

Your name *

First Name Last Name

Your email address *

example@example.com

What is the name of your organization? *

Which county/counties does your organization serve? *

- | | |
|--------------------------|----------------------------|
| Barry County | Barton County |
| Camden County | Cedar County |
| Cherokee County (Kansas) | Christian County |
| Crawford County (Kansas) | Dade County |
| Dallas County | Delaware County (Oklahoma) |
| Douglas County | Greene County |
| Hickory County | Howell County |
| Jasper County | Laclede County |
| Labette County (Kansas) | Lawrence County |
| McDonald County | Newton County |
| Ottawa County (Oklahoma) | Ozark County |
| Polk County | Pulaski County |
| Shannon County | St. Clair County |
| Stone County | Taney County |
| Texas County | Vernon County |
| Webster County | Wright County |

Which of the following best describes your organization? *

- Behavioral health clinic
- Health system, Hospital, Clinic or FQHC
- Local public health agency
- Public or private School (pre-K-grade 12)
- College or University
- Childcare agency or facility
- Community action agency
- Extension council
- Nonprofit organization
- Governmental or social services agency
- Public safety (jails, courts, police)

- Public library
- Faith-based organization
- Other

What racial/ethnic populations does your organization work with? *

- Black/African American
- African
- Native American/Indigenous/Alaska Native
- Latinx/Hispanic
- Asian
- Asian American
- Pacific Islander/Native Hawaiian
- Middle Eastern/North African
- White/European
- Other

Does your organization work with populations whose primary language is a language other than English? *

- Yes
- No
- Unsure

What languages do the populations you serve speak? *

- | | |
|----------------------------------------------|--------------------------------------------------------------|
| Arabic | Bantu languages (Swahili, Lingala, Zulu, Xhosa, Shona, etc.) |
| Chinese (Mandarin, Cantonese, Hokkien, etc.) | Dari |
| French and French Creole | Hmongic languages (Hmong, Hmu, and Xong) |
| Pashto | Pennsylvania Dutch |
| Sign language | Spanish |
| Tagalog (Filipino) | Vietnamese |
| Other | |

Does your organization have access to interpretation and translation services? *

- Yes
- No
- Unsure

What are your priority populations? *

- Individuals within a specific age group
- Individuals in rural communities
- Individuals who have served in the armed forces
- Individuals with justice involvement
- Individuals experiencing homelessness
- Individuals with immigrant or refugee status

- Individuals with disabilities
- All individuals
- Other historically marginalized communities
- Other

Which specific age groups are your priority? *

- Infants (0-2 years)
- Teens (13-17 years)
- Seniors (65+ years)
- Kids (3-12 years)
- Adults (18-64 years)

Which historically marginalized communities do you or your organization prioritize? *

Does your organization conduct assessments? *

- Yes
- Unsure
- No

Please describe what they assess *

Can you share the assessments you described above with the Ozarks Health Commission? *

- Yes
- Unsure
- No

What is your organization doing to address barriers to health for the populations you serve? *

What has happened since 2022 (when the last health assessment was completed) that may affect the health of your community?

What would you or your organization say are the top three health barriers to living in your community? *

What would you or your organization say are the top three health benefits to living in your community? *

In your opinion, which one health behavior do people in your community need more information about? *

If money and resources weren't an issue, what is one thing you would do to improve the wellbeing or quality of life in of your community?

Review these statements

Next you will review a series of statements about social determinants of health. Social determinants of health are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Please select a response that you believe best completes the sentence. If you do not feel knowledgeable enough on the topic to complete the sentence, select the "I do not know" option.

Employment is available to _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Stable employment is available to _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Healthy foods are accessible to _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

The healthy foods accessible in my community are affordable to _____ . *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Affordable housing in my community is accessible to _____ . *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Safe housing in my community is accessible to _____ . *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Poverty is an issue for _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Spots in childcare centers are available to _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Spots in childcare centers are affordable to _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

Safety is an issue for _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

After school youth care, programs and activities are available to _____ in my community. *

- | | |
|---------------|------|
| All | Most |
| Some | None |
| I do not know | |

After school youth care, programs and activities are affordable to _____ in my community. *

All	Most
Some	None
I do not know	

Quality education is available to _____ in my community. *

All	Most
Some	None
I do not know	

Quality education is accessible to _____ in my community. *

All	Most
Some	None
I do not know	

_____ children in my community receive adequate preparation for kindergarten *

All	Most
Some	None
I do not know	

Health care services are available to _____ in my community. *

All	Most
Some	None
I do not know	

Quality health care services are available to _____ in my community. *

All	Most
Some	None
I do not know	

Health insurance is available to _____ in my community. *

All	Most
Some	None
I do not know	

_____ individuals in my community are aware of and know how to access health care services. *

All	Most
Some	None
I do not know	

Preventative screenings are available to _____ in my community. *

All	Most
-----	------

Some
I do not know

None

Mental health care is available to _____ adults in my community. *

All
Some
I do not know

Most
None

Mental health care is available to _____ children and youth in my community. *

All
Some
I do not know

Most
None

Dental care is available to _____ adults in my community. *

All
Some
I do not know

Most
None

Dental care is available to _____ children and youth in my community. *

All
Some
I do not know

Most
None

_____ children and youth in my community have access to basic medical services. *

All
Some
I do not know

Most
None

_____ children and youth in my community are up-to-date on their immunizations. *

All
Some
I do not know

Most
None

_____ pregnant women in my community have access to adequate prenatal care. *

All
Some
I do not know

Most
None

_____ individuals in my community are able to effectively manage their chronic diseases, such as diabetes, cardiovascular disease and arthritis. *

All

Most

_____ individuals in my community have access to infrastructure that makes it easy and safe to be physically active. *

All

Most

Some

None

I do not know

_____ individuals in my community utilize infrastructure that makes it easy and safe to be physically active. *

All

Most

Some

None

I do not know

_____ individuals living in my community enjoy a local environment free from pollutants. *

All

Most

Some

None

I do not know

_____ individuals in my community are free from physical or verbal abuse. *

All

Most

Some

None

I do not know

_____ children and youth in my community are free from abuse and neglect. *

All

Most

Some

None

I do not know

_____ voting-age citizens in my community are able to vote if desired. *

All

Most

Some

None

I do not know

Public transportation is accessible to _____ in my community. *

All

Most

Some

None

I do not know

Personal transportation is accessible to _____ in my community. *

All
Some
I do not know

Most
None