



Statewide Independent Living Council of Illinois

Request for Input
Housing, Employment, Transportation, and other Barriers
for Individuals with Disabilities

SURVEY

We are asking people with disabilities to complete a survey to tell us what we can do to improve services across Illinois.

Please answer the following questions about housing, employment, transportation, and other things that concern you. Your answers to the following questions will help us to write the best plan that we can to help make things better for all people with disabilities.

Housing: Discussion Questions

1. What keeps you from living where you would like to live? Is it the cost or location of finding a house/apartment? Is it finding a house/apartment that is accessible to your needs? Is it another reason? If so, what?

2. Look at the reasons you listed and tell us how we can get rid of those things that make housing a problem.

Employment: Discussion Questions

1. If you want to work but don't, what keeps you from finding a job and keeping that job? Is it that you don't know where to look? Is it that you don't know how to talk to an employer? Is it that you don't have the skills you need? Is transportation a problem? Are you afraid of losing your SSI? Do you need an accommodation for your disability but are afraid to ask? Is there another reason? If so, what?

2. Look at the reasons you have listed and tell us how we can get rid of those things that make employment a problem.

Transportation: Discussion Questions

1. Do you rely on public transportation such as a bus or door to door service? Do you have someone in your family who takes you places? What are the biggest problems you have with transportation? Is it the cost? The availability? Knowing how to use public transportation? The service not available during the hours that you need? Do you feel unsafe using it or is it something else?

2. Look at the reasons you listed and tell us what we need to do to get rid of the things that make transportation a problem.

Other Areas of Concern

What other things can you think of that make it hard for you to live in your community and be independent?

Person completing this survey:

I am a person with a disability.

(Optional) Please specify disability_____

I am a service provider.

I am an advocate.

I am a concerned citizen.

RETURN THIS SURVEY TO:

E-Mail: silc@silcofillinois.org

Fax: **217-744-7744**

Mail: **Statewide Independent Living Council of Illinois**
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