



Sense of Community in High Foreclosure Neighborhoods

The Federal Reserve Bank of Boston



This survey should take approximately 5 to 10 minutes to complete.

All responses will be kept confidential.

Thank you for your participation.

For questions 1 and 2 please write in your response or check the appropriate box.

1. How long have you lived at your current address? _____ years _____ months

2. What are your current living arrangements? Own
 Rent
 Live with parents/family/friends
 Other _____

For this section, please consider your neighbors to be the people whose homes you can see from your front door and your block to be the houses you can see from your front door.

For questions 3 through 7 please read the following statements and indicate whether you agree or disagree by checking the appropriate box.

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
3. Very few of my neighbors know me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I have almost no influence over what my block is like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I can recognize most of the people who live on my block.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. My neighbors and I want the same things from the block.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If there is a problem on my block people who live here can get it solved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For questions 8 through 12 please read the following questions and check the box that corresponds with your answer.

8. In general, would you say that people on your block watch after each other and help out when they can, or do they pretty much go their own way?	Always go own way <input type="checkbox"/>	Mostly go own way <input type="checkbox"/>	A little of both <input type="checkbox"/>	Sometimes watch after <input type="checkbox"/>	Always watch after <input type="checkbox"/>
9. Would you say that it is very important, somewhat important or not important to you to feel a sense of community with the people on your block?	Not Important <input type="checkbox"/>	Of Little Importance <input type="checkbox"/>	Undecided <input type="checkbox"/>	Moderately Important <input type="checkbox"/>	Very Important <input type="checkbox"/>
10. Some people say they feel like they have a sense of community with the people on their block; others don't feel that way. With others on your block, would you say you feel like you have very little sense of community, or very strong sense of community, or something in between?	Very Little <input type="checkbox"/>	Little <input type="checkbox"/>	Somewhat <input type="checkbox"/>	Somewhat Strong <input type="checkbox"/>	Very Strong <input type="checkbox"/>

12. Overall, how would you rate your block as a place to walk?

Very Pleasant	Somewhat Pleasant	Not Very Pleasant	Not at all Pleasant
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. How safe from crime do you consider your block to be?

Extremely Safe	Quite Safe	Slightly Safe	Not at all Safe
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following questions regard the building at 123 Main St.

City records indicate that this building has been foreclosed on. Please read each question and check the appropriate box or write in your response.

14. Has the owner or manager of this property contacted you regarding the property or its condition?

Yes
 No

15. Have you contacted anyone about the property or its condition?

Yes
 No

If NO please Go to Question 19

16. Why did you contact someone about the property? _____

17. Who did you contact?

<input type="checkbox"/> Owner	<input type="checkbox"/> Police
<input type="checkbox"/> Occupant	<input type="checkbox"/> Neighborhood Organization
<input type="checkbox"/> Building Manager	<input type="checkbox"/> Mayor's Hotline
<input type="checkbox"/> City	<input type="checkbox"/> Other _____

18. Were you satisfied by the response?

Yes
 No

We would like to know if you participate in any neighborhood groups or activities.

19. In the past 12 months, have you participated in the following activities:

a. Attended a neighborhood or block organization meeting?

Yes
 No

If Yes, what organization? _____

b. Been part of a group that got together to try to change something in your neighborhood or community?

Yes
 No

If Yes, what group? _____

c. Been a part of another type of local group or organization? Such as a place of worship or community center.

Yes
 No

If Yes, what organization? _____

We would like to collect some basic demographic information. Please read each question and check the appropriate box or write in your response.

20. What is your gender? Male
 Female

21. What is your age? _____ Years

22. What is your relationship status?

- Single
- In a relationship
- Married
- Living with Partner
- Divorced or Separated
- Widowed

23. Do any children live with you?

- Yes
 - No
- If Yes, how many? _____

24. Which best describes your current employment situation?

- Full-time (more than 30 hours)
- Part-time/casual job
- Home maker
- Full-time student
- Retired
- Not currently employed

25. What is your race?

- White
- Black, African American
- Asian
- Other _____

26. Are you Hispanic or Latino, or Spanish origin? Yes
 No

27. What is your ethnicity? _____



In the space below, please share with us any other comments on how you feel about your neighborhood.

We appreciate your participation