



# Washita Valley Community Action Council

1000 West Minnesota Avenue  
Chickasha, OK 73018  
www.washitavalleycac.com

## Community Needs Assessment Survey

Washita Valley Community Action Council regularly conducts a survey to determine what the needs are in your community so we will know where to best focus our efforts and funding. Your help in completing this survey is sincerely appreciated.

Please list your City \_\_\_\_\_, County \_\_\_\_\_, and Zip Code \_\_\_\_\_

Check the response that best represents you.

### 1. What is your gender?

- Male  Female

### 3. What is your race?

- White or Caucasian  Black or African American  
 Asian  American Indian or Alaska Native  
 Native Hawaiian or Other Pacific Islander  
 Other \_\_\_\_\_

### 5. What best describes your household?

- Two Parent  Single Parent Female  
 Single Parent Male  Multifamily household  
 Single person  Two adults no children  
 Grandparent(s) raising grandchildren

### 7. What is the primary language spoken in the home?

- English  Spanish  Other \_\_\_\_\_

### 9. Anyone in your household receive disability benefits?

- Yes  No

If yes, please mark # of each below:

\_\_\_\_\_ # of Children \_\_\_\_\_ # of Adults

### 11. Mark the choice that best describes you:

- Client of Agency  
 Agency Board Member  
 Agency Volunteer  
 Representative of an educational institution  
(Public or private school, college, technical school)  
 Representative of a government entity  
(City, County, State, or Federal)  
 Representative of a private organization  
(Business, local civic group)  
 Representative of a faith-based organization  
(Church or other religious organization)  
 Representative of a community based organization  
(Nonprofit entities providing direct services)  
 General Public

### 2. What is your ethnicity?

- Hispanic  Non-Hispanic

### 4. What is your highest level of education completed?

- Less than 9<sup>th</sup> grade  9<sup>th</sup>-12<sup>th</sup> grade (no diploma)  
 High School Diploma/GED  Technical School/Votech  
 Some college (no degree)  Associate's degree  
 Bachelor's degree  Graduate/Professional

### 6. Number of persons in your household by age?

- \_\_\_\_\_ 0-3 \_\_\_\_\_ 4-5 \_\_\_\_\_ 6-12 \_\_\_\_\_ 13-17  
\_\_\_\_\_ 18-24 \_\_\_\_\_ 25-34 \_\_\_\_\_ 35-44 \_\_\_\_\_ 45-54  
\_\_\_\_\_ 55-59 \_\_\_\_\_ 60-64 \_\_\_\_\_ 65-74 \_\_\_\_\_ 75-84  
\_\_\_\_\_ 85 and older

### 8. Is anyone in your household a veteran?

- Yes  No

### 10. What was your total household income last year?

- Less than \$10,000  \$10,000 - \$19,999  
 \$20,000 - \$34,999  \$35,000 - \$49,999  
 Over \$49,999

### 12. What program/services would you like to see continued in your community? (Agency would provide unique list of programs/services offered by both agency and in the service community or leave as an open ended question) (Would use 1-5 rankings or leave open)

Example:

- \_\_\_\_\_ Service #1  
\_\_\_\_\_ Service #2  
\_\_\_\_\_ Service #3  
\_\_\_\_\_ Service #4  
\_\_\_\_\_ Service #5  
\_\_\_\_\_ Service #6  
\_\_\_\_\_ Service #7  
\_\_\_\_\_ Service #8  
\_\_\_\_\_ Service #9  
\_\_\_\_\_ Service #10

Other: \_\_\_\_\_

**13. How much does each item rate as a need in your community?** *Please check only one rating for each need listed*

<b>NUTRITION</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Availability/access to food (grocery store)				
Community Gardens				
Nutrition Education/ Healthy Eating				
Need food				

<b>EMPLOYMENT</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Job Training				
Help finding a job				
Higher Paying Jobs or Jobs with Benefits				

<b>HEALTH</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Health Insurance/ Affordable Health Care				
Health Education Services				
Mental Health Services				
Substance Abuse Counseling/Treatment				
RX (prescription assistance)				
Child Immunizations				
Teenage Pregnancy/ Family Planning				
Elder Care				
Vision				
Dental Insurance/ Affordable Dental				

<b>LINKAGES</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Prisoner Discharge Services				
Public Transportation				
Vehicle Repair Assistance				
Access to Services (WIC, SNAP, SSI, Sooner Care)				

<b>INCOME MANAGMENT</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Free Income Tax Preparation Assistance				
Gambling Counseling				
Budget/Credit/Debit Counseling				

<b>EDUCATION</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Early Childhood Education Programs				
GED Classes				
English as a Second-Language				
Computer Skills Training				
Literacy Classes				
Technical and Vocational Training				
Childcare				

<b>HOUSING</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Decent affordable houses to RENT				
Decent affordable houses to BUY				
Weatherization (Home Energy Improvement)				
Home Repair				
Home Buyer Education				
Handicap Accessibility Housing				
Senior Citizens Housing				
Rental Assistance				
Utility Assistance				

<b>COMMUNITY</b>	<b>No Need</b>	<b>Some Need</b>	<b>Great Need</b>	<b>Don't Know</b>
Safe Neighborhoods, sidewalks, parks				
Homeless Shelter				
Senior Activities				
Recreational Activities				
Youth Activities				
Crime Prevention				
Additional Health Care Facilities (Doctor's Offices, Clinics, Pharmacies)				
Legal Assistance				
Volunteer Opportunities				

**Please describe any other need that was not listed above:**

---



---

***Thank you for your participation!***