

Community Health Survey for Chippewa, Dunn, and Eau Claire Counties

This survey is being conducted to better understand the Community Conditions that impact the health of Chippewa, Dunn, and Eau Claire counties. What we learn will be used to address and prevent potential issues.

Participation in this survey is voluntary. Your answers will be anonymous, confidential, and combined with those of all other survey respondents. The results will be shared with community members who are interested in improving the health of our communities. Estimated time to complete this survey is 5 minutes.

Please note that this survey is intended to be completed by adults who either live or work in Chippewa, Dunn, or Eau Claire county only. The deadline for submission is September 24, 2023.

Community Conditions	
Lack of access to childcare or unaffordable childcare	Low-quality early education (PreK - 12 th grade)
Lack of higher education opportunities	Lack of adult education opportunities
Health care is difficult to access (mental, physical, oral, etc.)	Limited emergency services nearby
Lack of affordable or high-quality health insurance	Lack of affordable treatments for health conditions
Community is not safe	Low-quality or lack of public transportation
Environment or water pollution	Not enough green space (trees, open spaces, parks)
Racism and discrimination	Lack of community connectedness
Lack of accessibility for people with disabilities	Poor mental health
Lack of safe or affordable housing	Lack of access to digital resources (Internet, smartphone/computer)
Healthy food is not affordable	Lack of jobs that can support a family/myself
Poor nutrition or unhealthy food	Lack of physical activity
Alcohol misuse	Substance misuse (opioids, meth, THC)
Vaping and tobacco use	Other (please specify): _____
Other (please specify): _____	Other (please specify): _____

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Choose up to 5 areas from the list on Page 1 that you think are the biggest problems in your community that we need to work on addressing. Think about what impacts the health of you personally, and what impacts those around you.

Community Problem 1: _____

Community Problem 2: _____

Community Problem 3: _____

Community Problem 4: _____

Community Problem 5: _____

Of the 5 areas that you listed as the biggest problems in your community, now please choose what you think is the top priority to be addressed and please comment on why.

Top Community Health Problem: _____

This is a problem for: Me/my family My community Both me and my community

Optional: Please also share your ideas about services and programs that would help prevent this problem or improve this problem, if you have any.

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Please take the last few moments to complete a few demographic questions. As a reminder, all of your responses are confidential and will not be linked back to you.

ZIP Code of where you live (if within one of the 3 counties): _____

County where you work (if one of the 3 counties): _____

Age (in years):

Number of people in household:

Number of children under 18 in household:

Primary language spoken at home:

Secondary language spoken at home:

Which best describes your Gender?:

- Man
- Non-Binary
- Woman
- Prefer to self-describe: _____

- Unsure
- Prefer not to say

Which best describes your Sexual Orientation?:

- Asexual
- Bisexual
- Lesbian or Gay
- Straight
- Prefer to self-describe: _____

- Unsure
- Prefer not to say

Which category best describes you? (choose all that apply):

- American Indian/Alaskan Native (ex. Ho-Chunk, Ojibwe, Sioux, etc.)
- Black/African American
- East Asian (ex. Chinese, Japanese, Korean, etc.)
- Hispanic origin/Latinx (ex. Colombian, Mexican, Puerto Rican, etc.)
- Middle Eastern/North African (ex. Egyptian, Iranian, Syrian, etc.)
- Native Hawaiian/Other Pacific Islander (ex. Filipino, Guamanian, Samoan, etc.)
- South Asian (ex. Asian Indian, Pakistani, Nepalese, etc.)
- Southeast Asian (ex. Cambodian, Hmong, Vietnamese, etc.)
- White/Caucasian
- A race/ethnicity/origin not listed (please specify): _____

Estimated Household Income (combined money all adult household members earn):

- | | |
|--|--|
| <input type="checkbox"/> Less than \$10,000 | <input type="checkbox"/> \$50,000 - \$74,999 |
| <input type="checkbox"/> \$10,000 - \$14,999 | <input type="checkbox"/> \$75,000 - \$99,999 |
| <input type="checkbox"/> \$15,000 - \$24,999 | <input type="checkbox"/> \$100,000 - \$149,999 |
| <input type="checkbox"/> \$25,000 - \$34,999 | <input type="checkbox"/> \$150,000 - \$199,999 |
| <input type="checkbox"/> \$35,000 - \$49,999 | <input type="checkbox"/> \$200,000 or more |

Highest Level of Education:

- | | |
|--|---|
| <input type="checkbox"/> Less than a high school diploma or equivalent | <input type="checkbox"/> Associate degree |
| <input type="checkbox"/> High school diploma or equivalent | <input type="checkbox"/> Bachelor's degree |
| <input type="checkbox"/> Some college, no degree | <input type="checkbox"/> Master's degree |
| <input type="checkbox"/> Trade degree/certificate | <input type="checkbox"/> Doctorate or Professional degree |

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Please use this space to share anything else you want us to know
about the health of your community:

Thank you for completing this survey!

Completed surveys may be put in an envelope marked "Attention to PH" and placed in the drop box outside Door 5 of the Chippewa County Courthouse, dropped off at Dunn County Public Health, dropped off at the Eau Claire City-County Health Department, or mailed to the *Eau Claire City-County Health Department at 720 2nd Ave., Eau Claire, WI 54703.*

This survey is conducted by the Chippewa, Dunn, and Eau Claire counties
Community Health Assessment Planning Partnership Committee

