



2023 Community Needs Survey

The County of Los Angeles (LA County) receives approximately \$32,946,000 each year in Community Development Block Grant (CDBG), HOME Investment Partnerships (HOME), and Emergency Solutions Grants (ESG) Programs funding. These programs support community development activities to build stronger and more resilient neighborhoods, principally for persons of low- to moderate-income.

As part of its annual planning process, the Los Angeles County Development Authority (LACDA) would like your input on its use of CDBG, HOME, and ESG funds. Your feedback will help inform decisions on LA County's investments in its communities. The survey should take less than 10 minutes to complete.

Questions with an asterisk (*) require a response.

* 1. Which option **best** applies to you? (choose **one**)

- | | |
|---------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Resident (I live in LA County) | <input type="checkbox"/> Student (I go to school in LA County) |
| <input type="checkbox"/> Employee (I work in LA County) | <input type="checkbox"/> Business Owner (I own a business in LA County) |

* 2. In what LA County ZIP Code do you spend the **most** time? (living, working, studying, etc.)

* 3. Which **one** of the categories below is **most** important to you? (choose **one**)

- ☐ **Business and Job Opportunities** (training for people who need jobs, small business loans, coaching for small business owners)
- ☐ **Community Services** (access to health and mental health care, homeless services, services for children, services for the elderly, crime prevention programs, substance abuse programs)
- ☐ **Housing** (new affordable rental units, home repair, down payment assistance, prevention of discrimination, eviction prevention)
- ☐ **Public Facilities** (libraries, parks, senior centers, youth centers)
- ☐ **Public Improvements** (street and sidewalk repairs, water and sewer improvements, trash removal, graffiti removal)

4. Which one of the housing issues below do you think needs the most attention in your LA County community? (choose one)

- ☐ Increase **Affordable Rental Housing for Families**
- ☐ Increase **Affordable Rental Housing for Seniors**
- ☐ Increase **Affordable Housing with Supportive Services for People with Disabilities**
- ☐ Increase **Affordable Housing with Supportive Services for Homeless Individuals and Families**
- ☐ **Eviction Prevention and Renters' Rights Assistance**
- ☐ Assistance to **Repair and Modernize Public and Affordable Rental Housing**
- ☐ Assistance for Qualifying Homeowners to **Repair Issues with Homes**
- ☐ **Code Enforcement** to Improve the Health and Safety of Housing
- ☐ **Affordable First-Time Homebuyer Assistance:** Counseling, Down Payments, Closing Costs
- ☐ Increase **Available Housing for People Using Section 8 Housing Choice Vouchers**
- ☐ Increase **Available Housing for People with Low Credit Scores or a Previous Eviction**
- ☐ Assistance for **Energy Efficiency Upgrades** to Reduce Utility Bills
- ☐ Short-Term **Assistance with Rent/Mortgage/Utility Payments**

5. Which one of the following community services below do you think needs the most attention in your community? (choose one)

- ☐ **Healthcare Services** (preventative/primary care, prescription drug services, dental and vision care, HIV/AIDS services)
- ☐ **Children's/Youth Services** (childcare, after school activities, tutoring, mentoring, early childhood education)
- ☐ **Senior Services** (meal services, homecare assistance, nursing home services, recreational or social opportunities)
- ☐ **Mental Health Services** (counseling and evaluation, psychiatric care, in-patient programs, support groups)
- ☐ **Substance Abuse Services** (prevention and education, treatment, recovery programs)
- ☐ **Homeless Services** (transitional shelters, permanent supportive housing placement, meals, clothing resources)
- ☐ **Services for Victims of Domestic Violence and Neglect** (family shelters, counseling)
- ☐ **Crime Prevention and Awareness Programs**
- ☐ **Services for Disabled People** (vocational/self-sufficiency programs, rehabilitation, adult day care, transportation)
- ☐ **Financial Crisis Services** (emergency assistance with bills, access to food pantries, homelessness prevention)
- ☐ **Services for Immigrants, Refugees, and/or Non-English Speakers**

6. Which **one** of the **public improvements** below do you think needs the most attention in your community? (choose **one**)

- | | |
|------------------------------------------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Improving Water, Sewer, and Drainage Infrastructure | <input type="checkbox"/> Improving Streets/Alleys |
| <input type="checkbox"/> Cleanup of Trash and Illegal Dumping | <input type="checkbox"/> Graffiti Removal |
| <input type="checkbox"/> Tree Planting | <input type="checkbox"/> Improving Street Lighting |
| <input type="checkbox"/> Improving Sidewalks, including Access for Disabled People | <input type="checkbox"/> Improving Public Transportation |

7. What is **one public facility investment** that you feel should be a priority in your community? (choose **one**)

- | | | |
|---------------------------------------------------------------------|-----------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Parks, Playgrounds, and Recreational Areas | <input type="checkbox"/> Libraries | <input type="checkbox"/> Senior Centers |
| <input type="checkbox"/> Youth/Childcare Centers | <input type="checkbox"/> Public Schools | <input type="checkbox"/> Healthcare Centers |

8. Which **one** of the **business and job opportunity issues** below do you think needs the most attention in your community? (choose **one**)

- ☐ **Job Readiness and Retention** (training and referral programs, English as a Second Language/ESL classes, adult literacy, high school equivalency and college preparation, adult/juvenile detention discharge counseling)
- ☐ **Coaching and Technical Advice for Small Businesses** (business plans, marketing, bookkeeping, tax planning)
- ☐ **Increase Access to Small Business Grants or Loans**
- ☐ **Support for Businesses that Serve Community Needs** (access to fresh groceries, medical services, pharmacy)
- ☐ **Commercial Building Rehabilitation** (repair or improve the exterior of businesses, including signage and awnings)

9. What **best** represents your housing situation in the **past 30 days**? (choose **one**)

- | | | |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|------------------------------------|
| <input type="checkbox"/> Renting a house | <input type="checkbox"/> Renting an apartment | <input type="checkbox"/> Homeowner |
| <input type="checkbox"/> Staying in the house/apartment of a friend or family member | <input type="checkbox"/> Staying in a homeless shelter | |
| <input type="checkbox"/> Homeless/Unhoused | <input type="checkbox"/> Other (ex: living in a motel, your car, an RV, a tent) | |

10. How many people in **total** live in your household? (choose **one**)

- | | | | | |
|-------------------------------------------|----------------------------|----------------------------|----------------------------|------------------------------------|
| <input type="checkbox"/> 1 (I live alone) | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 or more |
|-------------------------------------------|----------------------------|----------------------------|----------------------------|------------------------------------|

11. Which **best** describes your household right now? (choose **one**; children are under 18, adults are 18 and older)

- | | |
|--------------------------------------------------------------|---------------------------------------------------------------------------|
| <input type="checkbox"/> Single Adult (just myself) | <input type="checkbox"/> Single Parent (myself) with One or More Children |
| <input type="checkbox"/> Two or More Adults with No Children | <input type="checkbox"/> Two Adults with One or More Children |
| <input type="checkbox"/> Multiple Generations of One Family | <input type="checkbox"/> Multiple Unrelated Families |

12. In general, does your **household** spend more than 30% of its **monthly** income on housing expenses, such as rent/mortgage + water, electricity, gas, trash? (choose **one**)

a. Add your **monthly** rent/mortgage + utilities costs = \$ _____

b. Multiply your **monthly household** income by **0.3** = \$ _____

If "a" is **greater than** "b," check yes below. If "a" is **less than** "b," check no below.

- | | | | |
|------------------------------|-----------------------------|---------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> I don't know | <input type="checkbox"/> Not applicable/I am a student |
|------------------------------|-----------------------------|---------------------------------------|--------------------------------------------------------|

Answers provided in questions 13 through 18 cannot and will not be used to identify anyone who participates in this survey.

13. How old are you?

- | | | | |
|----------------------------------------|-----------------------------------|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> 17 or younger | <input type="checkbox"/> 18 to 24 | <input type="checkbox"/> 25 to 34 | <input type="checkbox"/> 35 to 44 |
| <input type="checkbox"/> 45 to 54 | <input type="checkbox"/> 55 to 64 | <input type="checkbox"/> 65 to 74 | <input type="checkbox"/> 75 or older |

14. What gender do you identify as? (choose one)

- | | | | |
|-------------------------------------------------------------------|---------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> LGBTQIA+ | <input type="checkbox"/> Non-Binary |
| <input type="checkbox"/> Another gender identity not listed above | | | |

15. What is your race and/or ethnicity? (check all that apply)

- | | | | |
|-------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian | <input type="checkbox"/> Black or African American | <input type="checkbox"/> Hispanic or Latino |
| <input type="checkbox"/> Middle Eastern or North African | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> White | |
| <input type="checkbox"/> Another race and/or ethnicity not listed above | | | |

16. What level of education have you completed? (choose one)

- | | | |
|-------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Did not complete High School | <input type="checkbox"/> High School Diploma/Equivalent | <input type="checkbox"/> College/Vocational |
| <input type="checkbox"/> Bachelor's Degree | <input type="checkbox"/> Some Graduate School | <input type="checkbox"/> Advanced/Professional Degree |

17. What is your employment status? (choose one)

- | | | | |
|-------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Full-Time Employee | <input type="checkbox"/> Part-Time Employee | <input type="checkbox"/> Self-Employed | <input type="checkbox"/> Full-Time Student |
| <input type="checkbox"/> Unemployed <u>and</u> Seeking Work | <input type="checkbox"/> Unemployed <u>and</u> <i>Not</i> Seeking Work | | |
| <input type="checkbox"/> Unemployed/Unable to Work | <input type="checkbox"/> Stay-at-Home Parent | <input type="checkbox"/> Retired | |

18. Do any of the following describe you and/or a member of your household? (check all that apply)

- | | | | |
|-------------------------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------|------------------------------------------|
| <input type="checkbox"/> Disabled Person | <input type="checkbox"/> Military Veteran | <input type="checkbox"/> Aged 65+ | <input type="checkbox"/> LGBTQIA+ Person |
| <input type="checkbox"/> Homeless/Unhoused <u>or</u> Formerly Unhoused Person | <input type="checkbox"/> First-Generation Immigrant or Refugee | | |
| <input type="checkbox"/> Formerly Incarcerated Person | <input type="checkbox"/> Low- or Moderate-Income Person | | |
| <input type="checkbox"/> Single Parent or Grandparent Raising Grandchildren | | | |

Thank you for participating in the community survey!

If you would like to receive survey results, please provide us with your contact information below.

Name

Business Name

Address

City

State

ZIP Code

Email Address

Phone Number