

**This Southwestern Wisconsin Community Action Program (SWCAP) Survey is being conducted to gain a better understanding of the needs of the community members that SWCAP serves, in order to provide the best service possible. This survey is anonymous and will take between 5 and 10 minutes to complete.**

**Thank you for your time and participation. Your opinion is important and valued.**

**If you have any questions, please contact SWCAP at 1-800-704-8555.**

1. Please indicate your satisfaction with the following SWCAP services, if they have been used by anyone in your household?

	Very Unsatisfied	Somewhat Unsatisfied	Neutral	Somewhat Satisfied	Very Satisfied	I do not use this program	I am unaware of this program
Business Development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community Emergency Services (food and assistance for homeless, matching people to services, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dental Hygiene and Referral	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Foster Grandparent Program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Head Start and Early Head Start	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Housing Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
HUD Rental Assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
LIFT Transportation Service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Neighborhood Health Partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Representative Payee and Corporate Guardianship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Skills Enhancement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Target Hunger Venison Donation Program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We Care/Food Pantry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Weatherization	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
(WIC) Women, Infants, and Children Nutrition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work 'n Wheels	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. What is your level of satisfaction with the services you've received from SWCAP?

- Very unsatisfied
- Somewhat unsatisfied
- Neutral
- Somewhat satisfied
- Very satisfied
- Not applicable (I do not receive services from SWCAP)
- Other (please specify)

3. If SWCAP services have *not* been used by anyone in your household in the past three years, what are the reasons for not using the services? (*Check all that apply*)

- Have not heard of SWCAP.
- Do not know what services are available.
- Do not know where SWCAP is located.
- There is no SWCAP office close by.
- Do not know how to contact SWCAP.
- Do not have transportation to SWCAP office.
- Do not need assistance.
- Not applicable (I use SWCAP services.)

Other (please specify)

4. How present are these issues in your life?

	Not Present	Slightly Present	Very Present	Not Applicable
Fearing violence from your partner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling increased levels of stress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty finding a dentist that accepts Medical Assistance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty finding a doctor that accepts Medical Assistance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty getting quality medical care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Not Present	Slightly Present	Very Present	Not Applicable
Having a disability or health conditions that make it difficult to work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having a gambling addiction.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having depression and/or other mental health issues.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty affording dental care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty affording health care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty affording health insurance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty affording prescription drugs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having medical debt.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Abuse of alcohol and/or drug use by youth.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Getting physically, emotionally, and/or sexually abused.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing treatment for drugs or alcohol.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dealing with your teenagers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lacking affordable child care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing to learn parenting skills.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being in danger of eviction/foreclosure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty buying a house.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty affording heating bills.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty affording property taxes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty affording rent/house payments (mortgage payments).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Living in overcrowded housing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Not Present	Slightly Present	Very Present	Not Applicable
Needing accessible housing for people with disabilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing emergency shelter.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing home repairs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing insulation/weatherization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recovering from losing your home in foreclosure.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having debt due to a cash advance store.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having high credit car debt.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing help improving my credit score.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing job training.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing jobs for teens.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing jobs of any kind.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing to learn how to manage money.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing well-paying jobs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wanting after-school or before-school programs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing clothing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing food.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having difficulty accessing grocery stores and other food stores.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing transportation for elderly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing transportation for people with disabilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing transportation to get to work or school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. What county do you live in?

- Grant
- Green
- Iowa
- Lafayette
- Richland
- Other (please specify)

6. What is your housing situation?

- Homeless
- Living in an apartment.
- Living in a house.
- Living in a mobile home.
- Living in a shelter.
- Staying with others.
- Other (please specify)

7. Do you own your housing or do you rent?

- Own
- Rent
- Not applicable
- Other (please specify)

8. What is your household type?

- Single and living alone.
- Single parent with children at home.
- Living with a partner and no children.
- Living with a partner, and with children at home.
- Multi-generational family
- Other (please specify)

9. What are the ages of your household members (including yourself)?(Check all the apply)

- 0-4 years old
- 5-17 years old
- 18-24 years old
- 25-34 years old
- 35-44 years old
- 45-54 years old
- 55-64 years old
- 65-74 years old
- 75 years old or older

10. What are the genders of your household members(including yourself)?(Check all that apply)

- Male
- Female
- Other (please specify)

11. Do you or your household members have disabilities?

- Yes
- No
- Other (please specify)

12. What is your education level?

- Less than high school diploma or GED/HSED.
- High school diploma or GED/HSED.
- Some college/university or technical school.
- Four year college/university degree or technical degree.
- Other (please specify)

13. What is your employment status?

- Working full-time (30 or more hours per week).
- Working part-time (29 or less hours per week).
- Unemployed, but looking for work.
- Unemployed and not looking for work.
- Retired
- Other (please specify)

14. What is your annual household income?

- At or below \$9,999
- Between \$10,000 and \$14,999
- Between \$15,000 and \$19,999
- Between \$20,000 and \$24,999
- Between \$25,000 and \$29,999
- Above \$30,000

15. What are your sources of household income?(Check all that apply)

- Child support
- Food stamps
- Informal work/work for cash.
- Pension
- Self-employed
- Social Security
- Social Security Disability Insurance Benefits (SSDI).
- Supplemental Security Income (SSI).
- Temporary Assistance to Needy Families/Wisconsin Works (TANF/W2).
- Unemployment benefits
- Wages
- Other (please specify)

16. Which of the following describe your financials?(Check all that apply)

- Have a checking or savings account.
- Have borrowed money from a payday loan or cash advance service.
- Eligible for the Earned Income Tax Credit (EITC).
- Not eligible for the Earned Income Tax Credit (EITC).
- Unsure if eligible for Earned Income Tax Credit (EITC).
- Other (please specify)

17. If you have borrowed money from a payday loan or cash advance service, have you ever fallen behind on your payments?

- Yes
- No
- Not applicable (I have not borrowed money from a payday loan or cash advance service.)
- Other (please specify)

18. If you have medical insurance, what type do you have? *(Check all that apply)*

- BadgerCare
- Employer sponsored insurance
- Medicaid
- Medicare
- Private pay
- Insurance through the Affordable Care Act
- I do not have insurance

Other (please specify)

19. What is one thing that would have the greatest impact on you and your family becoming more economically self-sufficient?

20. Which best describes you? *(Please choose only one)*

- American Indian or Alaskan Native
- Asian / Pacific Islander
- Black or African American
- White / Caucasian
- Hispanic / Latino (of any race)
- Mixed Race/ Other (please specify)

21. What is your communication level in English?

- Fluent
- Struggle somewhat
- Struggle a lot
- Other (please specify)

22. Do you have any other comments, questions, or concerns?

\* 23. Where do you most often buy your food (Check all that apply)

- Convenience store / gas station
- Grocery Store (Walmart, Piggly Wiggly, Aldi, other)
- Discount Store (Family Dollar, Dollar General, etc)
- Discount Club (Costco, Sam's Club, etc.)
- Farmer's Market, roadside stand, or other local producer
- Eat at restaurants most often / go to drive-through
- Other (please specify)

\* 24. How do you usually get to the store to shop for food?

- My own car / truck
- Ride from friends or family
- ADRC bus
- Taxi
- Walk
- Bike
- Other (please specify)

\* 25. How long does it usually take to get to the store where you shop for food most often?

- 10 minutes or less
- Between 11-20 minutes
- Between 21-40 minutes
- More than 40 minutes

\* 26. Within the past 12 months, we worried whether our food would run out before we got money to get more.

- Often True
- Sometimes True
- Never True

\* 27. In the past 12 months, what would have made it easier for you to get your groceries? (Check all that apply)

- More money
- A dependable vehicle
- A full service food store that's closer to where I live
- A pantry that's open evenings and Saturdays
- Being allowed to use my local pantry more often
- Someone who can pick up and deliver food to me
- Not applicable
- Other (please specify)

28. Do you use any of these programs?

	Often	Sometimes	Never	I am unaware of this program
Women, Infants, and Children Program (WIC)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
FoodShare / Quest card (food stamps)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Food pantries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School meals (breakfast and lunch)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School backpack program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Summer Food Service Program (open to all children under 18)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Senior meal site and home-delivered meals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Senior Farmers Market Vouchers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community meal programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 29. Please rank the following populations in order of highest priority of those you believe that SWCAP should focus on when considering expansion of programs to increase food security (#1 HIGHEST priority and #7 LEAST priority)

<input type="text"/>	Seniors (age 60 and older)
<input type="text"/>	Families with children under the age of 18
<input type="text"/>	College students
<input type="text"/>	Veterans
<input type="text"/>	School-age children during summer and long school breaks
<input type="text"/>	Non-elderly adults
<input type="text"/>	Individuals affected by a natural disaster (flood, fire, tornado, etc)

\* 30. What do you think would be the most effective way to help people who are struggling with hunger?  
(Choose 3)

- Outreach and education about food assistance resources and services
- Have services available in the same location
- Expand the number of food pantries
- Encourage pantries to open more days and times
- Encourage pantries to let people get food more often
- Encourage pantries to offer healthier food
- Work with pantries to increase the number of volunteers
- Recruit volunteers to provide transportation to grocery stores, or deliver food to homes
- Outreach to Spanish-speaking communities to reduce concerns that using a food pantry will increase the risk of deportation
- Education to eliminate stigma associated with food insecurity
- Other (please specify)