Loudoun Health Check 2013

Make Your Opinion Count for a Healthier Loudoun County

The Loudoun Health Department wants to know your opinions about health issues in our county. Each member of your family should complete a survey. All responses are completely anonymous. Your answers will help us identify the most significant issues in Loudoun to better serve you and your community.

1. Check three items that you feel are most important to create and maintain a healthy community. **Check only three**.

- ☐ Ability to safely walk or bicycle to work, school, stores or recreation
- ☐ Arts and cultural events
- ☐ Affordable housing
- ☐ Availability of healthcare in County
- ☐ Clean and healthy environment
- ☐ Emergency preparedness
- ☐ Excellent race/ethnic relations
- ☐ Good jobs and healthy economy
- ☐ Good place to raise children
- ☐ Excellent schools
- ☐ Healthy behaviors and lifestyles
- ☐ Low adult death and disease rates
- ☐ Low crime/safe neighborhoods
- ☐ Low infant deaths
- ☐ Low suicide rates
- ☐ Parks and open space
- ☐ Recreation
- ☐ Religious or spiritual values
- ☐ Strong family life
- ☐ Other_____

2. Which three health concerns are most important for our community to address? **Check only three.**

- ☐ Access to outdoor space for exercise and fresh air
- ☐ Aging issues (arthritis, hearing/ vision loss, chronic disease etc)
- ☐ Air pollution
- ☐ Availability of health care within Loudoun County
- ☐ Bioterrorism
- ☐ Cancer
- ☐ Child abuse/neglect
- ☐ Chronic diseases
- ☐ Cost of healthcare
- ☐ Dental care
- ☐ Diabetes
- ☐ Disability Issues
- ☐ Domestic violence
- ☐ Elder abuse/neglect
- ☐ Emergency preparedness
- ☐ Family planning
- ☐ Restaurant food safety
- ☐ Heart disease and stroke
- ☐ Ground and surface water pollution
- ☐ High blood pressure
- ☐ HIV/AIDS
- ☐ Homicide
- ☐ Infant death
- ☐ Infectious diseases (TB, hepatitis, MRSA, etc)
- ☐ Lyme disease
- ☐ Mental health issues
- ☐ Motor vehicle accidents
- ☐ Obesity
- ☐ Pandemic Influenza
- ☐ Prenatal (pregnancy) healthcare
- ☐ Respiratory/lung disease
- ☐ Swimming pool safety
- ☐ Suicide
- ☐ West Nile virus/mosquitoes
- ☐ Other _____

3. Which three behaviors/risk factors are of greatest concern to our community's well-being? **Check only three.**

- ☐ Alcohol use/abuse
- ☐ Bullying
- ☐ Childhood obesity
- ☐ Dropping out of school
- ☐ Drug use/abuse
- ☐ Gang involvement
- ☐ Isolation and loneliness
- ☐ Lack of exercise
- ☐ Poor eating habits
- ☐ Peer pressure
- ☐ Not getting "shots" to prevent disease
- ☐ Racism
- ☐ Not getting needed healthcare
- ☐ Tobacco use
- ☐ Not using seat belts/child safety seats
- ☐ Other _____

4. Please rate the extent to which you agree with the following statements as they relate to you and your household:

	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
The quality of life in Loudoun County is good.	☐	☐	☐	☐	☐
Overall, Loudoun is a healthy community.	☐	☐	☐	☐	☐
We are able to get the healthcare that we need.	☐	☐	☐	☐	☐
We must travel outside Loudoun for healthcare.	☐	☐	☐	☐	☐
Healthcare is affordable in Loudoun County.	☐	☐	☐	☐	☐
Healthcare is of good quality in Loudoun.	☐	☐	☐	☐	☐
Loudoun County is a good place to raise children.	☐	☐	☐	☐	☐
Loudoun County is a good place to grow old. (Consider housing, transportation, social support, etc.)	☐	☐	☐	☐	☐
Loudoun County provides good job opportunities.	☐	☐	☐	☐	☐
Children receive high quality education in Loudoun. (Consider public, private and home schooling)	☐	☐	☐	☐	☐
Housing is affordable in Loudoun County.	☐	☐	☐	☐	☐
I am prepared for a public health emergency, such as a flu pandemic or an anthrax attack.	☐	☐	☐	☐	☐
Loudoun County is a safe community.	☐	☐	☐	☐	☐

Complete survey online at www.LoudounHealthCheck.com for a chance to win a $25 gas card.

You can also fax completed survey (both sides) to 703-771-5023,
or mail to Loudoun County Health Department at PO Box 7000, Leesburg VA 20177-7000

5. Approximately how many hours per month do you volunteer in the community? (e.g. schools, voluntary organizations, churches, hospitals, etc.)

☐ None ☐ 1-5 hours/month ☐ 6-10 hours/month ☐ Over 10 hours/month

6. How would you rate your personal health?

☐ Very healthy ☐ Healthy ☐ Somewhat healthy ☐ Unhealthy ☐ Very unhealthy

7. Within the last year, I have received services in Loudoun at (check all that apply):

☐ Community Health Center ☐ Emergency Room ☐ Free Clinic ☐ Health Department ☐ Urgent Care Center

7A. If you did use any of these services, why did you do so? Check all that apply.

☐ I had a true emergency ☐ My regular doctor's office was closed or could not see me ☐ I do not have a regular medical doctor ☐ I could not afford services at a private medical doctor ☐ I do not have insurance

8. If you received health care outside Loudoun County, check the choice that best matches why:

☐ My doctor of choice does not practice in Loudoun ☐ My insurance only covers doctors outside Loudoun ☐ I could not get in to see a doctor in Loudoun ☐ I could not receive specialty care in Loudoun ☐ Other

9. When was the last time you saw a primary care provider (PCP) (e.g. pediatrics, internal medicine, gynecology, general practice, or family practice)?

☐ Within the past year ☐ 1 to 2 years ago ☐ 2 to 5 years ago ☐ More than 5 years ago ☐ I do not have a PCP

10. When was the last time you saw a dentist?

☐ Within the past year ☐ 1 to 2 years ago ☐ 2 to 5 years ago ☐ More than 5 years ago

11. When was the last time you had a preventive health service (physical exam, blood pressure, Pap smear, diabetes or cholesterol test)?

☐ Within the past year ☐ 1 to 2 years ago ☐ 2 to 5 years ago ☐ More than 5 years ago

12. Zip code where you live: _____

13. Sex: ☐ Male ☐Female

14. Age:
☐ 18 or less ☐ 19-25
☐ 26-39 ☐ 40-54
☐ 55-64 ☐ 65 or over

15. Ethnic group you most identify with:
☐ African American/Black
☐ Asian/Pacific Islander
☐ Hispanic/Latino
☐ Native American/American Indian
☐ White/Caucasian

16. Type of household:
☐ Married couple with children
☐ Married couple, no children
☐ Single parent family
☐ Single, living alone
☐ Single, living with others
☐ Other household situation: _____

17. Household size (including you):
☐1 ☐2 ☐3 ☐4 or more

18. Highest level of education:
☐ Less than high school
☐ High school diploma/GED
☐ Associate's degree
☐ College degree
☐ Graduate degree

19. Household income (if known):
☐ Less than $10,000 per year
☐ $10,000 to $24,999 per year
☐ $25,000 to $49,999 per year
☐ $50,000 to $99,999 per year
☐ Over $100,000 per year

20. How do you pay for your healthcare?
☐ No insurance- pay out of pocket
☐ Health insurance through employer (or spouse/family member's employer)
☐ Purchase private health insurance
☐ Medicaid or FAMIS
☐ Medicare
☐ TRICARE

Please add any other comments you may have about health and well-being in Loudoun:

_____

_____

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