

Missouri Livable Streets Citizen Attitude Survey

Bicycling and walking are transportation choices that are low-cost, good for the environment and can improve health. (Insert sentence explaining that this survey is part of the information gathering phase of the local bicycle-pedestrian planning process). (The local group) is developing a bicycle-pedestrian master plan for (Insert city or county name). Your honest responses to the following questions can help us determine support for planned and conceptual projects. Your participation is completely voluntary. If you have concerns about this survey please contact (insert main contact and phone number).

For each of the following questions, please indicate if you would support...

- | | | |
|---|-----|----|
| 1. Spending 10% of funds allocated for transportation projects to add facilities for pedestrians, bicyclists, and those in wheelchairs? | Yes | No |
| 2. Spending 25% of funds allocated for transportation projects to add facilities for pedestrians, bicyclists, and those in wheelchairs? | Yes | No |

How difficult is it for you to access places of interest in your community when you...

- | | Very
Difficult | Difficult | Kind of
Difficult | Easy | Very
Easy | I do not
walk/bicycle |
|----------------------|-------------------|-----------|----------------------|------|--------------|--------------------------|
| 3. Choose to walk | 1 | 2 | 3 | 4 | 5 | 6 |
| 4. Choose to bicycle | 1 | 2 | 3 | 4 | 5 | 6 |

Please indicate how often you do each of the following in the past three months

- | | Daily | Weekly | Monthly | Not at all |
|-------------------------------|-------|--------|---------|------------|
| 5. Walk for exercise | 1 | 2 | 3 | 4 |
| 6. Walk for transportation | 1 | 2 | 3 | 4 |
| 7. Bicycle for exercise | 1 | 2 | 3 | 4 |
| 8. Bicycle for transportation | 1 | 2 | 3 | 4 |

The county is currently planning several projects that will make it easier for residents to bicycle and walk to destinations. Please rate how useful each of the potential projects would be for you.

- | | Not at all
Useful | Kind of
Useful | Useful | Very
useful |
|---|----------------------|-------------------|--------|----------------|
| 9. (Insert proposed local bicycle, pedestrian or ADA project here) | 1 | 2 | 3 | 4 |
| 10. (Insert proposed local bicycle, pedestrian or ADA project here) | 1 | 2 | 3 | 4 |
| 11. (Insert proposed local bicycle, pedestrian or ADA project here) | 1 | 2 | 3 | 4 |
| 12. (Insert proposed local bicycle, pedestrian or ADA project here) | 1 | 2 | 3 | 4 |
| 13. (Insert proposed local bicycle, pedestrian or ADA project here) | 1 | 2 | 3 | 4 |
-
- | | | |
|---|-----|----|
| 14. Do you have children under 16 in your household? | Yes | No |
| - If yes, do those children have a safe route to walk or bicycle to school? | Yes | No |
| - If yes, which schools do your children attend? | | |

15. Volunteers will be conducting “Walkability Assessments” of local streets to determine how accommodating they are for pedestrian, bicycle, and wheelchair traffic. In the space below please suggest any streets you feel should be assessed for walkability.

Please respond to each of the following to indicate if rising gas prices have impacted your driving.

	Yes	No
16. Rising gas prices have caused me to drive less.	1	2
17. Rising gas prices have caused me to use a carpool.	1	2
18. Rising gas prices have caused me to walk more.	1	2
19. Rising gas prices have caused me to bicycle more.	1	2

What is your gender?

- Male
 Female

What racial or ethnic group do you identify with?

(select all that apply)

- African American or Black
 Asian
 Hispanic or Latino
 American Indian or Alaska Native
 White
 Other racial or ethnic group

What is your age?

- 18 – 25 years
 26 – 39 years
 40 – 54 years
 55 – 64 years
 65 – 80 years
 Over 80 years

What is your annual household income?

- Less than \$20,000
 \$20,000 to \$29,999
 \$30,000 to \$49,999
 Over \$50,000

If you would like more information about the (insert name of local group leading the bicycle-pedestrian planning process) please complete the following.

Name:

Phone:

Email:

Would you be interested in being a part of the “Walkability Assessment” Yes No