

# 2009 AARP TENNESSEE LIVABLE COMMUNITY SURVEY OF RESIDENTS IN THE GREATER KINGSPORT AREA

## The Greater Kingsport Area

**1. How long have you lived in the Greater Kingsport Area?**

\_\_\_\_\_ Total number of years

**2. Were you born in the Greater Kingsport Area?**

- <sub>1</sub> Yes
- <sub>2</sub> No

**3. Have you previously lived in the Greater Kingsport Area, moved away, and moved back?**

- <sub>1</sub> Yes
- <sub>2</sub> No

**4. Overall, how satisfied are you with the Greater Kingsport Area as a place to live?**

- <sub>5</sub> Extremely satisfied
- <sub>4</sub> Very satisfied
- <sub>3</sub> Somewhat satisfied
- <sub>2</sub> Not very satisfied
- <sub>1</sub> Not at all satisfied

## Your Interests and Concerns

**5. How important are the following areas to you?**

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
a. Making changes to your home to enable you to stay there as you get older.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Finding trustworthy and competent people to hire or help you maintain your residence.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Finding help to downsize your belongings or remove unwanted clutter.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Finding someone to help you with filling out insurance, medical, or other forms.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Having safe and affordable transportation alternatives if you are no longer able to drive.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
f. Getting people involved in efforts to improve your neighborhood.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

6. Below is a list of concerns that have been expressed by people age 50 and older. Please check the box  that most closely matches your level of concern about each item.

	Extremely concerned	Very concerned	Somewhat concerned	Not very concerned	Not at all concerned
	▼	▼	▼	▼	▼
a. Being able to remain independent as you get older ..	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Staying physically active .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Becoming ill or disabled .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Staying connected to family and friends.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Being able to stay in your current neighborhood or residence as you get older .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
f. Having long-term care services that would allow you or a family member to stay at home for as long as possible .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
g. Affording the cost of health care, including prescription drugs.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
h. Affording your housing and utility costs .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
i. Affording the costs of food and clothing .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
j. Continuing to drive safely.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
k. Safety and security in your home, neighborhood, and community.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

### Activities

7. How important is it to have the following features in the Greater Kingsport Area?

	Extremely important	Very important	Somewhat important	Not very important	Not at all important
	▼	▼	▼	▼	▼
a. Conveniently located and well run senior centers.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Conveniently located and well run parks .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Conveniently located and well run community and recreation centers.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Opportunities for exercising and staying or getting physically fit.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Meaningful volunteer opportunities .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

**8. Does the Greater Kingsport Area have the following features?**

	Yes ▼	No ▼	Not sure ▼
a. Conveniently located and well run senior centers .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Conveniently located and well run parks.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Conveniently located and well run community and recreation centers .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Opportunities for exercising and staying or getting physically fit .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Meaningful volunteer opportunities .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

**Transportation**

**9. How important is it to have the following features in the Greater Kingsport Area?**

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
a. Convenient public transportation .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Bus stops with benches and shelters .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Posted bus schedules and routes .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Special transportation services for persons with disabilities or other special needs.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

**10. Does the Greater Kingsport Area have the following features?**

	Yes ▼	No ▼	Not sure ▼
a. Convenient public transportation.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Bus stops with benches and shelters.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Posted bus schedules and routes .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Special transportation services for persons with disabilities or other special needs .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

**Community Design**

**11. How important is it to have the following features in the Greater Kingsport Area?**

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
a. A visually attractive community .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. An active and lively downtown.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

11. CON'T. How important is it to have the following features in the Greater Kingsport Area?

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
c. Attractive entrances or gateways to the city .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Preservation of local history and heritage.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Farmers' markets.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
f. Urban or community vegetable gardens .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
g. Public flower gardens.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
h. Public art, such as sculpture or murals .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
i. Public fountains or water features.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
j. Conveniently located libraries or library branches.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
k. Entertainment, such as theatres or concerts .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
l. Public buildings and facilities that are handicapped accessible .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
m. Convenient places for public events and meetings .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
n. Well designed and maintained streets .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
o. Adequate street lighting .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
p. Well maintained sidewalks .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
q. Walking or biking trails .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

12. Does the Greater Kingsport Area have the following features?

	Yes ▼	No ▼	Not sure ▼
a. A visually attractive community.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. An active and lively downtown .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Attractive entrances or gateways to the city.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Preservation of local history and heritage .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Farmers' markets .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
f. Urban or community vegetable gardens.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
g. Public flower gardens .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
h. Public art, such as sculpture or murals .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
i. Public fountains or water features .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

12. CON'T. Does the Greater Kingsport Area have the following features?

	Yes ▼	No ▼	Not sure ▼
j. Conveniently located libraries or library branches.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
k. Entertainment, such as theatres or concerts.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
l. Public buildings and facilities that are handicapped accessible .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
m. Convenient places for public events and meetings.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
n. Well designed and maintained streets.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
o. Adequate street lighting .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
p. Well maintained sidewalks .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
q. Walking or biking trails .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

**Community Housing**

13. How important is it to have the following features in the Greater Kingsport Area?

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
a. Safe neighborhoods.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. An adequate supply of affordable housing .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Independent living options for seniors, such as age restricted communities, senior apartments, or one-story houses.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. A variety of housing options for persons with disabilities or other special needs .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Assisted living options, including nursing homes .	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

14. Does the Greater Kingsport Area have the following features?

	Yes ▼	No ▼	Not sure ▼
a. Safe neighborhoods.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. An adequate supply of affordable housing .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Independent living options for seniors, such as age-restricted communities, senior apartments, or one-story houses .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. A variety of housing options for persons with disabilities or other special needs .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Assisted living options, including nursing homes .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

**Community Education and Employment**

**15. How important is it to have the following features in the Greater Kingsport Area?**

	Extremely important	Very important	Somewhat important	Not very important	Not at all important
	▼	▼	▼	▼	▼
a. Good job opportunities for all ages.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Job training or re-training opportunities .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Excellent schools for children (Kindergarten through high school) .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Higher learning institutions (colleges, universities, vocational or technical schools) ....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Opportunities for life-long learning (community classes, clubs, etc.).....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

**16. Does the Greater Kingsport Area have the following features?**

	Yes	No	Not sure
	▼	▼	▼
a. Good job opportunities for all ages .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Job training or re-training opportunities .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Excellent schools for children (Kindergarten through high school).....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Higher learning institutions (colleges, universities, vocational or technical schools).....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Opportunities for life-long learning (community classes, clubs, etc.) .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

**Community Environment**

**17. How important is it to have the following features in the Greater Kingsport Area?**

	Extremely important	Very important	Somewhat important	Not very important	Not at all important
	▼	▼	▼	▼	▼
a. Clean air .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Clean water.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Well managed landfills .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

17. **CON'T. How important is it to have the following features in the Greater Kingsport Area?**

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
d. Conservation of trees and a tree planting program .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Removal or upkeep of abandoned buildings or lots .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
f. Recycling programs (glass, paper, plastic, aluminum) .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
g. Construction requirements that preserve both the environment and natural resources and don't significantly change the lay of the land ....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

18. **Does the Greater Kingsport Area have the following features?**

	Yes ▼	No ▼	Not sure ▼
a. Clean air .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Clean water .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Well managed landfills .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Conservation of trees and a tree planting program.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Removal or upkeep of abandoned buildings or lots .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
f. Recycling programs (glass, paper, plastic, aluminum, etc.).....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
g. Construction requirements that preserve the environment and natural resources and don't significantly change the lay of the land.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

19. **Thinking about your future needs, how would you rate the Greater Kingsport Area as a place for older people to live?**

- <sub>5</sub> Excellent
- <sub>4</sub> Very good
- <sub>3</sub> Good
- <sub>2</sub> Fair
- <sub>1</sub> Poor

**Your Neighborhood**

20. **How long have you lived in your current neighborhood?**

\_\_\_\_\_ Total number of years

**21. Overall, how satisfied are you with your neighborhood as a place to live?**

- <sub>5</sub> Extremely satisfied
- <sub>4</sub> Very satisfied
- <sub>3</sub> Somewhat satisfied
- <sub>2</sub> Not very satisfied
- <sub>1</sub> Not at all satisfied

**22. How important is it to have the following features in your neighborhood?**

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
a. Well designed and maintained streets .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Adequate street lighting .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Conveniently located and well run parks .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Conveniently located and well run community or recreation centers .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Well maintained sidewalks going to where you want to go .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
f. Safety and security .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
g. Walking or biking trails within a half mile of your home.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
h. A grocery store within a half mile of your home .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
i. A drug store within a half mile of your home....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

**23. Does your neighborhood have the following features?**

	Yes ▼	No ▼	Not sure ▼
a. Well designed and maintained streets.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Adequate street lighting .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Conveniently located and well run parks.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Conveniently located and well run community or recreation centers .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Well maintained sidewalks going to where you want to go .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
f. Safety and security .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
g. Walking or biking trails within a half mile of your home .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

23. CON'T. Does your neighborhood have the following features?

	Yes ▼	No ▼	Not sure ▼
h. A grocery store within a half mile of your home .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
i. A drug store within a half mile of your home .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

**Services**

24. How important is it to have the following services available in your neighborhood?

	Extremely important ▼	Very important ▼	Somewhat important ▼	Not very important ▼	Not at all important ▼
a. Affordable housekeeping services (cleaning or light maintenance).....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
b. Grocery delivery to your home .....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
c. Prescription drug delivery to your home.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
d. Group meals, such as senior lunch programs.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
e. Meals-on-Wheels or home delivered meals.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
f. Outdoor maintenance services, such as lawn work or snow removal.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
g. A service that helps low-income or older persons with home repairs or renovations, such as a roof, windows, or a ramp, etc.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
h. Home health aides, personal care attendants, or other assistants who help with personal needs...	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
i. Visiting nurse services, such as an RN, who comes to your home. ....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
j. Daily calls for companionship or assurance, such as Contact Concern. ....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
k. A 911 call button in your home.....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
l. Adult day care centers. ....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
m. Home health monitoring services (monitoring blood pressure, weight, etc. and transmitting data that is reviewed by health professionals or emergency response systems that alerts others of a medical emergency). ....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>
n. Respite care (getting a break from caregiving duties).....	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>

24. **CON'T. How important is it to have the following services available in your neighborhood?**

Extremely important    Very important    Somewhat important    Not very important    Not at all important  
 ▼                                    ▼                                    ▼                                    ▼                                    ▼

- o. End of life or hospice care (medication or services provided to relieve symptoms of terminal illness and assist families)..... <sub>5</sub>    <sub>4</sub>    <sub>3</sub>    <sub>2</sub>    <sub>1</sub>

25. **Does your neighborhood have the following services available?**

Yes    No    Not sure  
 ▼    ▼    ▼

- a. Affordable housekeeping services (cleaning or light maintenance)..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- b. Grocery delivery to your home..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- c. Prescription drug delivery to your home ..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- d. Group meals, such as senior lunch programs ..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- e. Meals-on-Wheels or home delivered meals ..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- f. Outdoor maintenance services, such as lawn work or snow removal .. <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- g. A service that helps low-income or older persons with home repairs or renovations, such as a roof, windows, or a ramp, etc..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- h. Home health aides, personal care attendants, or other assistants who help with personal needs..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- i. Visiting nurse services, such as an RN, who comes to your home ..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- j. Daily calls for companionship or assurance, such as Contact Concern..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- k. Adult day care centers ..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- l. Home health monitoring services (monitoring blood pressure, weight, etc. and transmitting data that is reviewed by health professionals or emergency response systems that alerts others of a medical emergency)..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- m. A 911 call button in your home ..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- n. Respite care (getting a break from caregiving duties)..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>
- o. End of life or hospice care (medication or services provided to relieve symptoms of terminal illness and assist families) ..... <sub>1</sub>    <sub>2</sub>    <sub>0</sub>

**26. If you needed to access any of the services referenced in Question 25, would you turn to any of the following sources to get more information about them?**

	Yes ▼	No ▼	Not sure ▼
a. Family members or friends.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Your doctor or other health professional.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Area Agency on Aging and Disability .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Department of Human Services.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Senior Center .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
f. United Way.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
g. Chamber of Commerce.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
h. The Internet.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
i. Phone book .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
j. Contact Concern .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
k. Local newspaper .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
l. Religious organization (church, synagogue, etc.) .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
m. Other, please specify:_____			

**27. Thinking about your future needs, how would you rate your neighborhood as a place for older people to live?**

- <sub>5</sub> Excellent
- <sub>4</sub> Very good
- <sub>3</sub> Good
- <sub>2</sub> Fair
- <sub>1</sub> Poor

**28. How important is it for you to remain in your neighborhood or community for as long as possible?**

- <sub>5</sub> Extremely important
- <sub>4</sub> Very important
- <sub>3</sub> Somewhat important
- <sub>2</sub> Not very important
- <sub>1</sub> Not at all important
- <sub>0</sub> Not sure

**Driving**

**29. How do you usually get around for things like shopping, visiting the doctor, running errands, or other things?**

	Yes ▼	No ▼	Not sure ▼
a. Drive yourself .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Get a ride with family or friends.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Walk.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Ride a bike .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Take a taxi.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
f. Use public transportation .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
g. Use a special transportation service, like one for seniors or persons with disabilities .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>

**Your Residence**

**30. Do you live in the city limits of Kingsport, Tennessee?**

- <sub>1</sub> Yes
- <sub>2</sub> No
- <sub>0</sub> Not sure

**31. Do you own or rent your primary residence?**

- <sub>1</sub> Own
- <sub>2</sub> Rent

**32. What type of home is your primary residence?**

- <sub>1</sub> Single family home
- <sub>2</sub> Mobile home
- <sub>3</sub> Town home or duplex
- <sub>4</sub> Apartment
- <sub>5</sub> Condominium or co-op
- <sub>0</sub> Other, please specify: \_\_\_\_\_

**33. Including yourself, how many people live in your household?**

- <sub>1</sub> 1
- <sub>2</sub> 2
- <sub>3</sub> 3
- <sub>4</sub> 4
- <sub>5</sub> 5
- <sub>6</sub> 6 or more

34. Does your home need any of the following types of modifications to enable you to stay there as you age?

	Yes ▼	No ▼	Not sure ▼
a. Adding a bathroom for single-level living.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
b. Remodeling a bathroom (shower, toilet, grab bars, etc.)...	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
c. Adding a bedroom for single-level living.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
d. Remodeling a kitchen .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
e. Relocating washer and dryer.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
f. Adding a ramp for access from outdoors.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
g. Adding a railing to stairs.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
h. Adding a security system.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>0</sub>
i. Other, please specify:_____			

35. Can you safely walk from your home to the following places?

	Yes ▼	No ▼
a. Your place of work, if employed.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. A grocery store.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. A pharmacy.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Your doctor's office.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. To a park or recreation area .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. To public transportation.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. A bank or financial services center.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**Internet Usage**

36. In the last 12 months, have you accessed the Internet or sent or received email?

- <sub>1</sub> Yes
- <sub>2</sub> No → **SKIP TO QUESTION D1, Page 15**

37. Do you access the Internet or send and receive email at any of the following places?

	Yes ▼	No ▼
a. At home.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. At work, if applicable .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. At a library .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. At a senior center .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. At a family or friend's home.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Other, please specify:_____		

**38. Do you do any of the following activities when you use the Internet?**

	Yes ▼	No ▼
a. Send and receive email .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Use an online search engine to help you find information .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Perform online banking or other financial services.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Seek information on community events, news, or schedules ....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Buy or make a reservation online for a travel service, such as an airline ticket, hotel room, or rental car.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Buy a product online, such as books, music, toys, clothing .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. Use a social networking site like MySpace or Facebook .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
h. Use Twitter or another service to share updates about yourself or to see updates about others.....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
i. Participate in an online discussion, a listserv, or other online group forum .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
j. Other, please specify:_____		

**39. Do you think the amount of money you pay each month to use the Internet is ....?**

- <sub>1</sub> Too much
- <sub>2</sub> About right
- <sub>3</sub> Too little
- <sub>0</sub> Do not pay for Internet service

**40. How likely are you to use the services of a “technology tutor” – someone who would help you understand your computer, help with email, and guide you to using your computer and other equipment properly?**

- <sub>5</sub> Extremely likely
- <sub>4</sub> Very likely
- <sub>3</sub> Somewhat likely
- <sub>2</sub> Not very likely
- <sub>1</sub> Not at all likely
- <sub>0</sub> Do not have computer at home

**About You**

The following questions are for classification purposes only and will be kept entirely confidential.

**D1. Are you male or female?**

- <sub>1</sub> Male  
<sub>2</sub> Female

**D2. What is your age as of your last birthday? \_\_\_\_\_ (in years)**

**D3. What county do you live in? \_\_\_\_\_ (Write in county)**

**D4. What neighborhood do you live in? \_\_\_\_\_ (Write in neighborhood)**

**D5. What is your ZIP Code? \_\_\_\_\_ (Write in ZIP Code)**

**D6. How would you rate your overall health today?**

- <sub>5</sub> Excellent  
<sub>4</sub> Very good  
<sub>3</sub> Good  
<sub>2</sub> Fair  
<sub>1</sub> Poor

**D7. Does any disability, handicap, or chronic disease keep you from participating fully in work, school, housework, or other activities?**

- <sub>1</sub> Yes  
<sub>2</sub> No

**D8. What is your current marital status?**

- <sub>1</sub> Married  
<sub>2</sub> Not married, living with partner  
<sub>3</sub> Separated  
<sub>4</sub> Divorced  
<sub>5</sub> Widowed  
<sub>6</sub> Never married

**D9. What is the highest level of education that you completed?**

- <sub>1</sub> 0-12<sup>th</sup> grade (no diploma)  
<sub>2</sub> High school graduate (or equivalent)  
<sub>3</sub> Post-high school education (no degree)  
<sub>4</sub> 2-year college degree  
<sub>5</sub> 4-year college degree  
<sub>6</sub> Post-graduate study (no degree)  
<sub>7</sub> Graduate or professional degree

**D10. Which of the following best describes your current employment status?**

- <sub>1</sub> Self-employed, part-time
- <sub>2</sub> Self-employed, full-time
- <sub>3</sub> Employed, part-time
- <sub>4</sub> Employed, full-time
- <sub>5</sub> Retired, not working at all
- <sub>6</sub> Not in labor force for other reasons
- <sub>7</sub> Unemployed, but looking for work

**D11. Are you of Hispanic, Spanish, or Latino origin or descent?**

- <sub>1</sub> Yes
- <sub>2</sub> No

**D12. What is your race?**

- <sub>1</sub> White or Caucasian
- <sub>2</sub> Black or African American
- <sub>3</sub> American Indian or Alaska Native
- <sub>4</sub> Asian
- <sub>5</sub> Native Hawaiian or other Pacific Islander
- <sub>6</sub> Other

**D13. What was your annual household income before taxes in 2008?**

- <sub>1</sub> Less than \$10,000
- <sub>2</sub> \$10,000 to \$19,999
- <sub>3</sub> \$20,000 to \$34,999
- <sub>4</sub> \$35,000 to \$49,999
- <sub>5</sub> \$50,000 to \$59,999
- <sub>6</sub> \$60,000 to \$74,999
- <sub>7</sub> \$75,000 to \$99,999
- <sub>8</sub> \$100,000 or more
- <sub>0</sub> Not sure

**Thank you for completing this survey.  
Please return the survey by November 25, 2009  
in the enclosed, postage-paid envelope to:  
AARP State Research  
601 E Street NW  
Washington, DC 20049**