

SURVEY

Your Voice Guides Your Community Investment

Complete the short questionnaire below to have your voice heard!

Whether you or someone you know has difficulty traveling in Skagit County, we would like to hear from you regarding your transportation needs.

1. Please provide your home ZIP code

2. Which of the following transportation challenges do you (or those you help) face? How limiting are these challenges?
Select all that apply

| | Not a limitation | Somewhat limiting | Very limiting |
|---|--------------------------|--------------------------|--------------------------|
| I have physical limitation and need assistance to get where I want to go | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I cannot afford transportation (either a care or fares on public transit) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I cannot drive myself for other reasons (age, no license, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Existing services do not take me where I need to go | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

3. What methods of transportation do you use, and how often do you use them?

Select all that apply

Every day A few times a week A few times a month A few times a year I never use

| | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Drive alone | <input type="checkbox"/> |
| Transit (bus, ferry) | <input type="checkbox"/> |
| Paratransit | <input type="checkbox"/> |
| Carpool only with household members | <input type="checkbox"/> |
| Carpool with others not in my household | <input type="checkbox"/> |
| Bicycle | <input type="checkbox"/> |
| Walk or wheelchair | <input type="checkbox"/> |
| Taxi, Uber, Lyft, or other ride-hailing service | <input type="checkbox"/> |
| Borrow a vehicle from friends or family | <input type="checkbox"/> |
| Ask for rides from friends or family | <input type="checkbox"/> |
| Get rides through a volunteer driver program | <input type="checkbox"/> |

4. How often do you travel outside of Skagit County?

- Daily
- A few times a week
- A few times a month
- Other: *please explain*
- A few times a year
- Rarely/Never

5. Which of the following, if any, prevented you from making a trip you wanted to make in the past month?

Select all that apply

- No accessibility for a mobility device (wheelchair, walker)
- No available working vehicle
- No transit (bus) available to get to destination on time
- Cost of vehicle trip was too high
- Travel time was too long
- No safe walking or biking route
- Weather conditions prevented travel

6. In the past 30 days have you had to reschedule an appointment because of a problem with transportation?

- Yes
- No

7. If yes, what type of appointment did you have to reschedule?

Select all that apply

- Medical appointment
- Pharmacy or medicine pick-up
- Shopping trip
- To visit family or social activity
- Employment related appointment
- Other: *please specify*

8. How do public transportation challenges impact you? How much of an impact is it?

Select all that apply

| | Minimal or no impact | Some impact | Significant impact |
|---|--------------------------|--------------------------|--------------------------|
| Employment or business opportunities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Medical appointments | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Community support or social services | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Complete daily tasks (errands/shopping) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Visiting friends and family | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to participate in recreational/entertainment activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other: <i>please specify</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

9. Are you of Hispanic, Latino/a/x, or Spanish origin?

- Yes
- No

10. How would you describe your race?

Select all that apply

- | | |
|---|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Native Hawaiian or Asian/Pacific Islander |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Other: <i>please specify</i> |

11. What is your age?

- Under 18 years old
- 18-34 years old
- 35-64 years old
- 65 and older

12. Do you have any other comments or questions regarding transportation services in Skagit County?
