

COMMUNITY SURVEY

RVA THRIVES // COWARDIN-JEFFERSON DAVIS CORRIDOR

Virginia Community Voice is surveying community residents to better understand the hopes and needs of the community and to strengthen people's capacity to join in the decisions impacting their neighborhood. Please take a few minutes to think about your neighborhood.

1. Which neighborhood do you live in?

- | | | | |
|----------------------------------|--------------------------------------|---|---|
| <input type="radio"/> Afton | <input type="radio"/> Broad Rock | <input type="radio"/> Davee Gardens | <input type="radio"/> Manchester |
| <input type="radio"/> Bellemeade | <input type="radio"/> Castlewood | <input type="radio"/> Hillside Court | <input type="radio"/> Oak Grove |
| <input type="radio"/> Blackwell | <input type="radio"/> Cherry Gardens | <input type="radio"/> Jefferson Trace | <input type="radio"/> Rudd Trailer Park |
| <input type="radio"/> Brookbury | <input type="radio"/> Cullenwood | <input type="radio"/> Lafayette Gardens | <input type="radio"/> Other: _____ |

2. What do you think are the 2 greatest strengths of your neighborhood? (Pick 2).

- | | |
|--|--|
| <input type="radio"/> Friendly people and neighbors. | <input type="radio"/> The diversity—racial, ethnic, immigrant, sexual—of the people. |
| <input type="radio"/> People's ability to overcome hardship. | <input type="radio"/> The history of the community. |
| <input type="radio"/> The way people stick together and help each other. | <input type="radio"/> Other: _____ |
| <input type="radio"/> The community's potential for change. | _____ |
| <input type="radio"/> How long people have lived in the neighborhood. | _____ |

3. What do you think are the 2 greatest challenges of your neighborhood? (Pick 2).

- | | |
|---|---|
| <input type="radio"/> Lack of food access. | <input type="radio"/> Need for affordable, quality childcare for 0–5 year olds. |
| <input type="radio"/> Need for neighborhood clean up. | <input type="radio"/> Not feeling safe in my neighborhood. |
| <input type="radio"/> Need for affordable housing (homeownership and rental housing). | <input type="radio"/> Lack of access to affordable health care. |
| <input type="radio"/> Need for Job training and Job opportunities. | <input type="radio"/> Other: _____ |
| <input type="radio"/> Need for after-school programs. | _____ |

4. How likely is it that people in your neighborhood would do something if the local public school was facing budget cuts?

- | | | | | |
|-----------------------------------|------------------------------|-------------------------------|--------------------------------|-------------------------------------|
| <input type="radio"/> Very Likely | <input type="radio"/> Likely | <input type="radio"/> Neither | <input type="radio"/> Unlikely | <input type="radio"/> Very Unlikely |
|-----------------------------------|------------------------------|-------------------------------|--------------------------------|-------------------------------------|

5. People in this neighborhood can be trusted.

- | | | | | |
|--------------------------------------|-----------------------------|-------------------------------|--------------------------------|---|
| <input type="radio"/> Strongly Agree | <input type="radio"/> Agree | <input type="radio"/> Neither | <input type="radio"/> Disagree | <input type="radio"/> Strongly Disagree |
|--------------------------------------|-----------------------------|-------------------------------|--------------------------------|---|

6. People in this neighborhood generally get along with each other.

- | | | | | |
|--------------------------------------|-----------------------------|-------------------------------|--------------------------------|---|
| <input type="radio"/> Strongly Agree | <input type="radio"/> Agree | <input type="radio"/> Neither | <input type="radio"/> Disagree | <input type="radio"/> Strongly Disagree |
|--------------------------------------|-----------------------------|-------------------------------|--------------------------------|---|

7. Roughly how many people on your block—both sides of the street—do you know by name?

- | | | | | |
|----------------------------|-----------------------------|----------------------------------|------------------------------------|-----------------------------------|
| <input type="radio"/> None | <input type="radio"/> A Few | <input type="radio"/> About Half | <input type="radio"/> Most of Them | <input type="radio"/> All of Them |
|----------------------------|-----------------------------|----------------------------------|------------------------------------|-----------------------------------|

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8. If you were to participate in a community-based project to address one of these problems, which 1 would you be most likely to support? (Pick 1)

- I'm not likely to get involved.
- Helping increase access to healthy, low-cost food.
- Helping clean up and beautify the neighborhood.
- Helping increase access to affordable housing.
- Setting up job training programs that match local jobs.
- Helping secure affordable childcare for children 0–5 years.
- Helping secure afterschool and summer programs for youth.
- Helping to increase access to affordable health care.
- Helping to make the neighborhood safe.
- Other: _____

9. Think about your neighborhood and the changes that you've seen over the last five years. Which best describes what you've seen?

- The changes are mostly positive for me and my neighbors.
- The changes have been mostly bad for me and my neighbors.
- The changes have been a mixed bag for me and my neighbors—some are good and some are bad.
- There have been no changes in my neighborhood in the last five years.

*We are partnering with the Richmond City Health Department to determine the needs in the community.
Please answer the following health questions for RCHD.*

10. Where do you usually go for routine medical care? (Choose 1).

- Doctor's office
- Richmond health department clinic
- Other clinic
- No regular place
- Urgent care/drop in care
- Emergency room
- Other (please specify):

11. What do the people in your household use (including adults and children) to help pay for health care? (Choose all that apply).

- Nothing, our household doesn't have health insurance.
- Medicare
- Medicaid
- Private Insurance (eg: Blue Cross and Blue Shield)
- Bon Secours Care Card
- VCC (Virginia Coordinated Care)
- Insurance through an employer
- Other (please specify):

- I don't know

12. What do you think keeps people in your community from getting health care? (Choose all that apply).

- Don't have insurance
- Costs too much
- No ride or transportation problems
- Bad experiences with doctors or hospitals in the past
- Afraid of what they might find out
- No child care
- Not sure what it will be like
- Really hard to get there during the hours they are open
- Other (please specify):

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13. How much of a problem are these health concerns for you, your family, or other people who live in the Corridor?

Cervical Cancer

Not at all A little A lot

Prostate cancer

Not at all A little A lot

Infant Death

Not at all A little A lot

Stress

Not at all A little A lot

Problems with Lungs/Breathing

Not at all A little A lot

Heart Problems

Not at all A little A lot

HIV/AIDS

Not at all A little A lot

Preterm Labor/Birth

Not at all A little A lot

Worrying a Lot (anxiety)

Not at all A little A lot

Infant/Child Health

Not at all A little A lot

Sexually transmitted infections

Not at all A little A lot

Sickle Cell

Not at all A little A lot

Diabetes (Sugar in Blood)

Not at all A little A lot

Lung Cancer

Not at all A little A lot

High Cholesterol

Not at all A little A lot

Arthritis

Not at all A little A lot

Depression

Not at all A little A lot

Smoking Cigarettes

Not at all A little A lot

High Blood Pressure

Not at all A little A lot

Breast Cancer

Not at all A little A lot

PERSONAL DETAILS

14. How long have you lived in the Cowardin-Jefferson Davis Corridor?

17. What is your age?

15. What is your gender?

Male Female Transgender

18. Do children (under 18 years) live in your home?

Yes No

16. What is your race?

- Asian
- Black
- Hispanic
- Multi-Racial
- White

19. Your education. (Choose highest completed).

- Less than High School
- High School Degree
- Some schooling or technical training after High School
- 4-year college degree or more

By completing this survey, I give my consent that my answers can be used by Thriving Cities and the Richmond City Health District to understand the hopes and needs of the community. I understand that I skip any question, including the health questions, that I don't want to answer and I do not have to turn in the survey if I do not want to share my answers. I understand all answers will be anonymous.