HCNC Life Area Survey

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The HCNC Social Needs Life Area Survey is adapted from the Transition to Success Life Area Survey and Arizona Self Sufficiency Matrix. There are 25 life area domains measured on a scale of 1 to 5, where 1 is "In Crisis" and 5 is "Thriving".

Life Area	1	2	3	4	5	My Score	Priority Areas
Food	I/We don't have enough food and/or the ability to cook or store food. I/we need food.	I/We need food stamps/ government support for food.	I/We can usually get by but sometimes I/we need help.	I/We have enough food on a budget without assistance.	I/We can buy the all the food I/we want without assistance.		○
Housing	I/We are homeless or I/we are afraid of losing my home.	I/We live in temporary / unsafe and/or can't afford housing.	I/We live in stable housing but it doesn't meet my needs.	My house is safe but government or family support is needed.	My house is safe and affordable.		○
Money	I/We have no money coming in.	I/We don't have enough money.	I/We can make ends meet with additional assistance.	I/We just get by without help.	I/We make enough money and manage it well.		○
Mental Health	Sometimes I want to hurt myself or others.	I struggle with depression or other mental health issues.	Sometimes I struggle with my feelings.	I deal with my emotions and stress and do not need help.	I deal with my emotions and stress and seek help when needed.		○
Drugs / Alcohol	I think I have a problem with street drugs/ prescription medication and/or alcohol.	I think about drugs/ alcohol - I worry about withdrawal symptoms. I have health, relationship and/or money problems because of my drug/ alcohol use.	I used within the last 6 months. I worry about my use of drugs/ alcohol and/or sometimes take risks (driving drunk, using on the job).	I have used in the last 6 months but it is not a pattern and I do not take risks (driving drunk/ using on the job).	I have not abused drugs/ alcohol in the last 6 months.		○
Health Insurance / Medical Care	I/We don't have health insurance and I, or a family member, need help right away.	I /We don't have health insurance and I, or a family member, need medical care.	I have Medicaid/ Medicare.	All my family members can get medical care but costs of medicines strain our budget.	All my family members have affordable and available health insurance.		○
Safety	I/We do not feel safe in our home. I feel I and/or my children are in danger.	My safety and/or that of my children is threatened but I/we are protected.	I/We do not feel safe in or outside of our home.	I/We feel safe but believe it could change.	I/We feel safe at home and at work and in our community.		○
Transport-ation	I/We do not have a way to get to where I/we need to go.	I have trouble getting where I/we need to go. I need a license and/or insurance.	I/We can get around most of the time, have a drivers license and insurance.	I/We have transportation and can get where I/we need to go.	I have affordable, safe, transportation with insurance.		○

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Disabilities [if applicable]	I have a disability and it is affecting my housing, work and/or ability to care for myself.	Sometimes my symptoms affect my housing, work and/or ability to meet my basic needs.	I rarely have symptoms that affect my housing, work and/or my ability to meet my basic needs.	My disability is well managed with medicine and support services.	I have everything I need to manage my disability to the best degree possible.		○
Life Skills	I am unable to care for myself - food, bathing, self- care.	I can meet some but not all of my needs without help.	I can meet most but not all of my needs without help.	I am able to meet most of my needs without help.	I am able to meet needs for myself and my family.		○
Work	I do not have a job.	My job is temporary, part-time and/or does not pay enough to meet my needs and if I miss a day of work I don't get paid.	I work fulltime but there is not enough pay and/or limited benefits. If I miss aday of work I don't get paid.	I work full time with enough money to pay my bills but I am afraid I will lose my job.	I have good pay, benefits and a secure job / job skill.		○
Legal	I have unpaid tickets and/or a warrant and/or unpaid child support.	I have legal problems and/or am not following the rules of probation/ parole and/or have not met the requirements of parole or probation.	I am meeting with parole / probation and/or child support has not been paid.	I have successfully completed probation/ parole with no new issues.	I do not have any legal matters.		○
Child Care	I need someone to watch my kids but no one is available.	I have child care but it is not reliable/ the child care I have is not meeting my child's needs.	I use affordable government supplied child care but it does not meet my needs.	I have reliable child care without government support.	I have the best child care for me and my child/ children.		○
Adult Education	I have trouble reading and/or do not have a High School diploma or GED and/or have limited English.	I am attending a reading/ GED program and have ability to speak English.	I have a High School diploma or GED and can speak English.	I need more school and/or training for reading and/or job skills.	I have finished training/ education and I can read and write.		○
Parenting	I worry about being a good parent and/or need more patience.	I try to be a good parent but struggle/ don't know what to do (discipline isn't working).	I do ok as a parent but want to do better.	I am good parent but have room for improvement.	I feel very good about how I parent.		○

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Children's Education	I have 1 or more children not enrolled in school or Head Start.	I have children enrolled in school but they don't go.	I have children in school but they get there late or not at all.	I have children in school and they get there most of the time.	All my children are going to school regularly.		○
Community Involvement	I am alone and do not spend time with others.	I am alone and spend little time with others. I have little or no desire to spend more time with others.	I want to get involved but don't know how.	I do get involved but childcare and transportation make it hard.	I am active in school, work, church and/or the neighborhood.		○
Support from Family and Friends	I/We don't have enough help from family and friends.	My family and friends want to help but can't help me and/or my family does not get along.	I have some help from family and friends. My family/friends try to get along.	I have lots of help from family and friends and we take care of each other.	I have lots of help when I need it, I get along with family and friends and I meet new people.		○
Budgeting	I have money problems with bankruptcies, foreclosures and/or evictions.	I am in trouble because I can't pay bills, owe money and/or money is being taken out of pay checks.	I am aware of my credit score/and need to improve my score.	I do okay, I have a budget and a bank account but no savings plan.	I manage my budget, save money and have a good credit score.		○
Racism / Bigotry	I am afraid. I have been called names, bullied or hurt because of color, religion, disability, gender, sexual orientation or appearance.	I am nervous and fear that something will happen to me or someone I know because of color, religion, disability, gender, sexual orientation or appearance.	I worry about deaths and crimes against people like me.	I feel capable of and considered for advancement in work and lifestyle even though some people may hold prejudices against me.	I feel capable of living my best life.		○
Internet Access/ Phone	I/We have a need for internet access and do not have it.	I/We need internet and rely on neighbors, libraries, or food places for use of their internet.	I/We need internet and we pay for service through use of a prepaid card.	I/We need internet and pay for services that are not reliable - I/we don't know if it will be working when I/we need it.	I/We need internet and it is paid for by us or others and it is reliable enough that that I/we can count on it or I/we do not have a need for internet connection.		○

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Dental Care	I/We don't have dental care of insurance and I, or a family member, need help right away.	I/We don't have dental insurance and I, or a family member need dental care soon.	I have Medicaid / Medicare but it is difficult to find a dentist.	All my family members can get dental care but the costs strain our budget.	All my family members have affordable and available dental care and insurance.		○
IDs / Brith Certificate	I/We do not have or have lost all birth certificates, social security cards, residency, and/or other ids.	I/We are missing most documents that we need for work, school, or other things.	I/We have most of the documents we need but need some help getting others	I /We have all the documents we need but need to be updated.	I have all my documents in order and everything is in good standing.		○
Clothing, Hygiene, and Household	I/We do not have or have any clothing, hygiene, or household items and we need help right away.	I/We are missing most of the clothing, hygiene items, and household goods that we need for life activities.	I/We have basic clothing, hygiene, and household items but we need quite a bit more and can't afford to purchase them on our own.	I /We have almost all the clothing, hygiene, and household goods to meet our needs, but there are a few things we can't afford.	I /We have enough clothing, hygiene, and household items we need and can afford to buy what we need.		○
Spirituality	I do not feel any connection or sense of belonging with my own spirituality or any faith community.	I have little interest in spiritual life and no desire to grow that area.	I would like to grow my spiritual life but don't know how and have barriers that make it hard.	I have some spiritual life and have some ideas to grow in this area at my own pace.	I have a strong sense of spirituality and feel fulfilled with my current practices.		○