

Section 5:
Survey Instrument



CITY OF COLUMBIA, MISSOURI

OFFICE OF MAYOR AND COUNCIL

November 16, 2015

Dear Columbia Citizen:

On behalf of the City Council, thank you for your ongoing involvement in this community. We hope you will help us by taking a few minutes to respond to the enclosed survey. Our last citizen survey was in 2014.

Your answers are important, and we value your opinion. To make sure that the City's priorities are in step with the needs of Columbia's residents, we need to know what you think. Your responses will remain confidential.

ETC Institute is helping us with this survey and will submit a public report to the City in a few weeks. The report will not identify anyone who responds to the survey.

Please return your completed survey in the next 10 days in the enclosed, postage-paid envelope. If you prefer, you may complete the survey online at www.Columbia2015Survey.org.

Feel free to contact Toni Messina at 573-874-7660 or at trmessin@gocolumbiamo.com if you have questions. Thanks, again, for helping with this important work.

Sincerely,

Bob McDavid
Mayor



1. Major categories of services provided by the City of Columbia are listed below. Please rate each item on a scale of 1 to 5, where 5 means “Very Satisfied” and 1 means “Very Dissatisfied”:

<i>How satisfied are you with:</i>		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
1.	Public safety services provided by the City (e.g., police and fire services)	5	4	3	2	1	9
2.	Parks and recreation programs and facilities provided by the City	5	4	3	2	1	9
3.	Condition of City streets	5	4	3	2	1	9
4.	Enforcement of City codes and ordinances	5	4	3	2	1	9
5.	Quality of customer service you receive from City employees	5	4	3	2	1	9
6.	Effectiveness of City communication with the public	5	4	3	2	1	9
7.	Quality of City permitting services for buildings	5	4	3	2	1	9
8.	The City's runoff/stormwater management system	5	4	3	2	1	9
9.	Public health services provided by the City	5	4	3	2	1	9
10.	Solid waste services (trash, recycling, etc.)	5	4	3	2	1	9
11.	City water, electric, and sewer services	5	4	3	2	1	9
12.	Public transit services (bus)	5	4	3	2	1	9

2. Which FOUR of the major City services listed above do you think are the most important services for the City to provide? [Write in the numbers below using the numbers from the list in Question 1.]

1st.: _____ 2nd.: _____ 3rd.: _____ 4th.: _____

3. PERCEPTIONS OF THE CITY. Several items that may influence your perception of the City of Columbia are listed below. Please rate each item on a scale of 1 to 5, where 5 means “Very Satisfied” and 1 means “Very Dissatisfied”:

<i>How satisfied are you with:</i>		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
1.	Overall quality of services provided by the City of Columbia	5	4	3	2	1	9
2.	Overall value that you receive for your City tax dollars and fees	5	4	3	2	1	9
3.	Overall quality of life in the city	5	4	3	2	1	9
4.	Overall feeling of safety in the city	5	4	3	2	1	9
5.	Local economic conditions	5	4	3	2	1	9
6.	City efforts to meet its financial needs & maintain a balanced budget	5	4	3	2	1	9

4. PERCEPTIONS OF SAFETY. Using a scale of 1 to 5, where 5 means “Very Safe” and 1 means “Very Unsafe,” please rate your feeling of safety in the following situations in the city:

<i>How safe do you feel:</i>		Very Safe	Safe	Neutral	Unsafe	Very Unsafe	Don't Know
1.	Walking in your neighborhood during the day	5	4	3	2	1	9
2.	Walking in your neighborhood at night	5	4	3	2	1	9
3.	In downtown Columbia during the day	5	4	3	2	1	9
4.	In downtown Columbia at night	5	4	3	2	1	9
5.	In City parks	5	4	3	2	1	9

5. **PUBLIC SAFETY CONCERNS.** Using a scale of 1 to 5, where 5 means “Very Likely” and 1 means “Very Unlikely,” please indicate how likely you think it is that the following will happen to you in the City of Columbia:

<i>How likely do you think these will happen to you in the City of Columbia:</i>		Very Likely	Likely	Neutral	Unlikely	Very Unlikely	Don't Know
1.	You will hear gun shots	5	4	3	2	1	9
2.	You will be a victim of property crime	5	4	3	2	1	9
3.	You will be a victim of violent crime	5	4	3	2	1	9
4.	You will be a victim of a fire	5	4	3	2	1	9

6. **PUBLIC SAFETY SERVICES.** For each of the following, please rate your satisfaction on a scale of 1 to 5, where 5 means “Very Satisfied” and 1 means “Very Dissatisfied”:

<i>How Satisfied are you with:</i>		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
1.	Police efforts to prevent crime	5	4	3	2	1	9
2.	How quickly police respond to emergencies	5	4	3	2	1	9
3.	Overall quality of local police services	5	4	3	2	1	9
4.	How quickly Fire personnel respond to emergencies	5	4	3	2	1	9
5.	Overall quality of City fire protection	5	4	3	2	1	9
6.	The City's municipal court	5	4	3	2	1	9

7. Which THREE of the public safety services listed above do you think are the most important services for the City to provide? [Write in the numbers below using the numbers from the list in Question 6.]

1st.:____ 2nd.:____ 3rd.:____

8. **PERCEPTIONS OF PARKS AND RECREATION.** For each of the following, please rate your satisfaction on a scale of 1 to 5, where 5 means “Very Satisfied” and 1 means “Very Dissatisfied”:

<i>How Satisfied are you with:</i>		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
1.	Quality of City parks	5	4	3	2	1	9
2.	Quality of walking/biking trails in the city	5	4	3	2	1	9
3.	Quality of outdoor athletic fields	5	4	3	2	1	9
4.	Quality of recreation programs and classes	5	4	3	2	1	9
5.	Availability of information about City parks and recreation programs	5	4	3	2	1	9
6.	City pools and aquatic facilities	5	4	3	2	1	9

9. Which TWO of the parks and recreation services listed above do you think are the most important services for the City to provide? [Write in the numbers below using the numbers from the list in Question 8.]

1st.:____ 2nd.:____

10. **STREETS AND SIDEWALKS.** For each of the following, please rate your satisfaction on a scale of 1 to 5, where 5 means “Very Satisfied” and 1 means “Very Dissatisfied”:

<i>How Satisfied are you with:</i>		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
1.	City maintenance and repair services for major City streets	5	4	3	2	1	9
2.	City maintenance and repair services for streets in YOUR neighborhood	5	4	3	2	1	9
3.	Snow removal on major City streets	5	4	3	2	1	9
4.	Snow removal on neighborhood streets	5	4	3	2	1	9
5.	City street cleaning services	5	4	3	2	1	9
6.	Condition of City sidewalks	5	4	3	2	1	9
7.	Availability of sidewalks in the city	5	4	3	2	1	9
8.	Condition of pavement markings	5	4	3	2	1	9

11. Which **THREE** of the street and sidewalk services listed on the previous page do you think are the most important services for the City to provide? [Write in the numbers below using the numbers from the list in Question 10]

1st.:____ 2nd.:____ 3rd.:____

12. **CODE ENFORCEMENT AND NEIGHBORHOOD SERVICES.** For each of the following, please rate your satisfaction on a scale of 1 to 5, where 5 means “Very Satisfied” and 1 means “Very Dissatisfied”:

How Satisfied are you with City efforts to enforce the following:		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
1.	Maintenance of residential property	5	4	3	2	1	9
2.	Enforcement of residential building codes	5	4	3	2	1	9
3.	Maintenance of business property	5	4	3	2	1	9
4.	Enforcement of business building codes	5	4	3	2	1	9
5.	Parking on neighborhood streets	5	4	3	2	1	9
6.	Clean-up of trash and litter	5	4	3	2	1	9

13. Which **THREE** of the code enforcement items listed above do you think are the most important services for the City to provide? [Write in the numbers below using the numbers from the list in Question 12.]

1st.:____ 2nd.:____ 3rd.:____

14. **CITY GOVERNMENT.** Using a scale of 1 to 5, where 5 means “Strongly Agree” and 1 means “Strongly Disagree,” please rate your level of agreement with the following statements about Columbia’s City government:

How strongly do you agree or disagree with the following statements:		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
1.	Columbia City government is democratic and representative	5	4	3	2	1	9
2.	Columbia City government is transparent	5	4	3	2	1	9
3.	Columbia City government is efficient	5	4	3	2	1	9
4.	Columbia City government is innovative	5	4	3	2	1	9
5.	Columbia City government values diversity	5	4	3	2	1	9
6.	Columbia City employees are ethical and honest	5	4	3	2	1	9
7.	Columbia government leaders listen to what citizens have to say	5	4	3	2	1	9

15. **PERSONAL WELL-BEING.** Using a scale of 1 to 5, where 5 means “Strongly Agree” and 1 means “Strongly Disagree,” please rate your level of agreement with the following statements:

How strongly do you agree or disagree with the following statements:		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
1.	Columbia is a great place to live, work, learn and play	5	4	3	2	1	9
2.	Columbia is a place where I can thrive	5	4	3	2	1	9
3.	I earn a living wage that allows me to meet basic needs for housing, food and utilities without assistance from others	5	4	3	2	1	9
4.	I take advantage of Water & Light energy efficiency programs to manage my home energy use	5	4	3	2	1	9
5.	Columbia has jobs for which I am qualified	5	4	3	2	1	9
6.	Columbia has job opportunities that would allow me to advance myself in my field	5	4	3	2	1	9
7.	Columbia offers opportunities to help people who want to start their own businesses	5	4	3	2	1	9
8.	There are opportunities for women to go into business for themselves and be successful	5	4	3	2	1	9
9.	There are opportunities for minorities to go into business for themselves and be successful	5	4	3	2	1	9

YOUR HEALTH CARE ACCESS

16. **When you are sick or need advice about your health, where do you usually go?**

- ___(1) A doctor’s office
- ___(2) An urgent care center
- ___(3) A hospital emergency room
- ___(4) No usual place
- ___(5) Other: _____

17. **Was there a time in the past 12 months when you needed medical care, but could not get it?**

- ___(1) Yes [answer Q17-2]
- ___(2) No

17-2. What was the main reason you could not get medical care?

- ___(1) Cost or no insurance
- ___(2) Office wasn’t open when I could get there
- ___(3) Too long a wait in the waiting room
- ___(4) No transportation
- ___(5) Distance from medical provider
- ___(6) Too long a wait for an appointment
- ___(7) No childcare
- ___(8) Medical provider did not speak my language

18. **Was there any time in the past 12 months when you were not able to meet your basic needs, such as paying for food, housing or utilities?**

- ___(1) Yes
- ___(2) No

19. **During the past month, on average, how many times did you engage in physical activities or exercise each week?**

- ___(1) 0 times
- ___(2) 1 – 2 times
- ___(3) 3 or more times

20. **During the past month, how many times per day (on average) did you eat fruit and or vegetables?**

- ___(1) Four or more times/day
- ___(2) Less than five or more times/day
- ___(3) Never
- ___(9) Don’t know

21. **NEIGHBORHOOD PROBLEMS. Please indicate the extent to which you think each of the following is a problem in your neighborhood by circling the corresponding number below:**

<i>Neighborhood Problems</i>		Level of the Problem				
		Not A Problem	Minor Problem	Moderate Problem	Major Problem	Don't Know
1.	Crime, drugs, or violence	1	2	3	4	9
2.	Unemployment	1	2	3	4	9
3.	Homelessness	1	2	3	4	9
4.	Public schools not providing quality education	1	2	3	4	9
5.	Lack of cultural activities	1	2	3	4	9
6.	Lack of recreational activities	1	2	3	4	9
7.	Lack of affordable, quality child care	1	2	3	4	9
8.	Abandoned or run-down buildings	1	2	3	4	9
9.	Unsupervised children or teenagers	1	2	3	4	9
10.	Speeding on neighborhood streets	1	2	3	4	9
11.	Lack of affordable housing	1	2	3	4	9
12.	Tension between racial/ethnic groups	1	2	3	4	9
13.	Lack of good places to shop for food or other items	1	2	3	4	9
14.	Roaming/loose animals	1	2	3	4	9
15.	Flooding	1	2	3	4	9
16.	Overgrown lots	1	2	3	4	9
17.	Graffiti	1	2	3	4	9
18.	Abandoned cars or vehicles	1	2	3	4	9

22. **Which ONE of the following best describes your relationship with your neighbors?**

- ___(1) I have a close relationship with many of my neighbors
- ___(2) I have a close relationship with a few my neighbors
- ___(3) I know several of my neighbors but I am not very close with any of them
- ___(4) I know a few people in my neighborhood but I am not very close with any of them
- ___(5) I don’t know anyone in my neighborhood

23. Which ONE of the following best describes how people in your neighborhood interact with one another?

- (1) They often help one another and have many social activities together
- (2) They often help one another but do have many social activities together
- (3) They occasionally help one another but generally keep to themselves
- (4) They almost always keep to themselves
- (9) Don't know

24. **NEIGHBORHOODS.** For each of the following, please rate your satisfaction with each item on a scale of 1 to 5, where 5 means "Very Satisfied" and 1 means "Very Dissatisfied":

How satisfied are you with the following items in your neighborhood:		Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
1.	Condition of housing	5	4	3	2	1	9
2.	Condition of streets	5	4	3	2	1	9
3.	Availability of sidewalks	5	4	3	2	1	9
4.	Neighborhood parks	5	4	3	2	1	9
5.	Overall appearance of your neighborhood	5	4	3	2	1	9
6.	Overall quality of City services in your neighborhood	5	4	3	2	1	9

25. **CUSTOMER SERVICE.** Have you called or visited the City with a question, problem, or complaint during the past year? (1) Yes (2) No [Skip to Q26]

25-2. [If "YES" to Q25] For which service did you contact the City most recently?

- (01) Police
- (02) Fire
- (03) Water
- (04) Sewer
- (05) Stormwater
- (06) Parks & recreation
- (07) Code enforcement
- (08) Public health
- (09) Streets
- (10) Sidewalks
- (11) Electric service
- (12) Public transportation
- (13) Planning and Zoning
- (14) Solid waste (trash, recycling, yard waste)
- (15) Monthly utility billing
- (16) Other: _____

25-3. [If "YES" to Q25] Why did you contact the City about this service?

- (1) Request service
- (2) Get information
- (3) Report a problem
- (4) Discuss a billing problem
- (5) Request emergency assistance
- (6) Request non-emergency assistance
- (7) Comply with City requirements
- (8) Other: _____

25-4. [If "YES" to Q25] Please indicate your level of agreement with the following statements about the quality of service you received from City employees the last time you contacted the City, as indicated in Question 25-2, by circling the corresponding number below:

Behavior of Employees		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
1.	The hours City employees were available met my needs	5	4	3	2	1	9
2.	It was easy to reach the right person at the City	5	4	3	2	1	9
3.	City employees who helped me were courteous and polite	5	4	3	2	1	9
4.	City employees did what they said they would do in a timely manner	5	4	3	2	1	9
5.	City employees gave prompt, accurate and complete answers to your questions	5	4	3	2	1	9
6.	City employees were knowledgeable	5	4	3	2	1	9
7.	Overall, I was satisfied with the quality of customer service provided by the City	5	4	3	2	1	9

26. Overall, how do you rate the service provided by the City's Utility Billing Office?

- (1) Excellent
- (2) Good
- (3) Average
- (4) Poor
- (5) Very Poor
- (9) Don't Know

27. How would you like to receive information about City issues, services and events?

[Check all that apply.]

- | | |
|--|---|
| <input type="checkbox"/> (01) The City newsletter that comes with utility bill | <input type="checkbox"/> (08) Neighborhood or homeowners associations |
| <input type="checkbox"/> (02) Local newspaper | <input type="checkbox"/> (09) Facebook |
| <input type="checkbox"/> (03) Television news | <input type="checkbox"/> (10) Twitter |
| <input type="checkbox"/> (04) City cable channel | <input type="checkbox"/> (11) YouTube |
| <input type="checkbox"/> (05) City website | <input type="checkbox"/> (12) Pinterest |
| <input type="checkbox"/> (06) Radio | <input type="checkbox"/> (13) Google+ |
| <input type="checkbox"/> (07) Friends/neighbors | <input type="checkbox"/> (14) Other: _____ |

28. Using a scale of 1 to 5, where 5 means “Strongly Agree” and 1 means “Strongly Disagree,” please rate your level of agreement with the following statements:

How strongly do you agree or disagree with the following statements:		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
1.	City government is a trusted source of information about programs and services	5	4	3	2	1	9
2.	It is easy to get the information I need from City government	5	4	3	2	1	9
3.	Information is communicated clearly, accurately and in a form that meets my needs	5	4	3	2	1	9
4.	The City's cable television channel provides information that is useful to me	5	4	3	2	1	9
5.	The City's website provides information that is useful to me	5	4	3	2	1	9
6.	The City newsletter provides information that is useful to me	5	4	3	2	1	9
7.	The City's use of social media provides information that is useful to me	5	4	3	2	1	9
8.	There are enough mobile apps to provide the City information I need or conduct business with the City	5	4	3	2	1	9

29. UTILITIES. Please indicate if your household uses the following services provided by the City of Columbia. If you answer “YES,” please rate your overall satisfaction with that service on a scale of 1 to 5, where 5 means “Very Satisfied” and 1 means “Very Dissatisfied”:

Do you use this service?			Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know
YES	NO	(1) Residential trash collection service	5	4	3	2	1	9
YES	NO	(2) Curbside recycling (blue bags)	5	4	3	2	1	9
YES	NO	(3) Drop-off recycling	5	4	3	2	1	9
YES	NO	(4) City electric service	5	4	3	2	1	9
YES	NO	(5) City water service	5	4	3	2	1	9
YES	NO	(6) City sewer service	5	4	3	2	1	9

30. Please indicate if you have done any of the following during the past year in the City of Columbia by circling YES or NO:

1.	Used police services?	YES	NO
2.	Were a victim of any crime?	YES	NO
3.	Used fire or emergency medical services?	YES	NO
4.	Visited a community recreation center?	YES	NO
5.	Visited a city park?	YES	NO
6.	Used public transportation/bus?	YES	NO
7.	Attended or watched any City meetings?	YES	NO
8.	Have you used the Columbia Airport?	YES	NO
9.	Used public health services provided by the City?	YES	NO
10.	Applied for a building permit from the City?	YES	NO

31. Approximately how many years have you lived at your current address? _____ years

32. Are you a student in a college or university? ___(1) Yes ___(2) No

33. Do you own or rent your current residence? ___(1) Own ___(2) Rent

34. What is your age? _____ years

35. How many people live in your household? _____ people

36. How many people in your household are employed? _____ people

37. Which of the following best describes your employment status?

- ___(1) Employed full time [answer Q37-2 and Q37-3] ___(4) Not employed, NOT looking for work
___(2) Employed part time [answer Q37-2 and Q37-3] ___(5) Retired
___(3) Not employed, looking for work ___(6) Disabled, not able to work

37-2. [If you are employed] How many paying jobs do you have? _____

37-3. [If you are employed] Do you work inside or outside the city limits of Columbia?

- ___(1) Inside ___(2) Outside ___(3) Both ___(9) Don't know

38. Would you say your total annual household income is:

- ___(1) Under \$15,000 ___(4) \$60,000 to \$99,999
___(2) \$15,000 to \$29,999 ___(5) \$100,000 or more
___(3) \$30,000 to \$59,999

39. Which of the following best describes your race/ethnicity?

- ___(1) Hispanic ___(4) Asian/Pacific Islander ___(7) Other: _____
___(2) White/Caucasian ___(5) Native American/Eskimo
___(3) African American/Black ___(6) Mixed Race

40. What is your gender identity? ___(1) Male ___(2) Female ___(3) Other

This concludes the survey. Thank you for your time!

If you have any additional comments, please write them on a separate piece of paper and return them with your completed survey. You may also complete the survey and provide comments on-line at www.Columbia2015Survey.org.

Please return your completed survey to: ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061

Individual responses to the survey will remain confidential. The information printed to the right will ONLY be used by the City to understand differences in the experience based on geography. If your address is not correct, please provide the correct information.