Perceptions of Quality of Life in
Lancaster County, Pennsylvania
March 2010

Prepared by:
Adam B. Lawrence, Ph.D.
Research Fellow
Kerrie R. H. Farkas, Ph.D.
Director
PURPOSE
The purpose of this survey was to measure the perceptions of quality of life expressed by residents of Lancaster County, Pennsylvania. This research provided an opportunity to better understand the degree to which Lancaster County residents are satisfied with their lives, and more specifically, their level of satisfaction in a number of important domains of living—work, neighborhood, community, health, and education. The survey of Lancaster residents’ quality of life was based on a questionnaire consisting of several components: 1) questions asking respondents about their overall quality of life, whether their quality of life had recently improved or gotten worse, and if so, why; 2) questions about respondents’ overall health status, how difficult it was to obtain medical care, and whether respondents were covered by health insurance; 3) questions that asked respondents to rate the quality, safety, and (for colleges and universities) accessibility of public schools in their area; 4) questions that asked respondents to rate their satisfaction with services they receive (e.g., trash collection, street maintenance, etc.); 5) questions that asked respondents to rate the severity of a number of problems in the areas where they live (e.g., garbage and litter on the streets, noisy neighbors, traffic congestion, etc.); and 6) questions designed to gather information about respondents’ demographic characteristics.

METHODOLOGY
The results of the 2010 survey, “Quality of Life in Lancaster County, Pennsylvania,” are based on computer-assisted telephone interviews with 405 adult residents of Lancaster County, conducted from February 22 to March 17, 2010. The interviews were completed in the Millersville University Polling & Research Office under the supervision of Dr. Kerrie Farkas, Director, and Dr. Adam Lawrence, Research Fellow. The overall response rate for this survey was 25%. The sample consisted of telephone numbers generated using Random Digit Dialing (RDD), and all respondents were randomly selected within each household. For the results of this survey, the sample of 405 residents of Lancaster County has a maximum margin of error of ± 4.87 percent at the 95% confidence interval. In addition to sampling error, the four primary sources of non-sampling measurement error include the following:

1 The response rate for this survey was calculated using Response Rate 2 (RR2) as defined by the American Association for Public Opinion Research (A.A.P.O.R.).
interviewer effects (e.g., an interviewer failing to read a question precisely as written); questionnaire
design (e.g., question wording, question length, question order); the respondent (e.g., some
respondents offer what they perceive to be socially desirable answers to particular kinds of
questions); and method of data collection (different methods of data collection—for example, face-to-
face, by telephone, or by mail—may yield different responses to the same questions).

EXECUTIVE SUMMARY

Overall Quality of Life
- A majority of respondents reported a good, or extremely good, quality of life (93%).
- 36% of respondents said their quality of life had changed significantly over the past year: 18% for
  the better and 18% for the worse.
- Respondents offered a variety of reasons to explain the improvement or decline in quality of life,
  including changes in the following: the economy, family financial situations, health, personal
  reasons, and (for those whose quality of life declined) problems with government and problems
  experienced in one’s neighborhood.

Community
- Most respondents felt that they had a strong or very strong sense of community (85%).
- Healthy majorities of respondents said they felt safe in their homes during the day (81%) and at
  night (71%), and most said they were comfortable out in their neighborhood at night (65%).
- While some respondents agreed that certain problems exist in their communities (e.g. vandalism,
  noisy cars, theft from inside cars), most thought these were minor problems rather than major
  ones.

Health
- Large proportions of respondents felt that their health was excellent or good (86%).
- Most respondents believed their health was better or the same as others of the same age (90%).
- Most thought it was not difficult to get the medical care they needed (87%).
- A very large majority said they were covered by a health insurance plan of some kind (92%).

Services
- Large majorities of respondents expressed favorable evaluations of the services they receive in
  their local communities (e.g., trash collection, street maintenance, fire, etc.).
- Some services, however, were rated less favorably than others. Evaluations of snow removal,
  street maintenance, and senior services stood out as the least favorably rated; trash collection,
  recycling, and fire were the most favorably rated.
Education
- Ratings of public elementary, middle, and high schools were much more positive than negative, though elementary schools were rated more positively than middle and high schools.
- Only about one third of respondents (34%) thought the public schools in their area were safe; 46% thought public schools were only somewhat safe.
- While 43% thought public colleges and universities were accessible (in terms of cost and location), more respondents believed they were only somewhat accessible (53%).

The Correlates of Quality of Life
- Perceptions of quality of life were statistically significantly correlated with a number of respondents’ social and demographic characteristics.
- White respondents with high levels of income, college degrees, who worked full time, and owned their own homes were far more likely to report an extremely good quality of life than respondents who did not share these characteristics.

QUALITY OF LIFE
The primary focus of this survey was the perceptions of overall quality of life expressed by residents of Lancaster County. The data summarized in Chart 1 reveal the strong, positive evaluations of quality of life offered by our respondents. Approximately 93% of the Lancaster County residents surveyed reported that their overall quality of life was either good or extremely good. Slightly more than 6% reported that their quality of life was fair, poor, or extremely poor.
While respondents overwhelmingly indicated that their quality of life was good or extremely good, Chart 2 shows that more than a third (36%) reported that their quality of life had changed significantly over the past year. The percentage of respondents who reported that their quality of life had gotten better (17.6%) was roughly equal to the percentage who indicated that it had gotten worse (18.1%). It should be pointed out that the meaning of the question may have been perceived differently by different respondents. When answering this question, some respondents might have had their own physical health in mind, others might have focused on their perceptions of the quality of neighborhood service that they receive, and still others might have based their answers on their evaluations on the public schools in the area where they lived. As such, it is not clear, at least from this question, on what specific components of quality of life these ratings are based.

As Graph 1 on the following page illustrates, the reasons cited most frequently by respondents for the improvement in their quality of life were their personal/family financial situation (23%), their overall health status (22%), and their job situation (20%). Respondents whose financial situation had improved pointed out that they made good financial decisions, were financially secure, were
able to pay their bills, their children had recently graduated from college, they were remodeling their home, had just sold their home, or had recently moved to a better area. Respondents who cited health as the primary reason for the improvement in their quality of life reported that they were experiencing progress in dealing with medical problems, they recently stopped chemotherapy
treatment, they began exercising again, they were losing weight, and that they were taking vitamins and supplements to get in better shape. Respondents who cited their job situation indicated that they just changed jobs, were receiving more hours, earned a salary increase, enjoyed job security, or were recently promoted. Finally, a considerable percentage of respondents cited family-related reasons (20%)—such as births, weddings, and graduations—for why their quality of life had gotten better, and a very small proportion (2%) indicated that their quality of life improved over the past year because of the economy.

As Graph 2 illustrates, the proportions of respondents who cited financial situation, job situation, and health as reasons why their quality of life had improved are remarkably similar to the proportions of respondents who cited the same reasons for why their quality of life had gotten worse. Respondents who cited their job situation (20%) indicated that they were laid off, unemployed, or recently had to change careers. Respondents who reported their personal/family financial situation (17%) as the primary reason pointed out that the costs of living keep going up, money is tight, everything is more expensive, they live on a fixed income, and they cannot afford insurance. Those who said that their health was the most important reason for the decline in their quality of life (24%) reported problems such as the following: chronic pain, advancing age, asthma, a broken hip, the need to take an increasing number of pain pills, a debilitating stroke, recent back surgery, a broken leg, and fatigue. Unlike the group of respondents who reported an improvement in their quality of life, the economy was cited by a significant percentage of respondents (12%) for why their quality of life had gotten worse. Two additional reasons were offered by respondents to explain why their overall quality of life had declined. Among respondents who said their quality of life had declined, and offered a reason why, 13% indicated that government was at least partially to blame. These respondents made reference to poor government services at the local level, increased taxes, larger budget deficits, an increasing national debt, and corrupt politicians. Finally, 2% of respondents reported that problems in their neighborhood—violence, crime, drugs, lack of safety—contributed to a deterioration in their overall quality of life. While government and neighborhoods were cited as reasons for a decrease in
overall quality of life, these items were not mentioned by any respondents as reasons why their quality of life had gotten better.

THE COMPONENTS OF QUALITY OF LIFE

In addition to asking respondents directly about their overall quality of life, respondents were about several different dimensions of quality of life. Specifically, they were asked, in a number of different ways, to evaluate the community in which they live; they were asked to reflect on their health and their access to health care; to evaluate several services they receive in the areas where they live; and to rate the quality and accessibility of public schools in their area.

Community

In an effort to get respondents to reflect on the communities in which they live, respondents were asked to rate their overall feeling of a sense of community, the extent to which they feel safe in their neighborhoods, and to rate the severity of a number of problems that they sometimes encounter in the areas where they live. As Chart 3 shows, the sense of community reported by respondents was generally strong: more than a quarter indicated they felt a very strong sense of community, and a substantial proportion (57%) said their sense of community was somewhat strong. Only 14% indicated that their sense of community was not strong.

Chart 3. How would you rate your feeling of a sense of community where you live?
Related to a sense of community is whether respondents feel safe at home—during the day and at night—or outside in their neighborhood at night. Not surprisingly, respondents reported feeling safest at home during the day, followed by at home at night, and least safe outside in their neighborhood at night. These differences should not be overstated; they are modest. In fact, as Chart 4 makes clear, substantial majorities of respondents said they felt safe in each of the three contexts posed to them: 81% of respondents felt very safe at home during the day, 71% felt safe at home at night, and almost two thirds said they felt safe outside in their neighborhood at night.

Another indicator of the strength of a community is how well neighbors get along with one another. In an attempt to gauge the strength of the relationships among neighbors, respondents were asked to agree or disagree with three separate statements: 1) if respondents felt the people in their neighborhood were willing to help other neighbors, 2) if respondents felt that people in their neighborhood could be trusted, and 3) if respondents felt comfortable lending a tool to neighbor.
The responses to each of these questions, summarized below in Chart 5, generally confirm that our respondents felt they had strong relationships with their neighbors. Among our respondents, 92% said they would be comfortable lending a tool to a neighbor; only 5% disagreed. Similarly high proportions of respondents agreed that people in their neighborhoods could be trusted (89%) and that people in their neighborhoods were willing to help their neighbors (91%). Only 7% and 6% disagreed with these statements, respectively.

In a final effort to understand respondents’ sense of community, respondents were asked the extent to which they thought their communities were being negatively affected by a variety of problems. In particular, respondents were asked if each of the following represented a major problem, a minor problem, or no problem at all in their neighborhood: vandalism, noisy cars, theft from cars, garbage and litter in the streets, illegal drug sales, public alcohol consumption, noisy neighbors, groups hanging around street corners, gunshots, and gangs. Chart 6 below shows that, while the percentage of respondents who reported each of these problems as major did not exceed 10%, there was substantial variation in the proportion of respondents who rated each of these concerns as minor.
Three items emerged as minor problems above and beyond the others: vandalism, noisy cars, and theft from inside cars. Approximately 35% of respondents reported vandalism as a minor problem; 3% reported this concern as major. Just as notably, 34% said that noisy cars represented a minor problem. Taken together, 42% of respondents indicated that noisy cars were either a major or a minor problem. Finally, theft from inside cars was cited by 29% of respondents as a minor problem and by 3% as a major problem. Among a varied list of 10 possible problems, our respondents selected three—vandalism, noisy cars, and theft from inside cars—far more frequently than the others as problems that plagued the communities in which they lived.

![Chart 6. Please tell me if each of the following represents a major problem, a minor problem, or no problem at all: what about...](chart)
Health

To better understand our respondents’ health status, they were asked to rate their overall health, to evaluate how they thought their own health compared to others of the same age, to report how difficult it was to get medical care, and also what proportion were covered by a health insurance plan of some kind. Based on the responses received, respondents reported being in rather good health. As Chart 7 demonstrates, an impressive 86% indicated that they were in either excellent (40%) or good (46%) overall health. On the other hand, 9% of respondents described their health as fair, and 4% characterized their health as poor.

![Chart 7. Based on your perception and experience, how would you rate your overall health?](chart.png)

Consistent with these positive self-perceptions, Chart 8 below shows that a large percentage of respondents believed that they were in better shape than others of the same age (40%). About half of respondents surveyed (49%) said their health was about the same, and only 7% reported that they felt their overall health was worse than others of their age.
Given that most respondents indicated they were in good or excellent health and most said their health was the same or better than others of the same age, it is not surprising that the large majority of respondents said it was not difficult for them to get the medical care they needed. Chart 9 shows that approximately 87% of respondents said it was not difficult to get medical care; only 9% said it was somewhat difficult, and 4% indicated it was very difficult to get medical care.
Finally, respondents were asked if they were covered by a health insurance plan of some kind. As Chart 10 illustrates, the overwhelming majority of our respondents (92%) indicated that, yes, they were covered by a health insurance plan of some kind. Just 8% indicated that they were not.

![Chart 10. Are you currently covered by a health insurance plan?](chart10.png)

**Services**

The services residents receive in their local communities represent an important component of their overall quality of life. Respondents were thus asked to rate the quality of 11 specific services in their communities: trash collection, recycling, library services, senior services, street maintenance, police, fire, EMS/Ambulance, water services, snow removal, and parks and recreation. The results revealed substantial variation in respondents’ ratings of these services. Chart 11 below shows that the three services rated most favorably by respondents were the following: trash collection (rated as excellent by 60% of respondents); recycling (rated as excellent by 52% of respondents); and fire (rated as excellent by 49% of respondents). Although 43% 

---

2 The percentages appearing in the graph above reflect the proportion of respondents who offered an evaluation of each service. To ensure clarity of presentation, those responding “don’t know” to each of the several service questions were excluded from the calculation of each percentage and are thus not reported.
indicated library services in their communities were excellent, a considerable proportion of respondents said library services where they lived were just fair (14%). The three services rated least favorably by our respondents were the following: street maintenance, snow removal, and senior services. Only 24% of respondents thought that street maintenance in their communities was excellent; a substantial 20% felt that this service was just fair and 6% said this service was poor. Along similar lines, 27% of respondents rated snow removal as excellent, but 18% rated snow removal in their communities as fair (18%) and 10% rated it as poor.
Education

The final component of quality of life examined in the survey was education. Respondents were asked to rate the quality of the public *elementary schools* and *middle and high schools* in their communities. Respondents were also asked how safe they thought students were in the public schools in their area. Finally, respondents were asked if they believed the public colleges and universities in the area where they lived were *accessible* in terms of cost and location. The respondents offered similar—and mostly positive—evaluations of public elementary and middle and high schools.

As Chart 12 confirms, respondents’ ratings of elementary schools were somewhat more favorable than their evaluations of middle and high schools. Elementary schools earned an “excellent” rating from 24% of our respondents, but just 18% of respondents gave the same rating to middle and high schools. On the other end of the spectrum, relatively few respondents gave the lowest rating—poor—to either type of public school, but a modest proportion rated schools as just fair (elementary, 10%; middle and high school, 15%). In terms of safety, Chart 13 reveals that approximately one third of
respondents felt that the public schools were safe (34%). About half of respondents, however, said that students were only somewhat safe (46%). On the other hand, only 4% believed students were unsafe in the public schools where they live. In addition to rating the quality and safety of public schools, respondents were asked to evaluate the accessibility of public colleges and universities in terms of their cost and location. Graph 3 shows that, while a considerable percentage rated colleges and universities as very accessible (45%), a larger percentage believed they were just somewhat accessible (53%). Only 2% thought that public colleges and universities were not at all accessible.
THE CORRELATES OF QUALITY OF LIFE: WHOSE QUALITY OF LIFE IS “EXTREMELY GOOD”? 

The results of this survey show that strong majorities of respondents reported a high overall quality of life, a strong sense of community, good overall physical health, and favorable evaluations of services and the public schools located in the areas where they live. However, not all respondents answered thusly. To be certain, the proportions of respondents who indicated a low overall quality of life were not large; however, the absolute numbers of individuals these respondents statistically represent are not insignificant.

The differences between the respondents who reported a good quality of life and those who didn’t were considered in relation to their level of education, their level of income, their race/ethnicity, their housing status, and their employment status.

Education

This section compares the relationship between perceptions of quality of life and education. The percentages in Chart 14 below reflect the proportion of residents who rated their quality of life as extremely good/good, fair, and extremely poor/poor with each of the four levels of education. First, 97% of respondents with a college degree or higher rated their quality of life as extremely good/good. At the other end of the educational spectrum, 90% of those with less than a high school degree reported having an extremely good/good quality of life, and 7% of these respondents said their quality of life was extremely poor/poor. Although the magnitude of this relationship is not overwhelming, it is statistically significant. In sum, the more education respondents had, the more likely they were to report that their quality of life was extremely good or good.

---

3 The results of a crosstabs analysis revealed that the relationship between quality of life and education is statistically significant at the conventional .05 level of statistical significance (Gamma: .385; \( p = .022 \)). A \( p \)-value of .022 indicates that there is a 97.8% probability that the relationship observed in the sample is representative of the overall population of Lancaster County.
This section compares the relationship between perceptions of quality of life and income, the magnitude of which is more impressive, both visually and statistically.\(^4\) According to Chart 15 below, ninety nine percent of those whose household incomes fell into the highest category ($75,000 or more) reported an extremely good/good quality of life. Conversely, just 77% of those with an income of $15,000 or below said their quality of life was extremely good/good. Additionally, the percentage indicating their quality of life was fair was largest among those with the lowest income (23%) and smallest among those with the highest household income (0%).

\(^4\) The results of a crosstabs analysis revealed the relationship between quality of life and income to be statistically significant at the conventional .05 level of statistical significance (Gamma: .546; \(p = .000\)). A \(p\)-value of .000 indicates that there is a 99.9% probability that the relationship observed in the sample is representative of the overall population of Lancaster County.
Race/Ethnicity

This section compares the relationship between perceptions of quality of life and race/ethnicity. The responses to the question about race and ethnicity resulted in the creation of several different racial and ethnic categories; however, for the purposes of conducting this analysis, all non-white respondents were included in one category (due to the small numbers of respondents from each racial/ethnic background) and all white respondents in another. The differences between the perceptions of quality life expressed by white and nonwhite respondents were substantial, and highly statistically significant.\(^5\) Chart 16 shows that white respondents were far more likely to report that

\(^5\) An independent samples t-test revealed a statistically significant difference between the mean quality of life expressed by white respondents (2.94) and the mean quality of life expressed by nonwhite respondents (2.70);
their quality of life was extremely good/good than non-whites. Specifically, 95% of whites said their quality of life was extremely good/good, but only 78% of non-white respondents indicated the same. Moreover, the percentages of non-white respondents who said their quality of life was fair (15%) or poor/extremely poor (7%) were much higher than that of whites (5% and 1%, respectively).

Housing Status
To gauge residents’ housing situation, they were asked if they rented the place in which they currently lived, if they owned it, or if they had some other kind of arrangement. Illustrated in Chart 17, 96% of those who owned the home in which they lived said their quality of life was extremely good/good, whereas only 82% of those who rented said the same. Additionally, just 3% of those who owned their

\[ t = -3.76; df: 386; p = .000 \]

This mean difference is statistically significant at the conventional .05 level of statistical significance. A \( p \)-value of .000 indicates that there is a 99.9% probability that the relationship observed in the sample is representative of the overall population of Lancaster County.
own residence said their quality of life was fair, while 13% of those who rented and had some other arrangement said their quality of life was fair. These differences in perceptions of quality of life—particularly between those who own and those who rent—are both sizable and highly statistically significant.⁶

![Chart 17. Do you rent, own a home, or have some other arrangement?](chart)

**Employment Status**

This section compares the relationship between perceptions of quality of life and employment status, specifically, the relationship between respondents' quality of life and whether they were

---

⁶ A One-Way Analysis of Variance (ANOVA) with Tukey’s Post Hoc Test revealed that the difference between mean quality of life expressed by those who own (2.95) and those who rent (2.77) is statistically significant at the conventional .05 level of statistical significance (F: 9.15; p = .000). A p-value of .000 indicates that there is a 99.9% probability that the relationship observed in the sample is representative of the overall population of Lancaster County.
working part time, full time, unemployed, or retired.\(^7\) As depicted in Chart 18, at least 95% of respondents who were working part time, full time, or were retired said that they had an extremely good or good quality of life. On the other hand, only 78% of unemployed respondents reported an extremely good quality of life, a statistically significant difference from their part time, full time, and retired counterparts.\(^8\)

\(^7\) Other categories resulted from the employment status question—such as student and homemaker—but because their numbers were too small, they were excluded from this analysis.

\(^8\) A One-Way Analysis of Variance (ANOVA) with Tukey’s Post Hoc Test revealed that the differences between the mean quality of life expressed by unemployed respondents (2.74) and the mean quality of life expressed by full time (2.95), part-time (2.97), and retired (2.94) respondents are all statistically significant at the conventional .05 level of statistical significance (F: 7.41; \(p = .000\)). A p-value of .000 indicates that there is a 99.9% probability that the relationship observed in the sample is representative of the overall population of Lancaster County.
Based on this rather examination of the correlates of quality of life, it is clear that not all respondents enjoy an “extremely good” quality of life. As it turns out, there are clear, systematic and statistically significant differences between the characteristics of respondents who reported a high overall quality of life and those who did not. As illustrated, whites with high levels of education and income who are working and own their own homes are significantly more likely to report an extremely good quality of life, whereas non-whites with little education, low household incomes, who are unemployed and rent the homes in which they live are significantly less likely to enjoy an extremely good quality of life.

CONCLUSION

The results of this survey collectively demonstrate that, in large measure, residents of Lancaster County are satisfied with their overall quality of life. It is also apparent that perceptions of quality of life are dynamic: many of our respondents reported that their quality of life had changed significantly over the past year for better (18%) and for worse (18%). The reasons cited for these changes were similar for both groups of respondents, although those who indicated their quality of life had declined stood alone in citing government and problems in their neighborhoods as explanations.

This positive pattern of results is consistent with the findings from the examination of each of the individual components of quality of life. Concerning community, residents of Lancaster County generally confirmed that they enjoyed a strong overall sense of community, generally felt safe in their homes and in their neighborhoods—more so during the day than at night—that they trusted their neighbors, and that the problems they encountered in their neighborhoods were mostly minor, as opposed to major. Respondents to this survey also reported good overall health. The overwhelming majority of respondents said their health was either better or the same as people their own age, that it was not difficult to get the medical care they needed, and that they were covered by some form of health insurance. With regard to services, most respondents rated the various services they receive in the communities where they live (trash collection, street maintenance, etc.) as either excellent or good, although there was considerable variation in the proportions of respondents who rated these services as excellent. When asked about education, most respondents gave favorable ratings to the public elementary, middle, and high schools in their area. On the other hand,
respondents were not quite as convinced that students were safe in the public schools: only about a third of respondents believed students were safe; 46% believed students were only somewhat safe, and 4% indicated students were not safe in the public schools where they lived.

Finally, although the positive pattern of results is clear and unmistakable, not all residents of Lancaster County enjoy an extremely good quality of life. In the examination of the correlates of quality of life, results indicated that perceptions of quality of life depended, to an extent, on the social and economic characteristics of the respondents.
### APPENDIX: PROFILE OF RESPONDENTS

#### SEX

<table>
<thead>
<tr>
<th></th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>38%</td>
<td>155</td>
</tr>
<tr>
<td>Female</td>
<td>62%</td>
<td>289</td>
</tr>
</tbody>
</table>

#### AGE

<table>
<thead>
<tr>
<th>Age Group</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-25 years</td>
<td>5%</td>
<td>23</td>
</tr>
<tr>
<td>26-35 years</td>
<td>6%</td>
<td>30</td>
</tr>
<tr>
<td>36-45 years</td>
<td>15%</td>
<td>68</td>
</tr>
<tr>
<td>46-60 years</td>
<td>26%</td>
<td>124</td>
</tr>
<tr>
<td>61 years and older</td>
<td>33%</td>
<td>156</td>
</tr>
<tr>
<td>Don’t know/no response</td>
<td>1%</td>
<td>3</td>
</tr>
</tbody>
</table>

#### RACE/ETHNICITY

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>89%</td>
<td>363</td>
</tr>
<tr>
<td>Black</td>
<td>2%</td>
<td>9</td>
</tr>
<tr>
<td>Latino or Hispanic</td>
<td>2%</td>
<td>7</td>
</tr>
<tr>
<td>Asian</td>
<td>1%</td>
<td>3</td>
</tr>
<tr>
<td>Other</td>
<td>2%</td>
<td>8</td>
</tr>
<tr>
<td>Don’t know/no response</td>
<td>4%</td>
<td>14</td>
</tr>
</tbody>
</table>

#### EDUCATION

<table>
<thead>
<tr>
<th>Education</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school degree</td>
<td>8%</td>
<td>32</td>
</tr>
<tr>
<td>High school degree</td>
<td>33%</td>
<td>132</td>
</tr>
<tr>
<td>Some college</td>
<td>21%</td>
<td>84</td>
</tr>
<tr>
<td>College degree or higher</td>
<td>38%</td>
<td>154</td>
</tr>
<tr>
<td>Don’t know/no response</td>
<td>&lt;1%</td>
<td>2</td>
</tr>
</tbody>
</table>
### Components

#### Quality of Life

**Housing Status**

<table>
<thead>
<tr>
<th></th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Own</td>
<td>79%</td>
<td>320</td>
</tr>
<tr>
<td>Rent</td>
<td>14%</td>
<td>56</td>
</tr>
<tr>
<td>Some other arrangement</td>
<td>6%</td>
<td>24</td>
</tr>
<tr>
<td>Don't know/no response</td>
<td>1%</td>
<td>4</td>
</tr>
</tbody>
</table>

**Income**

<table>
<thead>
<tr>
<th>Income Range</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 15K</td>
<td>5%</td>
<td>22</td>
</tr>
<tr>
<td>15-30K</td>
<td>14%</td>
<td>58</td>
</tr>
<tr>
<td>30-45K</td>
<td>14%</td>
<td>58</td>
</tr>
<tr>
<td>45-60K</td>
<td>13%</td>
<td>54</td>
</tr>
<tr>
<td>60-75K</td>
<td>13%</td>
<td>52</td>
</tr>
<tr>
<td>Over 75K</td>
<td>27%</td>
<td>107</td>
</tr>
<tr>
<td>Don't know/no response</td>
<td>13%</td>
<td>53</td>
</tr>
</tbody>
</table>

**Employment Status**

<table>
<thead>
<tr>
<th>Status</th>
<th>%</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full time</td>
<td>37%</td>
<td>174</td>
</tr>
<tr>
<td>Part time</td>
<td>13%</td>
<td>60</td>
</tr>
<tr>
<td>Retired</td>
<td>25%</td>
<td>117</td>
</tr>
<tr>
<td>Unemployed</td>
<td>10%</td>
<td>48</td>
</tr>
</tbody>
</table>
The Center for Public Scholarship

Polling & Research Office

The Polling & Research Office is a nonpartisan research and polling office dedicated to providing high quality public opinion research and analysis serving the public interest. The Polling & Research Office (PRO), housed within Millersville University’s Center for Public Scholarship, provides services for researching perceived community needs, quality of services, and attitudes of the public in order to help initiate and guide public policy decision-making.

Contact the Polling & Research Office

Millersville University
Bedford House
12 S. George Street
P.O. Box 1002
Millersville, PA 17551-0302

717-872-3049
http://www.millersville.edu/ccerp/cps/polling-research/index.php