

Review of the Families Continuous Attitude Survey, 2015

BACKGROUND

1. The Families Continuous Attitude Survey (FAMCAS) is an annual survey of UK regular Service personnel's spouses and civil partners. It is one of the main ways that the Ministry of Defence gathers information on their views and experiences in order to become aware of the nature and extent of issues that Service families are facing. This data can then be used to monitor trends, inform policy and focus efforts for improvements.
2. The survey is distributed to a stratified sample of Service personnel, with a request for them to pass it on to their spouses / civil partners for completion, through paper and on-line questionnaires. In 2014 over 7,000 Service spouses / civil partners responded to the survey (a response rate of 25%). The survey is an Official Statistic.
3. Following an internal review of survey content we are seeking further user views on the proposed changes.

REASONS FOR THE PROPOSED CHANGES

4. A review of FAMCAS began in 2014 aimed at providing a more relevant survey which reflects the current requirements of data users, and which is easier for respondents to complete. The review was also aimed at making further changes which would improve response rates.
5. The proposed changes to the survey should have the following outcomes:
 - Improved readability.
 - Swifter completion.
 - Data that is more relevant to user needs.
 - More opportunities for respondents to tell us issues they face in their own words.

SURVEY CONTENT AND PROPOSED CHANGES

6. Based on the internal consultation process the following changes are proposed
 - A small number of questions have been suggested for deletion as these are no longer felt to be relevant by internal stakeholders, or the data is available from another source
 - Some questions would be revised to ensure they are easier to read and respond to
 - Other questions would be revised to allow results to be compared with those from other surveys
 - Some questions have been reordered to allow ease of completion
 - A small number of follow up questions have been added to help understanding of responses

- Some minor methodological changes are made to help improve response rates such as the increased use of filtering questions to assist respondents and changes to the distribution of the questionnaire
- The only significant methodological change proposed is whether the use of electronic surveys should be extended. This should improve response rates and consequently the robustness of the data available

Annex A contains a more detailed overview of the changes made

Annex B contains the proposed new questionnaire with additions and changes flagged

Annex C contains a list of the questions that have been proposed for deletion

IMPLICATIONS OF CHANGES ON RESULTS AND REPORTING

7. Where questions have been amended or re-worded, this will result in the loss of the ability to compare results over time, as it will not be known whether observed changes are due to changes in attitudes or due to the changes to the questions.
8. Where questions have been removed from the survey, the topics will no longer be included in FAMCAS reporting. The information may be available from other sources.
9. Minor changes to the methodology should not impact on the ability to make comparisons over time for the remaining questions.
10. However, if the use of electronic questionnaires is extended this may impact on the ability to compare results over time, as observed changes may be due to changes in attitudes or because different types of people are completing the electronic questionnaire. If the use of electronic questionnaires is extended, testing on the new results should be able to ascertain what impact this change has had.

EXTERNAL CONSULTATION FEED BACK ON PROPOSED CHANGES

Considering the reasons for the proposed changes, we now invite the feedback of our external data users, particularly on the following areas:

- a) What impact will the removal of questions highlighted in Annex x have on you?
- b) What impact will the proposed additions / changes to the survey have on you?
- c) Is there any additional content that you feel should be reflected in FAMCAS?

We would also like your views on other aspects of the survey, particularly:

- a) Examples of how you have used results from the survey
- b) Do you have any other comments you would like to raise on the survey?

TIMINGS

This consultation will run from 19 August to 30 September 2014. This consultation process is in line with Official Statistics protocols.

If you have any comments on the proposed changes please send:

by email to DefStrat-Stat-WDS-Consult@mod.uk

by post to
FAMCAS Review
Defence Statistics (WDS),
Ministry of Defence,
Main Building,
Floor 3 Zone K,
Whitehall,
London,
SW1A 2HB.

When sending your comments please include contact details (your name and either email address, postal address or telephone number) so that we can follow up if clarification is needed.

NEXT STEPS

We will publish a summary of responses, with key findings and planned changes on Gov.uk.

Please note by responding to this consultation we shall assume that you have given your consent for your responses to be made public.

CONFIDENTIALITY AND DATA PROTECTION

Information provided in response to this consultation, including personal information may be subject to publication or release to other parties or to disclosure in accordance with the access to information regimes¹.

If you have any comments regarding the consultation process, please contact Roger Hardman by email at PersTrg-CDP-StratCDPRE2c@mod.uk or by telephone at 020 721 82869

¹ Freedom of Information Act 2000 (FOIA) the Data Protection Act 1998 (DPA) and Environmental Information Regulations 2004

ANNEX A: OVERVIEW OF CHANGES TO QUESTIONNAIRE

About you

The only proposed change is to the question on electoral registration. Whilst this question has been kept, additional responses have been drafted to enable the kind of difficulty a Service spouse / civil partner may have encountered with registering as a voter to be more clearly identified.

Health

The main change proposed is that the questions on accessing medical, mental health and dental services have been consolidated to allow the respondents to complete this section more quickly whilst still capturing the same data on access and any difficulty experienced.

The question on the type of dental service accessed would be deleted as it is no longer providing useful data.

Children's Education and Childcare

There have been some substantial changes proposed, to make this section easier to complete, including reordering the questions, adding filters to questions and rewording other questions.

The questions for families with children who had Special Educational Needs would be deleted as it is recognised that this information would be better obtained from a more targeted approach to the families involved.

The question on registering as children of Service personnel at schools and awareness of the Service Pupils Premium (SPP) would be deleted as statistical data on the SPP is now available.

Housing

Many of the questions in this section would be retained. However, the questions seeking satisfaction levels on Service families accommodation (SFA) require consolidation and revision. Harmonisation with the SFA satisfaction questions in AFCAS was considered to be the best option for enabling direct comparison with the views of Service personnel. As a result of this, questions on maintenance and cleaning are proposed for removal.

Employment and Higher Education

A number of relatively minor changes are proposed to be made to these questions e.g. addition of filtering, updates to the response options provided.

A question on using the Armed Forces Champion at the Job Centre Plus would be deleted as it is not providing useful evidence and this is now only one of the numerous support options available.

A small number of questions on employment support are proposed for deletion as there is little evidence of these being used.

Deployment

The only minor change proposed in this section is to replace the 'not applicable' option in the response options with a 'did not use' option.

Armed Forces Covenant

These questions would be consolidated, with the wording clarified and response options updated. Awareness of the Covenant would still be monitored the response options harmonised with the AFCAS question.

The question exploring the perceptions of advantages / disadvantages faced by Service spouses / civil partners would be limited to the main areas of the AFC namely housing, education and healthcare.

The question on feeling respected by society at large would be deleted as it does not provide evidence above that provided by the question on benefits of being a spouse / civil partner.

Annex B: Proposed questionnaire with changes flagged

DRAFT Armed Forces Covenant Questions DRAFT

The Government, through the Armed Forces Covenant, are working to address disadvantages that are faced by Service personnel, families and veterans. Have you heard of this?

****QUESTION REVISED****

(Please choose one of the following)

- I've never heard of it ¹
- I've heard of it but know nothing about it ²
- I've heard of it and know a little about it ³
- I've heard of it and know a lot about it ⁴

For details of the Covenant go to: <https://www.gov.uk/the-armed-forces-covenant>

The Armed Forces Covenant aims to reduce any disadvantage on three key issues.

How advantaged or disadvantaged do you feel when you compare yourself to the general public on these key issues? (mark one box on each line).

****QUESTION REVISED****

	<i>Very advantaged</i>	<i>Advantaged</i>	<i>Neither advantaged nor disadvantaged</i>	<i>Disadvantaged</i>	<i>Very disadvantaged</i>	<i>Don't know</i>
a. Housing	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
b. Education	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
c. Healthcare	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶

How positive or negative do you feel about the following aspects of Service life?

****QUESTIONS MERGED****

	<i>Very positive</i>	<i>Positive</i>	<i>Neither positive nor negative</i>	<i>Negative</i>	<i>Very negative</i>	<i>Don't know</i>
a. Effect on my career	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
b. Effect on my children	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
c. RN-RM/Army/RAF provided facilities	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
d. Relationship with my spouse / civil partner	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
e. Frequency of house moves	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
f. Family income / allowances	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
g. Knowing other military families	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
h. Social support for my family	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
i. Amount of separation from spouse / civil partner	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
j. Prospects for buying or renting own home	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
k. Opportunities for travel	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
l. Pride in my spouse/civil partner being in the Service.	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
m. Job security	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶

a. Other things I feel positive about:

b. \Other things I feel negative about:

DRAFT Deployment Questions DRAFT

When was your spouse or civil partner's last operational tour?

Currently on operational tour	<input type="checkbox"/>	¹	3-4 years ago	<input type="checkbox"/>	⁴
In the last 12 months	<input type="checkbox"/>	²	More than 5 yrs ago	<input type="checkbox"/>	⁵
1-2 years ago	<input type="checkbox"/>	³	Not applicable	<input type="checkbox"/>	⁶

Do you know where to go for Service-provided welfare support and information while your spouse/civil partner is on an operational

Yes	<input type="checkbox"/>	¹
No	<input type="checkbox"/>	²
Not applicable	<input type="checkbox"/>	³

How satisfied were you with the following BEFORE your spouse/civil partner's most recent operational tour?

	Very satisfied	Fairly satisfied	Neutral	Fairly dissatisfied	Very dissatisfied	Did not use
a. Welfare support you used (e.g. information, Padre, support staff, welfare organisations, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Direct contact and support from your spouse/partner's Chain of Command.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Facilities and events to meet with other spouses and families.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**How satisfied were you with the following DURING your spouse/civil partner's most recent operational tour?
(Please tick one box per line)**

	Very satisfied	Fairly satisfied	Neutral	Fairly dissatisfied	Very dissatisfied	Did not use
a. Welfare support you used (e.g. information, Padre, support staff, welfare organisations, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Direct contact and support from your spouse/civil partner's Chain of Command.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Facilities and events to meet with other spouses and families.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Lines of communication with your with your spouse/civil partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**How satisfied were you with the following AFTER your spouse/civil partner's most recent operational tour?
(Please tick one box per line)**

	Very satisfied	Fairly satisfied	Neutral	Fairly dissatisfied	Very dissatisfied	Did not use
a. Welfare support you used (e.g. information, Padre, support staff, welfare organisations, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Direct contact and support from your spouse/partner's Chain of Command.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Facilities and events to meet with other spouses and families.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DRAFT Employment Questions DRAFT

Have you moved in the past 12 months for Service reasons? *

****FILTER ADDED****

Yes ¹

No ² (go to question XX)

If you moved in the last 12 months, have you, or anyone in your family, experienced difficulties with the following as a result of Service life?

****QUESTION REVISED - MINOR CHANGE****

Yes No Not applicable

a. Accessing Further or Higher Education

¹ ² ³

b. Continuing a course previously started

¹ ² ³

In the last 12 months, have you or your family accompanied your spouse/civil partner on overseas assignments?

Yes ¹

No ² (go to question XX)

If yes, were you able to:

****RESPONSE OPTIONS UPDATED****

a. Obtain paid employment overseas?

Yes, without difficulty ¹

Yes, with difficulty (please specify) ²

No, I was not able to (please specify) ³

No, I chose not to ⁴

Please specify any difficulties:

b. Were you able to access Service-provided information about moving overseas before going? (please specify)

Yes, without difficulty ¹

Yes, with difficulty (please specify) ²

No, I was not able to (please specify) ³

No, I chose not to ⁴

Please specify any difficulties:

What is your current employment status?

In full-time employment ¹

In part-time employment ²

Self employed ³

Homemaker/Parent at home ⁴

Not employed - seeking employment ⁵

Not employed - not seeking employment ⁶

- In full-time education/personal development 7
- In part-time education 8
- In unpaid voluntary work 9
- My immigration status means that I am unable to work 10

Would you like to work longer hours, at your current basic rate of pay, given the opportunity?

- Yes 1
- No 2 (go to question XX)

If yes, how many extra hours would you like to work each week?

Number of extra hours

Have you been looking for a job in the last 12 months?

****FILTER ADDED****

- Yes 1
- No 2 (go to question XX)

If yes, did you have any difficulty finding suitable employment?

****FILTER ADDED****

- Yes 1
- No 2 (go to question XX)

If you experienced difficulty, was it because of any of the following:

****QUESTION REVISED****

(Tick any that apply)

- a. A lack of relevant qualifications? 1
- b. Your employment history? (i.e. moving jobs frequently) 2
- c. Being overseas with your spouse/civil partner? 3
- d. Having a spouse who is often away? 4
- e. Having a spouse in the Armed Forces? 5
- f. Other (please specify in the box below) 6

Other difficulties:

When you consider your current job, how satisfied are you with the following:

****RESPONSE OPTIONS UPDATED****

	<i>Very satisfied</i>	<i>Satisfied</i>	<i>Neither satisfied nor dissatisfied</i>	<i>Dissatisfied</i>	<i>Very dissatisfied</i>	<i>Don't know</i>
Overall, how satisfied are you with your job?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
How satisfied are you that your qualifications match your job?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
How satisfied are you that your job matches your skills and experience?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

DRAFT Accommodation Questions DRAFT

Have you moved in the last 12 months?

Yes ¹

No ²

If yes, was this for service reasons?

Yes ¹

No ²

Do you own your own home?

Yes, I am living in it. ¹

Yes, but not living in it. ²

No, I don't want to. ³

No, I have never owned my own home but I would like to. ⁴

If you don't own your own home, which of the following statements apply to you?

****RESPONSE OPTIONS UPDATED****

(Tick any that apply)

a. I/we don't want to own a home at this stage in my/our life/career(s). ¹

b. I am expecting my spouse/civil partner to be posted overseas or to an area where I/we don't want to buy a home where I/we don't want to buy a home. ²

c. Living in Service accommodation is better suited to my family's needs at present. ³

d. I/we want to be able to move with my spouse/civil partner when he/she is posted. ⁴

e. I/we don't want to buy a home where we are currently located. ⁵

f. I/we can't afford to buy a suitable home at the moment. ⁶

g. I/we had difficulties getting a mortgage. ⁷

h. I/we wouldn't be able to live in the home. ⁸

i. Other reason (please write in box below). ⁹

What type of accommodation do you live in during the working week?

- a. Privately owned home. 1
- b. Privately rented home. 2
- c. Service Substitution Families Accommodation (SSFA). 3
- d. Service Family Accommodation (SFA). 4
- e. Single Living Accommodation (SLA). 5
- f. Other accommodation (please specify below). 5

What type of accommodation would you prefer to live in during the working week?

- a. Privately owned home. 1
- b. Privately rented home. 2
- c. Service Substitution Families Accommodation (SSFA). 3
- d. Service Family Accommodation (SFA). 4
- e. Single Living Accommodation (SLA). 5
- f. Other accommodation (please specify below). 5

If you live in SFA or SSFA, how satisfied or dissatisfied are you with each of the following?

****RESPONSE OPTIONS UPDATED****

(Please put an X in one box on each row)

	<i>Very satisfied</i>	<i>Satisfied</i>	<i>Neither satisfied nor dissatisfied</i>	<i>Dissatisfied</i>	<i>Very dissatisfied</i>
a. The overall standard.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. The value for money.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. The response to requests for maintenance/repair.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. The quality of maintenance/repair work.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. How fairly Service Accommodation is allocated.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f. The security of your SFA.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Do you have any children?

Yes ¹

No ² Please go to question XX in the next section

If yes, how many children do you have?

(Please write the number of children in each box. If you do not have any children in that age group please insert '0')

Under 5 years ¹ Between 5 and 17 years ² 18 years or older ³

Have you needed childcare in the last 12 months?

****FILTER ADDED****

Yes ¹

No ² Please go to question 6

Have you had any difficulties with childcare in the last 12 months

****FILTER ADDED****

Yes ¹

No ² Please go to question 5

What sort of difficulties with childcare did you have? Please tick all that apply

****RESPONSE OPTIONS UPDATED****

a. Getting a place at the facility of your choice ¹

b. Getting information about local childcare (prior to a move??) ²

c. Other difficulties (please specify)

How satisfied or dissatisfied are you with the following aspects of your local childcare facilities?

****QUESTION REVISED AND MERGED****

	<i>Very Satisfied</i>	<i>Satisfied</i>	<i>Neither satisfied nor dissatisfied</i>	<i>Dissatisfied</i>	<i>Very dissatisfied</i>	<i>NA</i>
a. Access (e.g.distance, transportation)	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
b. Quality	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
c. Cost	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶
d. Opening hours	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶

Do you have any children of school age?

****FILTER ADDED****

Yes ¹

No ² Please go to question XX in the next section

If yes, please tell us the number of children you have at each type of school

****NEW QUESTION****

(If you do not have any children at that type of school please insert '0')

State school 1

Service school 4

Independent day school 2

Other 5

Independent boarding school 3

(please specify)

Are you currently in receipt of CEA (Childrens Education Allowance)?

****NEW QUESTION****

Yes 1

No 2

How satisfied are you with the following for your school age children?

****QUESTION REVISED****

	Very satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatis-fied	Very dissatis-fied	NA
a. Availability of out of school activities run by the school.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
b. Quality of out of school activites run by the school.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
c. Availability of activities for children run by the Local Authority or third party	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
d. Quality of activities for children run by the Local Authority or third party	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

Did your child(ren) have to change school due to your last family move for Service reasons?

****FILTER ADDED****

Yes 1

No 2 Please go to question XX

Did you experience any of the following difficulties because of your move?

****QUESTION REVISED AND RESPONSE OPTIONS UPDATED****

- a. Insufficient transport at school 1
- b. Distance to school 2
- c. Getting a place at the school of your choice 3
- d. Getting enough information about schools in your new area 4
- e. Not enough places at your local school 5
- f. Unsuitable educational standard of your local school 6
- g. Children could not attend the same school together 7
- h. Special Educational Needs (SEN) difficulties 8
- i. School admission application period did not coincide with notification of assignment 9
- j. Local Authority was unsupportive 10
- k. Continuing your children's education without a gap 11
- l. Differences in syllabus 12

m. Other (please specify)

DRAFT Healthcare Questions DRAFT

In the last 12 months have you or your family been able to access the following healthcare services?

****QUESTION REVISED****

(Please choose one of the following)

	<i>Yes, without difficulties</i>	<i>Yes, but with some difficulties (please specify)</i>	<i>No I was not able to (please specify)</i>	<i>No I did not need to</i>
Dental treatment	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
GP (including Nurse/Midwife etc)	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
Mental health treatment	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
Hospital or specialist services	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴

Please specify why you had difficulties with access in the box below:

If you moved in the last 12 months while undergoing a course of treatment with any of the following healthcare services, have you been able to continue the treatment in your new location?

****RESPONSE OPTIONS UPDATED****

(Please choose one of the following)

	<i>Yes, without difficulties</i>	<i>Yes, but with some difficulties (please specify)</i>	<i>No I was not able to (please specify)</i>	<i>No I did not need to</i>
Dental treatment	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
GP (including Nurse/Midwife etc)	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
Mental health support	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
Hospital or specialist services	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴

Please specify why you had difficulties with continuing treatment in the box below:

In the last 12 months, have you or a member of your family been on a waiting list for an operation/ consultants appointment?

(Please choose one of the following)

Yes ¹

No ²

If Yes, was your previous waiting time increased as a result of moving?

(Please choose one of the following)

Yes ¹ *Don't know* ³

No ² *Not applicable* ⁴

DRAFT About you questions DRAFT

Where do you currently live?

England

 1

Northern Ireland

 2

Scotland

 3

Wales

 4

Outside the UK (please specify which country)

 5

Your spouse/civil partner's rank?

OF-6 - Commodore/Brigadier/Air Commodore

 1

OF-5 - Captain/Colonel/Group Captain

 2

OF-4 - Commander/Lieutenant Colonel/Wing Commander

 3

OF-3 - Lieutenant Commander/Major/Squadron Leader

 4

OF-2 - Lieutenant/Captain/Flight Lieutenant

 5

OF-1 - Sub-Lieutenant/2nd Lieutenant/Flying Officer or Pilot Officer

 6

OR-9 - Warrant Officer 1/Warrant Officer / Master Aircrew

 7

OR-8 - Warrant Officer 2

 8

OR-7 - Chief Petty Officer/Colour Sergeant/Staff Sergeant/Flight Sergeant or Chief Technician

 9

OR-6 - Petty Officer/Sergeant

 10

OR-4 - Leading Rate/Corporal

 11

OR-3 - Lance Corporal

 12

OR-2/1 - Able Rate/Marine/Private/Junior Technician or Leading/Senior and Junior Aircraftsman

 13

Where is your spouse/civil partner currently stationed?

England

 1

Northern Ireland

 2

Scotland

 3

Wales

 4

Outside the UK (please specify which country)

 5

Are you currently registered to vote?

****RESPONSE OPTIONS REVISED****

(Please choose one of the following)

Yes, and I registered without difficulty

 1

Yes, but I had some difficulty registering (please specify in box below)

 2

No, I chose not to register

 3

No, I was not able to register (please specify in box below)

 4

Don't know

 5

Prefer not to say

 6

Please specify the difficulty:

Annex C: Questions proposed for removal from survey

If you needed dental treatment in the last 12 months, did you access...? (Tick all that apply)	[1] Paying treatment at an NHS dentist [2] Free treatment at an NHS dentist [3] Fully private dental treatment [4] Other (please specify) [5] Not applicable
Were any of your children deemed to have a Special Educational Need (SEN) after having had a special needs assessment? (For Scotland, SEN is termed Additional Support Needs)?	[1] Yes [2] No [3] Not applicable
If your child(ren) was deemed to have a Special Educational Need, have they been registered with the Children's Education Advisory Service (CEAS)?	[1] Yes [2] No [3] Not applicable
If your child(ren) was deemed to have a Special Educational Need, and you have moved in the last 12 months, was the support for their Special Educational Needs (SEN)... (For Scotland, SEN is termed Additional Support Needs) (please tick one box only)	[1] Continued without disruption [2] Continued after a time lag [3] Not continued [4] Not applicable
Have you registered your child (ren) as a Service child (ren) at his/her school?	[1] Yes [2] No
Are you aware of the link between registering your child (ren) as a Service child (ren) and the school accessing the Service Pupil Premium? (This only applies to schools in England)	[1] Yes [2] No [3] I/we have not heard of this. [4] Not applicable
Have you used the Modern Housing Solutions (or an equivalent) maintenance service in the last 12 months?	[1] Yes [2] No [3] Not applicable
If yes, how satisfied were you with the service provided by MHS (or an equivalent)?	[1] Very satisfied [2] Fairly satisfied [3] Neither satisfied nor dissatisfied [4] Fairly dissatisfied [5] Very dissatisfied [6] Don't know [7] Not Applicable
If you accompanied your spouse/civil partner on an overseas assignment did you apply for National Insurance credits to maintain your National Insurance contribution record?	[1] Yes [2] No [3] Not applicable
Did you use the Job Centre Plus Armed Forces Champion in the last 12 months ?	[1] Yes, and this helped me to find employment [2] Yes, but this did not help me to find employment [3] No, I did not use this [4] I have not heard of this [5] NA
If the MOD offered courses to assist you in finding employment (or moving to an employment of your choice) would you use them?	[1] Yes, [2] No [3] Not applicable

<p>Which of the following would help you find employment (or move to an employment of your choice)? Tick all that apply</p>	<ul style="list-style-type: none"> [1] CV Writing Course [2] Interview Skills Course [3] Access to a Jobs Database [4] Career Consultation Service [5] Self-Employment Awareness Course [6] Small Business Start-up Course [7] Other (please specify) [8] Not applicable
<p>As a member of the wider Armed Forces community I feel respected by society at large</p>	<ul style="list-style-type: none"> [1] Strongly agree [2] Agree [3] Neither agree nor disagree [4] Disagree [5] Strongly disagree [6] Don't know