

Welcome to the Hub Community Survey. This survey is designed to identify the most pressing needs and priorities for improvement in our Three Points/Robles Junction Community. Your participation is key to this process. Make your voice count!

The survey will take 10-15 minutes to complete. Your input is invaluable, and we appreciate your time.

If you prefer to complete the survey online, please go to friendsofroblesranch.org.

If you would like to be entered into our drawing for a chance to win a \$25 gift card please give us your contact information. Thank You Please Print Clearly

Name _____ Phone # _____

Email _____ Address _____

1. Which issues below are essential to your household?

- | | |
|--|---|
| ___(1) work/Job training | ___(11) Access to mental health services |
| ___(2) Feeling connected to neighbors | ___(12) Caring for family members who can not care for themselves |
| ___(3) Childcare | ___(13) Access to safe outdoor spaces |
| ___(4) Public safety | ___(14) Access to outdoor programming |
| ___(5) Cost of healthy food | ___(15) Access to indoor recreational programming |
| ___(6) Access to healthy food | ___(16) Services and programming for seniors |
| ___(7) Quality education for school-aged children | ___(17) Firearms training due to low sherrif presence. |
| ___(8) Accessibility for people with disabilities | ___(18) Other: |
| ___(9) Quality after-school or summer programs for youth | |
| ___(10) Access to health care | |

2. Which FOUR items in the list above are the MOST IMPORTANT to your household?

Write your answers below using the numbers from the list in the questions or circle "none."

1st _____	4th _____
2nd _____	
3rd _____	None

3. Please CHECK ALL of the places you or the members of your household use to access services or participate in programs [check all that apply]

- | | |
|--|---|
| ___(1) Robles Community Center | ___(7) Local VFW |
| ___(2) Church facilities | ___(8) Neighborhood Parks |
| ___(3) Local School/Family Resource Center | ___(9) Parks in town |
| ___(4) Friends of Robles Ranch/My Friends Closet | ___(10) Local Fire Department Meeting Rooms |
| ___(5) Friends of Robles Ranch/Food Bank | ___(11) Other: |
| ___(6) Serenity Baptist Food Ministry | ___(12) None of these |

3a. Do these organizations meet ALL of your household's needs?

___(1) Yes ___(2) No

4. Please CHECK ALL the transportation types listed below that members of your household currently use to get to work, school, or take care of important tasks[check all that apply]

____(1) Personal car, truck, van, or motorcycle

____(4)Personal bicycle

____(2) Ride sharing (Uber, Lyft, Junction Connection).

____(5) Public transportation

____(3) Taxi services

____(6) Walking

____(7) Other

5. Does public transportation in Robles/Three Points meet your household needs?

____(1) Yes.

____(2) No

____(3) I don't need or use public transportation

6. Is there a park near your home where you enjoy spending time?

____(1) Yes. ____ (2) No

6a. What events would your household like to attend at parks?

Answer

7. Please CHECK ALL the ways your household learns about community community center programs, events, programs, local businesses, community resources, and other activities. [check all that apply]

____(1) The Fence Post

____(8) Conversation with community center staff

____(2) Word of mouth

____(9) Conversation with My Friends Closet staff

____(3) Social Media

____(10) Conversation with Food Bank staff

____(4) Public meetings

____(11) Handouts

____(5) Flyers on Bulletin Boards

____(12) Signs along the street

____(6) Hub website

____(13) Other:

____(7) Email notifications

8. What are the best ways to learn about community activities? [Use the numbers in question 7. Please write the numbers of the 1st, 2nd, 3rd, and 4th items, or circle "none."]

1st_____

2nd_____

3rd_____

4th_____

None

9. Please CHECK ALL of the items below that make a public space WELCOMING to you and the members of your household.

- | | |
|--|---|
| <input type="checkbox"/> (1) Familiar & Friendly staff presence | <input type="checkbox"/> (9) Clearly marked Rest Rooms or signs to the Rest Rooms |
| <input type="checkbox"/> (2) Organized recreational activities | <input type="checkbox"/> (10) A welcoming sign |
| <input type="checkbox"/> (3) Close to home | <input type="checkbox"/> (11) Good telephone or wifi signal |
| <input type="checkbox"/> (4) Security cameras | <input type="checkbox"/> (12) Good indoor or outdoor lighting |
| <input type="checkbox"/> (5) Presence of police/security staff | <input type="checkbox"/> (13) Other |
| <input type="checkbox"/> (6) Shade from trees | |
| <input type="checkbox"/> (7) Controlled facility or park access before and after hours | |
| <input type="checkbox"/> (8) A place for kids to play | |

10. Please CHECK ALL of the items below that make a public space UNWELCOMING to you and the members of your household. [check all that apply]

- | | |
|---|---|
| <input type="checkbox"/> (1) Poor lighting | <input type="checkbox"/> (8) No presence of staff |
| <input type="checkbox"/> (2) Presence of trash, litter, general dirtiness | <input type="checkbox"/> (9) After hour activities |
| <input type="checkbox"/> (3) Crowded facilities | <input type="checkbox"/> (10) Poor telephone signal |
| <input type="checkbox"/> (4) Other user's behavior | <input type="checkbox"/> (11) Other: _____ |
| <input type="checkbox"/> (5) Presence of police/security staff | |
| <input type="checkbox"/> (6) Lack of amenities outside facilities | |
| <input type="checkbox"/> (7) Feeling space is not "for me" | |

11. Please rate how satisfied you are with the community experiences below.

Community Experience	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Don't Know/ Never Visit
1. My Friends Closet						
2. Food Bank						
3. Community Center						
4. The VFW						
5. United Community Health Center (UCHC)						
6. Serenity Baptist Food Ministry						
Local School						

12. If dissatisfied with a community experience, provide the organization's name and briefly describe what you would improve.

Name of Organization : _____

Feedback:

13. Please CHECK ALL of the items below that you would like to see in a public space where everyone in your household would enjoy spending time [check all that apply]

- ____(1) Cafe or coffee shop
- ____(2) Computer lab with free access to internet and ability to print for a small per page charge.
- ____(3) Community walking, biking, and nature path in the park
- ____(4) Spaces for arts, crafts, and hobbies
- ____(5) Space for seniors
- ____(6) Space for teens

- ____(7) Mental health clinics
- ____(8) Job training center
- ____(9) Laundromat
- ____(10) Indoor fitness space
- ____(11) Splash pad
- ____(12) dog park
- ____(13) Skate park
- ____(14) Dedicated large spaces for family or community events
- ____(15) Other: _____

14. Which of the THREE items in the list above are MOST IMPORTANT to your household?

[Write your answer using the numbers from the list in question 13, or circle "none."]

- 1st _____
- 2nd _____
- 3rd _____
- None

15. How important is it for your community to take action to provide essential services?

Service	Very Important	Somewhat Important	Not Important	Don't Know
Emergency Food and Clothing				
Health Care				
Mental Health Service				
Suicide Prevention				
Youth and Parenting Services				
Elder Services				
LGBTQ+ Services				
Domestic Abuse Support				
Homeless Services				
Youth Services				
Educational Resources				
Pet Help				
Housing Assistance				
Drug Prevention and Safety				
Legal Help				
Transportation				

16 a. If you have children, please indicate what school they currently attend.

- (1) Local public school
- (2) Charter school
- (3) Private school
- (4) Vocational school
- (5) Home School

16 B . If you raised your family here, please indicate what school they attended.

- (1) Local public school
- (2) Charter school
- (3) Private school
- (4) Vocational school
- (5) Home School

17. Are you interested in Adult education classes?

Yes _____ . No _____

18. Please check all topics you are interested in.

- (1) **Basic Computer Skills.**
- _____ PC or _____Apple
- (2) Word processing
- (3) Spreadsheet skills
- (4) Computer Photo editing
- (5) Setting Up Social media
- (6) Setting up a website
- (20) Writing,
- _____(20 a) basic composition
- _____(20 b) Resume
- _____(20c) Creative
- _____(20) Other

Other Classes Groups or Clubs

- (7) Firearms training for license
- (8) Self defense
- (9) Sewing
- (10) Art, painting,
- (11) Photography
- (12) Astronomy
- (13) Yoga
- (14) Healthy cooking
- (15) Gardening
- (16) Canning
- (17) Crafts for Men
- (18) Crafts for Women
- (19) Crafts for children

_____ (21) To get a good teacher would you be willing to pay a fee for the class?
_____ Yes _____ No

_____ (22) Support groups
_____ Grief. _____ Weight Loss _____ Parenting
_____ Other _____

_____ (23) If you and your friends wanted to start a group or a club do you know where you can meet for free?

Demographics:

Your answers will remain private, and your information will not be shared with other agencies.

19. What is your age? _____ years

20. Gender Identity:

- | | |
|------------------------------|--|
| _____ (1) Male/Man | _____ (4) TransFemale/TransWomen |
| _____ (2) Female/Women | _____ (5) Genderqueer/Gender nonconforming |
| _____ (3) TransMale/TransMan | _____ (6) something else: _____ |
| | _____ (7) Decline to answer |

21. How many years have you lived in Robles/Three Points _____ years

22. Counting yourself, how many people live in your household? _____ people

23. Including yourself, what are the ages of the people in your household?

- | | |
|--------------------|-------------------|
| Under age 5: _____ | Ages 35-44: _____ |
| Ages 5-9: _____ | Ages 45-54: _____ |
| Ages 10-14: _____ | Ages 55-64: _____ |
| Ages 15-19: _____ | Ages 65-74: _____ |
| Ages 20-24: _____ | Ages 75+: _____ |
| Ages 25-34: _____ | |

24. What is your annual household income?

- _____ (1) Under \$25,000
- _____ (2) \$25,000 - 49,999
- _____ (3) \$50,000-74,999
- _____ (4) \$75,000-99,999
- _____ (5) \$100,000 or more

25. Please include any additional comments _____

This concludes the survey. Thank you for your time.

Please return your completed survey to The Food Bank

Located on the Robles Community Center property at 16150 W Ajo HWY.

Please put your survey in a sealed envelope to protect the privacy of your answers.