

In order to better serve the community, the Youngstown Office on Minority is asking you to complete this brief questionnaire. Our partner, the Youngstown State University's Center for Human Services Development, will analyze the data from this survey. Thank you.

1.Always	2.Very Often	3.Fairly Often	4.Sometimes	5.Almost Never
Has the Young check the appr		inority Health made a	an impact on you	r agency? Please
1.Very Much	2. Much	3. A Fair Amount	4. A Little	5. Not at All
	gstown Office on M Please check the a	inority Health made a appropriate box. 3. A Fair Amount	an impact on you	r agency's target 5. Not at All
1. Very Much	Z. Wideli	J. A Pau Amount	4. A Ditte	J. Hotal I in
Do you unders (Please circle)		wn Office on Minorit		
		wn Office on Minorit	y Health's role in	
(Please circle) Below is the m	Yes ission statement of	2. No	3. Uncerta	ain
(Please circle) Below is the m	1. Yes	2. No	3. Uncerta	ain Health. Is the offic
(Please circle) Below is the m meeting its mi	Yes nission statement of ssion? (Please circ.) 1. Yes	2. No the Youngstown Offi le)	3. Uncertaince on Minority I 3. Uncertain	ain Health. Is the offic
(Please circle) Below is the m meeting its mi	Yes nission statement of ssion? (Please circ.) 1. Yes	2. No T the Youngstown Offi le) 2. No	3. Uncertaince on Minority I 3. Uncertain	ain Health. Is the offic

Youngstown Office on Minority Health Mission Statement:

Through collaboration and partnerships with local health care stakeholders and community groups, YOMH promotes awareness, education, advocacy, and support to lead the effort to reduce health care disparities.