LSU-NPN New Orleans Community Organization Survey

Welcome!

LSU-NPN New Orleans Community Organization Survey

Thank you for taking the time to complete the LSU-NPN New Orleans Neighborhood Organization Survey. The Neighborhoods Partnership Network is partnering with the LSU Department of Sociology to survey community organizations and identify the best, most effective strategies for community revitalization. Our hope is that the findings from you and your peer groups will highlight what strategies are most effective, thus spurring more groups to achieve similar success.

By participating you are:

• Helping compile the most thorough data on neighborhood group organization and recovery strategies.

• Providing information that could be of practical use for your own group as well as other organizations.

• Leading your organization to gain insight and best practices from similar groups.

The survey takes an average of 30 minutes to complete. You are free to skip any question or to end the survey at any point. The results will be used only for Capacity College training, community recovery planning, and scholarly research.

At the end of the survey, you will be given choices on how confidential you want your responses to be. We will not release any answers by your own name. But we will ask permission to give examples of your ORGANIZATION's responses to other members of the Capacity College, and in several other ways. Beyond any permissions you give, we will only report results in aggregate, percentaged form.

If you have questions about this survey, you may contact the LSU Sociology Department at 126 Stubbs Hall, Baton Rouge, LA 70803, 225-578-1645, and the Neighborhoods Partnership Network at 3500 Canal Street, 2nd Floor, New Orleans, LA 70119, 504-940-2207. If you have questions about respondents' rights, you may contact Dr. Robert C. Mathews, Chairman of the Institutional Review Board at LSU, at 203 B-1 David Boyd Hall, tel. 225-578-8692.

We look forward to working with you in finding best practices for community recovery from the hurricanes.

LSU-NPN New Orleans Community Organization Survey

Your Organization

Please tell us about your organization. Please give answers to the best of your ability. In cases when you are asked to provide numbers, financial or otherwise, approximate according to your experience and knowledge.

1. Date of Interview

MM   DD   YYYY

Date of Interview   [   ] / [   ] / [   ]

2. Name of Organization

[   ]

3. Current Street Address of Organization

Address: [   ]
Address 2:   [   ]
City/Town: [   ]
State: [▼]
ZIP/Postal Code: [   ]

4. Street Address of the Organization when Hurricane Katrina struck.

Address: [   ]
Address 2:   [   ]
City/Town: [   ]
State: [▼]
ZIP/Postal Code: [   ]

5. Name of Respondent and Position in Organization

Name of Respondent   [   ]
Position in Organization [   ]

6. Name of the current Organization Leader

[   ]

7. Name of the Organization Leader when Hurricane Katrina struck:

ʝ∩   Same as now

ʝ∩   [If different]

[   ]

8. In what year was your organization founded?

[   ]

9. Please indicate your type of group (check all that apply)

- Neighborhood Association
- Citywide Community Development Corporation (City CDC)
- Neighborhood Specific Community Development Corporation (Neighborhood CDC)
- Neighborhood Recovery Center
- Umbrella
- Condo/Subdivision
- Neighborhood Economic/Business Association
- Other (please specify)

10. What area or neighborhood do you NOW serve? Please give the exact street boundaries.

11. What area or neighborhood did you serve PRIOR to Katrina? Please give the exact street boundaries.

12. Does your organization have the capacity to serve all of your boundaries or is the actual area of implementation a smaller area?

- Able to serve our whole "target" area or neighborhood
- NOT able to serve our whole "target" area or neighborhood. The actual or effective current street boundaries are:

13. How many staff, if any, are/were employed by your organization?

Prior to Katrina

Now

14. How many members are enrolled in your neighborhood group/organization?

15. Briefly describe the employed staff positions' role and duties. (Please give the position title, and then the description.)

Organization Resources

16. What is/was the total organization budget (in dollars) for ...

The Present Year

The Year before Katrina

17. Where does your revenue come from since Hurricane Katrina?

	Over 75%	About 50-75%	About 25-50%	Some Money, but less than 25%	None
Federal funds / grants	○	○	○	○	○
State of Louisiana funds / grants	○	○	○	○	○
City/municipal funds / grants	○	○	○	○	○
Nonprofit funds / grants	○	○	○	○	○
Funds / Donations from Faith-Based organizations	○	○	○	○	○
Private donations	○	○	○	○	○
Fund raising events	○	○	○	○	○
Community resident dues	○	○	○	○	○
Other community donations	○	○	○	○	○
Insurance	○	○	○	○	○
Other (please specify)	○	○	○	○	○

If Other (please specify)

18. Please tell us about any Federal grant proposals your organization has written and received since Hurricane Katrina.

How many written?

How many funded?

Approximate total amount of funds received from this source

19. How about State of Louisiana grants?

How many written?

How many funded?

Approximate total amount of funds received from this source

20. City grants?

How many written?

How many funded?

Approximate total amount of funds received from this source

21. Grants from faith-based organizations?

How many written?

How many funded?

Approximate total amount of funds received from this source

22. Red Cross grants?

How many written?

How many funded?

Approximate total amount of funds received from this source

23. Grants from other nonprofit organizations?

How many written?

How many funded?

Approximate total amount of funds received from this source

24. Business and/or Corporate grants?

How many written?

How many funded?

Approximate total amount of funds received from this source

25. Donations from Private Individuals (non-community members)?

How many written?

How many funded?

Approximate total amount of funds received from this source

26. Other?

(please specify)

How many written?

How many funded?

Approximate total amount of funds received from this source

Organization Activities

27. Which of the following statements best describe the educational make-up of your community? (Levels: professional degree, bachelors, high school/GED, vocational/trade).

	All members shared similar educational levels	Many members shared similar educational levels with a few members from other levels	Members came from a wide variety of educational levels
Before Katrina	jn	jn	jn
Now	jn	jn	jn

28. On average, how often do you have general neighborhood meetings?

	More than once a month	Once a month	Every other month	Quarterly	Twice a year or less
Prior to Katrina	jn	jn	jn	jn	jn
Now	jn	jn	jn	jn	jn

29. What is the average number of community participants at General meetings, prior to Katrina and now?

Prior to Katrina [   ]

Now [   ]

30. What is the average attendance at special-topic forums/informational meetings, prior to Katrina and now?

Prior to Katrina [   ]

Now [   ]

31. What is the average committee size, prior to Katrina and now?

Prior to Katrina [   ]

Now [   ]

32. What is the largest number of people from your community you have mobilized for a rally or protest event, prior to Katrina and now?
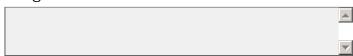
Prior to Katrina [   ]

Now [   ]

33. In your community, approximately how many households experienced the following types of loss due to Katrina? Please approximate.

	Under 5%	About 5-25%	About 25-50%	About 50-75%	About 75-95%	Over 95%
Total destruction of residence	◯	◯	◯	◯	◯	◯
Major destruction of residence	◯	◯	◯	◯	◯	◯
Minor damage to residence	◯	◯	◯	◯	◯	◯
Damage to business property	◯	◯	◯	◯	◯	◯
Short term stoppage of work	◯	◯	◯	◯	◯	◯
Long term stoppage of work	◯	◯	◯	◯	◯	◯
Injury or Death	◯	◯	◯	◯	◯	◯

34. Does your organization have an office?

	Yes	No
Pre-Katrina	◯	◯
Now	◯	◯

35. What has been most helpful in reestablishing your organization and neighborhood?

36. What has been the biggest obstacle in reestablishing your organization and community?

37. Did your organization recommend that community members evacuate New Orleans for Hurricane Katrina before or following the mandatory evacuation order?

◯ Yes

◯ No

38. Did your organization recommend that community members evacuate New Orleans for Hurricane Gustav before or following the mandatory evacuation order?

◯ Yes

◯ No

39. If YES to either, how did your organization communicate the recommendation to evacuate to community members? Please check any that apply.

	Face-to-face	Door-to-door leafleting	By phone	By text-messaging (on cell phones)	Emailing	In your org. newsletter	On your org. website	By "networking" or "chaining" – having people tell others	Other (please describe)
For Hurricane Katrina	€	€	€	€	€	€	€	€	€
For Hurricane Gustav	€	€	€	€	€	€	€	€	€

If "Other" please describe

40. If No, why did your organization not recommend evacuation?

41. Does your organization provide, act on, or address the following items?

	No	No, but Plan to	Yes, but Incomplete or Partial	Yes, Basic	Yes, Extensive	Doesn't Apply; Not Relevant
Track & update residents' contact information	jn	jn	jn	jn	jn	jn
Regularly publish a Newsletter	jn	jn	jn	jn	jn	jn
Maintain an up-to-date website	jn	jn	jn	jn	jn	jn
Send Email messages	jn	jn	jn	jn	jn	jn
Send Text messaging	jn	jn	jn	jn	jn	jn
Emergency Preparedness and Evacuation Planning	jn	jn	jn	jn	jn	jn
Rebuilding/Return guide: Mold, Inspections, House Raising, Building Supplies, Permits, Contractors List, etc.	jn	jn	jn	jn	jn	jn
Invite and encourage renters and/or business owners to join.	jn	jn	jn	jn	jn	jn
Assistance in applying for Road Home & other home rebuilding grants	jn	jn	jn	jn	jn	jn
Medical Information, Resources	jn	jn	jn	jn	jn	jn
Provide Resident Case Management	jn	jn	jn	jn	jn	jn
Maintain Rosters of Property owners	jn	jn	jn	jn	jn	jn
Property Tax Records	jn	jn	jn	jn	jn	jn
Maintain Business Owners List	jn	jn	jn	jn	jn	jn
Track membership dues payment and reminders	jn	jn	jn	jn	jn	jn

42. Does your organization provide, act on, or address the following items? (cont.)

	No	No, but Plan to	Yes, but Incomplete or Partial	Yes, Basic	Yes, Extensive	Doesn't Apply; Not Relevant
Active Committees	jn	jn	jn	jn	jn	jn
Block Captains System	jn	jn	jn	jn	jn	jn
Hold regular neighborhood "town hall" & information meetings	jn	jn	jn	jn	jn	jn
A Plan of Yearly Goals & Objectives	jn	jn	jn	jn	jn	jn
Surveys, Community Mapping	jn	jn	jn	jn	jn	jn
Resident Community Center	jn	jn	jn	jn	jn	jn
Provide copy, telephone, fax, and wireless internet capabilities	jn	jn	jn	jn	jn	jn
Coordinate local and out-of-town volunteer groups for local projects.	jn	jn	jn	jn	jn	jn
Have or coordinate volunteer housing for your neighborhood projects.	jn	jn	jn	jn	jn	jn
Maintain lawn/garden tools, for use by residents and/or volunteers.	jn	jn	jn	jn	jn	jn

43. Does your organization provide, act on, or address the following items? (cont.)

	No	No, but Plan to	Yes, but Incomplete or Partial	Yes, Basic	Yes, Extensive	Doesn't Apply; Not Relevant
Track condition of residents' properties.	jn	jn	jn	jn	jn	jn
Track Blighted properties	jn	jn	jn	jn	jn	jn
Interact Directly with City Agencies to Remediate Blight & Follow Up	jn	jn	jn	jn	jn	jn
Track condition of public properties, streets, etc.	jn	jn	jn	jn	jn	jn
Monitor Compliance With Zoning Regulations & Follow Up	jn	jn	jn	jn	jn	jn
List Abandoned vehicles	jn	jn	jn	jn	jn	jn
Interact Directly with City Agencies to pick up Abandoned vehicles & Follow Up	jn	jn	jn	jn	jn	jn
Neighborhood Safety /Crime Watch	jn	jn	jn	jn	jn	jn
Formal Partnering with Police Department & Follow Up	jn	jn	jn	jn	jn	jn
Collaborate and Advocate with/to City Hall Agencies (e.g. ORDA, NORA, Public Works, NORD).	jn	jn	jn	jn	jn	jn
Collaborate and Advocate with/to City Planning Commission	jn	jn	jn	jn	jn	jn
Collaborate and Advocate with/to City Councilperson	jn	jn	jn	jn	jn	jn
Created a Community Development Corporation (CDC)	jn	jn	jn	jn	jn	jn
Develop marketing strategy to encourage commercial development & repopulation	jn	jn	jn	jn	jn	jn
Seek partnership/investment from neighborhood/city businesses.	jn	jn	jn	jn	jn	jn
Seek investment from outside the region	jn	jn	jn	jn	jn	jn
Seek Government grants	jn	jn	jn	jn	jn	jn
Seek Foundation grants	jn	jn	jn	jn	jn	jn

44. What methods does your organization use to address these items? [check any/all that apply]

	Info Sharing (web, info sheets)	Staff or Vol.	Use a Computer (Database, etc.)	Block Captain, Phone Chain	Committees and Board	Doesn't Apply; Not Relevant
Track & update residents' contact information	∈	∈	∈	∈	∈	∈
Regularly publish a Newsletter	∈	∈	∈	∈	∈	∈
Maintain an up-to-date website	∈	∈	∈	∈	∈	∈
Send Email messages	∈	∈	∈	∈	∈	∈
Send Text messaging	∈	∈	∈	∈	∈	∈
Emergency Preparedness and Evacuation Planning	∈	∈	∈	∈	∈	∈
Rebuilding/Return guide: Mold, Inspections, House Raising, Building Supplies, Permits, Contractors List, etc.	∈	∈	∈	∈	∈	∈
Invite and encourage renters and/or business owners to join.	∈	∈	∈	∈	∈	∈
Assistance in applying for Road Home & other home rebuilding grants	∈	∈	∈	∈	∈	∈
Medical Information, Resources	∈	∈	∈	∈	∈	∈
Provide Resident Case Management	∈	∈	∈	∈	∈	∈
Maintain Rosters of Property owners	∈	∈	∈	∈	∈	∈
Property Tax Records	∈	∈	∈	∈	∈	∈
Maintain Business Owners List	∈	∈	∈	∈	∈	∈
Track membership dues payment and reminders	∈	∈	∈	∈	∈	∈

45. What methods does your organization use to address these items? (cont.) [check any/all that apply]

	Info Sharing (web, info sheets)	Staff or Vol.	Use a Computer (Database, etc.)	Block Captain, Phone Chain	Committees and Board	Doesn't Apply; Not Relevant
Active Committees	∈	∈	∈	∈	∈	∈
Block Captains System	∈	∈	∈	∈	∈	∈
Hold regular neighborhood "town hall" & information meetings	∈	∈	∈	∈	∈	∈
A Plan of Yearly Goals & Objectives	∈	∈	∈	∈	∈	∈
Surveys, Community Mapping	∈	∈	∈	∈	∈	∈
Resident Community Center	∈	∈	∈	∈	∈	∈
Provide copy, telephone, fax, and wireless internet capabilities	∈	∈	∈	∈	∈	∈
Coordinate local and out-of-town volunteer groups for local projects.	∈	∈	∈	∈	∈	∈
Have or coordinate volunteer housing for your neighborhood projects.	∈	∈	∈	∈	∈	∈
Maintain lawn/garden tools, for use by residents and/or volunteers.	∈	∈	∈	∈	∈	∈

46. What methods does your organization use to address these items? (cont.) [check any/all that apply]

	Info Sharing (web, info sheets)	Staff or Vol.	Use a Computer (Database, etc.)	Block Captain, Phone Chain	Committees and Board	Doesn't Apply; Not Relevant
Track condition of residents' properties.	∈	∈	∈	∈	∈	∈
Track Blighted properties	∈	∈	∈	∈	∈	∈
Interact Directly with City Agencies to Remediate Blight & Follow Up	∈	∈	∈	∈	∈	∈
Track condition of public properties, streets, etc.	∈	∈	∈	∈	∈	∈
Monitor Compliance With Zoning Regulations & Follow Up	∈	∈	∈	∈	∈	∈
List Abandoned vehicles	∈	∈	∈	∈	∈	∈
Interact Directly with City Agencies to pick up Abandoned vehicles & Follow Up	∈	∈	∈	∈	∈	∈
Neighborhood Safety /Crime Watch	∈	∈	∈	∈	∈	∈
Formal Partnering with Police Department & Follow Up	∈	∈	∈	∈	∈	∈
Collaborate and Advocate with/to City Hall Agencies (e.g. ORDA, NORA, Public Works, NORD).	∈	∈	∈	∈	∈	∈
Collaborate and Advocate with/to City Planning Commission	∈	∈	∈	∈	∈	∈
Collaborate and Advocate with/to City Councilperson	∈	∈	∈	∈	∈	∈
Created a Community Development Corporation (CDC)	∈	∈	∈	∈	∈	∈
Develop marketing strategy to encourage commercial development & repopulation	∈	∈	∈	∈	∈	∈
Seek partnership/investment from neighborhood/city businesses.	∈	∈	∈	∈	∈	∈
Seek investment from outside the region	∈	∈	∈	∈	∈	∈
Seek Government grants	∈	∈	∈	∈	∈	∈
Seek Foundation grants	∈	∈	∈	∈	∈	∈

47. Does your organization maintain and use a computer database program (e.g., Access, Salesforce, etc.)?

jn No

jn Yes; Which one(s):

48. If yes, please describe how you use the computer data base program(s).

49. Does your organization use block captains, and if so, what are their duties and activities, and what are the strengths and weaknesses of the program?

jn Don't have block captains

jn Yes; please describe the program, its strengths and weaknesses

50. [If your organization use block captains] How successful is the program?

jn Very successful

jn Somewhat successful

jn Not very successful

jn Not at all successful

51. Does your organization have a committee structure?

jn Yes

jn No

52. If yes, what committees do you have, and how active are they?

	Very Active	Somewhat Active	Not Very Active	Don't Have	Not Relevant to our Neighborhood
Neighborhood Safety /Crime Watch	jn	jn	jn	jn	jn
Block Captains	jn	jn	jn	jn	jn
Outreach Committee	jn	jn	jn	jn	jn
Executive Board	jn	jn	jn	jn	jn
Business Committee	jn	jn	jn	jn	jn
Membership/Communications Committee	jn	jn	jn	jn	jn
Economic Development	jn	jn	jn	jn	jn
Community Activities / Beautification	jn	jn	jn	jn	jn
Neighborhood Zoning and Compliance	jn	jn	jn	jn	jn
Historic Preservation	jn	jn	jn	jn	jn
Finance and Development	jn	jn	jn	jn	jn
Other (please describe)	jn	jn	jn	jn	jn

If Other, please describe

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Volunteers

How many Volunteers have assisted your organization? Please estimate as best you can.

53. About how many Volunteer Groups PER MONTH assisted your organization?

From the time of Hurricane Katrina to the end of 2007

Since the start of 2008

54. About how many Individual Volunteers PER MONTH assisted your organization?

From the time of Hurricane Katrina to the end of 2007

Since the start of 2008

55. How effective was the assistance of Volunteers from different sources?

	Highly Effective	Effective	Somewhat Effective	Not Effective	None from this source
Government volunteer programs (e.g. Americorps, City Year, etc.)	○	○	○	○	○
Faith-based & church volunteers	○	○	○	○	○
Red Cross	○	○	○	○	○
Other Nonprofits	○	○	○	○	○
Other Local Community Groups	○	○	○	○	○
Business and/or Company Groups	○	○	○	○	○
Local Students (university & high school)	○	○	○	○	○
Non-Local Students	○	○	○	○	○
Other (please specify)	○	○	○	○	○

If Other, please specify

56. Does your neighborhood area/group work with house building/rehabilitation organizations to improve residents' property (e.g. Rebuilding Together, PNOLA, Habitat, etc).

○ Yes, more than one

○ Yes, just one

○ No, none

57. Does your neighborhood group coordinate volunteer projects and/or partner with other groups to implement local projects.

○ Yes, very often

○ Yes, occasionally

○ No, but would like to

○ No, not a priority

58. How much of a priority is it for your organization to receive and work with volunteers for your goals?

- ◌ High Priority

- ◌ Medium Priority

- ◌ Low Priority

59. How do Volunteers provide support to your organization and neighborhood?

	A Lot	Some	A Little	Not at All	We didn't do this; not relevant; doesn't apply
Gutting houses, clearing debris, other unskilled or semi-skilled physical work	◌	◌	◌	◌	◌
Skilled construction work	◌	◌	◌	◌	◌
Helping residents apply for grants or services	◌	◌	◌	◌	◌
Clerical & office assistance	◌	◌	◌	◌	◌
Transportation, giving rides	◌	◌	◌	◌	◌
Medical assistance (trained)	◌	◌	◌	◌	◌
Counseling (trained)	◌	◌	◌	◌	◌
Legal assistance (trained)	◌	◌	◌	◌	◌
Conducting damage & recovery assessment surveys (incl mapping)	◌	◌	◌	◌	◌
Conducting resident interview surveys	◌	◌	◌	◌	◌

Organizational Relationships & Partnerships

60. Are there other neighborhood organizations whose roles overlap with your organization?

○ Yes

○ No

61. If yes, please list the main ones and describe the nature of the overlap.

62. In general, do you see your relationships with other neighborhood groups as more cooperative or competitive?

○ More cooperative

○ More competitive

63. Please indicate how your neighborhood group has worked with other neighborhood groups/CDC's in the following areas. [check any/all that apply]

	Ad-Hoc/ Project specific	Umbrella Organization	Adjacent Neighborhoods	Planning District Mtgs	City Council Boundaries
Area Economic Development	○	○	○	○	○
Changing/Adjusting Zoning	○	○	○	○	○
Blight and Code Enforcement	○	○	○	○	○
Street/Infrastructure Repairs	○	○	○	○	○
Improve Parks and Common Spaces	○	○	○	○	○
Lobby City Council	○	○	○	○	○
Manage Volunteer Projects	○	○	○	○	○
Work with City Agencies (ORDA, NORA, etc)	○	○	○	○	○
Work with State Legislators	○	○	○	○	○
Other (please specify)	○	○	○	○	○

(please specify Other)

64. How would you rate the effectiveness of your relationships with the following groups?

	Highly Effective	Effective	Somewhat Effective	Not Effective	Not relevant
Your Councilperson & Staff	○	○	○	○	○
State Legislators	○	○	○	○	○
NORA	○	○	○	○	○
ORDA	○	○	○	○	○
Public Works	○	○	○	○	○
City Planning Commission	○	○	○	○	○
Surrounding Neighborhoods	○	○	○	○	○
Recovery School District	○	○	○	○	○
Mayor's Office	○	○	○	○	○
NPN	○	○	○	○	○
Army Corps of Engineers	○	○	○	○	○
NORD	○	○	○	○	○

65. Does your organization compare activities and strategies with organizations in other neighborhoods, in order to learn from each others' experiences?

○ Yes

○ No

66. If yes, who are some of your main partner organizations, and what are some of the main things you have learned from each other? Please indicate for each organization you list.

67. Who do you think would be a helpful partner for your neighborhood group to implement your revitalization goals?

	Very Helpful	Helpful	Somewhat Helpful	Not Helpful	Not relevant
Volunteer Management Organizations (hands-on, Kaboom, Faith based vol, etc).	○	○	○	○	○
Housing Non-Profits (NHS, Fair Housing Action Center, Rebuilding Together, PNOLA, etc)	○	○	○	○	○
Education Non-Profits (SOS Nola, Parents Organizing Network, Rethink)	○	○	○	○	○
Beautification / Quality of Life (Beacons of Hope, etc)	○	○	○	○	○
Health (Mobile Vans, LPHI, Catholic Charities)	○	○	○	○	○
Economic Development (Regional Planning Commission, GNO Inc, Stay Local).	○	○	○	○	○
Local Businesses (rouses, mom & pops)	○	○	○	○	○
National Retailers (Home Depot, Kinko's)	○	○	○	○	○

How NPN Can Help

68. Please indicate how you believe NPN could provide the greatest benefit to its neighborhoods across the city?

	Great Benefit	Significant Benefit	Some Benefit	No Benefit	Not Relevant
Members create and advocate policy to City Hall	jn	jn	jn	jn	jn
Members target foundations and private companies and convince them to invest in neighborhood Revitalization.	jn	jn	jn	jn	jn
Serve as facilitator for member neighborhoods to learn strategies and share information	jn	jn	jn	jn	jn
Provide on-going technical assistance to its member organizations	jn	jn	jn	jn	jn
Assign dedicated liaisons to work with neighborhood groups development	jn	jn	jn	jn	jn
Help create an Office of Neighborhoods to work closely with Neighborhoods	jn	jn	jn	jn	jn

69. Please rate the effectiveness of NPN's programs, resources and services to your neighborhood group?

	Highly Effective	Effective	Somewhat Effective	Not Effective	Not Relevant; Have not used
Neighborhood Liaisons	jn	jn	jn	jn	jn
Forums and Citywide Roundtables	jn	jn	jn	jn	jn
Workshops	jn	jn	jn	jn	jn
Website & Profile Feature	jn	jn	jn	jn	jn
Best Practices Binder	jn	jn	jn	jn	jn
The Trumpet	jn	jn	jn	jn	jn
Advocacy & Info Sharing	jn	jn	jn	jn	jn
E-Newsletter	jn	jn	jn	jn	jn

70. Please share your vision of how NPN can best serve New Orleans and its neighborhoods in the next 3 years. All suggestions and comments are welcome.
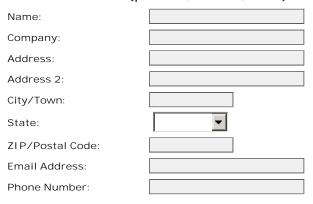
71. What advice would you give other organizations who find themselves in a disaster?

72. Dr. Rick Weil of the LSU Sociology Department, is conducting surveys of community members. Would you be willing to have your community participate in this survey? We will give you the results, which can help you understand you community's needs more fully. Dr. Weil can contact you or a organization administrator about distributing the community survey.

ｊｎ Yes

ｊｎ No

73. If YES, please tell us whom Dr. Weil should contact and what contact information he should use (phone, email, etc.):

Name:

Company:

Address:

Address 2:

City/Town:

State:

ZIP/Postal Code:

Email Address:

Phone Number:

74. Thank you for completing the survey. Your responses are helpful in gaining new insight and data on the best practices of community organizations. We will NOT report your responses by your own name. Please let us know how we may cite your responses by your ORGANIZATION's name in the following ways.

	Yes	Yes, except for the topics listed below	No
As examples in Capacity College	ｊｎ	ｊｎ	ｊｎ
On maps	ｊｎ	ｊｎ	ｊｎ
As examples in scholarly reports and publications	ｊｎ	ｊｎ	ｊｎ
In any public setting	ｊｎ	ｊｎ	ｊｎ

Please give any further explanation to your answers