



Ministry of Housing,
Communities &
Local Government

Annex C

Social Integration survey tools (baseline and follow-up)

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CBEL SURVEY FINAL BASELINE

21 APRIL 2016

DATE:

NAME:

STUDY ID:



1. APART FROM YOUR ENGLISH CLASS, HOW MANY PEOPLE DID YOU SPEAK TO LAST WEEK USING ENGLISH? (PLEASE ✓ ONE)	
0 PEOPLE	<input type="checkbox"/> ₁
1 TO 2 PEOPLE	<input type="checkbox"/> ₂
3 TO 4 PEOPLE	<input type="checkbox"/> ₃
5 TO 6 PEOPLE	<input type="checkbox"/> ₄
7 TO 8 PEOPLE	<input type="checkbox"/> ₅
9 TO 10 PEOPLE	<input type="checkbox"/> ₆
11 TO 12 PEOPLE	<input type="checkbox"/> ₇
13 TO 14 PEOPLE	<input type="checkbox"/> ₈
15 TO 16 PEOPLE	<input type="checkbox"/> ₉
17 TO 18 PEOPLE	<input type="checkbox"/> ₁₀
19 TO 20 PEOPLE	<input type="checkbox"/> ₁₁
21 OR MORE PEOPLE	<input type="checkbox"/> ₁₂
DON'T KNOW	<input type="checkbox"/> ₁₃

2. APART FROM YOUR ENGLISH CLASS, HOW MANY PEOPLE DID YOU SPEAK TO LAST WEEK FROM A DIFFERENT COUNTRY OR RELIGION TO YOU? (PLEASE ✓ ONE)	
0 PEOPLE	<input type="checkbox"/> ₁
1 TO 2 PEOPLE	<input type="checkbox"/> ₂
3 TO 4 PEOPLE	<input type="checkbox"/> ₃
5 TO 6 PEOPLE	<input type="checkbox"/> ₄
7 TO 8 PEOPLE	<input type="checkbox"/> ₅
9 TO 10 PEOPLE	<input type="checkbox"/> ₆
11 TO 12 PEOPLE	<input type="checkbox"/> ₇
13 TO 14 PEOPLE	<input type="checkbox"/> ₈
15 TO 16 PEOPLE	<input type="checkbox"/> ₉
17 TO 18 PEOPLE	<input type="checkbox"/> ₁₀
19 TO 20 PEOPLE	<input type="checkbox"/> ₁₁
21 or more people	<input type="checkbox"/> ₁₂
Don't know	<input type="checkbox"/> ₁₃

**3. How many friends do you have to rely on if you have a problem, or need help or advice?
(Please ✓ one)**

0 people	<input type="checkbox"/> ₁
1 to 2 people	<input type="checkbox"/> ₂
3 to 4 people	<input type="checkbox"/> ₃
5 to 6 people	<input type="checkbox"/> ₄
7 to 8 people	<input type="checkbox"/> ₅
9 to 10 people	<input type="checkbox"/> ₆
11 to 12 people	<input type="checkbox"/> ₇
13 to 14 people	<input type="checkbox"/> ₈
15 to 16 people	<input type="checkbox"/> ₉
17 to 18 people	<input type="checkbox"/> ₁₀
19 to 20 people	<input type="checkbox"/> ₁₁
21 or more people	<input type="checkbox"/> ₁₂
Don't know	<input type="checkbox"/> ₁₃

**4. How many of your friends are from a different country or religion to you?
(Please ✓ one)**

0 people	<input type="checkbox"/> ₁
1 to 2 people	<input type="checkbox"/> ₂
3 to 4 people	<input type="checkbox"/> ₃
5 to 6 people	<input type="checkbox"/> ₄
7 to 8 people	<input type="checkbox"/> ₅
9 to 10 people	<input type="checkbox"/> ₆
11 to 12 people	<input type="checkbox"/> ₇
13 to 14 people	<input type="checkbox"/> ₈
15 to 16 people	<input type="checkbox"/> ₉
17 to 18 people	<input type="checkbox"/> ₁₀
19 to 20 people	<input type="checkbox"/> ₁₁
21 or more people	<input type="checkbox"/> ₁₂
Don't know	<input type="checkbox"/> ₁₃

**5. Apart from with your English class, how many times have you gone to the shops or market, either on your own, or without another person who speaks English, in the last week?
(Please ✓ one)**

0 times	<input type="checkbox"/> ₁
1 to 2 times	<input type="checkbox"/> ₂
3 to 4 times	<input type="checkbox"/> ₃
5 to 6 times	<input type="checkbox"/> ₄
7 to 8 times	<input type="checkbox"/> ₅
9 to 10 times	<input type="checkbox"/> ₆
11 times or more	<input type="checkbox"/> ₇
Don't know	<input type="checkbox"/> ₈

**6. Apart from with your English class, how many times in the last week have you used a bus, train or tram, either on your own, or without another person who speaks English,?
(Please ✓ one)**

0 times	<input type="checkbox"/> ₁
1 to 2 times	<input type="checkbox"/> ₂
3 to 4 times	<input type="checkbox"/> ₃
5 to 6 times	<input type="checkbox"/> ₄
7 to 8 times	<input type="checkbox"/> ₅
9 to 10 times	<input type="checkbox"/> ₆
11 times or more	<input type="checkbox"/> ₇
Don't know	<input type="checkbox"/> ₈

**7. Apart from with your English class, how many times in the last week have you gone to a park or playground, either on your own, or without another person who speaks English,?
(Please ✓ one)**

0 times	<input type="checkbox"/> ₁
1 to 2 times	<input type="checkbox"/> ₂
3 to 4 times	<input type="checkbox"/> ₃
5 to 6 times	<input type="checkbox"/> ₄
7 to 8 times	<input type="checkbox"/> ₅
9 to 10 times	<input type="checkbox"/> ₆
11 times or more	<input type="checkbox"/> ₇
Don't know	<input type="checkbox"/> ₈

8. How confident are you to book an appointment in English with a doctor, dentist or nurse? (Please ✓ one)	
Very confident	<input type="checkbox"/> ₁
Confident	<input type="checkbox"/> ₂
Not confident	<input type="checkbox"/> ₃
Not confident at all	<input type="checkbox"/> ₄

9. Do you have any children who go to school? (Please ✓ one)	
Yes	<input type="checkbox"/> PLEASE ANSWER Q10
No	<input type="checkbox"/> PLEASE GO TO Q11

10. How confident are you to speak in English to people at your child's school? (Please ✓ one)	
Very confident	<input type="checkbox"/> ₁
Confident	<input type="checkbox"/> ₂
Not confident	<input type="checkbox"/> ₃
Not confident at all	<input type="checkbox"/> ₄

11. If you saw a crime taking place, how confident would you be to talk to the police about it? (Please ✓ one)	
Very confident	<input type="checkbox"/> ₁
Confident	<input type="checkbox"/> ₂
Not confident	<input type="checkbox"/> ₃
Not confident at all	<input type="checkbox"/> ₄

12. How much do you agree or disagree: 'I am free to decide for myself how to live my life'. (Please ✓ one)	
Agree strongly	<input type="checkbox"/> ₁
Agree	<input type="checkbox"/> ₂
Disagree	<input type="checkbox"/> ₃
Disagree strongly	<input type="checkbox"/> ₄

13. How much do you trust people in your family? (Please ✓ one)	
Trust completely	<input type="checkbox"/> ₁
Trust somewhat	<input type="checkbox"/> ₂
Do not trust very much	<input type="checkbox"/> ₃
Do not trust at all	<input type="checkbox"/> ₄

14. How much do you trust people in your local area? (Please ✓ one)	
Trust completely	<input type="checkbox"/> ₁
Trust somewhat	<input type="checkbox"/> ₂
Do not trust very much	<input type="checkbox"/> ₃
Do not trust at all	<input type="checkbox"/> ₄

15. How much do you trust people from a different country or religion? (Please ✓ one)	
Trust completely	<input type="checkbox"/> ₁
Trust somewhat	<input type="checkbox"/> ₂
Do not trust very much	<input type="checkbox"/> ₃
Do not trust at all	<input type="checkbox"/> ₄

16. Do you think people from different countries or religions living in your local area: (Please ✓ one)	
Should mix less	<input type="checkbox"/> ₁
Mix enough	<input type="checkbox"/> ₂
Should mix more	<input type="checkbox"/> ₃

17. How much do you feel part of your local area? (Please ✓ one)	
A lot	<input type="checkbox"/> ₁
Somewhat	<input type="checkbox"/> ₂
Not very much	<input type="checkbox"/> ₃
Not at all	<input type="checkbox"/> ₄

18. How much do you feel part of this country?

(Please ✓ one)

A lot	<input type="checkbox"/> ₁
Somewhat	<input type="checkbox"/> ₂
Not very much	<input type="checkbox"/> ₃
Not at all	<input type="checkbox"/> ₄

19. How interested are you in doing employment skills training in the next six months?

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

20. How interested are you in finding a paid job in the next six months?

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

21. How interested are you in volunteering in the next six months

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

22. How interested are you in doing digital/computer training in the next six months?

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

23. Are you interested in doing anything else in the next six months that has not been mentioned above? If yes, please specify?

--

INTERPRETER PLEASE INDICATE HOW THIS SURVEY WAS COMPLETED BY TICKING ONE OF THE BOXES BELOW:

Completed by learner with no assistance	<input type="checkbox"/> ₁
Completed by learner with some assistance	<input type="checkbox"/> ₂
Completed by reading out questions and recording responses	<input type="checkbox"/> ₃

CBEL SURVEY FOLLOW UP



Date:

Name:

Study ID:

9	9	3	4						
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1. Apart from your English class, how many people did you speak to last week using English? (Please ✓ one)	
0 people	<input type="checkbox"/> ₁
1 to 2 people	<input type="checkbox"/> ₂
3 to 4 people	<input type="checkbox"/> ₃
5 to 6 people	<input type="checkbox"/> ₄
7 to 8 people	<input type="checkbox"/> ₅
9 to 10 people	<input type="checkbox"/> ₆
11 to 12 people	<input type="checkbox"/> ₇
13 to 14 people	<input type="checkbox"/> ₈
15 to 16 people	<input type="checkbox"/> ₉
17 to 18 people	<input type="checkbox"/> ₁₀
19 to 20 people	<input type="checkbox"/> ₁₁
21 or more people	<input type="checkbox"/> ₁₂
Don't know	<input type="checkbox"/> ₁₃

2. Apart from your English class, how many people did you speak to last week from a different country or religion to you? (Please ✓ one)	
0 people	<input type="checkbox"/> ₁
1 to 2 people	<input type="checkbox"/> ₂
3 to 4 people	<input type="checkbox"/> ₃
5 to 6 people	<input type="checkbox"/> ₄
7 to 8 people	<input type="checkbox"/> ₅
9 to 10 people	<input type="checkbox"/> ₆
11 to 12 people	<input type="checkbox"/> ₇
13 to 14 people	<input type="checkbox"/> ₈
15 to 16 people	<input type="checkbox"/> ₉
17 to 18 people	<input type="checkbox"/> ₁₀
19 to 20 people	<input type="checkbox"/> ₁₁
21 or more people	<input type="checkbox"/> ₁₂
Don't know	<input type="checkbox"/> ₁₃

**3. How many friends do you have to rely on if you have a problem, or need help or advice?
(Please ✓ one)**

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**4. How many of your friends are from a different country or religion to you?
(Please ✓ one)**

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19 to 20 people	<input type="checkbox"/> ₁₁
21 or more people	<input type="checkbox"/> ₁₂
Don't know	<input type="checkbox"/> ₁₃

**5. Apart from with your English class, how many times have you gone to the shops or market, either on your own, or without another person who speaks English, in the last week?
(Please ✓ one)**

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3 to 4 times	<input type="checkbox"/> ₃
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(Please ✓ one)**

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**7. Apart from with your English class, how many times in the last week have you gone to a park or playground, either on your own, or without another person who speaks English,?
(Please ✓ one)**

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9. Do you have any children who go to school? (Please ✓ one)	
Yes	<input type="checkbox"/> PLEASE ANSWER Q10
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10. How confident are you to speak in English to people at your child's school? (Please ✓ one)	
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Not confident at all	<input type="checkbox"/> ₄

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Confident	<input type="checkbox"/> ₂
Not confident	<input type="checkbox"/> ₃
Not confident at all	<input type="checkbox"/> ₄

12. How much do you agree or disagree: 'I am free to decide for myself how to live my life'. (Please ✓ one)	
Agree strongly	<input type="checkbox"/> ₁
Agree	<input type="checkbox"/> ₂
Disagree	<input type="checkbox"/> ₃
Disagree strongly	<input type="checkbox"/> ₄

13. How much do you trust people in your family? (Please ✓ one)	
Trust completely	<input type="checkbox"/> ₁
Trust somewhat	<input type="checkbox"/> ₂
Do not trust very much	<input type="checkbox"/> ₃
Do not trust at all	<input type="checkbox"/> ₄

14. How much do you trust people in your local area? (Please ✓ one)	
Trust completely	<input type="checkbox"/> ₁
Trust somewhat	<input type="checkbox"/> ₂
Do not trust very much	<input type="checkbox"/> ₃
Do not trust at all	<input type="checkbox"/> ₄

15. How much do you trust people from a different country or religion? (Please ✓ one)	
Trust completely	<input type="checkbox"/> ₁
Trust somewhat	<input type="checkbox"/> ₂
Do not trust very much	<input type="checkbox"/> ₃
Do not trust at all	<input type="checkbox"/> ₄

16. Do you think people from different countries or religions living in your local area: (Please ✓ one)	
Should mix less	<input type="checkbox"/> ₁
Mix enough	<input type="checkbox"/> ₂
Should mix more	<input type="checkbox"/> ₃

17. How much do you feel part of your local area? (Please ✓ one)	
A lot	<input type="checkbox"/> ₁
Somewhat	<input type="checkbox"/> ₂
Not very much	<input type="checkbox"/> ₃
Not at all	<input type="checkbox"/> ₄

18. How much do you feel part of this country?

(Please ✓ one)

A lot	<input type="checkbox"/> ₁
Somewhat	<input type="checkbox"/> ₂
Not very much	<input type="checkbox"/> ₃
Not at all	<input type="checkbox"/> ₄

19. How interested are you in doing employment skills training in the next six months?

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

20. How interested are you in finding a paid job in the next six months?

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

21. How interested are you in volunteering in the next six months

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

22. How interested are you in doing digital/computer training in the next six months?

(Please ✓ one)

Not at all interested	<input type="checkbox"/> ₁
Not interested	<input type="checkbox"/> ₂
Interested	<input type="checkbox"/> ₃
Very interested	<input type="checkbox"/> ₄

23. Are you interested in doing anything else in the next six months that has not been mentioned above? If yes, please specify?

--

PLEASE ASK THIS QUESTION ONLY OF SEPTEMBER LEARNERS

24. Have you undertaken any activities to improve your English language since 22 April 2016? If so what (please specify).

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INTERPRETER PLEASE INDICATE HOW THIS SURVEY WAS COMPLETED BY TICKING ONE OF THE BOXES BELOW:

Completed by learner with no assistance	<input type="checkbox"/> ₁
Completed by learner with some assistance	<input type="checkbox"/> ₂
Completed by reading out questions and recording responses	<input type="checkbox"/> ₃

At the start of your course, you agreed to help Talk English and Department for Communities and Local Government (DCLG) ¹with their research, by completing two surveys and taking two English language tests. Thank-you for your help.

DCLG would like to stay in touch with you over the next twelve months, to find out what you do after finishing the Talk English course. We may publish this information in a short report. We will guarantee that it is not possible to identify you from this report and all your information will be kept confidential and secure.

[INTERVIEWER TO ASK]

Would it be OK for DCLG to contact you over the next twelve months?

1. Yes

 ₁

2. No

 ₂

If Yes, please can you sign Form A and give us your contact details.

[INTERVIEWER, IF YES: PLEASE ENSURE YOU ASK RESPONDENT TO SIGN AND COMPLETE DETAILS IN CONSENT FORM A]

¹ Please note that participants signed these forms when MHCLG was formerly DCLG and as such, they have not been amended to reflect the new name of the Department.

Learner Consent Form A– Permission to contact learner in future

I have understood that DCLG may wish to contact me over the next twelve months, and I am happy for them to do so.

I am happy for any information I give to be published in a report. I understand I will not be personally identified in any report produced and that my data will be kept securely and confidentially.

By completing the details below I freely give my consent for DCLG to contact me in the next twelve months.

PRINT FULL NAME _____

Signature _____

Date _____

Your contact details:

Address: _____

Home telephone: _____

Mobile number: _____

E-mail address: _____

DCLG would also like to add information held on your benefits, employment and tax records to your answers to this survey. This will give them a better picture of what you do after finishing the Talk English course.

If you agree, we will pass your name, address, sex and date of birth to the Department for Work and Pensions (DWP) and Her Majesty's Revenue and Customs (HMRC). They will use this information to find your records and add them to your answers. All information will be used for research and statistical purposes only. Your personal details will be kept completely confidential.

[INTERVIEWER TO ASK]

Would it be okay for DCLG to pass you name, address, sex and date of birth to DWP and HMRC?

Yes

 ₁

No

 ₂

[INTERVIEWER, IF YES: PLEASE ENSURE YOU ASK RESPONDENT TO SIGN AND COMPLETE DETAILS IN CONSENT FORM B]

Learner Consent Form B– Permission to share data

I have understood that DCLG will pass my name, address, sex and date of birth to DWP and HMRC and I am happy for them to do so.

I am happy for this information to be used in a report. I understand I will not be personally identified in any report produced and that my data will be kept securely and confidentially.

By completing the details below I freely give my consent for DCLG to pass my information to DWP and HMRC.

PRINT FULL NAME _____

Signature _____

Date _____