

2013 GREATER LOS ANGELES  
**HOMELESS COUNT**  
*They Count. Will You?*

1. What is your name?

First Name

Last Name

2. What is your birth date? Please write the month, date, and year.

		/			/				
M	M		D	D		Y	Y	Y	Y

3. Are you Male or Female?

- Male  
 Female

4. Which of the following best represents how you think about yourself?

- Lesbian or Gay  
 Straight  
 Bisexual  
 Transgender  
 Questioning

5. Are you Hispanic or Latino?

- Yes  
 No

6. What is your race? Choose all that apply.

- Black / African American  
 White  
 Asian / Pacific Islander  
 American Indian / Alaskan Native  
 Something else

↓  
What? \_\_\_\_\_

7. Are you a current or former foster care youth?

- Yes  
 No

8. Have you served in the U.S. Armed Forces?

- Yes → **GO TO QUESTION 8c**  
 No

8a. Were you a member of the National Guard or a Reservist?

- Yes  
 No → **GO TO QUESTION 9**

8b. Was your unit ever put into Active Duty?

- Yes  
 No → **GO TO QUESTION 9**

8c. What is your discharge status?

- Honorable  
 Less than Honorable  
 General  
 Medical  
 Dishonorable  
 Still on Active Duty  
 Other

↓  
What? \_\_\_\_\_

9. Do you have any children under 18?

*Include step-children and children for whom you are responsible*

- Yes
- No → **GO TO QUESTION 10**

9a. Are you living with them now?

- Yes
- No → **GO TO QUESTION 10**

9b. Currently, how many of your children, under 18, live with you?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

9c. Of the children who live with you, how many are Female?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

9d. Of the children who live with you, how many are Male?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

9e. How many adults, over 18, live with you?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

10. What's the total amount of time you have been homeless over the course of your lifetime?

- 7 days or less
- 8 – 29 days
- 1 – 3 months
- 4 – 5 months
- 6 – 11 months
- 1 – 5 years
- More than 5 years

11. Including this time, how many separate times have you been homeless in the past 3 years?

- 1 time
- 2 or 3 times
- 4 or more times

12. Including this time, how many separate times have you been homeless in the past 12 months?

- 1 time
- 2 or 3 times
- 4 or more times

13. How long have you been homeless this time?

\_\_\_\_\_ Days      \_\_\_\_\_ Months      \_\_\_\_\_ Years

14. In the last 7 days, have you spent one or more nights outside of L.A. County?

- Yes
- No

15. Over the last year, did you spend any nights outside, in a tent?

- Yes
- No → **GO TO QUESTION 16**

15a. The last time you stayed in a tent, how many adults 18 or older stayed with you, including yourself?

- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

15b. The last time you stayed in a tent, how many children under 18 stayed with you?

- 0 → **GO TO QUESTION 16**
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

15c. How many of those adults did not have children with them when they stayed in the tent?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

15d. How many families that included children stayed in the tent? A family being a group of people who live together and take care of each other.

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

16. Over the last year, did you spend any nights outside, in a make-shift shelter?

- Yes
- No → **GO TO QUESTION 17**

16a. The last time you stayed in the make-shift shelter, how many adults 18 or older stayed with you, including yourself?

- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

16b. The last time you stayed in a make-shift shelter, how many children under 18 stayed with you?

- 0 → **GO TO QUESTION 17**
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

16c. How many of those adults did not have children with them when they stayed in the make-shift shelter?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

16d. How many families that included children stayed in the make-shift shelter? A family being a group of people who live together and take care of each other.

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

17. Over the last year, did you spend any nights outside, in a car?

- Yes
- No → **GO TO QUESTION 18**

17a. The last time you stayed in a car, how many adults 18 or older stayed with you, including yourself?

- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

17b. The last time you stayed in a car, how many children under 18 stayed with you?

- 0 → **GO TO QUESTION 18**
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

17c. How many of those adults did not have children with them when they stayed in the car?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

17d. How many families that included children stayed in the car? A family being a group of people who live together and take care of each other.

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

18. Over the last year, did you spend any nights outside, in a van?

- Yes
- No → **GO TO QUESTION 19**

18a. The last time you stayed in a van, how many adults 18 or older stayed with you, including yourself?

- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

18b. The last time you stayed in a van, how many children under 18 stayed with you?

- 0 → **GO TO QUESTION 19**
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

18c. How many of those adults did not have children with them when they stayed in the van?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

18d. How many families that included children stayed in the van? A family being a group of people who live together and take care of each other.

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

19. Over the last year, did you spend any nights outside, in an RV/Camper?

- Yes
- No → **GO TO QUESTION 20**

19a. The last time you stayed in an RV/Camper, how many adults 18 or older stayed with you, including yourself?

- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

19b. The last time you stayed in an RV/Camper, how many children under 18 stayed with you?

- 0 → **GO TO QUESTION 20**
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

19c. How many of those adults did not have children with them when they stayed in the RV/Camper?

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

19d. How many families that included children stayed in the RV/Camper? A family being a group of people who live together and take care of each other.

- 0
- 1
- 2
- 3
- More than 3 → How many? \_\_\_\_\_

20. Where have you spent most of your nights, over the last month?

**Choose only one.**

Outdoor Locations

- In a tent
- In an make-shift shelter
- In a car
- In a van
- In a RV/camper
- On the street, in an alley, a park, the woods, etc.
- In a backyard, garage, garden, or a storage structure
- In a bus depot, train station, or transit center

Indoor Locations

- In a treatment center
- In an emergency shelter or winter shelter program
- In shared housing or a boarding house
- In a transitional housing program
- In a voucher motel/hotel from an agency
- In a house/apartment BUT in a place not normally used for sleeping (unfinished basement/garage)
- In an abandoned building or house
- In a hospital
- In jail or prison

- Other  
↓  
Where? \_\_\_\_\_

21. **Many situations can cause people to become homeless. Do any of the following situations apply to you?**

*Choose all that apply.*

- Having been a victim of domestic violence
- Having disagreements with family members/household members
- Having problems with drugs
- Having problems with alcohol
- Having mental health issues
- Having medical problems or illness
- Having lost your job
- None of the above

22. **Have you ever been physically or sexually abused by a relative or another person you have lived with, such as a spouse, intimate partner, brother or sister, or parent?**

- Yes
- No

23. **In the last month, have you been turned away from a shelter or transitional housing in Los Angeles County?**

- Yes
- No → **GO TO QUESTION 24**

23a. **Were you turned away for any of the following reasons? Choose all that apply.**

- Drug or alcohol problems
- A physical disability
- A mental disability
- No ID / identification
- Criminal record
- The program wouldn't allow you in with your children
- The program wouldn't allow you in with your pet or pets
- Because you had stayed there before
- None of the above

24. **Do you have now, have you ever had, or has a healthcare provider ever told you that you have any of the following medical conditions?**

- Kidney disease/ End Stage Renal Disease or Dialysis
- History of frostbite, Hypothermia, or Immersion Foot
- History of Heat Stroke/ Heat Exhaustion
- Liver disease, Cirrhosis, or End-Stage Liver Disease
- Heart Disease
- HIV Positive or AIDS
- Emphysema
- Diabetes
- Asthma
- Cancer
- Hepatitis C
- Tuberculosis
- Severe Depression

25. **DO NOT ASK: Surveyor, do you observe signs or symptoms of serious physical health conditions?**

- Yes
- No

26. **Have you ever abused drugs/alcohol, or have been told that you do?**

- Yes
- No

27. **Have you consumed alcohol every day for the past month?**

- Yes
- No

28. **Have you ever used injection drugs or shots?**

- Yes
- No

29. Have you ever been treated for drug or alcohol abuse?

- Yes
- No

30. **DO NOT ASK: Surveyor, do you observe signs of symptoms of alcohol or drug abuse?**

- Yes
- No

31. Are you currently or have you ever received treatment for mental health issues?

- Yes
- No

32. Have you ever been taken to the hospital against your will for mental health reasons?

- Yes
- No

33. **DO NOT ASK: Surveyor, do you detect signs or symptoms of severe, persistent mental illness?**

- Yes
- No

34. In the past 12 months, have you experienced or been diagnosed with any of the following? *Choose all that apply.*

- A physical disability
- A mental illness, such as bipolar disorder, schizophrenia, PTSD, or any other mental illness
- Alcohol problems
- Drug problems
- Tobacco use/addiction
- Long-term health problems
- None of the above

35. How many times have you been to the emergency room in the past 3 months?

36. How many times have you been admitted to a hospital in the past year?

37. Are you currently using or getting any of the following services or programs?

*Choose all that apply.*

- Access or Drop-in centers
- Job training or job placement
- Case management services
- Mental health counseling
- Housing location assistance or housing placement assistance
- Legal assistance
- None of the above

38. Which of the following best describes your employment situation most of the time during the past 6 months?

- Part-time paid job (less than 35 hours)
- Full-time paid job (35 or more hours)
- Day labor or pick-up work
- Student / vocational training
- Recycling or selling things
- Panhandling
- Disabled and cannot work
- Unemployed but looking for work
- Unemployed and not looking for work

39. Are you currently receiving any of the following forms of government assistance? Choose all that apply.

- Unemployment payments
- GR - General Relief
- SSI/SSD - Supplemental Security Income/ Social Security Disability benefits
- Social Security Retirement payments
- Food Stamps/EBT card/CalFresh
- CAPI - Cash Assistance Program for Immigrants
- WIC - Women, Infants, and Children
- CalWorks
- Medi-Cal
- Medicare
- Health Way L.A.
- Veteran's disability payment
- Other veterans benefits
- Child support or survivor benefits
- Other

↓  
What? \_\_\_\_\_

40. What city or neighborhood were you living in when you became homeless?

41. What is your Social Security number?

**DO NOT ASK:** Surveyor, if the homeless individual will not provide a social security number, please ask for the last 4 digits of the number.

**STAFF USE ONLY**

- ✓ Thank the interviewee for participating and sharing information about their homeless experience.
- ✓ Give the interviewee the food card.
- ✓ Check to see if they want the enclosed referral guide.
- ✓ Make sure that you have filled out the food card tracking form.
- ✓ Fill out the below information about the interview.

Census Tract

Location/Intersection

Date

Time

Interviewer ID

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- OSPA 1
- OSPA 2
- OSPA 3
- OSPA 4

- OSPA 5
- OSPA 6
- OSPA 7
- OSPA 8

- Complete
- Partial
- Refusal

- Incoherent
- Asleep