



Parks & Recreation Department Needs Assessment Survey

Let your voice be heard today!

The City of Carlsbad needs your input to help determine the community's parks and recreation priorities. Parks and recreation facilities and services contribute significantly to Carlsbad's quality of life, and your input is very important to us. This survey will take 10-15 minutes to complete. When you are finished, please return it in the enclosed postage-paid, return-reply envelope. If you prefer, you can complete the survey online at www.carlsbadsurvey.org. We greatly appreciate your time!

1. Have you or any member of your household visited any City of Carlsbad parks, recreation facilities, or sports fields during the year before the start of the Covid-19 Pandemic (March 2020)?

___(1) Yes [Answer Q1a-b.] ___(2) No [Skip to Q2.]

1a. How often have you visited City of Carlsbad parks, recreation facilities, or sports fields during the last 12 months before the Covid-19 Pandemic?

___(1) More than 5 times a week ___(3) Once a week ___(5) Less than once a month
___(2) 2-4 times a week ___(4) 1-3 times a month ___(6) Don't know

1b. Overall, how would you rate the physical condition of ALL the City of Carlsbad parks, recreation facilities and sports fields you have visited?

___(1) Excellent ___(2) Good ___(3) Fair ___(4) Poor

2. Please CHECK ALL the following reasons that prevent you or members of your household from using City of Carlsbad parks, recreation facilities, or sports fields more often. [Check all that apply]

- ___(01) Use parks in other cities
- ___(02) Too far from your home
- ___(03) Parks are not well maintained
- ___(04) Lack of features we want to use
- ___(05) Lack of parking to access parks
- ___(06) Do not feel safe using parks
- ___(07) Lack of handicap accessibility
- ___(08) Not aware of park locations
- ___(09) Lack of transportation
- ___(10) Lack of restrooms
- ___(11) Lack of trust in government
- ___(12) Language/cultural barriers
- ___(13) Other: _____

3. From the following list, please CHECK ALL the service providers that you or members of your household used for recreation and sports activities during the year before the Covid-19 Pandemic (March 2020).

- ___(01) Private schools
- ___(02) Places of worship (e.g. synagogues, churches)
- ___(03) Private and non-profit youth sports
- ___(04) Public schools
- ___(05) Private summer camps
- ___(06) Neighboring cities
- ___(07) Private clubs (tennis, health, swim, fitness)
- ___(08) City of Carlsbad Parks & Recreation Department
- ___(09) YMCA programs
- ___(10) Boys and Girls club
- ___(11) Other: _____

4. From the following list, please CHECK ALL the ways you currently learn about City of Carlsbad Parks & Recreation Department facilities, programs and activities.

- ___(01) City community services guide
- ___(02) City website
- ___(03) Materials at recreation facilities
- ___(04) Conversations with recreation staff
- ___(05) Newspaper
- ___(06) Friends and neighbors
- ___(07) Temporary signs at parks or around the City
- ___(08) Peachjar
- ___(09) Emails
- ___(10) E-newsletter
- ___(11) Facebook
- ___(12) NextDoor
- ___(13) Instagram
- ___(14) Twitter
- ___(15) Flyers
- ___(16) City Council meetings
- ___(17) Other: _____

5. From the list in Question 4, which **THREE** methods of communication would you **MOST PREFER** the City use to communicate with you about recreation facilities, programs and activities? *[Write in your answers below using the numbers from the list in Question 4, or circle "NONE."]*

1st: ____ 2nd: ____ 3rd: ____ NONE

6. Has your household participated in any programs offered by the City of Carlsbad Parks & Recreation Department during the past 12 months before the Covid-19 Pandemic?

____(1) Yes *[Answer Q6a-b.]* ____ (2) No *[Skip to Q7]*

6a. How many City of Carlsbad Parks & Recreation Department programs did you or members of your household participate in during the 12 months before the Covid-19 Pandemic?

____(1) One ____ (2) 2-3 ____ (3) 4-6 ____ (4) 7 or more

6b. How would you rate the overall quality of the City of Carlsbad Parks & Recreation Department programs in which your household has participated?

____(1) Excellent ____ (2) Good ____ (3) Fair ____ (4) Poor

7. Please **CHECK ALL** the following reasons that prevent you and members of your household from participating in City of Carlsbad Parks & Recreation Department programs more often. *[Check all that apply]*

- | | |
|---|--|
| ____(01) Lack of quality instructors | ____(10) Program not offered |
| ____(02) Outdated facilities | ____(11) Registration is difficult |
| ____(03) Use programs of other agencies | ____(12) Poor customer service by staff |
| ____(04) I don't know what is offered | ____(13) Lack of transportation |
| ____(05) Lack of quality programs | ____(14) Lack of right program equipment |
| ____(06) Fees are too high | ____(15) Too busy/Not interested |
| ____(07) Too far from my home | ____(16) Language / cultural barriers |
| ____(08) Program times are not convenient | ____(17) Other: _____ |
| ____(09) Classes are full | |

8. Please indicate your level of agreement with the following statements concerning some potential benefits of the City of Carlsbad's parks and recreation system by circling the corresponding number.

The parks and recreation system in Carlsbad...	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
01. Improves my (my household's) physical health and fitness	5	4	3	2	1	9
02. Helps improve community safety and keep youth out of trouble	5	4	3	2	1	9
03. Makes Carlsbad a more desirable place to live	5	4	3	2	1	9
04. Preserves open space and protects the environment	5	4	3	2	1	9
05. Increases my (my household's) property value	5	4	3	2	1	9
06. Improves my (my household's) mental health and reduces stress	5	4	3	2	1	9
07. Provides positive social interactions for me (my household/family)	5	4	3	2	1	9
08. Helps to attract new residents and businesses	5	4	3	2	1	9
09. Promotes tourism to the city and the region	5	4	3	2	1	9
10. Positively impacts economic/business development	5	4	3	2	1	9
11. Is accessible to all age groups	5	4	3	2	1	9
12. Provides jobs/professional development for youth	5	4	3	2	1	9
13. Provides community volunteer opportunities	5	4	3	2	1	9
14. Provides access to specialized offerings for various groups e.g. Senior Center / Teen programs, etc.	5	4	3	2	1	9

9. Please indicate if you or any member of your household has a need for each of the City of Carlsbad parks and recreation facilities/amenities listed below by circling either "Yes" or "No." If "Yes," please rate how well your need for facilities/amenities of this type are being met using a scale of 1 to 4, where 4 means "Fully Met," and 1 means "Not Met."

	Type of Facility/Amenity	Do you have a need for this facility/amenity?		If "Yes," how well are your needs being met?			
		Yes	No	Fully Met	Mostly Met	Partly Met	Not Met
01.	Universally accessible playground equipment	Yes	No	4	3	2	1
02.	Adventure facility (rock wall, ropes course)	Yes	No	4	3	2	1
03.	Bike park (pump/skills track)	Yes	No	4	3	2	1
04.	Community gardens	Yes	No	4	3	2	1
05.	Community parks	Yes	No	4	3	2	1
06.	Concessions	Yes	No	4	3	2	1
07.	Dining / retail	Yes	No	4	3	2	1
08.	Disc golf course	Yes	No	4	3	2	1
09.	Family picnic areas - covered and uncovered	Yes	No	4	3	2	1
10.	Game tables (e.g. chess, checkers, dominoes etc.)	Yes	No	4	3	2	1
11.	Multigenerational community center	Yes	No	4	3	2	1
12.	Multipurpose diamond fields (e.g. Baseball/ Softball/Cricket)	Yes	No	4	3	2	1
13.	Multipurpose Rectangular Fields (Soccer/Football/Lacrosse/ Rugby)	Yes	No	4	3	2	1
14.	Neighborhood parks	Yes	No	4	3	2	1
15.	Off-leash dog parks	Yes	No	4	3	2	1
16.	Ornamental / interpretive gardens	Yes	No	4	3	2	1
17.	Outdoor basketball / volleyball courts	Yes	No	4	3	2	1
18.	Outdoor Pickleball courts	Yes	No	4	3	2	1
19.	Outdoor swimming pools	Yes	No	4	3	2	1
20.	Skate parks	Yes	No	4	3	2	1
21.	Tennis courts	Yes	No	4	3	2	1
22.	Other: _____	Yes	No	4	3	2	1

10. Which FOUR facilities/amenities from the list in Question 9 are MOST IMPORTANT to your household? [Write in your answers below using the numbers from the list in Question 9, or circle "NONE."]

1st: ____ 2nd: ____ 3rd: ____ 4th: ____ NONE

11. Please indicate if you or any member of your household has a need for each of the recreation programs in the City of Carlsbad listed below by circling either "Yes" or "No."

If "Yes," please rate how well your need for recreation programs of this type are being met using a scale of 1 to 4, where 4 means "Fully Met," and 1 means "Not Met."

	Type of Program	Do you have a need for this program?		If "Yes," how well are your needs being met?			
		Yes	No	Fully Met	Mostly Met	Partly Met	Not Met
01.	Adult fitness and wellness programs	Yes	No	4	3	2	1
02.	Adult sports programs	Yes	No	4	3	2	1
03.	Aquatics programming (swim lessons, recreation/lap swim, competitive training, etc.)	Yes	No	4	3	2	1
04.	Before and after school programs	Yes	No	4	3	2	1
05.	City-sponsored special events (Eggstravaganza, Holiday at the Rancho, Teen Scene, Movie Night, etc.)	Yes	No	4	3	2	1
06.	Culinary arts (cooking, baking, etc.)	Yes	No	4	3	2	1
07.	Cultural arts programs	Yes	No	4	3	2	1
08.	Dancing	Yes	No	4	3	2	1
09.	Dog training	Yes	No	4	3	2	1
10.	Environmental education programs	Yes	No	4	3	2	1
11.	Esports programs / leagues / tournaments	Yes	No	4	3	2	1
12.	Intergenerational programming	Yes	No	4	3	2	1
13.	Gymnastics and tumbling programs	Yes	No	4	3	2	1
14.	Martial arts programs	Yes	No	4	3	2	1
15.	Outdoor skills / adventure programs	Yes	No	4	3	2	1
16.	Preschool programs	Yes	No	4	3	2	1
17.	Programs for individuals with disabilities	Yes	No	4	3	2	1
18.	Senior adult and fitness programs (age 50+)	Yes	No	4	3	2	1
19.	Senior Trips / Other Targeted Senior Programs	Yes	No	4	3	2	1
20.	Teen programs	Yes	No	4	3	2	1
21.	Teen Day Trips	Yes	No	4	3	2	1
22.	Tennis programs	Yes	No	4	3	2	1
23.	Unstructured indoor play	Yes	No	4	3	2	1
24.	Youth enrichment camp programs	Yes	No	4	3	2	1
25.	Youth fitness and wellness programs	Yes	No	4	3	2	1
26.	Youth sports programs	Yes	No	4	3	2	1
27.	Youth summer camp programs	Yes	No	4	3	2	1
28.	Other: _____	Yes	No	4	3	2	1

12. Which FOUR facilities/amenities from the list in Question 11 are MOST IMPORTANT to your household? [Write in your answers below using the numbers from the list in Question 11, or circle "NONE."]

1st: ____ 2nd: ____ 3rd: ____ 4th: ____ NONE

13. The following is a list of actions the City of Carlsbad could take to improve the parks and recreation system. Please indicate your level of support for renovating or developing new facilities for each item by circling the corresponding number to the right.

How supportive are you of having the City of Carlsbad renovate and/or develop new facilities for.....		Very Supportive	Somewhat Supportive	Not Sure	Not Supportive
01.	Multipurpose fields.	4	3	2	1
02.	Adventure facility (rock wall, ropes course)	4	3	2	1
03.	Amphitheater	4	3	2	1
04.	Arena / speed soccer	4	3	2	1
05.	Better lighting in parks	4	3	2	1
06.	Bike park (pump/skills track)	4	3	2	1
07.	Botanical or ornamental gardens	4	3	2	1
08.	Community gardens	4	3	2	1
09.	Concessions	4	3	2	1
10.	Conference / trade shows /training center	4	3	2	1
11.	Culinary arts (cooking, baking, etc.)	4	3	2	1
12.	Cultural arts programs	4	3	2	1
13.	Dining/retail	4	3	2	1
14.	Disc golf course	4	3	2	1
15.	Family picnic areas (covered and uncovered)	4	3	2	1
16.	More shaded areas in parks	4	3	2	1
17.	Multigenerational community center (fitness/recreation/meeting space)	4	3	2	1
18.	Off-leash dog parks	4	3	2	1
19.	Outdoor basketball courts	4	3	2	1
20.	Outdoor swimming pools	4	3	2	1
21.	Outdoor Pickleball courts	4	3	2	1
22.	Playground equipment	4	3	2	1
23.	Radio controlled aircraft/drone fields	4	3	2	1
24.	Senior center (age 50+)	4	3	2	1
25.	Skateboard parks	4	3	2	1
26.	Synthetic turf fields	4	3	2	1
27.	Teen center	4	3	2	1
28.	Tennis courts	4	3	2	1
29.	Unstructured indoor play	4	3	2	1
30.	Youth multi-purpose fields	4	3	2	1
31.	Other: _____	4	3	2	1

14. Which FOUR actions from the list in Question 13 would your household be MOST WILLING to fund? [Write in your answers below using the numbers from the list in Question 13, or circle "NONE."]

1st: _____ 2nd: _____ 3rd: _____ 4th: _____ NONE

15. During the Covid-19 Pandemic (March 2020 – June 2021), what types of virtual programs/activities did you participate in? [Check ALL that apply]

- | | |
|--|---|
| _____ (1) Virtual tours | _____ (5) Virtual performing arts classes |
| _____ (2) Virtual camps | _____ (6) Virtual health and wellness programs |
| _____ (3) Virtual arts and craft classes | _____ (7) Other: _____ |
| _____ (4) Virtual fitness classes | _____ (8) Haven't participated in virtual programs/activities |

16. Beyond the Covid-19 Pandemic, what types of virtual programs/activities would you be interested in participating in? [Check ALL that apply]

- | | |
|--|--|
| <input type="checkbox"/> (1) Virtual tours | <input type="checkbox"/> (5) Virtual performing arts classes |
| <input type="checkbox"/> (2) Virtual camps | <input type="checkbox"/> (6) Virtual health and wellness programs |
| <input type="checkbox"/> (3) Virtual arts and crafts Classes | <input type="checkbox"/> (7) Other: _____ |
| <input type="checkbox"/> (4) Virtual fitness classes | <input type="checkbox"/> (8) Not interested in virtual programs/activities |

FUNDING

17. Please rate your level of satisfaction with the overall value that your household receives from the City of Carlsbad Parks & Recreation Department.

- | | | |
|---|---|--|
| <input type="checkbox"/> (1) Very satisfied | <input type="checkbox"/> (3) Neutral | <input type="checkbox"/> (5) Very dissatisfied |
| <input type="checkbox"/> (2) Satisfied | <input type="checkbox"/> (4) Dissatisfied | <input type="checkbox"/> (6) Don't know |

18. Given the recent Covid-19 Pandemic, how has your and your household's perception of the value of parks and recreation changed?

- | | | |
|---|---|--|
| <input type="checkbox"/> (1) Increased | <input type="checkbox"/> (3) No change | <input type="checkbox"/> (5) Decreased |
| <input type="checkbox"/> (2) Somewhat increased | <input type="checkbox"/> (4) Somewhat decreased | |

19. Would you or your household like to see the city place a greater emphasis on parks and recreation projects, programs, and services?

- | | | | |
|---|--|---|---------------------------------------|
| <input type="checkbox"/> (1) Increase funding | <input type="checkbox"/> (2) Maintain existing funding | <input type="checkbox"/> (3) Reduce funding | <input type="checkbox"/> (4) Not sure |
|---|--|---|---------------------------------------|

DEMOGRAPHICS

20. Your gender: (1) Male (2) Female (3) Non-binary

21. Including yourself, how many people in your household are...

- | | | | |
|---------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| Under age 5: <input type="checkbox"/> | Ages 15-19: <input type="checkbox"/> | Ages 35-44: <input type="checkbox"/> | Ages 65-74: <input type="checkbox"/> |
| Ages 5-9: <input type="checkbox"/> | Ages 20-24: <input type="checkbox"/> | Ages 45-54: <input type="checkbox"/> | Ages 75-84: <input type="checkbox"/> |
| Ages 10-14: <input type="checkbox"/> | Ages 25-34: <input type="checkbox"/> | Ages 55-64: <input type="checkbox"/> | Ages 85+: <input type="checkbox"/> |

22. Your age: _____ years

23. How many years have you lived in Carlsbad? _____ years

24. Which of the following best describes your race/ethnicity?

- | | | |
|---|---|--|
| <input type="checkbox"/> (1) White/Caucasian | <input type="checkbox"/> (4) African American/Black | <input type="checkbox"/> (6) Hispanic/Latino |
| <input type="checkbox"/> (2) Asian | <input type="checkbox"/> (5) Native American | <input type="checkbox"/> (7) Other: _____ |
| <input type="checkbox"/> (3) Pacific Islander | | |

25. Please share any additional comments that can assist the City of Carlsbad Parks & Recreation Department in improving their projects, programs, and services.

This concludes the survey – Thank you for your time!

Please return your completed survey in the enclosed return-reply envelope addressed to:
ETC Institute, 725 W. Frontier Circle, Olathe, KS 66061

Your responses will remain anonymous. The information provided will ONLY be used to help identify the level of need and priorities in your area. Thank you!