

2024-2028 AREA PLAN NEEDS ASSESSMENT GUIDELINES

California Department of Aging

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INTRODUCTION AND BACKGROUND

Section 306(a)(1) of the Older Americans Act (OAA) requires the Area Agencies on Aging (AAA) to determine the extent of need for supportive services (including those services associated with Access, In-Home Services, and Legal Assistance), Nutrition services and Multipurpose Senior Centers when preparing area plans, and to evaluate the effectiveness of resources in meeting these local needs.

The California Code of Regulations implementing the OAA (Title 22, Division 1.8), details the needs-assessment process to be used and the resultant outcomes. The Older Californians Act (OCA), [Welfare & Institutions Code, Section 9400(d)] requires that each AAA assess the need for services and develop and implement a plan for delivery of those services based on those needs.

The Welfare & Institutions Code, Section 9103 specifically requires AAAs to include the needs of lesbian, gay, bisexual, and transgender (LGBT) seniors in their needs assessments and Area Plans. Section 9400 requires that AAAs use the Elder Economic Security Standard Index (Elder Index) as a reference when making decisions about allocating existing resources. AAAs are to use the Elder Index only when it is updated and made available in a format that displays each county's specific data.

AAAs are required to target services to older adults facing the [greatest economic and social needs](#). Welfare and Institutions Code section 9015 defines "greatest social need" as "the need caused by noneconomic factors that restrict an individual's ability to perform normal daily tasks or that threaten an individual's capacity to live independently. These factors include physical or mental disability, language barriers, and cultural or social isolation caused by, among other things, racial and ethnic status, sexual orientation, human immunodeficiency virus (HIV) status, gender identity, or gender expression."

The goal of the Area Plan is to provide readers with a comprehensive picture of how services will address identified local need(s) and to demonstrate how these services are being integrated into the community service network. Needs assessments *are* the key to the entire planning and service delivery process. They pose the questions of "who, what, and why" around which services will be established.

Web links to all statutory and regulatory requirements are located in the reference section of this document. The California Department of Aging (CDA) also included additional links that may be beneficial to the AAAs in their needs assessments.

Survey data collections (also known as performance data collection) and identifying demographic information presented here mirror that of the ongoing annual LGBT Sexual Orientation and Gender Identification (SOGI) requirements. The LGBT SOGI requirements can be found in Government Code, Section 8310.8. The Veteran status has also been added to the survey data collections due to the requirements found in Government Code, Sections 11019.11 and 11019.12.

AAA's can execute their mission and work together to determine what services can be provided in the community. CDA reviews and interprets the findings of the needs assessment in relation to measured service delivery, allowing for a broad analysis of overall AAA reach and effectiveness.

PART I - NEEDS ASSESSMENT PROCESS

A. General

For the purpose of this guideline, a needs assessment is defined as a systematic process for collecting, analyzing, and interpreting *timely* information on *local* [with relevance to your specific Planning and Service Area (PSA)] service needs of the client population. This population includes not only seniors and those targeted senior groups such as individuals with the [greatest economic and social needs](#), as well as those with severe disabilities; but, depending upon the programs, could also include functionally-impaired adults as well.

The California Code of Regulations (Title 22, Article 3, §7300) outlines the purpose for conducting a needs assessment, which is to identify: A) target populations; B) the types and extent of existing and potential needs of older individuals in the PSA; and C) the services and resources existing within the PSA that are available for addressing those needs as well as any existing constraints. In addition, this section also lists the minimum contents of the needs assessment, which includes: 1) an analysis of the Department of Finance Census Tables or data from the U.S. Census Bureau; 2) a review of data obtained from other social service agencies that provide services to older individuals; and 3) completion and analysis of a sample survey of older individuals. (Please refer to the above-mentioned regulations subsection for specific details).

The needs assessment process should be approached systematically. It is a planned and purposeful activity carried out step-by-step as a part of the overall planning process; a process which includes *program planning, implementation, and evaluation*. A needs assessment is key to the process as it provides a fundamental basis for the development of the agency's area plan.

The needs assessment should result in two principal products. The first is the identification of the types and extent of existing and potential needs of the client population within the community, and of the services or resources existing within that community which are available for addressing those needs. The second is an estimation of *unmet needs, under-utilized services, and barriers*, which prevent access to available services. These two products will provide AAA planners and decision-makers with a firm foundation for formulating policy and for developing the area plan. The definition of need as a gap between what currently exists and what is required will help in suggesting actions which can be taken to fill the gap; the needs assessment will therefore suggest priorities for programs and services and where they should be targeted. On the basis of identified priorities, goals and related objectives can be developed to guide the planning effort to focus on a specific range or group of needs.

In order to maximize the credibility and utility of the results of a needs assessment, and to enhance its value to planners and decision-makers, the needs assessment process should be conducted in a systematic and comprehensive manner. The process should be open, and as inclusive as possible of input from all appropriate entities. It should involve persons representative of the community's full demographic profile. Finally, the AAAs should maintain complete documentation of the process.

There are minimum needs assessment requirements identified in regulations that must precede each four-year planning cycle. These requirements are referenced in various sections of this document. Some AAAs, for a variety of reasons such as rapidly

changing demographics in their PSA, may find it necessary to go beyond the published minimum standards and continue the needs assessment process on an on-going basis throughout the four-year cycle. In such cases, the AAA may want to create a separate needs assessment goal with associated objectives and incorporate this goal into their Area Plan. An example of this would be AAA's desire to assess, in more detail, the needs of multiple ethnic groups residing in the PSA over a three-year period. A plan for this activity would be captured in a goal statement with timelines and related measurable objectives. This approach will serve to provide the public with a more detailed description of the assessment process for that particular AAA.

The AAA's Advisory Council has a particularly important role to play in the needs assessment process. To be consistent with the function and composition as outlined in the Older Americans Act, the Advisory Council should be representative of the interests of all those in the PSA who engage in programs for seniors. The Advisory Council should be involved as early as possible in the development of the Area Plan, including planning for the needs assessment, and should be encouraged to provide input into its purpose and design. This will help to ensure that the data collected are relevant for planning and will assist in assuring that the objectives set for the needs assessment are achieved.

Area Agencies should combine assessment methods whenever possible to achieve the advantages of a convergent approach. A convergent approach to needs assessment assumes that planners should not rely on one type of measure or source of data as the basis for a planning decision. Many sources of data should be sought to promote higher levels of citizen participation, to guarantee more representative input into the planning process, and to maximize its validity. Methods used in a convergent approach to needs assessment may include but need not be limited to the use of census data; community surveys; client surveys; provider surveys; focus groups; service data; and public hearings.

The advantages of a convergent approach are:

- one set of data collected through one method may validate data collected through another method;
- the use of multiple methods will lead to the completion of a more comprehensive needs assessment and will help to avoid "blind spots";
- the use of multiple methods will lay the groundwork for further inquiry;
- the review and analysis of multiple methods over time will provide an indication of the stability or changing nature of needs; and
- use of less comprehensive and less costly methods in interim periods will be more cost effective for the AAAs.

B. Area Plan Preparation

Because of the importance of the needs assessment process to the entire planning cycle, some specific expectations have been outlined for use in the development of an Area Agency's plan.

First, the findings resulting from the needs assessment activities should be used as a

primary basis for the initial development of goals and objectives for the four-year area plan. New perspectives arising from subsequent needs assessment efforts should be reflected in plan updates. Findings should be based on documented analysis of the data collected and prioritized to establish the goals to be addressed in the Area Plan. The Area Plan includes a requirement to identify, at a minimum, one goal and/or objective for each service that is funded with either federal OAA, Title V, or State OCA dollars.

Second, the California Code of Regulations (Title 22, Article 3, §7302) requires AAAs to include in their Area Plans a section on needs assessment which contains the following components:

- the identification of the needs assessment methods used in the process and the reason for their selection along with a brief summary of the documentation associated with the method(s) selected (minimum documentation is discussed in Part II A);
- a discussion of the findings of the needs assessment;
- characteristics of the survey/public forum participants;
- a description of the sources of data used;
- a brief summary of the analysis of the data and the rationale used in prioritizing the areas to be addressed in the area plan;
- the identification in priority order of the areas of need resulting from the assessment process, including targeting plans; and
- a brief description of the role played by the Advisory Council and other strategies to obtain public input in the needs assessment process.

Third, AAAs should maintain records pertaining to the methods and process of how the needs were arrived at (see Part II A).

C. Needs Assessment and Public Input

Needs assessment is one of the areas in which public participation plays an important role and which can result in an assessment more accurately reflective of a community's needs. The Older Americans Act, since its inception, has emphasized the importance of public involvement and participation in the planning and delivery of services. As the ultimate beneficiaries of these services, the public's role is all the more critical in seeking to accurately identify and assess needs.

Area Agencies on Aging have implemented a number of successful approaches to increasing public participation. Among the most common strategies are:

1. Appointing citizens/older persons to the AAA's Governing Board and Advisory Council.
2. Using community outreach efforts in hiring and recruiting staff.
3. Involving volunteers at both the AAA and service provider levels.
4. Using customer satisfaction surveys and evaluations, both formal and informal.
5. Holding public hearings, meetings, discussion groups, forums, etc.

6. Involving community leaders, key informants, and staff of non-senior programs, etc.
7. Regularly and frequently reviewing program use and demand for services.

PART II - METHODOLOGY

This section on methodologies is included in order to provide guidance on a few basic means available for data collection and to help with statewide consistency. While it tackles the basics, other resources might be available through the literature (including online sources), and universities, for tailoring needs assessments to specific AAA requirements above and beyond core aging-related regulatory mandates.

A. Comments on Methods

1. Gathering Data

- a. Needs assessment data can be either objective or subjective. Objective data is "hard", factual, not subject to opinion, and is usually quantitative. (For example, the poverty rate is 28%; last month there were 83 calls to the elder abuse hot line.) Subjective data is based on people's opinion or beliefs. Most of the needs assessment data with which we are most familiar is of this type. (What do you feel is a problem to you/your customers?)

While many are impressed with "hard" data, numbers by themselves mean little and can even be deceptive. What does the poverty rate say if people don't feel poor; if their wants are few, their neighbors all live the same way, and their quality of life is rich?

- b. Data can also be either from primary sources - those which rely on data directly from the consumers themselves - or secondary - those which rely on data about the consumers from some other source. In discussing client needs, there are obvious advantages to relying on data which comes directly from the people who need or will be using the services. However, this is oftentimes subjective.

There is no way of eliminating bias from a person's responses, no matter who the responders may be. As in the case of objective versus subjective data, no single choice is adequate; it will depend largely on the context. As recommended earlier, AAAs should use a mix of methods when assessing need and should stagger the time periods during which the data is collected. Each method should involve a selection of people who are drawn from all areas of the PSA and who are representative of its demographic diversity. Seniors who are currently non-participants in your (AAA's) programs as well as other individuals in your community (e.g., local business people, civic leaders) should also be represented.

Minimum in-house documentation for each method used should include a description of the method used and its time frame, an explanation of the data-objective sought, and the use anticipated, characteristics of the persons surveyed, the methods used to contact them, and the questions asked. The completed questionnaires or survey responses should be maintained; they provide a valuable check on accuracy and can be useful for future investigations.

2. Formulating Questions

Questions can be either fixed choice with a specified number of responses to select from, or open-ended, where responses are recorded as given. The fixed choice method allows for easier tabulation and analysis of results; however, it leaves no room for personal responses, which may be a rich source of information. Generally, open-ended questions are preferable for more investigative issues early in a process to identify the key issues or categories. However, after these have been determined and a systematic needs assessment is underway, it is essential to ask respondents to select from fixed choices. Additional space for comments should always be provided for those who feel overly constrained. Also, an open-ended response format is appropriate for a more in-depth analysis of a specific problem, such as in a focus group.

Developing good questions is an arduous task. Survey questions that are confusing, poorly worded, or do not lend themselves to a simple answer are common and cause problems with analyzing results. Many of those who work in community services are familiar with examples of a term or phrase, which could be very confusing or perhaps even offensive if it were used in another culture.

Pre-testing of items is an important way to ensure these problems are overcome. Before actual use, give the questions to a sample of people similar to those who will be taking it. Do they understand it? Are the responses reasonable and adequate? Can it be successfully translated? Can it be tabulated reasonably? Allow sufficient time for revisions as a result of the pre-test before the instrument is finalized and reproduced.

PART III - DATA COLLECTION

A. Subjective Methods

1. General (Community) Surveys. The random sample community survey can be accomplished by mail-out, phone, or door-to-door. It is among the most effective strategies for collecting data on unmet needs from the population at large and if done properly, can yield the most "objective" information of all survey methods. But a random survey can be expensive. Avoiding cultural bias in questions is difficult. And what is to be done about translation into different languages or using interpreters? If not done properly the results can be very misleading. Proper selection and phrasing of questions is critical, as is training of staff, for effective written surveys. Professional help is usually needed in determining the sample size and pool, and in tabulating and interpreting the results.

Periodic surveys of persons who do not participate in services provided by your AAA are important. Ideally this involves random sampling, but it need not do so. For non-random community surveys it is important to collect information from a broad selection of people who represent the population at large and who capture accurately the characteristics of the population involved. This must be kept in mind in distributing questionnaires. Respondents should be drawn from throughout the PSA in a manner that is consistent with the area's unique demographic profile. Data collected through surveys of targeted sub-populations should be "weighted" to accurately represent their distribution within the area of concern. (For example, if Hispanics constitute 35% of a community, then their responses to a survey of that community should be about 35% of the total or they

should carry about 35% of the "weight.")

A simple yet effective non-random sampling technique is the "snowball sample." A small group of initial respondents is each asked to name 3-5 people who are most knowledgeable about the issues. These new people are also surveyed and in turn asked to provide more names, thus the sample size grows as it "rolls along." As the pool of names increases, respondents can be selected in a "stratified" or weighted manner to represent the population at large and thereby achieve many of the advantages of a random survey. Further, some of the same people will be named again and again, thus the community "self-selects" its most knowledgeable persons who can be valuable resources for more in-depth techniques such as focus groups or expert opinion.

2. Consumer/client surveys have the advantage of focusing on individuals who are in need of services. They are inexpensive and easy to administer but are also subject to considerable limitations. For instance, consumers can tell us nothing about the needs of those who are not aware of, or do not ask for, services.
3. Provider surveys are easy to use. They need not be limited to service providers with whom AAAs have a contract. Any person who regularly makes contact with large numbers of people in need of some support or service, such as an employee or volunteer, is a good source of information. Providers are in a position to have a deep awareness of customers' actual needs but can easily see the world in terms of their own existing services and may have their own professional bias. (What teacher does not see a need for better schools? What nutritionist does not feel there should be more or better meals?)
4. Key informants/experts include anyone who is considered knowledgeable about community needs, from program administrators to academics and elected officials to informal community leaders. Like providers, they may be easy to interview and may respond clearly and with considerable insight. However, like providers, their views are personal opinions subject to their own values and biases. One person may feel that people need more of a certain service, while another may believe there should be less. Also, how many are aware of the needs of the entire community? Finally, is it more advantageous to ask "experts" about people's needs or to ask the people themselves?

Whichever method is used, be sure to record all relevant data about the responders and use that as a check against bias. For example, a large number of responders from medical related fields may skew the results towards health and medical issues. A survey taken at a nutrition site may show a disproportionate concern for food or hunger.

B. Other Subjective Methods

Community forums are useful in that they contribute to an understanding of the perceptions of selected groups. These forums may range from public hearings to focus groups on which individuals from targeted groups discuss specific issues. Information collected through community surveys and secondary sources should not be expected to stand alone in the assessment of need.

1. Focus groups are an increasingly popular assessment tool. Their primary value lies in providing in-depth information on specific areas, which is shaped by a

process of group discussion and hopefully, consensus. This kind of information is highly subjective, and the value of focus groups is limited by a number of technical considerations such as selection of participants, identification of questions, and skill of the group leader.

2. Public hearings, strongly rooted in the concept of "town hall" democracy where one can speak for all to hear, are required by law for some occasions. They have the advantage of providing an official public forum; typically, testimony is recorded, and decision-makers are often in attendance. The dynamics of public testimony lend themselves well to a presentation of testimony on topics which have previously been prepared and disseminated. Of course, the data is limited to that from individuals who are willing and able to attend and testify. This method does little to ascertain "hidden" community needs or those which do not have advocates.

It is important to develop and maintain in-house documentation of the characteristics of forum participants and the details which pertain to the implementation of community forums. Whenever possible, participants should be requested to respond to questions contained in the core questionnaire to establish their particular characteristics. The locations, dates, times, and numbers of participants should be clearly stated, and discussion highlights formulated cogently and related to needs assessment objectives. Information gained should contribute to a deeper understanding or confirmation of data collected through other methods. Documentation can enhance the value of the data collected through this method in the overall needs assessment process.

C. Objective Methods

1. Utilizing demographic data is the most "objective" of all sources and should be included in any complete needs assessment. The U.S. Census and the ACS are valuable sources of data about characteristics which can gauge the vulnerability of the population and may indicate service needs. Census and ACS data can be obtained for county levels or can be broken down into county subdivisions, even census tract or block levels, which can be very useful in the identification and location of groups to be targeted. Among factors to be considered are age, gender, ethnicity, marital or living status, education, perceived need, income/poverty, disability, isolation, source of income, etc. Further, comparison of indicators from the core questions with similar indicators from the broader census will assist AAAs to assess the reliability of the data collected and to extrapolate findings to a larger area.

The Administration for Community Living (ACL) Aging Integrated Database (AGID) is an on-line query system based on ACL-related data files and surveys and includes population characteristics from the Census for comparison purposes. The four options or paths through AGID provide different levels of focus and aggregation of the data – from individual data elements within Data-at-a-Glance to full database access within Data Files. The AGID also includes special tabulations of ACS data by County and by PSA. For more information, see the following link: <https://agid.acl.gov/>.

The California Department of Finance produces annual estimates of population for all cities and counties in the state, and projects population for counties for

years far in advance. This data is much more limited than census data; it consists only of gender, age, and race/ethnicity. Current estimates of the population over age 60 are broken down by race/ethnicity, for each county and PSA in the State.

Investigate use of local sources of data. Almost all regional planning agencies (councils of governments or economic development districts) and county planning departments are involved in population estimates or projections, as are many larger cities. In addition, local advocacy groups and service agencies sometimes make estimates of specific population groups. However, caution should be exercised in using local estimates for OAA planning purposes unless they are clearly documented.

2. Utilizing Information and Assistance reporting data has many advantages. It is usually readily available; it is in aggregate form which boosts objectivity, its focus is on people in need, and it tends to be recorded in categories which are clear to the assessment. However, it does not capture any information from the community which is not aware of the service or is unlikely to call, or about the needs which do not fit well into the existing "boxes". (See Part IV, "Best Practices")
3. Citing service utilization data may be of little value if it stands alone but can be a valuable complement to other tools.

PART IV - BEST PRACTICE RECOMMENDATIONS

The following are a limited selection of "best practices." Doubtless there are other methods which some AAAs are familiar with or have used in their areas.

A. Enhancing Survey Utility

A simple, yet effective survey technique is to administer the same survey to a wide variety of different respondents - experts, providers, community leaders, non-participants, and many consumers from targeted groups. The questionnaires must be recorded and tabulated according to the type of respondent. The responses can then be compared or contrasted according to the respondents.

For example, do consumers of a service feel the same as providers? Do Hispanics feel the same as Caucasians or Asians? Do north-county urban residents respond in a similar way to the rural south county? Do frail elderly see community needs like the vigorous "newly old"? How do the answers of males compare with those of females? (Statistical tests can be conducted to assess the significance of any differences as well as correlation between certain items.)

If the responses are the same across groups, this will lend important support to the process itself as well as strengthening the importance of the results. If there are differences, are they due to errors in survey techniques or do they reflect actual differences among the population? If the latter is true, this becomes especially fertile ground for further investigation. For example, if people in a certain locale are unaware of a needed service, could this indicate a need for targeted outreach in that area? If a particular ethnic group does not make use of a service in their neighborhood, could there be insensitivity on the part of the provider? Do higher-income people see less need for legal services than poorer ones, or do their legal service needs differ?

Enhancing surveys has the advantages of being inexpensive and easy to administer.

The survey can be as broad-based as the best random sample while allowing targeting of specific groups and can offer stronger verification of the survey instruments and techniques as well as greater reliance on the results. Whether the responses are the same or not, the cross-tabulating will provide much useful information for an assessment of community needs.

B. Utilizing Data from Information and Assistance (I & A) System

As mentioned in Part III.C.2, there are a number of advantages in utilizing data from Information and Assistance (I & A) programs as one of the sources of needs assessment data, while keeping in mind its limitations. In fact, many of the AAAs in California already do so, to a certain extent.

One example of utilizing I & A data would be to log every call which is received by an AAA's I & A unit and record the service requested. The responses would be tabulated on a sheet to correspond to the service categories kept by the AAA. This information would allow an AAA to see which categories of service are receiving the most calls. Follow-up could then be made whenever possible. Every call for which no referral could be made or for which there was not a satisfactory referral/outcome would be tabulated as an "unmet need."

Information on specific "unmet needs" would then be turned over to program staff as it accumulates, and to the administration and planning staff every three months. This provides them with aggregate data specifically on unmet needs in terms of existing categories of services, which becomes an important component of their ongoing needs assessment and can help plot changing needs in your AAA.

In addition, the quarterly data on unmet needs can also be distributed to other service agencies and providers. This not only encourages broader participation in the Needs Assessment process; it can also facilitate discussions and cooperative efforts with other agencies to address or resolve the areas of unmet needs.

C. Using Mailed Surveys (With Several Caveats)

Mailed surveys offer a number of advantages to the researcher, among them being more uniform inquiry and the ability to tap larger and more representative samples. However, there admittedly may be disadvantages as well. Differences between respondents and non-respondents may bias the sample. Similarly, non-writers and non-readers may be unable or reluctant to respond.

Another area of concern pertains to using mailed surveys with diverse populations. AAAs should collaborate with their Advisory Councils, trained community workers, or specially formed advisory groups to adapt the language of questions and support documents to encourage the response of targeted populations. This effort could be part of a planned program of outreach to involve community leaders, targeted groups, and their providers not only in promoting involvement in the process, but also in evaluating and utilizing the resulting data as participants in the overall planning process.

Because of the potential disadvantages, it is recommended that AAAs make every effort to encourage maximum response of survey recipients to amplify their return and usefulness. Although response rates to mailed questionnaires are known to be low, hovering around 50% and below, researchers have found that response rates of 70% and above can be achieved. Methods undertaken to promote higher rates of response

must be considered within the context of available resources. These methods include:

- preparation of cover letters which emphasize the social usefulness of the study and the importance to its success of the responder's participation.
- personalizing of survey documents such as salutations which use the participant's name, individually signed support letters, and use of first-class mailings and better stationery.
- coordination of follow-up by means of postcard in the first week, replacement questionnaires with letters to non-respondents in the third week, and replacement questionnaires sent by certified mail with letters to non-respondents after seven weeks. Telephone follow-up may also be used effectively.

REFERENCES

California Department of Aging (CDA) Web Links:

California Aging Population Demographic Projections for Intrastate Funding Formula (IFF): The CDA annual California Aging Population Demographic Projections report provides older adult population data by county and at the PSA-level. The statistics include age, minority and non-English demographics, geographic isolation (rural), individuals living alone, and Medi-Cal and SSI/SSP participants. These factors are used to develop planning estimates for the local assistance allocation of Federal and State funds to the Area Agencies on Aging (AAA) as part of the IFF.

[CDA California Aging Population Demographic Projections for Intrastate Funding Formula](#)

https://aging.ca.gov/Data_and_Reports/

CDA Poverty Guidelines:

The CDA Poverty Guidelines Report is used for AAAs and their service providers for assessing the income-level of OAA and Older Californians Act program clients. This information is updated annually from the Federal Register by the U.S. Department of Health and Human Services (HHS).

https://aging.ca.gov/Data_and_Reports/

California State Web Links:

California Welfare and Institutions Code, Chapter 1, General Provisions Section 9014 and 9015, Definition of Greatest Economic Need and Greatest Social Need.

[California Welfare and Institutions Code Section 9014](#)

[California Welfare and Institutions Code Section 9015](#)

https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?division=8.5.&chapter=1.&lawCode=WIC

California Welfare and Institutions Code, Chapter 2 California Department of Aging, Section 9103, LGBT Seniors in Needs Assessment

[California Welfare and Institutions Code Section 9103](#)

https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?lawCode=WIC&division=8.5.&title=&part=&chapter=2.&article=1.

California Welfare and Institutions Code, Chapter 2 California Department of Aging,
Section 9103, Area Agencies on Aging

[California Welfare and Institutions Code Section 9400](#)

https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=9400.&lawCode=WIC

California Code of Regulations, Title 22, Chapter 1.8, California Department of Aging
[California Code of Regulations, Department of Aging](#)

[https://govt.westlaw.com/calregs/Browse/Home/California/CaliforniaCodeofRegulations?guid=I04D66EC65B6111EC9451000D3A7C4BC3&originationContext=documenttoc&transitionType=Default&contextData=\(sc.Default\)](https://govt.westlaw.com/calregs/Browse/Home/California/CaliforniaCodeofRegulations?guid=I04D66EC65B6111EC9451000D3A7C4BC3&originationContext=documenttoc&transitionType=Default&contextData=(sc.Default))

California Code of Regulations, Title 22, Chapter 1.8, Article 3, Area Plans

[California Code of Regulations, Area Plans](#)

[https://govt.westlaw.com/calregs/Browse/Home/California/CaliforniaCodeofRegulations?guid=I058218105B6111EC9451000D3A7C4BC3&originationContext=documenttoc&transitionType=Default&contextData=\(sc.Default\)](https://govt.westlaw.com/calregs/Browse/Home/California/CaliforniaCodeofRegulations?guid=I058218105B6111EC9451000D3A7C4BC3&originationContext=documenttoc&transitionType=Default&contextData=(sc.Default))

California Department of Finance (DoF):

The Demographic Research Unit of the California Department of Finance is designated as the single official source of demographic data for state planning and budgeting. The DoF also publishes ACS and Census reports at the County-level which may be useful for local planning.

[California Forecasting/Demographics/](#)

<http://dof.ca.gov/Forecasting/Demographics/>

Federal Government Web Links:

Older Americans Act (OAA):

This site provides information on the original legislation passed to provide services to older adults and their caregivers. The 2020 amendments to the OAA and related topics are also included.

[Older Americans Act](#)

<https://www.acl.gov/about-acl/authorizing-statutes/older-americans-act>

U.S. Census:

The Census is conducted once every 10 years to provide an official count of the entire U.S. population to Congress. States use the census to redraw their congressional districts. Communities use it to plan where to build schools, roads, and hospitals. Governments use it to allot funds and support.

[United States Census](#)

<http://census.gov>

American Community Survey (ACS):

The ACS is conducted every year to provide up-to-date information about the social and economic status of populations at the national, statewide, and community levels. ACS estimate data is accessed through the Census Bureau's American FactFinder.

[United States Census American Community Survey](#)

<https://data.census.gov/>

Aging Integrated Database (AGID):

The AGing Integrated Database (AGID) is an on-line query system based on Administration for Community Living -related data files and surveys and includes population characteristics from the ACS and Census for comparison purposes. AGID also includes special tabulations on ACS data at the County and Planning and Service Area (PSA) -levels.

[Aging Integrated Database](#)

<https://agid.acl.gov/>

Other Web Links:

California Elder Economic Security Index:

Publishers Insight Center for Economic Development produce this index as a measure of minimum income necessary to cover all of the retired older adult's (age 65+ years) basic expenses including housing, food, healthcare, and transportation.

<https://insightcced.org/>

LGBTQ Web Links

[SAGE Advocacy & Services for LGBTQ+ Elders](#)

<https://www.sageusa.org/>

[LGBT Persons in Chicago Growing Older: A Survey of Needs and Perceptions ASA need to email for permission](#)

http://www.centeronhalsted.org/programs/growing_older.pdf

[LGBT Resource Links](#)

https://www.aging.ca.gov/Helpful_Tools_and_Tips/LGBT/

Resources Related to HIV

[ACL: Older Adults with HIV/AIDS](#)

<https://acl.gov/news-and-events/acl-blog/older-adults-hivaids-growing-population>

[HIV Surveillance Reports: California Department of Public Health](#)

https://www.cdph.ca.gov/programs/cid/doa/pages/oa_case_surveillance_reports.aspx

[SAGE \(Advocacy & Services for LGBT Elders\)](#)

<https://www.sageusa.org/resource-category/hiv-aids/>

[ACRIA/GHMC](#)

<https://www.gmhc.org/services/acria/>

[National Resource Center on HIV & Aging](#)

<https://aginghiv.org/>

[Positive Women's Network](#)

<https://www.pwn-usa.org/>

Surveys:

Survey Design: Suggest doing an internet search on this topic, and:

Internet Survey Services:

Surveys using Internet services can be used as an anonymous method of soliciting input.

Question Pro

<http://www.questionpro.com/>

Survey Monkey

<http://www.surveymonkey.com/>

Web Online Surveys

<http://web-online-surveys.com/>

Zoomerang

<http://www.zoomerang.com/>

Focus Groups:

Carter McNamara, MBA, PhD, Basics of Conducting a Focus Group, Authenticity Consulting, LLC.

<http://www.managementhelp.org/evaluatn/focusgrp.htm>

Key Informant Interviews:

UCLA Center for Health Policy Research Section 4: Training to conduct a key informant interview.

[Training To Conduct Key Informant Interviews](#)

http://healthpolicy.ucla.edu/programs/health-data/trainings/documents/tw_cba23.pdf