

The following pages are a copy of the questions being asked by MORI.

They are not part of the information that MORI will use as its statistically selected sample for Fylde's CPA report, but the pages do show the sort of questions that are being asked.

If you have any views – whether inspired by these questions – or otherwise, about how you think Fylde Council is performing, a Comprehensive Performance Assessment Team from the Audit Commission reviewing FBC at the moment.

You could tell them your views so they know how you feel.

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ADDRESS1
ADDRESS2
ADDRESS3
ADDRESS4
POSTCODE

October 2008

Dear local resident,

We are writing to you to ask for your views.

Fylde Borough Council and Lancashire County Council work closely with other public services such as the police, health, business and community representatives to make decisions about the provision of services for local people. They now need to know what you think about what it's like to live in your area so they can be certain they are dealing with the issues that concern and matter to you.

This questionnaire asks for your opinions about aspects of the quality of life in your local area (such as community safety, local services etc) which we know are important to local people. By your local area, we mean the area within 15-20 minutes walking distance from your home. The findings from this research will be used to see how well Fylde Borough Council, Lancashire County Council and its partners are doing at delivering the services that matter to you and to decide what needs doing differently in the future.

Please take this opportunity to have your say. It doesn't matter if you've only just moved into the area or if you don't pay council tax. It's important that we hear everybody's views.

To ensure personal information about you is secure, all of your answers will be treated in the strictest confidence and will be stored securely. Responses, which will not include personal information such as names and addresses, will only be used by public service organisations to monitor public services and assess how well they are performing.

If you have any questions or concerns about this survey please do not hesitate to contact the Ipsos MORI helpline on FREEPHONE 0808 238 5402 or email having.your.say@ipsos-mori.com. Alternatively, please contact please call Alex Scrivens at Fylde Borough Council on 01253 658490 or at alexs@fylde.gov.uk who will be happy to help you.

We very much hope you will be able to take part and thank you very much for your help in advance. Please return the completed questionnaire in the pre-paid envelope provided with this questionnaire as soon as possible or by 19 December 2008.

No stamp is required.

Yours sincerely,


RESUPPLY AS HIGH
RES JPEG

Allan Oldfield
Director of Performance and Improvement
Fylde Borough Council



County Councillor Hazel Harding
Leader of Lancashire County Council

**If you require a large print copy please contact Ipsos MORI on
FREEPHONE 0808 238 5402 or email having.your.say@ipsos-mori.com**

HELPFUL HINTS FOR COMPLETING THIS QUESTIONNAIRE

- The questionnaire should be completed by any resident aged 18 or over living at this address.
- Please read each question carefully and tick a box to indicate your answer.
- In most cases you will only have to tick one box but please read the questions carefully as sometimes you will need to tick more than one box.
- Answer the next question unless asked otherwise.
- Some questions include an 'other' option. If you would like to include an answer other than one of those listed within the question, please tick the 'other' box and write in your answer in the space provided.
- Once you have finished please take a minute to check you have answered all the questions that you should have answered.
- This questionnaire consists of 12 pages and should take no longer than 15 minutes to complete. Thank you in advance for your time.
- Once you have completed the questionnaire please return in the pre-addressed envelope supplied.

You do not need to add a stamp.

If you would like more information in your own language, please let us know by phone or email. The details are shown at the bottom of the page.

Bengali যদি আপনার নিজের ভাষায় লেখা আরও তথ্য চান তাহলে দয়া করে আমাদের সঙ্গে যোগাযোগ করুন, উনার বক্ সে আমাদের ঠিকানা রয়েছে।

Chinese 如果你需要用中文印成的資料，請按低端方格內提供的地址與我們聯系。

Gujarati જો તમને તમારી પોતાની ભાષામાં વધારે માહિતી જોઈતી હોય, તો કૃપા કરીને નીચે અંતમાં આપેલા ખાનામાં દર્શાવેલા સરનામે અમારો સંપર્ક કરો.

Hindi यदि आप अपनी भाषा में अधिक जानकारी चाहत हैं तो कृपया हमसानीचाबॉक्स में दिखाए गए पतापर संपर्क करें

Punjabi (Gurmukhi script) ਜੇਕਰ ਤੁਸੀਂ ਪੰਜਾਬੀ ਵਿਚ ਹੋਰ ਜਾਣਕਾਰੀ ਲੈਣੀ ਚਾਹੁੰਦੇ ਹੋ ਤਾਂ ਕ੍ਰਿਪਾ ਕਰਕੇ ਹੇਠ ਲਿਖੇ ਖਾਨੇ ਵਿਚ ਦਿੱਤੇ ਪਤੇ 'ਤੇ ਸਾਡੇ ਠਾਲ ਸੰਪਰਕ ਕਰੋ।

Punjabi (Urdu script) ہوز معلومات چاہی دیاں ہون تہ کھلے خاصٹو لکھے ہوئے پتے تہ ساڈا ٹال بٹھ کو نوں اپنی زبان

Urdu اگر آپ اپنی زبان میں مزید معلومات حاصل کرنا چاہتے ہیں تو براہ کرم ہم سے اس پتے پر رابطہ قائم کریں جو کہ نیچے کے بکس میں درج ہے۔

having.your.say@ipsos-mori.com

FREEPHONE: 0808 238 5402

Section 1: About your local area

Throughout the questionnaire we ask you to think about 'your local area'. When answering, please consider your local area to be the area within 15-20 minutes walking distance from your home.

Q1 Thinking generally, which of the things below would you say are most important in making somewhere a good place to live?
PLEASE TICK ✓ UP TO FIVE BOXES ONLY IN THE LEFT HAND COLUMN BELOW

Q2 And thinking about this local area, which of the things below, if any, do you think most need improving?
PLEASE TICK ✓ UP TO FIVE BOXES ONLY IN THE RIGHT HAND COLUMN BELOW

	Q1 Most important in making somewhere a good place to live	Q2 Most needs improving in this local area
Access to nature	<input type="checkbox"/>	<input type="checkbox"/>
Activities for teenagers	<input type="checkbox"/>	<input type="checkbox"/>
Affordable decent housing	<input type="checkbox"/>	<input type="checkbox"/>
Clean streets	<input type="checkbox"/>	<input type="checkbox"/>
Community activities	<input type="checkbox"/>	<input type="checkbox"/>
Cultural facilities (e.g. libraries, museums).	<input type="checkbox"/>	<input type="checkbox"/>
Education provision	<input type="checkbox"/>	<input type="checkbox"/>
Facilities for young children.	<input type="checkbox"/>	<input type="checkbox"/>
Health services	<input type="checkbox"/>	<input type="checkbox"/>
Job prospects.	<input type="checkbox"/>	<input type="checkbox"/>
The level of crime	<input type="checkbox"/>	<input type="checkbox"/>
The level of pollution	<input type="checkbox"/>	<input type="checkbox"/>
The level of traffic congestion	<input type="checkbox"/>	<input type="checkbox"/>
Parks and open spaces	<input type="checkbox"/>	<input type="checkbox"/>
Public transport.	<input type="checkbox"/>	<input type="checkbox"/>
Race relations.	<input type="checkbox"/>	<input type="checkbox"/>
Road and pavement repairs.	<input type="checkbox"/>	<input type="checkbox"/>
Shopping facilities	<input type="checkbox"/>	<input type="checkbox"/>
Sports and leisure facilities.	<input type="checkbox"/>	<input type="checkbox"/>
Wage levels and local cost of living.	<input type="checkbox"/>	<input type="checkbox"/>
Q1 - Other	<input type="checkbox"/>	

(PLEASE TICK BOX AND WRITE IN BELOW)

Q2 - Other

(PLEASE TICK BOX AND WRITE IN BELOW)

None of these.
 Don't know



Overall, how satisfied or dissatisfied are you with your local area as a place to live?

Q3 PLEASE TICK ✓ ONE BOX ONLY

- | | |
|---|--|
| <input type="checkbox"/> Very satisfied | <input type="checkbox"/> Fairly dissatisfied |
| <input type="checkbox"/> Fairly satisfied | <input type="checkbox"/> Very dissatisfied |
| <input type="checkbox"/> Neither satisfied nor dissatisfied | |

And how satisfied or dissatisfied are you with your home as a place to live?

Q4 PLEASE TICK ✓ ONE BOX ONLY

- | | |
|---|--|
| <input type="checkbox"/> Very satisfied | <input type="checkbox"/> Fairly dissatisfied |
| <input type="checkbox"/> Fairly satisfied | <input type="checkbox"/> Very dissatisfied |
| <input type="checkbox"/> Neither satisfied nor dissatisfied | |

How strongly do you feel you belong to your immediate neighbourhood?

Q5 PLEASE TICK ✓ ONE BOX ONLY

- | | | | | |
|---|---|---|---|--|
| Very strongly
<input type="checkbox"/> | Fairly strongly
<input type="checkbox"/> | Not very strongly
<input type="checkbox"/> | Not at all strongly
<input type="checkbox"/> | Don't know
<input type="checkbox"/> |
|---|---|---|---|--|

Section 2: Your local public services

Here are some things that people have said about their local public services. To what extent do you think that these statements apply to public services in your local area?

Q6 PLEASE TICK ✓ ONE BOX ONLY FOR EACH STATEMENT

Local public services.....	A great deal	To some extent	Not very much	Not at all	Don't know
...are working to make the area safer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...are working to make the area cleaner and greener.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...promote the interests of local residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...act on the concerns of local residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...treat all types of people fairly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate how satisfied or dissatisfied you are with each of the following public services in your local area.

Q7 PLEASE TICK ✓ ONE BOX ONLY FOR EACH SERVICE

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know	Haven't used the service
Lancashire Constabulary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lancashire Fire and Rescue Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your GP (family doctor)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your local hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your local dentist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Q8 Fylde Borough Council and Lancashire County Council are also key providers of public services locally, so we would like your views on some of the services they provide. How satisfied or dissatisfied are you with each of the following services provided or supported by Fylde Borough Council and Lancashire County Council?

PLEASE TICK ✓ ONE BOX ONLY FOR EACH SERVICE

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know
Keeping public land clear of litter and refuse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refuse collection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doorstep recycling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local tips/household waste recycling centres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local transport information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local bus services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sport/leisure facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libraries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Museums/galleries.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Theatres/concert halls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks and open spaces.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q9 Please indicate how frequently you have used the following public services provided or supported by Fylde Borough Council and Lancashire County Council.

PLEASE TICK ✓ ONE BOX FOR EACH SERVICE

	Almost every day	At least once a week	About once a month	Within the last 6 months	Within the last year	Longer ago	Never used	It does not apply/ don't know
Local tips/household waste recycling centres	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local transport information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local bus services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sport/leisure facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libraries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Museums/galleries.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Theatres/concert halls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks and open spaces.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

As you live in a two-tier authority you have a **county council** and a **district council**. County councils are responsible for education, social care, transport planning, highways, consumer protection, waste disposal, small holdings and libraries. District councils are responsible for local planning applications, housing, building regulations, environmental health, waste collection, revenue collection, leisure and recreation.

Q10 To what extent do you agree or disagree that Fylde Borough Council and Lancashire County Council provide value for money?

PLEASE TICK ✓ ONE BOX ONLY FOR EACH COUNCIL

	Strongly agree	Tend to agree	Neither agree or disagree	Tend to disagree	Strongly disagree	Don't know
Fylde Borough Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lancashire County Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q11 And now taking everything into account, how satisfied or dissatisfied are you with the way Fylde Borough Council and Lancashire County Council run things?

PLEASE TICK ✓ ONE BOX ONLY FOR EACH COUNCIL

	Very satisfied	Fairly satisfied	Neither satisfied or dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know
Fylde Borough Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lancashire County Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 3: Information

How well informed do you feel about each of the following?

Q12 **PLEASE TICK ✓ ONE BOX ONLY FOR EACH STATEMENT**

	Very well informed	Fairly well informed	Not very well informed	Not well informed at all	Don't know
How and where to register to vote	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How your council tax is spent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How you can get involved in local decision-making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What standard of service you should expect from local public services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How well local public services are performing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How to complain about local public services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What to do in the event of a large-scale emergency e.g. flooding, human pandemic flu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall, how well informed do you feel about local public services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 4: Local decision-making

As with previous questions, when answering, please consider your local area to be the area within 15-20 minutes walking distance from your home.

Q13 Do you agree or disagree that you can influence decisions affecting your local area?
PLEASE TICK ✓ ONE BOX ONLY

Definitely
agree

Tend
to agree

Tend to
disagree

Definitely
disagree

Don't
know

Q14 Generally speaking, would you like to be more involved in the decisions that affect your local area?
PLEASE TICK ✓ ONE BOX ONLY

Yes

No

Depends on
the issue

Don't
know

Section 5: Helping out

We are interested to know about the unpaid help people give.

Please think about any group(s), club(s) or organisation(s) that you've been involved with during the last 12 months. That's anything you've taken part in, supported, or that you've helped in any way, either on your own or with others. For example, helping at a youth or day centre, helping to run an event, campaigning or doing administrative work.

Please exclude giving money and anything that was a requirement of your job.

Q15 Overall, about how often over the last 12 months have you given unpaid help to any group(s), club(s) or organisation(s)?

Please only include work that is unpaid and not for your family.

PLEASE TICK ✓ ONE BOX ONLY

At least once a week

Less than once a week but at least once a month

Less often

I give unpaid help as an individual only and not through group(s), club(s) or organisation(s)

I have not given any unpaid help at all over the last 12 months

Don't know

Section 8: Community safety

Q22 How safe or unsafe do you feel when outside in your local area after dark?
PLEASE TICK ✓ ONE BOX ONLY IN THE LEFT HAND COLUMN BELOW

Q23 How safe or unsafe do you feel when outside in your local area during the day?
PLEASE TICK ✓ ONE BOX ONLY IN THE RIGHT HAND COLUMN BELOW

	Q22 After dark	Q23 During the day
Very safe	<input type="checkbox"/>	<input type="checkbox"/>
Fairly safe	<input type="checkbox"/>	<input type="checkbox"/>
Neither safe nor unsafe	<input type="checkbox"/>	<input type="checkbox"/>
Fairly unsafe	<input type="checkbox"/>	<input type="checkbox"/>
Very unsafe	<input type="checkbox"/>	<input type="checkbox"/>
Don't know	<input type="checkbox"/>	<input type="checkbox"/>

Q24 Thinking about this local area, how much of a problem if at all, do you think each of the following are...
PLEASE TICK ✓ ONE BOX ONLY FOR EACH STATEMENT

	A very big problem	A fairly big problem	Not a very big problem	Not a problem at all	No opinion
Noisy neighbours or loud parties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teenagers hanging around the streets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rubbish or litter lying around	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vandalism, graffiti and other deliberate damage to property or vehicles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People using or dealing drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People being drunk or rowdy in public places	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abandoned or burnt out cars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

It is the responsibility of the police and other local public services to work in partnership to deal with anti-social behaviour and crime in your local area.

Q25 So, how much would you agree or disagree that the police and other local public services seek people's views about these issues in your local area?
PLEASE TICK ✓ ONE BOX ONLY IN THE LEFT HAND COLUMN BELOW

Q26 And how much would you agree or disagree that the police and other local public services are successfully dealing with these issues in your local area?
PLEASE TICK ✓ ONE BOX ONLY IN THE RIGHT HAND COLUMN BELOW

	Q25 Seek people's views	Q26 Are successfully dealing with
Strongly agree	<input type="checkbox"/>	<input type="checkbox"/>
Tend to agree	<input type="checkbox"/>	<input type="checkbox"/>
Neither agree or disagree	<input type="checkbox"/>	<input type="checkbox"/>
Tend to disagree	<input type="checkbox"/>	<input type="checkbox"/>
Strongly disagree	<input type="checkbox"/>	<input type="checkbox"/>
Don't know	<input type="checkbox"/>	<input type="checkbox"/>

Thinking about crime in your local area, do you think there is more or less crime than two years ago?

Q27 PLEASE TICK ✓ ONE BOX ONLY

- | | | | | | |
|--------------------------|--------------------------|--------------------------------|--------------------------|--------------------------|--------------------------|
| A lot more crime | A little more crime | About the same amount of crime | A little less crime | A lot less crime | Don't know/no opinion |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PLEASE ANSWER THIS QUESTION IF YOU THINK THERE IS MORE OR LESS CRIME IN YOUR AREA. OTHERWISE GO TO Q29.

Why do you think there is more or less crime in your local area?

Q28 PLEASE TICK ✓ AS MANY BOXES AS APPLY

- | | |
|---|---|
| <input type="checkbox"/> Personal experience | <input type="checkbox"/> Radio programs |
| <input type="checkbox"/> Relatives' and/or friends' experiences | <input type="checkbox"/> Internet/world-wide-web |
| <input type="checkbox"/> Word of mouth/Information from other people | <input type="checkbox"/> Other (✓ TICK AND WRITE IN BELOW) |
| <input type="checkbox"/> Reports in broadsheet newspapers (eg Times, Guardian, Telegraph) | <div style="border: 1px solid black; height: 30px; width: 100%;"></div> |
| <input type="checkbox"/> Reports in tabloid newspapers (eg Sun, Express, Daily Mail) | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> Local newspapers | |
| <input type="checkbox"/> News programmes on TV | |

Here is a list of a number of everyday situations. In which of these situations, if any, would you say you regularly meet and talk with people of a different ethnic origin to you?

Q29 PLEASE TICK ✓ AS MANY BOXES AS APPLY

- | | |
|---|--|
| <input type="checkbox"/> At local shop | <input type="checkbox"/> In your neighbourhood |
| <input type="checkbox"/> At work | <input type="checkbox"/> On buses and trains |
| <input type="checkbox"/> At a place of study e.g. school, college or university | <input type="checkbox"/> At sports or fitness activities |
| <input type="checkbox"/> At a place of worship | <input type="checkbox"/> At youth clubs |
| <input type="checkbox"/> At a relative's home | <input type="checkbox"/> At other place |
| <input type="checkbox"/> At restaurants, pubs, cinemas, community centres etc. | <input type="checkbox"/> None of these |

FINALLY, WE WOULD LIKE TO ASK YOU A FEW QUESTIONS ON YOUR GENERAL WELLBEING.

Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last two weeks.

Q30 PLEASE TICK ✓ ONE BOX ONLY FOR EACH STATEMENT

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling useful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling relaxed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been dealing with problems well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been thinking clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling close to other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been able to make up my own mind about things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 9: About yourself

Please complete these questions which will help us to see if there are differences between the views of different residents. All the information you give will be kept completely confidential.

Are you male or female?

Q31 PLEASE TICK ✓ ONE BOX ONLY

- Male Female

What was your age on your last birthday?

Q32 PLEASE WRITE IN BOX OPPOSITE

Years

How is your health in general? Would you say it is.....

Q33 PLEASE TICK ✓ ONE BOX ONLY

- Very good
- Good
- Fair
- Bad
- Very bad

In which of these ways does your household occupy your current accommodation?

Q34 PLEASE TICK ✓ ONE BOX ONLY

- Owned outright
- Buying on mortgage
- Rent from council
- Rent from Housing Association/Trust
- Rented from private landlord
- Other **(PLEASE TICK ✓ AND WRITE IN BELOW)**

How many children aged 17 or under are living here?

Q35 PLEASE TICK ✓ ONE BOX ONLY

- None
- One
- Two
- Three
- Four
- More than four **(PLEASE TICK ✓ AND WRITE IN BELOW)**

And how many adults aged 18 or over are living here?

Q36 PLEASE TICK ✓ ONE BOX ONLY

- None
- One
- Two
- Three
- Four
- More than four **(PLEASE TICK ✓ AND WRITE IN BELOW)**

Which of these activities best describes what you are doing at present?

Q37 PLEASE TICK ✓ ONE BOX ONLY

- Employee in full-time job (30 hours plus per week)
- Employee in part-time job (under 30 hours per week)
- Self employed full or part-time
- On a government supported training programme (e.g. Modern Apprenticeship, Training for Work)
- Full-time education at school, college or university
- Unemployed and available for work
- Permanently sick/disabled
- Wholly retired from work
- Looking after the home
- Doing something else **(PLEASE TICK ✓ AND WRITE IN BELOW)**

Please select any of the following qualifications or certificates you have achieved...

Q38 PLEASE TICK ✓ AS MANY BOXES AS APPLY

- Foundation GNVQ, GCSE, O level, CSE
- Intermediate GNVQ, A levels, AS level
- Advanced GNVQ, National certificate
- City and Guilds, RSA/OCR, BTEC
- Undergraduate degree, Teaching certificate
- Postgraduate degree
- Trade apprenticeship
- None of these
- Other qualifications **(PLEASE TICK ✓ AND WRITE IN BELOW)**

Q39 Do you plan to work towards another qualification in the next 3 years?
PLEASE TICK ✓ AS MANY BOXES THAT APPLY

- No
- Yes
- Yes – if my employer supports me
- Yes – if I find a local part-time course
- Yes – if I can find an online course
- Don't know

Q40 Do you have any long-standing illness, disability or infirmity? (Long-standing means anything that has troubled you over a period of time or that is likely to affect you over a period of time.)

PLEASE TICK ✓ ONE BOX ONLY

- Yes (PLEASE CONTINUE TO Q41)
- No (PLEASE GO TO Q42)

Q41 Does this illness or disability limit your activities in any way?

PLEASE TICK ✓ ONE BOX ONLY

- Yes
- No

Q42 To which of these groups do you consider you belong to?

PLEASE TICK ✓ ONE BOX ONLY

White

- British
 - Irish
 - Any other White background
- (PLEASE TICK ✓ AND WRITE IN BELOW)

Black or Black British

- Caribbean
 - African
 - Any other Black background
- (PLEASE TICK ✓ AND WRITE IN BELOW)

Mixed

- White & Black Caribbean
 - White & Black African
 - White & Asian
 - Any other Mixed background
- (PLEASE TICK ✓ AND WRITE IN BELOW)

Asian or Asian British

- Indian
 - Pakistani
 - Bangladeshi
 - Any other Asian background
- (PLEASE TICK ✓ AND WRITE IN BELOW)

Chinese and Other ethnic groups

- Chinese

- Other ethnic group
- (PLEASE TICK ✓ AND WRITE IN BELOW)

Q43 Is there anything else you would like to add?

PLEASE WRITE IN BELOW

Thank you very much for taking part in this survey.