Investing in Kids (INK!) Survey Questions Adults (18 and Older)

Investing in Kids (INK!) of St. Johns County needs your help. Please fill out this survey to share your opinions about mental health, substance use, and the quality of life in St. Johns County. Your feedback will help identify gaps to help make St. Johns County a better place to live.

1.	Stress is when a person feels tense, restless, nervous, or anxious. Sometimes when someone is stressed, they may be unable to sleep at night because their mind is always troubled. In the last 30 days, have you experienced this kind of stress?			
	□ Never □ Rarely	□ Sometimes □ Often	□ Always	
2.		off, cancel, or neglect seeking ser y of the following reasons? Check □ I had no insurance □ I could not afford the deductible		
	□ I had no transportation	□ Stigma - I did not want people to know I needed services		
3.		ointment with a mental health or sailable to schedule an appointmen 12:00 am - 6:00 am 7:00 am - 12:00 pm		
4.		ointment with a mental health or s want available? Check all that app Urtual appointments or online Telephone calls	oly.	
5.	Is it difficult for you to find menta Yes, I have difficulty finding services	I health or substance use services i □ No, I can easily find the services I need.	n St. Johns County? I have not needed services recently.	
If ye	s, then go to the next question.	If no, then skip to question 7:		
6.	What made finding the service di			
	□ Service not available within St. Johns County. □ Other:	□ Long waitlist to receive services.	□ I can't find providers that accept my insurance.	
7.	What is your ZIP code?			
	□ 32004	□ 32081	□ 32085	
	□ 32033	□ 32082	□ 32086	
	□ 32080	□ 32084	□ Other:	
8.	What is your age?			
	□ 18-24	□ 45-54	□ 75+	
	□ 25-34	□ 55-64		
	□ 35-44	□ 65-74		

9.	What is your gender? □ Female	□ Male	□ I prefer not to answer.	
10.	What is your race? Check all that a Asian / Pacific Islander	□ Native American / Alaskan	□ I prefer not to answer.	
	□ Black / African-American	Native ☐ White / Caucasian	□ Other:	
11	What is a said of the O			
11.	What is your ethnicity? ☐ Hispanic or Latino(a)	□ Non-Hispanic or Latino(a)	□ I prefer not to answer.	
12.	What is your education level? □ Elementary / Middle School	□ Community College / Technical or Trade School / 2- Year Degree	□ Graduate / Advanced Degree	
	□ High School or GED	□ 4-Year College / Bachelor's Degree	□ I prefer not to answer.	
13.	13. What is your current employment status?			
	□ Disabled	□ Self-Employed	□ Unemployed	
	□ Employed Full-Time	☐ Stay-At-Home Parent /	□ Retired	
	□ Employed Part-Time	Caregiver	□ I prefer not to answer.	
14.	4. What is your annual household income?			
	□ Less than \$19,999	□ \$30,000 - \$49,999	□ \$100,000 or more	
	□ \$20,000 - \$29,999	□ \$50,000 - \$99,999	□ I prefer not to answer.	
15. Do you identify with any of the following groups? Check all that apply.				
	□ Currently in or formerly in foster care	□ English as a second language	□ Veteran / Active Military /	
	loster care		Family of Veteran or Active Military	
	□ Disabled	□ LGBTQ+	□ I do not identify with these groups.	
16.	What is your marital status?			
	□ Divorced	□ Married	□ Single (never married)	
	□ Living with Partner	□ Separated	□ I prefer not to answer	
17. How is your healthcare covered?				
	☐ Health insurance through a job	□ Medicare	□ Other:	
	or family member.	Ad III I		
	☐ Health insurance I pay for on my own.	□ Medicaid	□ I prefer not to answer	
	□ VA Benefits	□ I do not have any insurance.		