

OVRDC Region 7
2024 Public Transportation Survey

1. What is your age?

- 18-25
- 26-39
- 40-59
- 60-64
- 65+

2. What is your race? (Circle all that apply)

- American Indian or Alaska Native
- Hispanic or Latino
- Asian
- Black or African American
- White
- Prefer not to answer

3. How do you identify?

- Male
- Female
- Other

4. What is the zip code for where you live?

5. What County do you reside in?

6. I consider myself. (Check all that apply)

- Low Income
- Disabled
- Senior
- Veteran
- Unhoused/Homeless
- Student
- None of the above

7. Do you use a mobility device to get around? (Wheelchair, walker, etc.)

- Yes
- No
- Prefer not to answer

8. What is your usual way of getting where you want and need to go?
(Check all that apply)

- I drive myself
- My friends or family drive me to where I need to go
- I use public transportation with set stops and schedule
- I use flexible public transportation with a set schedule/flexible route
- I use a taxi, Uber, or Lyft
- I use a service that picks me up at my location and requires me to schedule in advance
- I use social services for transportation (Veteran's Affairs, senior services)
- I walk
- I bike
- I carpool

9. In your neighborhood, do you have access to the following
(Check in the 'yes' or 'no' box)

Public Transit Yes No

Bus Stop Amenities Yes No

(benches, shelters, etc.)

Bus Stops Yes No

Bike Lanes Yes No

Access to Bike Trails Yes No

Sidewalks Yes No

Crosswalks Yes No

Ramps to enter Buildings or zero-step entry Yes No

Neighborhood watch or other programs Yes No

10. If you choose not to use alternative transportation modes, please select
your reason why. (Check all that apply)

Do not feel safe

It's not efficient/it takes too much time

It does not go where I need to go

It is not available at the dates/times when I need it

The vehicles are not wheelchair accessible

I do not know what options are available and what I am able to use

I am not eligible for transportation options in my area

It is not affordable

I have my own car and prefer to drive

I have friend(s) or family member(s) who are willing to drive me

Other_____

11. Where do you most often travel? (Check all that apply)

- Work
- School
- Dialysis
- Medical/Dental appointments
- Shopping
- Senior programs
- Social/Recreation Activities
- Counseling or treatment/recovery appointments
- Faith based activities
- Out of County Travel
- Other_____

12. If you travel out of county often, what is your common destination?

13. Is there anything else you would like us to know about your experience as a transportation user?

14. If you would like to be put in a drawing for a \$25 Visa Gift Card, please provide your contact information.

***Thank You for participating in the 2024 Region 7
Public Transportation Survey.***

This survey is intended to gather information about people’s opinions about their transportation options and their needs. The survey results will be used to help Mobility Managers understand the transportation needs of our community and will help funds to be used more effectively.

Your personal information will not be shared with anyone. Participation in this survey will not have any impact on your ability to use transportation or access Mobility Management services.

Please contact Marlana Hopkins, Transit Coordination Specialist- OVRDC at 740-947-2853, if you have any questions about the survey, need a translation version of the survey or want to provide more information about your experience with transportation.