

North Dakota Community Needs Assessment Questionnaire

(For Region 2 - Minot)

We would appreciate it if you would please complete the needs assessment questionnaire on the following pages. The information that you provide is confidential, so please do not put your name on the survey. The following questionnaire will take about 10 minutes or less to complete. The results of the survey will be used to help the North Dakota Community Action Agencies (CAAs) in evaluating the needs of and services for low-income individuals and families.

The survey questionnaire was developed by North Dakota State University (NDSU), who helps CAAs by providing technical support to the needs assessment. Both CAAs and NDSU would like to acknowledge the support of the Consensus Council, Inc. (in partnership with the Bush Foundation) through the Community Innovation Grants on this survey.

To answer the survey question, please check the small box in front of each need (see an example below). The bulleted list under each need provides more information/explanation for the need.

- ☒ Finding a job
- Finding a full-time job
 - Applying for jobs
 - Writing a resume
 - Interviewing for a job
 - Getting appropriate clothing for a job
- ☐ Higher paying jobs or jobs with benefits
- More jobs with better pay and benefits

You may also scan the QR code below and work on the survey online.



Should you have any questions, please don't hesitate to contact us: Yao Yu at yao.yu@ndsu.edu or 701-231-8822.

Section 1 – Basic Demographic Information: (Check the respond that best represents you)

- 1.1 Do you live in State of North Dakota?** ☐ Yes ☐ No
- 1.2 What county is your household living in?** _____
- 1.3 What is your gender?**
☐ Male ☐ Female ☐ Non-binary/third gender
☐ Prefer to self-describe _____ ☐ Prefer not to say
- 1.4 What is your age range?**
☐ Under 18 ☐ 18-24 ☐ 25-39 ☐ 40-59
☐ 60-64 ☐ 65-79 ☐ 80 or older
- 1.5 Do you or a member of your household have child(ren) under age 18 years old?**
☐ Yes ☐ No ☐ Currently pregnant
- 1.6 What best describes your household?**
☐ Two parents ☐ Single person ☐ Multifamily household
☐ Single parent Male ☐ Single parent Female ☐ Two adults no children
☐ Grandparent(s) raising grandchildren ☐ Other _____ (Please specify)
- 1.7 What is your race/ethnicity?**
☐ Asian or Pacific Islander ☐ Black/African American
☐ Hispanic/Latino American ☐ Indian/Native American
☐ White/Caucasian ☐ Other _____ (Please specify)
- 1.8 What is your TOTAL household income last year, including any type of financial aid for disabilities, social security, child support, food stamps, etc.?**
☐ Less than \$10,000 ☐ \$10,001-\$20,000 ☐ \$20,001-\$30,000
☐ \$30,001-\$40,000 ☐ \$40,001-\$50,000 ☐ \$50,001-\$60,000
☐ \$60,001-\$70,000 ☐ \$70,001-More ☐ Prefer not to answer
- 1.9 What language is spoken in your home?**
☐ English ☐ Spanish ☐ English and Spanish
☐ Other _____ (Please specify)
- 1.10 What is your highest level of education completed?**
☐ Less than 9th grade ☐ 9th – 12th grade (no diploma)
☐ High School Diploma/GED ☐ Technical School/Vocational Technical School
☐ Some college (no degree) ☐ Associate's degree
☐ Bachelor's degree ☐ Graduate/Professional
☐ Other _____ (Please specify)
- 1.11 What is your current employment status?**
☐ Full time ☐ Part time ☐ Seasonal/day labor
☐ Not working/looking ☐ Not working/not looking ☐ Apprenticeship
☐ Retired ☐ Self-employed ☐ Other _____ (Please specify)
- 1.12 What is your current housing status?**
☐ Own ☐ Rent ☐ Homeless ☐ Hotel/motel
☐ Nursing/long term care ☐ Assisted living ☐ Group home
☐ Staying with friends/family ☐ Other _____ (Please specify)

1.13 What is your role in the community? (Please select the best choice which fits your role when completing this survey)

- ☐ Client of agency
(Have received service from agency. Example – Tax Preparation)
- ☐ Agency Board Member ☐ Agency Volunteer
- ☐ Representative of an educational institution ☐ General Public
(Public or private school, college, technical school etc.) (Have NOT received services from agency)
- ☐ Representative of a government entity ☐ Representative of a private organization
(City, county, state, or federal) (Business, local civic group)
- ☐ Representative of a faith-based organization ☐ Representative of a community-based organization
(Church or other religious organization) (Nonprofit entities providing direct service)
- ☐ Other _____ (Please specify)

Section 2 – Specific Needs: (Please check all the boxes that indicate the needs for you, your family, and/or your community.)

2.1 EMPLOYMENT

☐ DO NOT have any employment needs right now (If so please skip this section and go to Section 2.2)

.OR.

☐ DO have employment needs right now (If so, please check all that apply below)

- ☐ Job Training
- Career path services introduction
 - Technical skills to find work
 - Soft skills to keep a job (e.g., good communication skills, etc.)
 - Training for the types of jobs available in the area
 - Knowledge of available employment resources
 - Readiness skills to be able to work
- ☐ Finding a job
- Finding a full-time job
 - Applying for jobs
 - Writing a resume
 - Interviewing for a job
 - Getting appropriate clothing for a job
- ☐ Higher paying jobs or jobs with benefits
- More jobs with better pay and benefits
- ☐ Background Check
- Criminal background
 - Offender status
- ☐ Other needs or comments under this category (Please specify):

2.2 INCOME AND ASSET-BUILDING

☐ DO NOT have any financial needs right now (If so please skip this section and go to Section 2.3)

.OR.

☐ DO have financial needs right now (If so, please check all that apply below)

- ☐ Free Income Tax Preparation
 - Filling out tax forms
- ☐ Gambling Counseling
- ☐ Budget/Credit/Debit Counseling
 - Information on how to access free credit counseling
 - Opening a checking or savings account
 - Financial literacy/planning
 - Understanding credit scores
 - Anonymous and confidential savings counseling
 - Anonymous and confidential budget counseling
 - Foreclosure/bankruptcy/repossession problems
- ☐ Financial Issues
 - Divorce problems
 - Child support problems
 - Problems with utility or telephone company
 - Education on how to build assets
- ☐ Other needs or comments under this category (Please specify):

2.3 EDUCATION

☐ DO NOT have any education needs right now (If so please skip this section and go to Section 2.4)

.OR.

☐ DO have education needs right now (If so, please check all that apply below)

- ☐ Early Childhood Education Programs
 - Preschool activities for child(ren) to develop school readiness skills
- ☐ GED Classes
 - Getting a high school diploma or GED (General Education Development)/HSED (High School Equivalency Diploma)
 - High school transition coordination
- ☐ English as a Second-Language Classes
- ☐ Computer Skills Training
 - Learning how to use a computer
- ☐ Literacy Classes
 - Improving communication or language skills
- ☐ Technical and Vocational Training
 - Getting a two-year college degree
 - Choosing a technical school program
 - Counseling to prepare students for technical school or college
 - Certificate/degree programs offered locally
- ☐ Childcare
 - Parenting Education
 - Affordable high-quality childcare options

<input type="checkbox"/> Paying for education <ul style="list-style-type: none"> • Paying for post-secondary education programs (e.g. Associate's, Bachelor's Degrees) • Completing college aid forms (including FAFSA forms (Free Application for Federal Student Aid)) <input type="checkbox"/> Life Skills <ul style="list-style-type: none"> • Help choosing a career • Character education (i.e. anti-bullying, etc.) <input type="checkbox"/> Other needs or comments under this category (Please specify):
<hr/>
<hr/>

2.4 HOUSING

☐ DO NOT have any housing needs right now (If so please skip this section and go to Section 2.5)

.OR.

☐ DO have housing needs right now (If so, please check all that apply below)

<input type="checkbox"/> Decent Affordable Houses to RENT <ul style="list-style-type: none"> • Addressing housing discrimination <input type="checkbox"/> Decent Affordable Houses to BUY <ul style="list-style-type: none"> • Mortgage Assistance • Counseling resources for homeowners • A down payment/closing costs to buy a home • Qualifying for a loan to buy a home <input type="checkbox"/> Weatherization (home energy improvement) <ul style="list-style-type: none"> • Grants to provide services that reduce energy cost <input type="checkbox"/> Home Repair <ul style="list-style-type: none"> • Programs to provide free home repair • Long-term care/home care services • Basic home repair/property maintenance skills <input type="checkbox"/> Home Buyer Education <ul style="list-style-type: none"> • Home ownership education <input type="checkbox"/> Handicap Accessibility Housing <ul style="list-style-type: none"> • Changes to my home for a person with disabilities <input type="checkbox"/> Senior Citizens Housing <ul style="list-style-type: none"> • Income based rental housing for seniors <input type="checkbox"/> Rental Assistance <ul style="list-style-type: none"> • Rent deposits • Rent payments • Renter/tenant rights and responsibilities education • More monthly rental assistance programs <input type="checkbox"/> Utility Assistance <ul style="list-style-type: none"> • Utility deposit programs <input type="checkbox"/> Other needs or comments under this category (Please specify):
<hr/>
<hr/>

2.5 HEALTH AND SOCIAL/BEHAVIOR DEVELOPMENT

☐ DO NOT have any health needs right now (If so please skip this section and go to Section 2.6)

.OR.

☐ DO have health needs right now (If so, please check all that apply below)

- ☐ Health Insurance/Affordable Health Care

 - Paying for medicine and prescriptions
 - Long-term health care
 - Chronic Illness
 - AIDS/HIV
 - STD's (Sexually Transmitted Diseases)

☐ Health Education Services

 - Nutritional counseling
 - Healthy eating habits
 - Early childhood nutrition education
 - Education on maintaining personal hygiene
 - Answering health insurance questions
 - Preventative healthcare

☐ Substance Abuse Counseling/Treatment

 - Drug or alcohol problem

☐ Mental Health Service

 - Stress, depression, or anxiety
 - Post-Traumatic Stress Disorder (PTSD)

☐ Teenage Pregnancy/Family Planning

 - Birth control
 - Good medical care before baby is born

☐ Dental Insurance/Affordable Dental

 - Payment assistance programs for adult dental services
 - Paying for regular dental checkups

☐ Elder Care

 - Hypertension (High blood pressure)
 - Diabetes
 - Hearing care
 - Heart Disease

☐ Veterans Services

☐ Visions

 - Vision assistance programs for adults
 - Paying for glasses

☐ Child Immunizations

 - Vaccines for children regular check-ups, developmental screens, or physicals

☐ Disability/Body Issues

 - Assistance for child diagnosed with disability
 - Assistance for adult diagnosed with disability
 - Prosthesis
 - Medical equipment (i.e. wheelchair, crutch, hearing aids, etc.)

- ☐ Abuse/Violence protection
 - Protection in domestic violence situations
 - Physical, emotional, or sexual abuse☐ Other needs or comments under this category (Please specify):

2.6 CIVIC ENGAGEMENT AND COMMUNITY INVOLVEMENT

☐ DO NOT have any community needs right now (If so please skip this section and go to Section 2.7)

.OR.

☐ DO have community needs right now (If so, please check all that apply below)

- ☐ Safe neighborhoods, sidewalks, parks
☐ Additional health care facilities (Doctor's offices, Clinics, Pharmacies)
☐ Homeless Shelter
 - Getting emergency shelter
 - Community supports for homeless families☐ Senior Activities
☐ Recreational Activities
☐ Youth Activities
☐ Crime Prevention
☐ Legal Assistance
 - Family/Child Abuse
 - Citizenship classes
 - Deportation or immigration issues☐ Volunteer Opportunities
 - Knowledge on civic activities
 - Joining neighborhood associations, community boards, advisory groups or similar organizations☐ Other needs or comments under this category (Please specify):

2.7 OTHER SUPPORTS

☐ DO NOT have any other supporting needs right now (If so please skip this section and go to Section 2.8)

.OR.

☐ DO have other supporting needs right now (If so, please check all that apply below)

- ☐ Availability/Access to Food (grocery store)
☐ Community Gardens
☐ Food
☐ Prisoner Discharge Services
☐ Public Transportation
 - Public Transportation to work, school, health service, etc.☐ Vehicle Repair Assistance

- ☐ Access to services (WIC, SNAP, SSI, etc.)
 - WIC (Special Supplemental Nutrition Program for Women, Infants, and Children)
 - SNAP (Supplemental Nutrition Assistance Program)
 - SSI (Supplemental Security Income)
 - ☐ Clothing
 - ☐ Internet
 - ☐ Burial Costs
 - ☐ Special needs children
 - ☐ Other needs or comments under this category (Please specify):
-
-

2.8 OVERALL NEEDED (Please mark **THREE** most important needs to you, your family, and/or your community)

- ☐ Employment
- ☐ Income and Asset-building
- ☐ Education
- ☐ Housing
- ☐ Health and Social/Behavior Development
- ☐ Civic Engagement and Community Involvement
- ☐ Other Supports

2.9 The current programs/services provided by your local CAA are listed below. What are the MOST important program/services you would like to see continued in your community? (Please check all that apply)

- ☐ Self Sufficiency
 - Self-Reliance Case Management
 - Representative Payee Case Management
 - Emergency Services
 - Rental Assistance
 - Rental Security Deposit
 - Energy Share (Utilities)
 - Budget Counseling
 - Individual Development Account (IDA)
 - Emergency Prescription Assistance
- ☐ Housing Programs
 - Housing Counseling
 - Home Rehabilitation
 - Security Deposit Assistance
 - Rent and Mortgage Assistance
- ☐ Emergency Programs
 - Energy Share
 - Food Pantries
 - Supportive Services for Veterans Families (SSVF)
 - Holiday Activities
- ☐ Energy Conservation
 - Weatherization

- Emergency Furnace and Water Heater Repair and Replacement
 - Cooling (Air Conditioner repair or Replacement)
- ☐ Other programs/services expected from your local CAA .OR. any other comments (Please specify):

Section 3 – Additional Feedback:

3.1 Any additional feedback or comments related to needs in your community?

3.2 Are you willing to be contacted by NDSU on behalf of Community Action Agencies to further discuss needs in your community? ☐ Yes ☐ No

If yes, please provide your contact information, such as phone number and/or email address.

Thank you for your participation!