

IMHPAC Member Questionnaire

Please include the Introduction at the top of the survey. The bullet points below each question are the list of values that should be available for each of the questions.

Introduction:

Confidential: Respondents are identified, personal information is never revealed but is included in statistical data about the Full Council.

Purpose: From time to time we receive inquiries about the demographics of the Council's membership. The purpose of this survey is to report general and descriptive information to SAMHSA and others who are interested in learning about the Council. The information provided in your response will be aggregated and reported in a statistical/percentage format. The survey is brief consisting of ____ questions and should take only ____ minutes of your time. *Please answer all of the questions.* **For the sake of accuracy, we need a 100% response from all members to all of the questions.** If you prefer not to answer a particular question, please mark that option.

List of Questions

To which gender identity do you most identify?

- Female
- Male
- Transgender Female
- Transgender Male
- Gender Variant/Non-Conforming
- Not Listed (need a text box for entry if this is selected) _____
- Prefer Not to Answer

Sexual Orientation:

- Heterosexual
- Gay/Lesbian
- Bisexual/Pansexual
- Prefer Not to Answer

What is your age?

- 17 - 30 years old
- 30 - 45 years old
- 45 – 60 years old
- 60+ years old
- Prefer not to answer

Please specify your race.

- White

- Black/African-American
- Asian
- American Indian/Alaska Native
- Native Hawaiian or Pacific Islander
- More Than One Race
- Other/Unknown
- Prefer not to say

Please specify your Hispanic origin.

- Not Hispanic
- Mexican/Mexican American
- Puerto Rican
- Cuban
- Central/South American
- Other
- Unknown

What is the highest degree or level of education you have completed?

- Some High School
- High School
- Bachelor's Degree
- Master's Degree
- Ph.D. or higher
- Trade School
- Prefer not to say

What is your Marital Status?

- Single (Never Married)
- Married
- Domestic Partnership
- Divorced
- Widowed
- Prefer not to say

What is your current employment status?

- Full Time (40 or more Hours per week)
- Part-Time (Less than 40 Hours/Week)
- Unemployed (Looking for work)
- Unemployed (Not Looking for work)
- Self Employed
- Retired
- Student

- Unable to Work
- Prefer not to say

Residence Location – What DMH Region do you reside in?

Create Link to Region Map (open in new tab/page):

<https://www.dhs.state.il.us/page.aspx?item=55223>

- Create drop-down option with values 1, 2, 3, 4 and 5

Residence Environment – What environment do you reside?

- City
- Suburb
- Town or Village
- Smaller city (based on population)
- Rural
- Prefer Not to Answer