |
| 0 | Low-cost housing Police and crime prevention | 0 | Other | | | | | |
| 0 | Playgrounds and parks | 0 | Other | | | | | |
| 23. | . Please feel free to write any additional cor | mments y | ou may have in the box below | | | | | |
| | | | | | | | | |

You are almost finished!

| Lastly, | we | would like to ask you questions about yourself | | |
|---------|-----|---|--------|--|
| 24. | Ηον | w old are you? | | |
| 25. | Wh | at is your gender? | | |
| | 0 | Female Male | 0 | Other |
| 26. | Wh | at is your marital status? | | |
| | 0 0 | Currently married/have a partner Widowed Divorced | 0 | Separated Never married or had a partner |
| 27. | Wh | at is your ethnicity or race (Please check all that a White Black or African American American Indian or Alaska Native Hispanic, Latino, or Spanish origin (specify origin Asian (specify) Pacific Islander (specify) Other (specify) |) | |
| 28. | | at is the highest degree or level of school that ANY completed? No schooling completed Grade 1-11 (Specify) Grade 12; no diploma Regular high school diploma GED or alternative credential Some college credit but less than one year of col 1 or more years of college credit, NO DEGREE Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) Master's degree (for example: MA, MS, MBA) Professional degree (for example: MD, DDS, DVI Doctorate degree (for example: PhD, EdD) | lege (| - |

| 29. | How many people aged 16 and older in your home have a full-time job (for example, one job that is 40 or more hours per week)? | | | | | | |
|-----|---|------------------------------------|---|-------------------|--|--|--|
| | 0 | 0 | 0 | 4 | | | |
| | 0 | 1 | 0 | 5 | | | |
| | 0 | 2 | 0 | 6 or more | | | |
| | 0 | 3 | | | | | |
| 30. | How many people aged 16 and older in your home have a part-time job? | | | | | | |
| | 0 | 0 | 0 | 4 | | | |
| | 0 | 1 | 0 | 5 | | | |
| | 0 | 2 | 0 | 6 or more | | | |
| | 0 | 3 | | | | | |
| 31. | How many people contribute to your household's total income? | | | | | | |
| | 0 | 0 | 0 | 4 | | | |
| | 0 | 1 | 0 | 5 | | | |
| | 0 | 2 | 0 | 6 or more | | | |
| | 0 | 3 | | | | | |
| 32. | What is your household's total income for the past MONTH? | | | | | | |
| | 0 | Less than \$500 | 0 | \$3,500 - \$3,999 | | | |
| | 0 | \$500 - \$999 | 0 | \$4,000 - \$4,499 | | | |
| | 0 | \$1,000 - \$1,499 | 0 | \$4,500 - \$4,999 | | | |
| | 0 | \$1,500 - \$1,999 | 0 | \$5,000 - \$5,499 | | | |
| | 0 | \$2000 - \$2,499 | 0 | \$5,500 - \$5,999 | | | |
| | 0 | \$2,500 - \$2,999 | 0 | \$6,000 - \$6,999 | | | |
| | 0 | \$3,000 - \$3,499 | 0 | \$7,000 and above | | | |
| 33. | Which of the following income supports does this household receive? (Please check all that apply) | | | | | | |
| | 0 | None | | | | | |
| | O Temporary Assistance to Needy Families (TANF) | | | | | | |
| | O Food Stamps | | | | | | |
| | 0 | Employment Related Day Care (ERDC) | | | | | |
| | 0 | Unemployment | | | | | |
| | 0 | Disability | | | | | |
| | 0 | Earned Income Tax Credit (EITC) | | | | | |
| | 0 | Child support | | | | | |
| | 0 | Other (please specify) | | | | | |
| | | | | | | | |

Thank you for taking the Current Supports Survey