Marion County Health and Human Services Service Equity Assessment Individuals in Service Survey

Which language would you like to take this survey in?

- **D** English
- 🗅 Español

Introduction:

Marion County Health and Human Services (MCHHS) is conducting a survey about your experience receiving services from MCHHS. The purpose of this survey is to gather information that will help us understand strengths and challenges related to diversity, equity, and inclusion.

All of your responses to this survey are confidential and will be reported in group form only. Your responses will not impact your ability to receive services from MCHHS. You must be 18 or older and a resident of Marion County to complete this survey.

Below are some definitions that may be helpful as you answer these questions:

Diversity refers to embracing differences among people with respect to age, class, ethnicity, gender, health, physical and mental ability, race, sexual orientation, religion, physical size, education level, job level and function, personality traits, etc.

Equity is the condition in which everyone has a fair and just opportunity to lead a healthy, independent, and dignified life. This requires removing obstacles to health, independence, and dignity, such as poverty, racism, sexism, and discrimination, as well as their consequences.

Inclusion means that all individuals are respected, feel engaged and motivated, and that their contributions are valued.

Please complete this survey by 5pm on Tuesday, July 27.

You must live in Marion County to complete this survey. What is your zip code? (short response answer)

Are you 18 or older?

- **U** Yes
- 🛛 No

Please indicate how much you agree or	Strongly	Disagree	Agree	Strongly	I don't	Not
disagree with the following statements	disagree			agree	know	applicable

about Marion County Health and Human Services			
1. In my experience, MCHHS has a strong commitment to diversity, equity, and inclusion.			
2. Staff I interact with at MCHHS are diverse, reflecting different cultures and backgrounds.			
3. MCHHS staff I interact with understand the issues that might make it difficult for a person to get services such as housing, affordable food, transportation, etc.			
 When I talk to others similar to me (race, gender, age, physical abilities, etc.) they tell me they had a positive experience with MCHHS. 			

Please indicate how much you agree or disagree with the following statements about Marion County Health and Human Services	Strongly disagree	Disagree	Agree	Strongly agree	I don't know	Not applicable
5. MCHHS clearly communicates to me what services and resources are available.						
6. I feel comfortable receiving services from MCHHS staff and programs.						
7. I can easily read and understand written materials given to me by members of this agency.						
8. If I have a complaint about the quality of service or a particular MCHHS staff, I know who to talk to.						

Please indicate how much you agree or	Strongly	Disagree	Agree	Strongly	I don't	Not
disagree with the following statements	disagree			agree	know	applicable

about staff at Marion County Health and Human Services			
9. MCHHS staff I interact with care about me as an individual.			
10. When I interact with MCHHS staff, they respect my pronouns, name, and gender identity.			
11. MCHHS staff and programs are welcoming to people with physical, intellectual, and developmental disabilities, and mental health challenges.			

12. How could MCHHS do a better job of serving diverse individuals and communities? (short response answer)

Demographics:

Our last questions are about you. These responses will be used to compare the survey responses above to better understand the potential differing experiences of people from diverse backgrounds. **All of your responses to this survey are confidential and will be reported in group form only.**

- 13. What is the race or ethnicity that you primarily identify with?
 - □ African American/Black
 - 🗅 Asian
 - □ Caucasian/White
 - □ Latino/Hispanic
 - Middle Eastern
 - Native American/Alaska Native
 - Pacific Islander/Native Hawaiian
 - □ Biracial/Multiracial/Other (please specify): ____
 - Prefer not to answer

14. What is your gender identity?

- 🛛 Man
- 🛛 Woman
- □ Transgender Male/Trans Man/FTM
- □ Transgender Female/Trans Woman/MTF
- Gender Nonconforming
- □ Not listed above (please specify):
- □ Prefer not to answer
- 15. What is your sexual orientation?

- □ Heterosexual or straight
- 🖬 Gay
- Lesbian
- Bisexual/Pansexual
- **Q**ueer
- □ Not listed above (please specify):
- □ Prefer not to answer

16. What is your total household income?

- Less than \$25,000
- □ \$25,000 to \$34,999
- □ \$35,000 to \$49,999
- □ \$50,000 to \$74,999
- □ \$75,000 to \$99,999
- □ \$100,000 to \$149,999
- □ \$150,000 or more
- Prefer not to answer

17. How would you describe your citizenship status?

- U.S. citizen
- Legal resident
- □ In the process of becoming resident or U.S. citizen
- □ Lacking necessary documents or unknown status
- Refugee Status
- Common Compact Status
- □ Prefer not to answer
- 18. Do you consider yourself to have any sort of disability (e.g., having serious difficulty hearing, seeing, concentrating, or walking, intellectual disabilities, mental health challenges and/or other identified disabilities)?
 - **I** Yes
 - 🛛 No
 - □ Prefer not to answer
- 19. Thank you for completing this survey! If you would like to receive a \$20 Walmart gift card, please provide the following contact information. Your contact information will not be connected to your responses to the questions in this survey. All of your responses to this survey are confidential and will be reported in group form only.
 - Name
 - 🖵 Email
 - Address