

Story County Wellness Recreation Center

Unscientific Online Questionnaire Results *(not statistically valid)*

October 12, 2016

988 total responses

Online questionnaire administered September 19 to October 2, 2016



Questionnaire

988 total responses

Story County Wellness and Recreation Center Planning



Story County Wellness and Recreation Center Questionnaire

NOTE: We are accepting questionnaire responses through October 2, 2016. Thank you.

Story County Medical Center and City of Nevada are evaluating the potential of developing a wellness and recreation center to serve Eastern Story County. As part of this process we are interested in your opinion on the future of health, wellness and recreation opportunities in your area. We would like you to answer the following questions, thinking about what would be best for you, members of your household, friends and community.

Thank you for taking time to complete this questionnaire.

1. What are the TOP TWO reasons you and members of your household would use a Wellness and Recreation Center if it were located within reasonable distance of your residence?

PLEASE CHECK NO MORE THAN TWO

- Recreation/fun
- Walking or jogging
- Weight or other equipment training
- Leisure swimming
- Competitive swimming
- Therapy swimming
- Lessons in health, nutrition, wellness
- Practice for sporting events - basketball, pitching, etc.
- Group classes such as yoga, Pilates, Zumba, etc.
- To stay active in winter or during bad weather
- Meeting friends/family
- Special events or programs
- Other, please describe: _____
- I have no interest in a new wellness and recreation center
<<< If selected, skip to Q10 >>>

2. What spaces or amenities are of greatest interest to your household to include in a new Wellness and Recreation Center?

PLEASE CHECK NO MORE THAN THREE

- Gym
- Jogging/walking track
- Pickleball/courts
- Exercise equipment (e.g. treadmills, stationary bikes, etc.)
- Weight machines/weight lifting equipment
- Exercise/Group Classes Room (for yoga, Pilates, Zumba, etc.)
- Indoor turf
- Leisure swim pool
- Competitive swim pool
- Therapy swim pool
- Training kitchen for nutrition/culinary classes
- Flexible spaces for any number of activities
- Community room
- Social/gathering spaces
- Sauna, massage table or other specialty care facilities
- Facilities for primary use by patients of the Medical Center
- Outdoor recreation equipment rentals (e.g. tents, canoes, kayaks, etc.)
- Other, please describe: _____

3. What features are of greatest interest to your household when considering a new Wellness and Recreation Center?

PLEASE CHECK NO MORE THAN THREE

- Close proximity to parks, sports fields, trails and/or playgrounds
- Close proximity to medical facilities

- Close proximity to schools or community facilities
- Special events for the public or other events (e.g. carnivals, family games/raffle night, birthday parties, reunions)
- Technology to support meetings or programs (multi-media, wifi, etc.)
- Staff for education, practice and/or in facility/community
- Staff for sports/wellness education and programs
- Drop-in facilities for facility users
- Other, please describe: _____

4. What would your household consider the most important programs to offer at the new Wellness and Recreation Center?

PLEASE CHECK NO MORE THAN THREE

- Basketball or other sports team practice
- Yoga and nutrition classes
- Rehabilitative programs
- Programs focused on indoors-in-winter fun
- Physical therapy
- Weight loss/mgmt., fitness classes
- Exercise classes (aerobic, stretch, etc.)
- Swimming lessons
- Swimming team
- Swimming therapy
- Group fitness or programs like yoga, Pilates, meditation, etc.
- Journaling, meditation or other mental wellness classes
- Special sports camps (basketball, baseball, etc.)
- Open gym time
- Massage, sauna, etc.
- Other, please describe: _____

5. Which audiences is it MOST IMPORTANT that this facility serve? PLEASE CHECK NO MORE THAN TWO.

- Youth
- Young families
- Seniors
- Persons with disabilities
- All generations and abilities at once
- Young adults
- Persons with limited resources to access these services any other way
- Medical Center patients
- Other, please describe: _____

6. Where would your household prefer to see a new Wellness and Recreation Center located?



- Location Option A: SCORE Plaza/1014/1015 Cornelia
- Location Option B: Nevada Economic Development Council Property
- Location Option C: Story County Medical Center Campus
- Equally support all locations
- Other, please describe: _____

Please briefly describe why this is your preferred site: _____

7. Under what circumstances would you vote against a Wellness and Recreation Center in Story County? Please

Please briefly describe: _____

8. Are there other comments or considerations you would like to share related to a new Wellness and Recreation Center?

Please briefly describe: _____

Finally, some quick questions about you and your household:

9. What is your zip code?

Zip Code: _____

10. Which category best describes your age:

- 15-19 years
- 20-24
- 25-29
- 30-39
- 40-49
- 50-59
- 60+

11. Gender:

- Female
- Male
- Not sure

12. Do you have children under the age of 18 living with you full- or part-time?

- If YES, how many? _____
- NO
- NO, but grandchildren (or other children) are frequently in my care

13. Are you currently a member of any type of wellness, fitness or recreation facility?

- YES
- NO

IF YES, which one(s)? _____

What is your ZIP code?

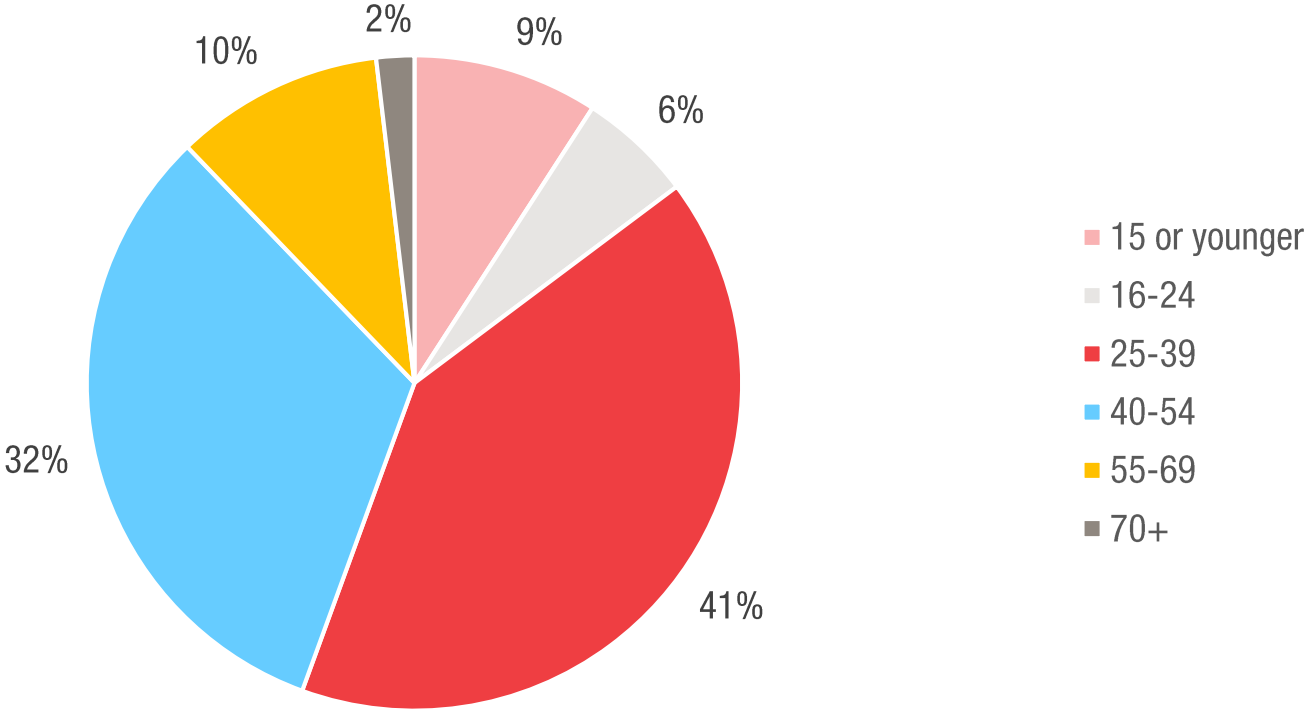
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Which category best describes your age?

Q10

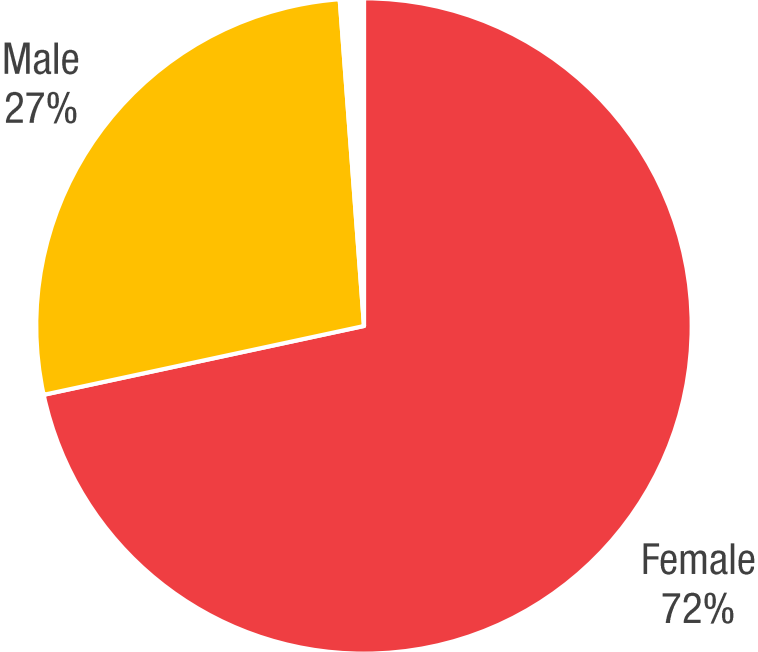
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What is your gender?

Q11

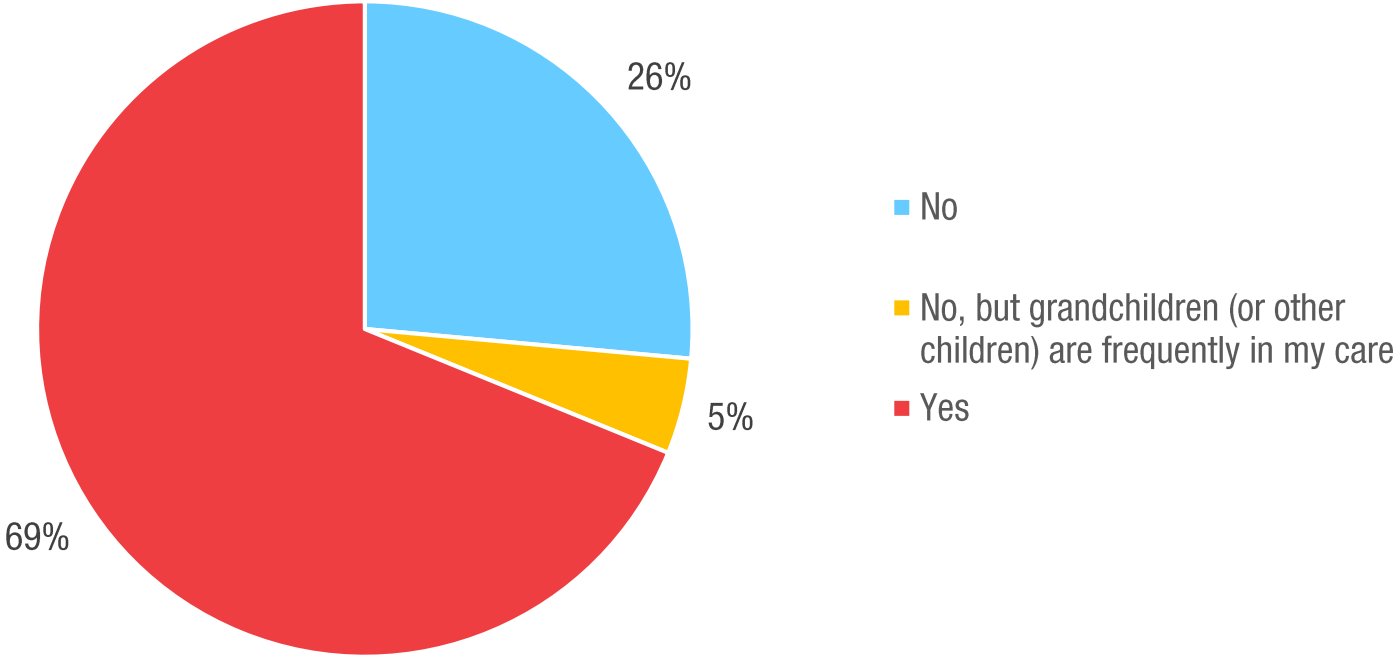
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Do you have children under the age of 18 living with you full- or part-time?

Q12

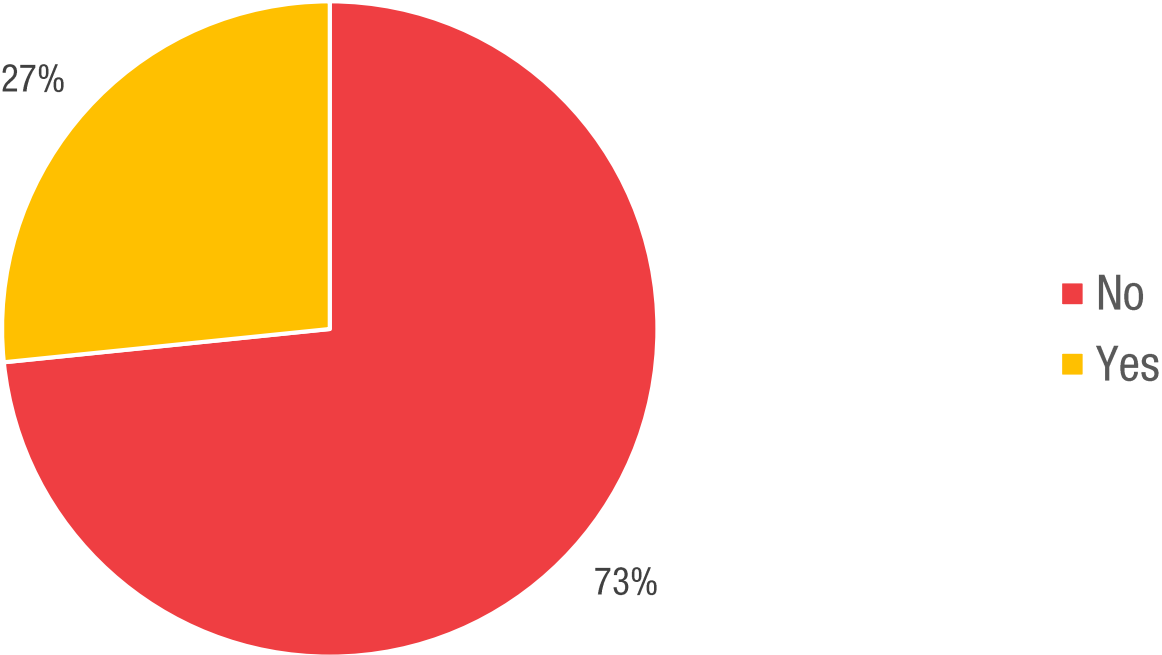
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Are you currently a member of any type of wellness, fitness or recreation facility?

Q13

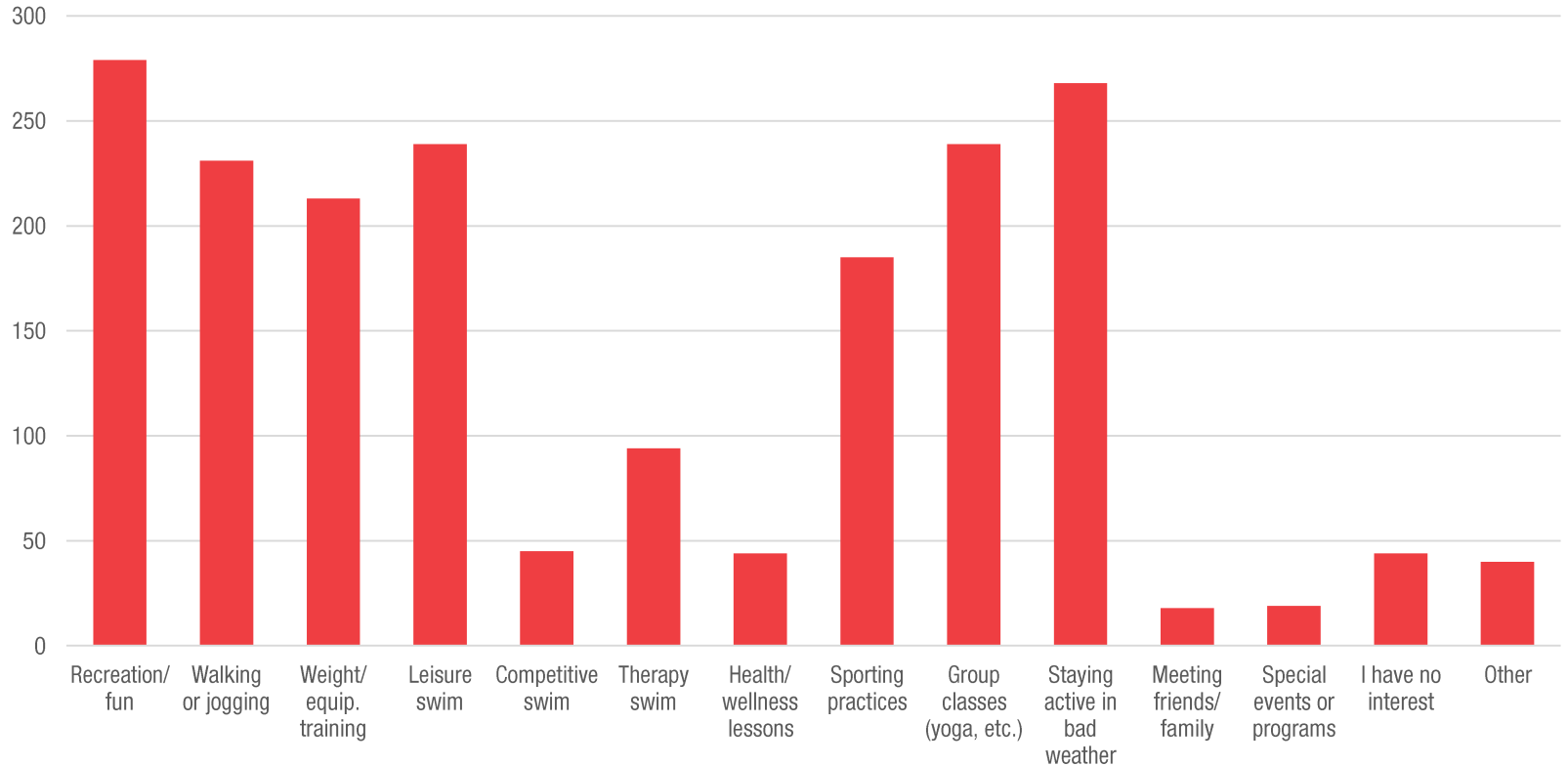
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What are the TOP TWO reasons you and members of your household would use a Wellness and Recreation Center if it were located within reasonable distance of your residence? Q1

Maximum:
2 selections

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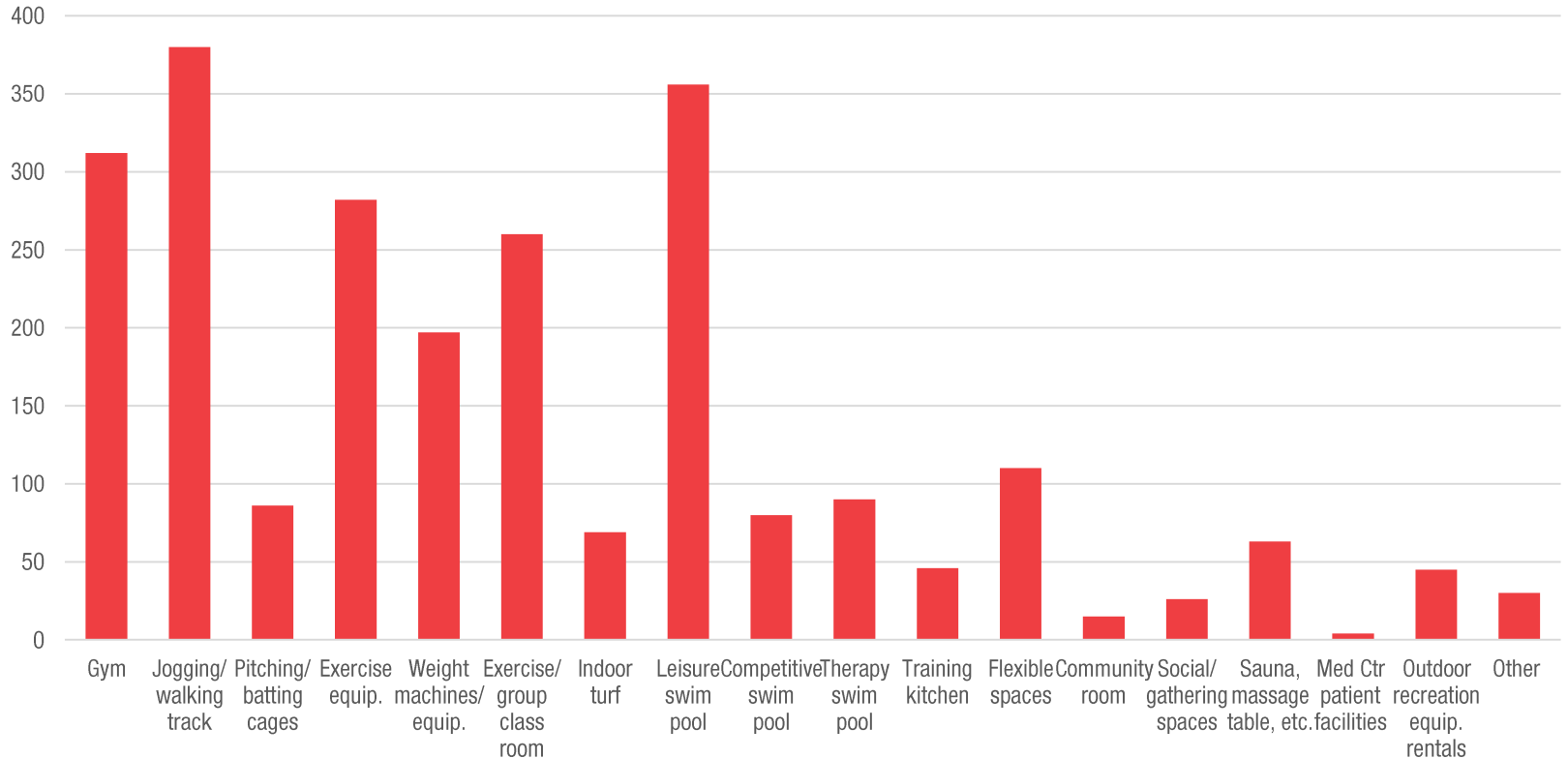


What spaces or amenities are of greatest interest to your household to include in a new Wellness and Recreation Center?

Q2

Maximum:
3 selections

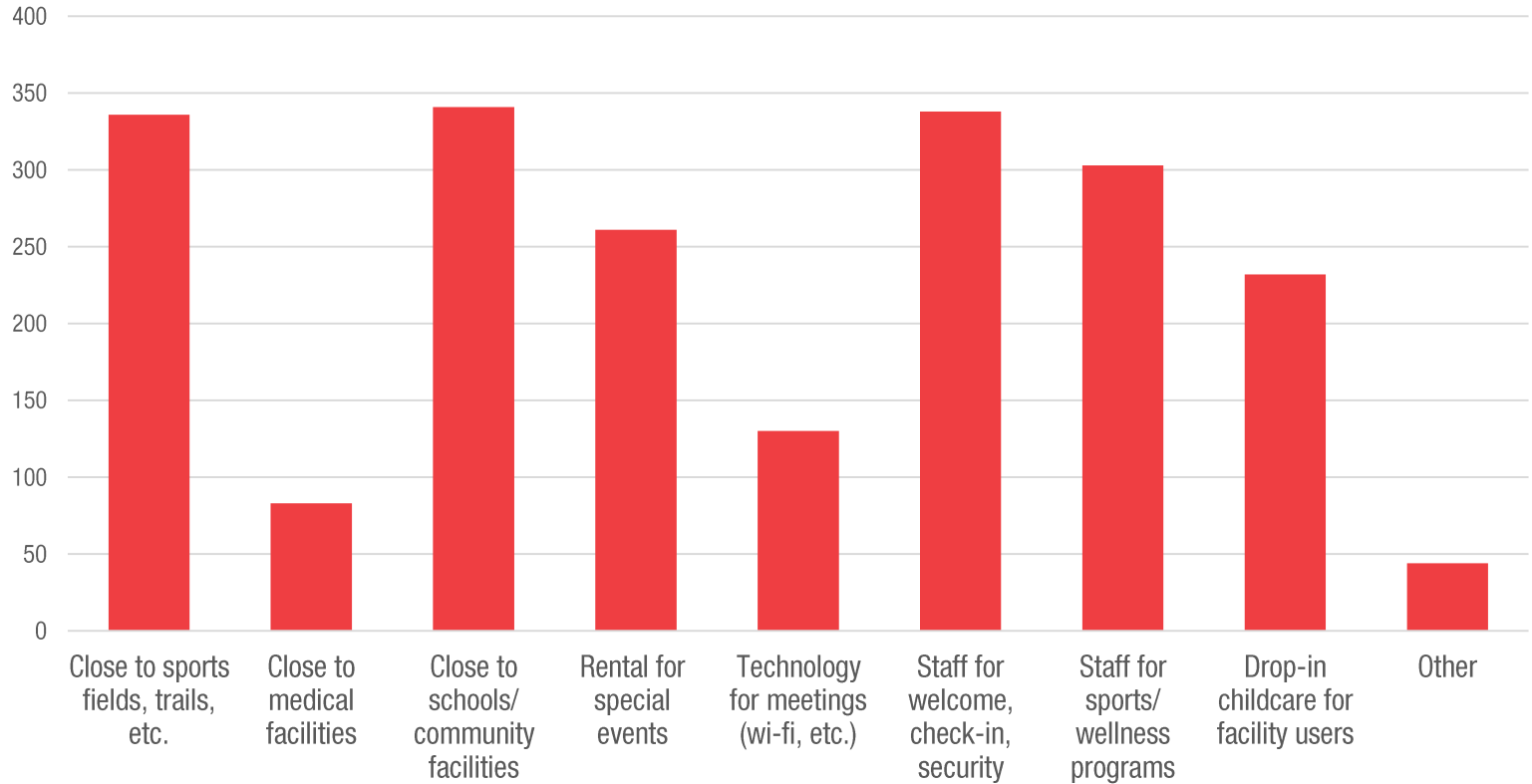
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What features are of greatest interest to your household when considering a new Wellness and Recreation Center?

Maximum:
3 selections

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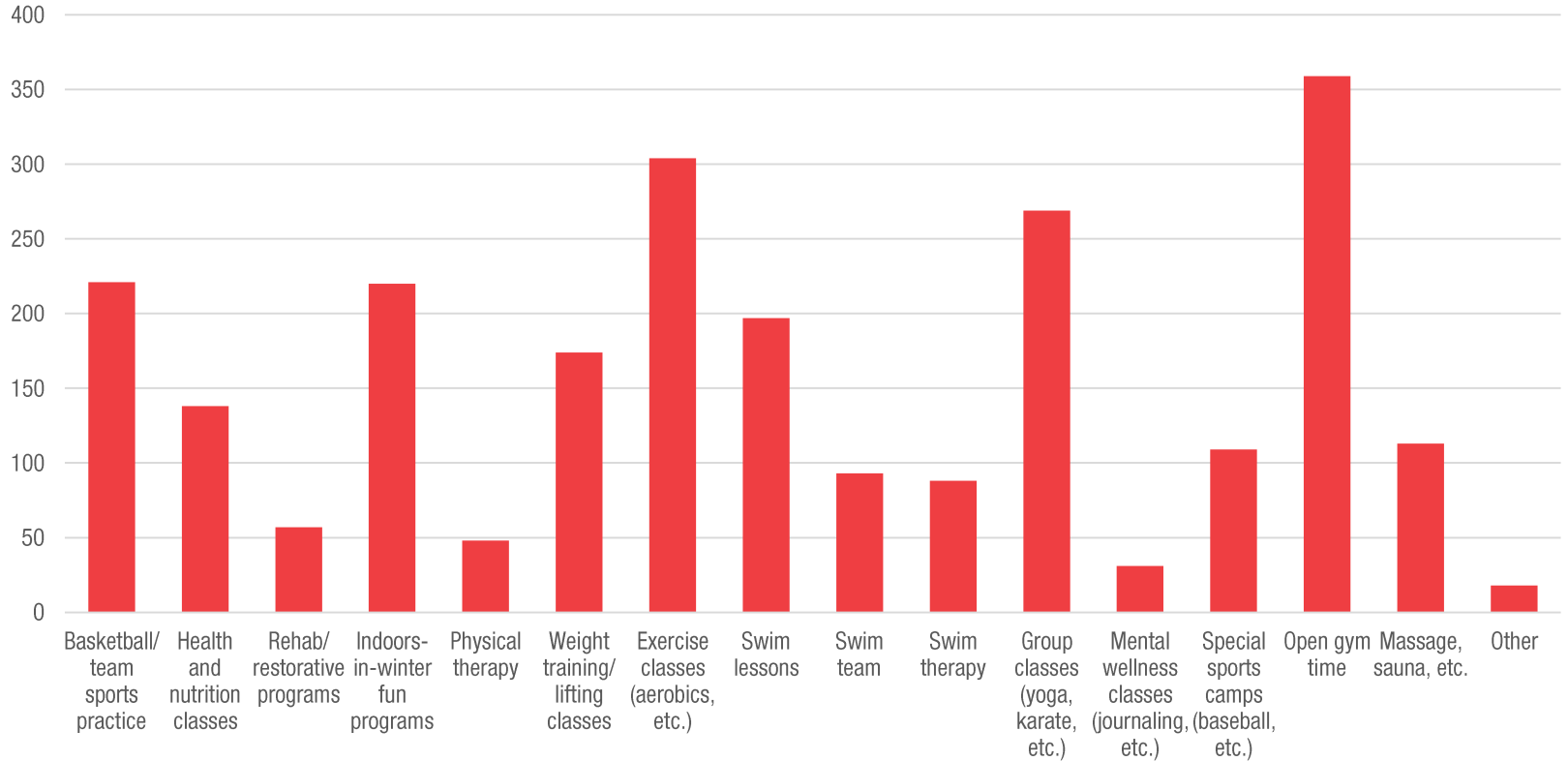


What would your household consider the most important programs to offer at the new Wellness and Recreation Center?

Q4

Maximum:
3 selections

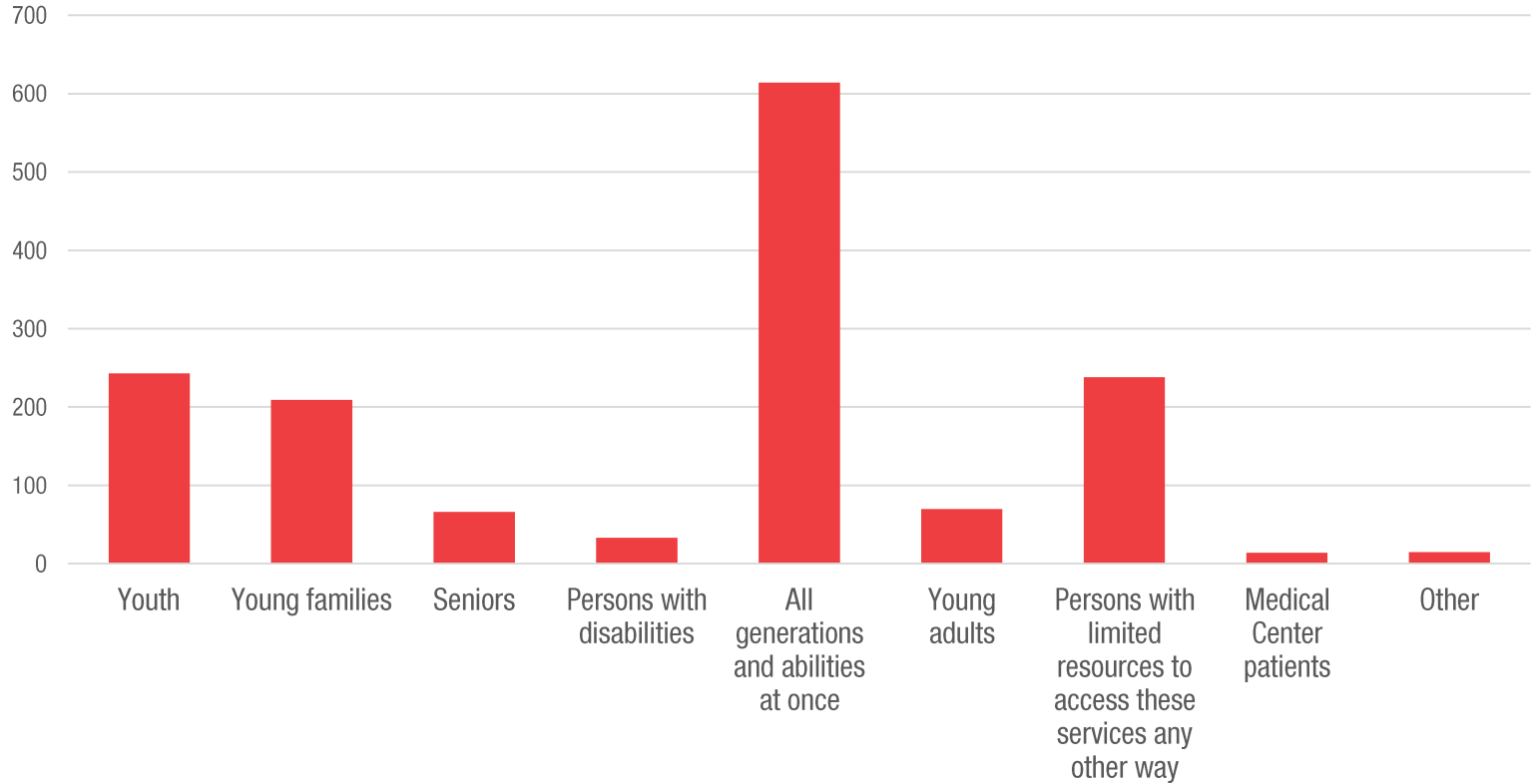
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Which audiences is it MOST IMPORTANT that this facility serve?

Maximum:
2 selections

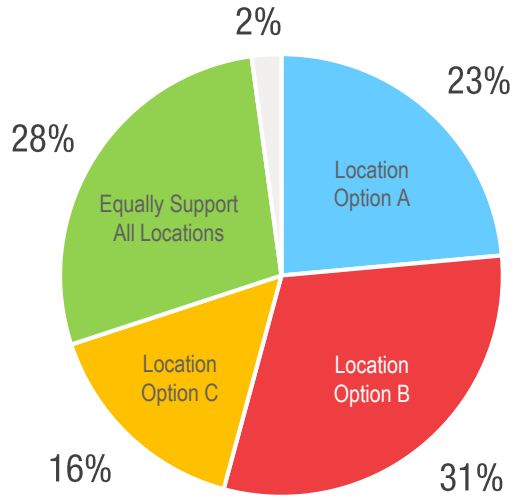
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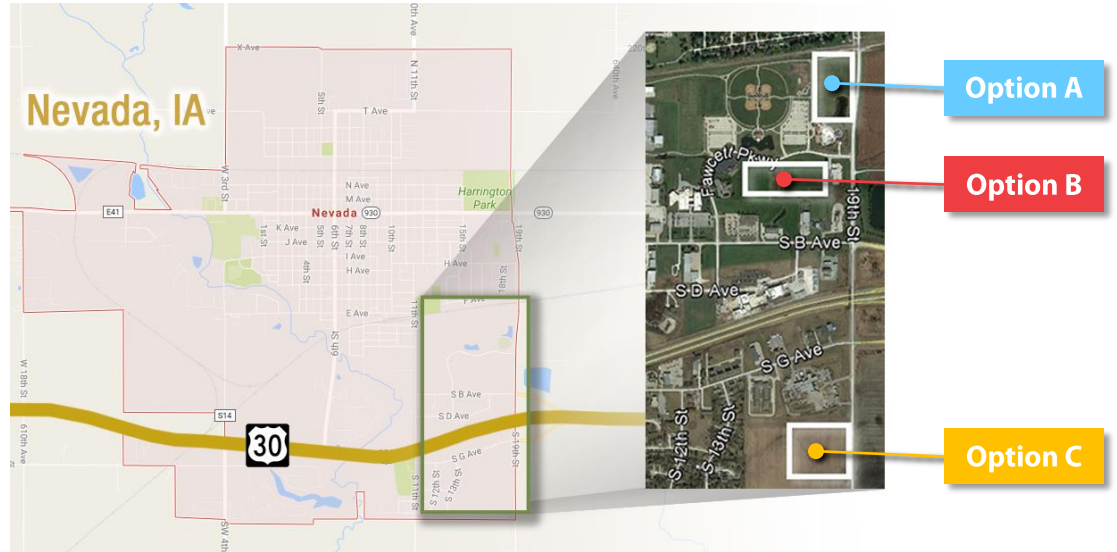
This map shows three site location options.

Where would your household prefer to see a new Wellness and Recreation Center located? Q6

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- Location Option A: SCORE Recreation Athletic Complex
- Location Option B: Nevada Economic Development Council Property
- Location Option C: Story County Medical Center Campus
- Equally support all locations
- Other

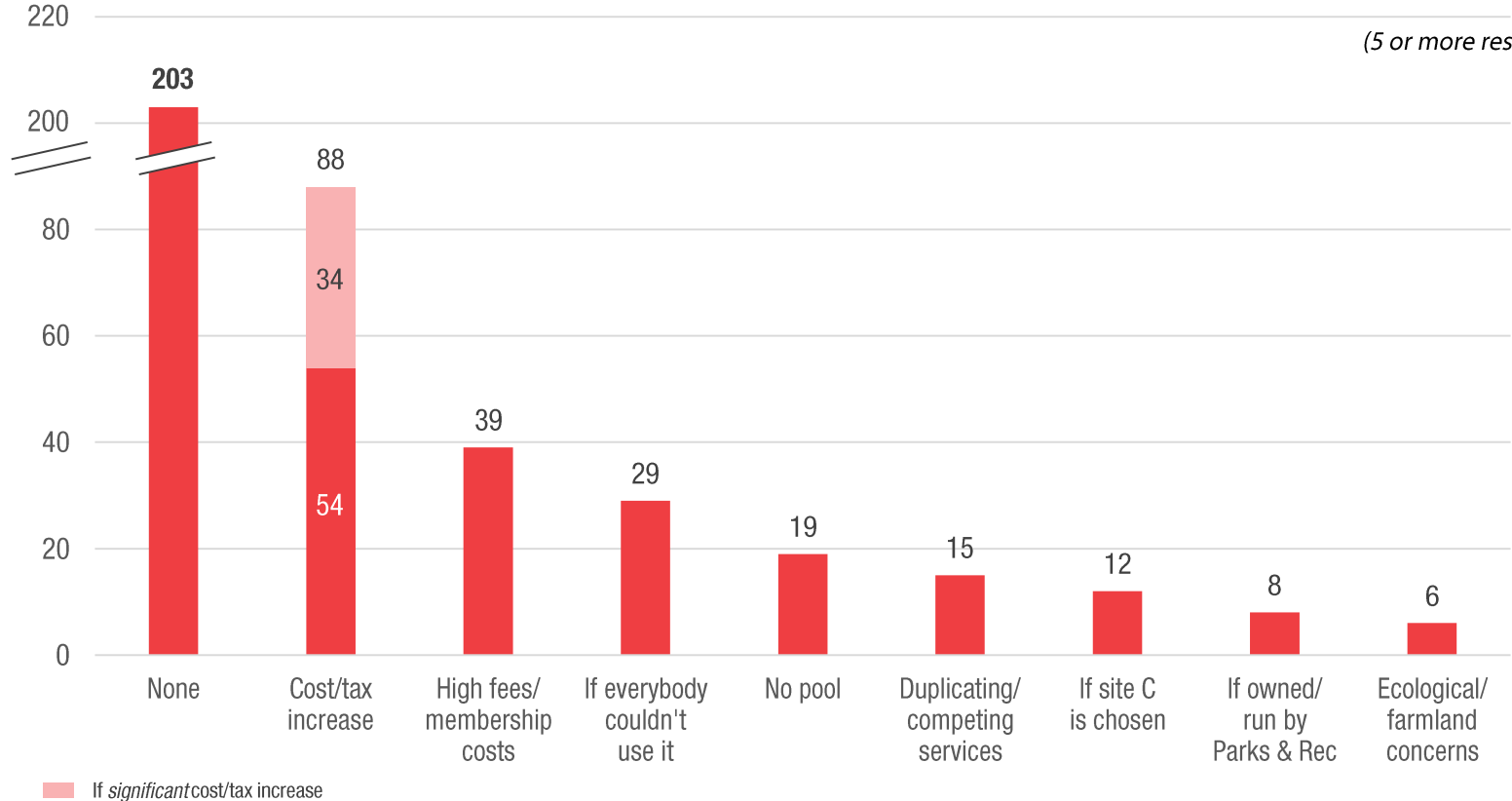


Under what circumstances would you vote *against* a Wellness and Recreation Center in Story County?

Open-ended question

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(5 or more responses)



Are there other comments or considerations you would like to share related to a new Wellness and Recreation Center?

Q8

*Open-ended
question*

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Create. Meaning. Together.

