Community needs assessment survey

[Organization name], [neighborhood, town or area]. Please return by [date].

Why we are asking

We want to know what you see as the biggest needs where you live, and what already works well. [Organization name] and our partners will use the answers to decide what to work on first.

Every question is optional, so skip any you would rather not answer. It takes about 10 minutes.

We will share what we learn by [month] at [place or website].

How to fill it in: tick one box unless a question says to pick all that apply. Write in the lines where we ask for your own words.

Part 1. Needs where you live

1. How big a problem is each of these where you live? Tick one box in each row.

Area	Big problem	Small problem	Not a problem	Not sure
Housing (cost, repairs, finding a place)				
Food (affording enough healthy food)				
Health care (getting a doctor, dentist or mental health care)				
Getting around (buses, rides, safe walking routes)				
Jobs and training (finding work, learning new skills)				
Children and youth (childcare, after-school activities)				
Older adults (help at home, staying connected)				
Safety (feeling safe at home and on the street)				

2. Which one of these needs should come first?

[ ] Housing [ ] Food [ ] Health care [ ] Getting around [ ] Jobs and training

[ ] Children and youth [ ] Older adults [ ] Safety [ ] Something else

3. Why does that need matter most to you?

Part 2. What already works

4. What does your neighborhood already do well? (pick all that apply)

[ ] Neighbors help each other [ ] Parks and green space [ ] Schools

[ ] Local shops [ ] Faith and community groups [ ] Library or community center

5. Overall rating: how good is your neighborhood as a place to live? (1 is poor, 5 is great)

[ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5

Part 3. Taking part

6. What would help you take part in community programs? (pick all that apply)

[ ] Evening or weekend sessions [ ] Childcare during sessions [ ] A ride or bus pass

[ ] Information in my language [ ] Free or low cost [ ] Online options

7. How did you get this survey?

[ ] Paper copy [ ] QR code on a poster [ ] Shared tablet at an event

[ ] Online by email or text [ ] Social media

Part 4. About you (all optional)

These questions help us see whether we heard from every part of the community. Skip any of them, or tick Prefer not to say.

8. Which neighborhood or area do you live in?

[Replace these with the names people use for your areas.]

[ ] North side [ ] South side [ ] East side

[ ] West side [ ] Downtown [ ] Prefer not to say

9. Your age group

[ ] Under 18 [ ] 18 to 24 [ ] 25 to 44

[ ] 45 to 64 [ ] 65 or older [ ] Prefer not to say

10. Do you rent or own your home?

[ ] Rent [ ] Own [ ] Live with family or friends

[ ] Something else [ ] Prefer not to say

11. Do children under 18 live in your home?

[ ] Yes [ ] No [ ] Prefer not to say

12. Which language do you mostly speak at home?

[ ] English [ ] Spanish [ ] Another language [ ] Prefer not to say

13. Any other comments?

14. Email, only if you would like a copy of the results

Leave it blank if you do not want a copy.

Thank you

Please hand this back to [name] or drop it in the box at [place] by [date].

Rather answer online? Scan the QR code or type [short link]. You can also ask for this survey in [other languages].

For staff: type each paper copy into the online form and pick "Paper copy" for "How did you get this survey?", so every answer lands in the same export.

Question bank

More questions to swap in. Keep the survey short: add one or two where you need more detail, and take one out for each one you add.

Housing

- In the past 12 months, did you worry about paying rent or a mortgage?
- Does your home need repairs you cannot afford?
- If you had to move, could you find a place you can afford nearby?

Food

- In the past month, did your household skip meals because money ran short?
- How far is the nearest store that sells fresh fruit and vegetables?
- Do you know where to get free or low cost food nearby?

Health care

- Do you have a doctor or clinic you usually go to?
- In the past 12 months, did you put off care because of cost or distance?
- Is it hard to get mental health support here?

Getting around

- How do you usually get to work, school or the store?
- Is there a place you need to get to but often cannot reach?
- Are the sidewalks and crossings near you safe to walk?

Jobs and training

- Are you looking for work, or for better work?
- What skills or training would help you most?
- What gets in the way of taking a class or training?

Children and youth

- Can you find childcare you can afford when you need it?
- What do young people here do after school and in the summer?
- What would you like young people here to have that they do not have now?

Older adults

- Do older adults here have help with shopping, rides and chores?
- How often do older neighbors get out to see other people?
- What would help older adults stay in their homes longer?

Safety

- Do you feel safe walking in your neighborhood after dark?
- Which places here feel unsafe, and why?
- What would make your street feel safer?

Strengths and ideas

- Who are the people or groups that make this place better?

- Which places do people go to meet each other?
- Would you give time to help with any of these needs? Which ones?

Before you send it

- Plan it with partners: residents, service providers and groups who know the people you want to hear from.
- Try it on five people from the community first. Fix any question they stumble on.
- Offer it on paper, through a QR code on posters and on a shared tablet at events, not only online.
- Decide now how you will share the results back, and when.