



HM Government

# The Community Life Survey

## 2024-25

### Who should complete the questionnaire?

We are interested in the views of everyone aged 16 or over in your household. Please read the rest of the information on this page, then turn over the page to start the survey.

### How do I fill in the questionnaire?

1. Most questions can be answered by putting a cross in the box next to the answer that applies to you, like this: ☒

Or by writing in a number like this:

1	0
---	---

2. Some questions will ask you to: ➔ **Please cross one box only** and some will ask you to: ➔ **Please cross all boxes that apply.**

3. Some questions may not apply to you and you will be taken to the next one that does by following an arrow like this: ➔ **Go to Q43** or a box like this: **Go to Q62**

4. Please try to answer every question that applies to you. If you cannot remember or do not know, please cross the relevant box where shown or leave the question blank.

5. If you change your mind about an answer you have given, completely block out the box you have crossed like this, ☒ and then put a cross in your preferred box.

6. Please use black or blue ink to complete the questionnaire.

### Where can I get more information?

✉: [communitylifesurvey@veriangroup.com](mailto:communitylifesurvey@veriangroup.com)

☎: 0800 158 2952 (9am-5pm)

Information about how your data is processed and information about your rights in relation to the data we collect is available on the back of the accompanying letter. You can also access our privacy policy at:

**[www.commlife.co.uk/surveyprivacypolicy.html](http://www.commlife.co.uk/surveyprivacypolicy.html)** or by calling **0800 158 2952**

## Section 1: About you

Thank you for choosing to take part in the Community Life Survey. In this first section we would like to find out a little about you and your household.

By 'your household' we mean the group of people (not necessarily related) living at your address who share cooking facilities with you and also share a living room or sitting room or dining area.

The information is used to understand the experiences of different groups and will not identify you or anyone in your household.

### Q1 Including you, how many people aged 16 or over are currently living in your household? If you live by yourself, please cross 1

➔ Please cross one box only ☒

- |                            |                              |
|----------------------------|------------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 6   |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 7   |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 8   |
| <input type="checkbox"/> 4 | <input type="checkbox"/> 9   |
| <input type="checkbox"/> 5 | <input type="checkbox"/> 10+ |

### Q2 What is your sex?

A question about gender identity will follow

- ☐ Female  
☐ Male  
☐ Prefer not to say

### Q3 Is the gender you identify with the same as your sex registered at birth?

If you do not wish to answer, please cross prefer not to say

- ☐ Yes  
☐ No - please write in gender identity

☐ Prefer not to say

### Q4 What is your age?

Please write in your age below.

--	--	--

If age provided  
➔ Go to Q6

☐ Prefer not to say

### Q5 What age band are you in?

- |                                   |  |
|-----------------------------------|--|
| <input type="checkbox"/> 16 to 19 | <input type="checkbox"/> 55 to 59          |
| <input type="checkbox"/> 20 to 24 | <input type="checkbox"/> 60 to 64          |
| <input type="checkbox"/> 25 to 29 | <input type="checkbox"/> 65 to 69          |
| <input type="checkbox"/> 30 to 34 | <input type="checkbox"/> 70 to 74          |
| <input type="checkbox"/> 35 to 39 | <input type="checkbox"/> 75 to 79          |
| <input type="checkbox"/> 40 to 44 | <input type="checkbox"/> 80 to 84          |
| <input type="checkbox"/> 45 to 49 | <input type="checkbox"/> 85 or over        |
| <input type="checkbox"/> 50 to 54 | <input type="checkbox"/> Prefer not to say |

### Q6 What is your marital status?

➔ Please cross one box only ☒

- ☐ Never married and never legally registered in a civil partnership
- ☐ Married ➔ Go to Q8
- ☐ In a legally registered civil partnership ➔ Go to Q8
- ☐ Separated, but still legally married
- ☐ Separated, but still legally in a civil partnership
- ☐ Divorced
- ☐ Formerly in a civil partnership which is now legally dissolved
- ☐ Widowed
- ☐ A surviving member of a legally registered civil partnership
- ☐ Prefer not to say

### Q7 Are you living with someone in this household as a couple?

- ☐ Yes  
☐ No  
☐ Prefer not to say

### Q8 How many children aged under 16 currently live in your household?

➔ Please cross one box only ☒

- |                            |  |
|----------------------------|--|
| <input type="checkbox"/> 0 | <input type="checkbox"/> 6                 |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 7                 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 8                 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 9                 |
| <input type="checkbox"/> 4 | <input type="checkbox"/> 10+               |
| <input type="checkbox"/> 5 | <input type="checkbox"/> Prefer not to say |

## Section 2: Contact with family and friends

The next few questions are about how often you personally contact your family members and friends. Please do not include any people you live with.

### Q9 On average, how often do you...?

➡ Please cross one box only for each statement ☒

	More than once a day	Once a day	2 to 3 times per week	About once a week	About once a fortnight	About once a month	Less often than once a month	Never	Don't know
Meet up in person with family members or friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speak on the phone, or video, or audio call, via the internet with family members or friends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email or write to family members or friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exchange text messages or instant messages with family members or friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Section 3: Your community

The next questions are about your neighbourhood. By neighbourhood we mean a few minutes walking distance from your home.

### Q10 How strongly do you feel you belong to your immediate neighbourhood?

➡ Please cross one box only ☒

- ☐ Very strongly
- ☐ Fairly strongly
- ☐ Not very strongly
- ☐ Not at all strongly
- ☐ Don't know

### Q11 Roughly how many years have you lived in your current neighbourhood?

--	--	--

- ☐ Don't know

### Q12 How often do you chat to your neighbours, more than to just say hello?

➡ Please cross one box only ☒

- ☐ On most days
- ☐ Once or twice a week
- ☐ Once or twice a month
- ☐ Less than once a month
- ☐ Never
- ☐ Don't have any neighbours ➡ Go to Q14
- ☐ Don't know

**Q13** How strongly do you agree or disagree with the following statement:

Generally, I borrow things and exchange favours with my neighbours.

- ☐ Definitely agree
- ☐ Tend to agree
- ☐ Tend to disagree
- ☐ Definitely disagree

**Q14** To what extent would you agree or disagree that people in your neighbourhood pull together to improve the neighbourhood?

➡ Please cross one box only ☒

- ☐ Definitely agree
- ☐ Tend to agree
- ☐ Tend to disagree
- ☐ Definitely disagree
- ☐ Nothing needs improving

**Q15** Thinking about the people who live in this neighbourhood, to what extent do you believe they can be trusted?

➡ Please cross one box only ☒

- ☐ **Many** of the people can be trusted
- ☐ **Some** of the people can be trusted
- ☐ **A few** of the people can be trusted
- ☐ **None** of the people can be trusted
- ☐ Just moved here
- ☐ Don't know

## Section 4: Your local area

The next questions refer to your wider area. Please think of the area within 15 to 20 minutes walking distance from your home.

**Q16** Overall, how satisfied or dissatisfied are you with your local area as a place to live?

➡ Please cross one box only ☒

- ☐ Very satisfied
- ☐ Fairly satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Fairly dissatisfied
- ☐ Very dissatisfied

**Q17** To what extent do you agree or disagree that your local area is a place where people from different backgrounds get on well together?

➡ Please cross one box only ☒

- ☐ Definitely agree
- ☐ Tend to agree
- ☐ Tend to disagree
- ☐ Definitely disagree
- ☐ There are too few people in the local area
- ☐ People in this area are all of the same background

**Q18** Do you think that over the past two years your area has...?

- ☐ Got better to live in
- ☐ Got worse to live in
- ☐ Not changed much (hasn't got better or worse)
- ☐ Have not lived here long enough to say

**Q19** How strongly do you feel you belong to your local area?

- ☐ Very strongly
- ☐ Fairly strongly
- ☐ Not very strongly
- ☐ Not at all strongly
- ☐ Don't know

## Section 5: Local politics and affairs

The next questions are about influencing political decisions and local affairs.

### Q20 In the last 12 months have you...?

➡ Please cross all that apply ☒

- ☐ Contacted a local official such as a local councillor, MP, government official, mayor, or public official working for the local council (Please do not include any contact for personal reasons, for example housing repairs or contact through work)
- ☐ Attended a public meeting, rally, or taken part in a public demonstration or protest
- ☐ Signed a paper petition or an online/e-petition
- ☐ None of these ➡ Go to Q22

### Q21 And over the last 12 months, how often have you done the things you selected at the previous question?

- ☐ At least once a week
- ☐ Less than once a week but at least once a month
- ☐ Less often than once a month

### Q22 In the last 12 months, have you taken part in a consultation about local services or issues in your local area through any of these ways?

➡ Please cross all that apply ☒

- ☐ Completing a paper or online questionnaire
- ☐ Attending a public meeting
- ☐ Being involved in a face-to-face or online group
- ☐ None of these

## Section 6: Activities in your local community

The following questions are about activities in your local community.

### Q23 In the last 12 months, have you done any of these things?

Please include any activities you have already mentioned, but not any related to your job.

➡ Please cross all that apply ☒

- ☐ Been a local councillor (for local authority, town, or parish)
- ☐ Been a school governor
- ☐ Been a volunteer special constable or volunteer at a higher rank
- ☐ Been a magistrate
- ☐ None of these

### Q24 And again in the last 12 months, have you been a member of any of the following decision making groups in your local area?

Please include online groups and any activities you have already mentioned, but not any related to your job.

➡ Please cross all that apply ☒

- ☐ A group making decisions on local health services
- ☐ A decision making group set up to regenerate the local area
- ☐ A decision making group set up to tackle local crime problems
- ☐ A tenants' group decision making committee
- ☐ A group making decisions on local education services
- ☐ A group making decisions on local services for young people
- ☐ Another group making decisions on services in the local community
- ☐ None of these

### Q25 To what extent do you agree or disagree that you personally can influence decisions affecting your local area?

- ☐ Definitely agree
- ☐ Tend to agree
- ☐ Tend to disagree
- ☐ Definitely disagree

**Q26 How important is it for you personally to feel that you can influence decisions in your local area?**

- ☐ Very important
- ☐ Quite important
- ☐ Not very important
- ☐ Not at all important

## Section 7: Local facilities

The next few questions are about facilities in your local area

**Q27 For each of the following, please indicate whether there is at least one within a 15-20 minute walk from your home, further away but still in your local area, or there is not one in your local area at all.**

➡ Please give an answer for each row below. You can cross the first two columns in a row if they both apply. ☒

	Yes, within a 15-20 minute walk from my home	Yes, further away but still in my local area	No, not in my local area at all	Don't know/Not sure
General/grocery shop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pub/bar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restaurant/cafe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community centre/hall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health centre/GP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemist or pharmacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Place of worship for my faith or religion, such as a church, mosque, temple Please leave blank if you do not have a faith or religion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public transport links	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q28 Generally, how satisfied are you with the local services and amenities in your local area?**

➡ Please cross one box only ☒

- ☐ Very satisfied
- ☐ Fairly satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Fairly dissatisfied
- ☐ Very dissatisfied

**Q29 Which of these local facilities have you visited in person in the last 12 months?**

➡ Please cross all that apply ☒

- ☐ General/grocery shop
- ☐ Pub/bar
- ☐ Park
- ☐ Library
- ☐ Restaurant/cafe
- ☐ Community centre/hall
- ☐ Sports facilities
- ☐ Health centre/GP
- ☐ Chemist or pharmacy
- ☐ Post Office
- ☐ Place of worship for my faith or religion, such as a church, mosque, temple
- ☐ Public transport links
- ☐ None of these



If you chose 'Library' at Q29, please answer Q30

**Q30 Over the last 12 months, how often have you visited your local library?**

➡ Please cross one box only ☒

- ☐ At least once a week
- ☐ Less often than once a week but at least once a month
- ☐ Less often than once a month but at least 3 or 4 times a year
- ☐ Twice in the last 12 months
- ☐ Once in the last 12 months
- ☐ Don't know

**Q31 How satisfied or dissatisfied are you with the shops and retailers available in your local area?**

➡ Please cross one box only ☒

- |   |                  |
|---|------------------|
| <input type="checkbox"/> Very satisfied                                       | <b>Go to Q32</b> |
| <input type="checkbox"/> Fairly satisfied                                     |                  |
| <input type="checkbox"/> Neither satisfied nor dissatisfied                   | <b>Go to Q34</b> |
| <input type="checkbox"/> Fairly dissatisfied                                  | <b>Go to Q33</b> |
| <input type="checkbox"/> Very dissatisfied                                    |                  |
| <input type="checkbox"/> There aren't any shops or retailers in my local area | <b>Go to Q34</b> |

**Q32 What are the reasons you are satisfied with the shops and retailers available in your local area?**

➡ Please cross all that apply

- ☐ Easy to get to
- ☐ They have all the basic essentials I need
- ☐ There are a wide range of goods and services to choose from
- ☐ Reasonably priced
- ☐ Independent or locally run
- ☐ Some other reason (please write in)
- ☐ Don't know



If you answered Q32 please move on to Section 8

**Q33 What are the reasons you are dissatisfied with the shops and retailers available in your local area?**

➡ Please cross all that apply ☒

- ☐ Limited choice
- ☐ Shops keep closing down in my local area
- ☐ Too many chains and not enough independent shops/retailers
- ☐ Too many other types of business such as hairdressers and coffee bars
- ☐ Too many discount/charity shops
- ☐ Too expensive
- ☐ Difficult to get to
- ☐ Some other reason (please write in)
- ☐ Don't know

## Section 8: Volunteering

The next questions are about your involvement with groups, clubs or organisations.

### Q34 Have you been involved with any of the following groups, clubs or organisations 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. Please **exclude** giving money or anything that was a requirement of your job or organised through your employer.

➡ Please cross all that apply ☒

- |  |  |
|--|--|
| <ul style="list-style-type: none"><li><input type="checkbox"/> <b>Children's education/schools</b> (for example, Parent Teacher Associations, School governor, supporting fairs and fundraising, helping in school, running pupils' clubs)</li><li><input type="checkbox"/> <b>Youth/children's activities</b> (outside school) (for example, youth clubs, sports clubs, hobby or cultural groups for children)</li><li><input type="checkbox"/> <b>Education for adults</b> (for example, attending or teaching classes, mentoring, cultural groups, Students Union, College governor)</li><li><input type="checkbox"/> <b>Sport/exercise</b> (taking part, coaching or going to watch) (for example, sports clubs or groups (such as football, swimming, fishing, golf, keep-fit, hiking), Supporter clubs)</li><li><input type="checkbox"/> <b>Religion</b> (for example, attending a place of worship (church, chapel, mosque, temple, synagogue), attending faith-based groups, Saturday/Sunday school)</li><li><input type="checkbox"/> <b>Politics</b> (for example, membership of, or involvement with, political groups, serving as local councillor)</li><li><input type="checkbox"/> <b>Older people</b> (for example, involved with groups, clubs or organisations for older people, such as Age UK, pensioner's clubs, visiting, transporting or representing older people)</li><li><input type="checkbox"/> <b>Health, Disability and Social welfare</b> (for example, medical research charities, hospital visiting, disability groups, social welfare (such as Oxfam, NSPCC, Samaritans, Citizens Advice Bureau), offering respite care, self-help groups (such as Alcoholics Anonymous))</li><li><input type="checkbox"/> <b>Safety, First Aid</b> (for example, Red Cross, St. John Ambulance, Life Saving, RNLI, Mountain Rescue, helping after a disaster)</li><li><input type="checkbox"/> <b>The environment, animals</b> (for example, national organisations (such as Greenpeace, National Trust, RSPCA), local conservation groups, preservation societies)</li></ul> | <ul style="list-style-type: none"><li><input type="checkbox"/> <b>Justice and Human Rights</b> (for example, special constable, magistrate, legal advice centre, victim support, prison visiting or aftercare, justice and peace groups, community or race relations, LGBT groups, national organisations (such as Amnesty International))</li><li><input type="checkbox"/> <b>Local community or neighbourhood groups</b> (for example, Tenants' / Residents' Association, Neighbourhood Watch, community group, local pressure group)</li><li><input type="checkbox"/> <b>Citizens' Groups</b> (for example, Rotary Club, Lion's Club, Women's Institute (WI), Freemasons)</li><li><input type="checkbox"/> <b>Hobbies, Recreation/Arts/Social clubs</b> (for example, clubs or groups for the Arts (such as theatres, museums, amateur dramatics, orchestras), hobby or cultural groups (such as local history club, social club)</li><li><input type="checkbox"/> <b>Trade union activity</b> (for example, membership of, or involvement with, a trade union)</li><li><input type="checkbox"/> <b>Other:</b> (please write in)<div style="border: 1px solid black; height: 100px; margin-top: 5px;"></div></li><li><input type="checkbox"/> None of these ➡ <a href="#">Go to Section 9</a></li></ul> |
|--|--|



**Q35** In the last 12 months, have you given unpaid help to any of the groups, clubs or organisations you've just selected in any of the following ways?

➡ Please cross all that apply ☒

- ☐ Raising or handling money/taking part in sponsored events
- ☐ Leading a group/member of a committee
- ☐ Getting other people involved
- ☐ Organising or helping to run an activity or event
- ☐ Visiting people
- ☐ Befriending or mentoring people
- ☐ Giving advice/information/counselling
- ☐ Secretarial, admin or clerical work
- ☐ Providing transport/driving
- ☐ Representing
- ☐ Campaigning
- ☐ Other practical help (for example, helping out at school, shopping)
- ☐ Any other help
- ☐ None of these ➡ Go to Section 9

**Q36** Over the last 12 months, how often have you helped these groups, clubs or organisations?

➡ Please cross one box only ☒

- ☐ At least once a week
- ☐ Less than once a week but at least once a month
- ☐ Less than once a month

## Section 9: Unpaid help to other people

The next section asks about any unpaid help you **as an individual** may have given to other people, that is apart from any help given through a group, club or organisation. This could be help for a friend, neighbour or someone else **but not a relative**.

**Q37** In the last 12 months, have you done any of these things, unpaid, for someone who was not a relative?

➡ Please cross all that apply ☒

- ☐ Keeping in touch with someone who has difficulty getting out and about (visiting in person, telephoning or e-mailing)
- ☐ Doing shopping, collecting pension or paying bills
- ☐ Cooking, cleaning, laundry, gardening or other routine household jobs
- ☐ Decorating, or doing any kind of home or car repairs
- ☐ Babysitting or caring for children
- ☐ Sitting with or providing personal care (for example, washing, dressing) for someone who is sick or frail
- ☐ Looking after a property or a pet for someone who is away
- ☐ Giving advice
- ☐ Writing letters or filling in forms
- ☐ Representing someone (for example, talking to a council department or to a doctor)
- ☐ Transporting or escorting someone (for example, to a hospital or on an outing)
- ☐ Anything else
- ☐ None of these ➡ Go to Section 10

**Q38** Over the last 12 months, about how often have you done any of these things?

➡ Please cross one box only ☒

- ☐ At least once a week
- ☐ Less than once a week but at least once a month
- ☐ Less than once a month

## Section 10: Attitudes to local area

For the next questions please think generally about your local area.

### Q39 How attractive or unattractive is your local area?

➡ Please cross one box only ☒

- ☐ Very attractive
- ☐ Somewhat attractive
- ☐ Neither attractive nor unattractive
- ☐ Somewhat unattractive
- ☐ Very unattractive

### Q40 How much do you agree or disagree with the following statements?

➡ Please cross one box per row ☒

After you have crossed the last row, please go to the next question as directed

	Definitely agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Definitely disagree	Don't know
In five years' time I would like to still be living in my local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would recommend my local area to others as a good place to live	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am proud to live in my local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Go to Q41		Go to Q43	Go to Q42		Go to Q43

### Q41 What are the main reasons you agree that 'I am proud to live in my local area'?

➡ Please cross all that apply ☒

- ☐ There is a strong sense of community here
- ☐ It is a safe area to live in
- ☐ Because of the green and natural spaces here
- ☐ The people here are respectful and friendly
- ☐ It has good work or job opportunities
- ☐ It has lots of activities and fun things to do
- ☐ Because of the culture, heritage and history of the local area
- ☐ Because of the schools
- ☐ There are good transport links
- ☐ There is a good range of shops and local facilities
- ☐ Some other reason (please write in)

- ☐ No reason in particular



If you answered Q41 please move on to Q43

**Q42 What are the main reasons you disagree that 'I am proud to live in my local area'**

➡ Please cross all that apply ☒

- ☐ There is a lack of community here
- ☐ Safety concerns
- ☐ There is a lack of green and natural spaces here
- ☐ Some people here can be disrespectful or troublesome
- ☐ There is a lack of good work or job opportunities
- ☐ There is a lack of activities and fun things to do
- ☐ The area is run down
- ☐ The area lacks culture, history or heritage
- ☐ The schools are poor
- ☐ There is a lack of good transport links
- ☐ There is a lack of shops or local facilities
- ☐ Some other reason (please write in)
- ☐ No reason in particular

**Q43 How satisfied or dissatisfied are you with the green and natural spaces in your local area?**

➡ Please cross one box only ☒

- ☐ Very satisfied
- ☐ Fairly satisfied
- ☐ Neither satisfied nor dissatisfied
- ☐ Fairly dissatisfied
- ☐ Very dissatisfied
- ☐ There are no green or natural spaces in my local area
- ☐ Don't know

## Section 11: Local area involvement

The next questions are about getting involved in your local area.

**Q44 How strongly do you agree or disagree with the following statement:**

When people in this area get involved in their local community, they really can change the way that their area is run.

- ☐ Definitely agree
- ☐ Tend to agree
- ☐ Neither agree nor disagree
- ☐ Tend to disagree
- ☐ Definitely disagree

**Q45 Have you been involved in any of the following activities in the last 12 months?**

Please only include those activities that were unpaid. Please don't include anything where you signed a petition but took no further action.

➡ Please cross all that apply ☒

- ☐ Trying to set up a new service/amenity for local residents
- ☐ Trying to stop the closure of a service/amenity
- ☐ Trying to stop something else happening in my local area
- ☐ Running local services on a **voluntary** basis (for example, childcare, youth services, parks, community centres)
- ☐ Organising a community event (for example, a street party)
- ☐ Another local issue: (Please cross the box and write in the space provided)

- ☐ None of these ➡ [Go to Section 12](#)

**Q46 On how many occasions in the last 12 months have you spent time helping with any of these activities?**

➡ Please cross one box only ☒

- ☐ On one occasion only
- ☐ On two or three occasions
- ☐ On four or five occasions
- ☐ More frequently

## Section 12: Local arts and culture

The next questions refer to arts and cultural facilities, groups and events in your local area. Some examples include:

- Facilities such as cinemas, theatres, museums, art galleries, studios, music venues
- Groups or classes such as book clubs, theatre or dance groups, choir or music groups, art or craft classes, film clubs, video games clubs
- Events such as street festivals, musical festivals, carnivals

**Q47** Are there opportunities to take part in arts and cultural activities, groups and events in your local area?

☐ Yes, lots

Go to  
Q48

☐ Yes, some

☐ No, none

Go to  
Section  
13

☐ Don't know

**Q48** Over the last 12 months, how often have you taken part in arts and cultural activities, groups and events in your local area?

➡ Please cross one box only ☒

☐ At least once a week

☐ Less often than once a week but at least once a month

☐ Less often than once a month but at least 3 or 4 times a year

☐ Twice in the last 12 months

☐ Once in the last 12 months

☐ Not in the last 12 months

☐ Don't know

## Section 13: Local heritage and sports

The next question refers to heritage sites and places of historic interest. Some examples include:

- Ancient monuments or archaeological sites with historic significance (such as a burial site or castle)
- A place that you visited specifically for its historic nature (such as a local historic town, coastline or countryside)
- A building or place with historic or artistic features (such as a public garden, country house, place of worship attended as a visitor, historic civic buildings)
- A place connected with industrial or other local history (such as an old factory, mine or railway, shipwrecks, historic sports venue visited for its heritage)

**Q49** Are there opportunities to visit heritage sites and places of historic interest in your local area?

☐ Yes, lots

Go to  
Q50

☐ Yes, some

☐ No, none

Go to  
Q51

☐ Don't know

**Q50** Over the last 12 months, how often have you visited heritage sites and places of historic interest in your local area? For places of historic interest please only include places that you visited specifically for their historic nature.

➡ Please cross one box only ☒

- ☐ At least once a week
- ☐ Less often than once a week but at least once a month
- ☐ Less often than once a month but at least 3 or 4 times a year
- ☐ Twice in the last 12 months
- ☐ Once in the last 12 months
- ☐ Not in the last 12 months
- ☐ Don't know

**Q51** Are there opportunities to visit museums or galleries in your local area?

- |                                     |                  |
|-------------------------------------|------------------|
| <input type="checkbox"/> Yes, lots  | <b>Go to Q52</b> |
| <input type="checkbox"/> Yes, some  |                  |
| <input type="checkbox"/> No, none   | <b>Go to Q53</b> |
| <input type="checkbox"/> Don't know |                  |

**Q52** How often do you visit museums or galleries in your local area?

➡ Please cross one box only ☒

- ☐ At least once a week
- ☐ Less often than once a week but at least once a month
- ☐ Less often than once a month but at least 3 or 4 times a year
- ☐ Twice in the last 12 months
- ☐ Once in the last 12 months
- ☐ Not in the last 12 months
- ☐ Don't know

**Q53** Are there opportunities to take part in sport teams, clubs or classes or exercise at sports facilities in your local area?

- |                                     |                  |
|-------------------------------------|------------------|
| <input type="checkbox"/> Yes, lots  | <b>Go to Q54</b> |
| <input type="checkbox"/> Yes, some  |                  |
| <input type="checkbox"/> No, none   | <b>Go to Q55</b> |
| <input type="checkbox"/> Don't know |                  |

**Q54** How often do you take part in sport teams, clubs or classes or exercise at sports facilities in your local area?

➡ Please cross one box only ☒

- ☐ At least once a week
- ☐ Less often than once a week but at least once a month
- ☐ Less often than once a month but at least 3 or 4 times a year
- ☐ Twice in the last 12 months
- ☐ Once in the last 12 months
- ☐ Not in the last 12 months
- ☐ Don't know

**Q55** Are there opportunities to watch people participate in sports activities or events in your local area?

- |                                     |                   |
|-------------------------------------|-------------------|
| <input type="checkbox"/> Yes, lots  | <b>Go to Q56</b>  |
| <input type="checkbox"/> Yes, some  |                   |
| <input type="checkbox"/> No, none   | <b>Go to Q56b</b> |
| <input type="checkbox"/> Don't know |                   |

**Q56** How often do you watch people participate in sports activities or events in your local area?

➡ Please cross one box only ☒

- ☐ At least once a week
- ☐ Less often than once a week but at least once a month
- ☐ Less often than once a month but at least 3 or 4 times a year
- ☐ Twice in the last 12 months
- ☐ Once in the last 12 months
- ☐ Not in the last 12 months
- ☐ Don't know

**Q56b.** Thinking about local news. On average, how often do you watch, read or listen to local news? i.e. TV or radio that covers local news or a local newspaper, in print or online.

➡ Please cross one box only ☒

- ☐ At least once every 2 weeks
- ☐ Once a month
- ☐ Less often
- ☐ Never
- ☐ I don't know of any local news providers

## Section 14: Wellbeing

The next questions ask about your feelings on aspects of your life. They are included to help measure people's wellbeing and the information produced will not identify you or anyone in your household.

There are no right or wrong answers. For each of these questions please give an answer on a scale of 0 to ten, where 0 is 'not at all' and 10 is 'completely'.

### Q57 Overall, how satisfied are you with your life nowadays?

➡ Please cross one box only ☒

Not at all  
satisfied

Completely  
satisfied

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

0	1	2	3	4	5	6	7	8	9	10	Prefer not to say
---	---	---	---	---	---	---	---	---	---	----	----------------------

### Q58 Overall, to what extent do you feel the things you do in your life are worthwhile?

➡ Please cross one box only ☒

Not at all  
worthwhile

Completely  
worthwhile

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

0	1	2	3	4	5	6	7	8	9	10	Prefer not to say
---	---	---	---	---	---	---	---	---	---	----	----------------------

### Q59 Overall, how happy did you feel yesterday?

➡ Please cross one box only ☒

Not at all  
happy

Completely  
happy

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

0	1	2	3	4	5	6	7	8	9	10	Prefer not to say
---	---	---	---	---	---	---	---	---	---	----	----------------------

### Q60 Overall, how anxious did you feel yesterday?

➡ Please cross one box only ☒

Not at all  
anxious

Completely  
anxious

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

0	1	2	3	4	5	6	7	8	9	10	Prefer not to say
---	---	---	---	---	---	---	---	---	---	----	----------------------

**Q61 How often do you feel that you lack companionship?**

- ☐ Often
- ☐ Some of the time
- ☐ Hardly ever or never
- ☐ Prefer not to say

**Q62 How often do you feel left out?**

- ☐ Often
- ☐ Some of the time
- ☐ Hardly ever or never
- ☐ Prefer not to say

**Q63 How often do you feel isolated from others?**

- ☐ Often
- ☐ Some of the time
- ☐ Hardly ever or never
- ☐ Prefer not to say

**Q64 How often do you feel lonely?**

- ☐ Often/always
- ☐ Some of the time
- ☐ Occasionally
- ☐ Hardly ever
- ☐ Never
- ☐ Prefer not to say

## Section 15: Anti-social behaviour

For the next questions please think generally about your local area.

**Q65 Have you personally experienced or witnessed any sort of anti-social behaviour in your local area in the last 12 months?**

Anti-social behaviour is any behaviour that causes people nuisance, annoyance, alarm or distress. This can include behaviours that are aggressive or intimidating or that impact upon a person's quality of life.

- ☐ Yes
- ☐ No

**Q66 To what extent, if at all, is anti-social behaviour a problem in your local area?**

- ☐ A very big problem
- ☐ A fairly big problem
- ☐ Not a very big problem
- ☐ Not a problem at all

**Q67 Which, if any, of the following are a problem in your local area?**

➡ Please cross all that apply ☒

- ☐ People hanging around or loitering
- ☐ Street drinking or drunken behaviour
- ☐ Vandalism, criminal damage or graffiti
- ☐ Inconsiderate behaviour such as using a football in inappropriate areas, cycling/skateboarding in pedestrian areas or inappropriate use of fireworks.
- ☐ Loud music or other loud noise
- ☐ Drugs or evidence of drugs
- ☐ Public harassment, intimidation or abuse
- ☐ Litter or rubbish (including fly tipping) or dog fouling
- ☐ Nuisance neighbours
- ☐ Vehicle related anti-social behaviour such as abandoned vehicles, speeding cars or motorcycles, car revving.
- ☐ Begging
- ☐ People committing inappropriate or indecent sexual acts in public or sex work
- ☐ Problems with out of control or dangerous dogs
- ☐ Some other type of anti-social behaviour (please write in)

- ☐ None of these

## Section 16: About you

The following questions are about you and your circumstances.

### Q68 Do you or your household own or rent this accommodation?

➡ Please cross one box only ☒

☐ Own it outright

Go to  
Q70

☐ Own with a mortgage or loan

☐ Part own and part rent (shared ownership)

Go to  
Q69

☐ Rent it (with or without housing benefit)

☐ Live here rent-free

☐ Don't know

Go to  
Q70

### Q69 Who is your landlord?

➡ Please cross one box only ☒

☐ The local authority/council /ALMO

☐ A housing association, RSL, charitable trust or Local Housing Company

☐ Employer (organisation) of a household member

☐ Another organisation

☐ Relative/acquaintance of any current household member from before this tenancy started

☐ Employer (individual) of a household member

☐ Another individual private landlord

☐ Don't know

### Q70 Have you used the internet, at home or elsewhere, in the last 12 months?

➡ Please cross one box only ☒

☐ Yes

☐ No

### Q71 What is your ethnic group?

➡ Please cross one box only ☒

#### White

☐ English or Welsh or Scottish or Northern Irish or British

☐ Irish

☐ Gypsy or Irish Traveller

☐ Any other White background

#### Mixed / Multiple ethnic groups

☐ White and Black Caribbean

☐ White and Black African

☐ White and Asian

☐ Any other mixed or multiple ethnic background

#### Asian / Asian British

☐ Indian

☐ Pakistani

☐ Bangladeshi

☐ Chinese

☐ Any other Asian background

#### Black / African / Caribbean / Black British

☐ African

☐ Caribbean

☐ Any other Black or African or Caribbean background

#### Other Ethnic Group

☐ Arab

☐ Any other ethnic group

☐ Don't know

☐ Prefer not to say



If you selected any 'other' ethnicity at Q71, please answer Q72. If not, go to Q73.

### Q72 Please tell us your ethnic group

☐ Prefer not to say



### Q73 Are you a citizen of any of the following?

Citizenship means you are entitled to a passport issued by that country

➡ Please cross all that apply ☒

- ☐ The United Kingdom (Great Britain and Northern Ireland)
- ☐ Republic of Ireland
- ☐ Any other member state of the European Union
- ☐ Any other country elsewhere in the world
- ☐ Don't know
- ☐ Prefer not to say

### Q74 What is your religion?

➡ Please cross one box only ☒

- ☐ No religion
- ☐ Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
- ☐ Buddhist
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ Any other religion
- ☐ Don't know
- ☐ Prefer not to say

### Q75 How is your health in general?

- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Bad
- ☐ Very bad
- ☐ Prefer not to say

### Q76 Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☐ Prefer not to say

Go to  
Section  
17

### Q77 Does your condition or illness reduce your ability to carry out day-to-day activities?

- ☐ Yes, a lot
- ☐ Yes, a little
- ☐ Not at all
- ☐ Prefer not to say

## Section 17: Work and employment

The next questions are about your work and employment

### Q78 What is your current working status?

➡ Please cross one box only ☒

- ☐ Working full time (30+hours a week)
- ☐ Working part time (less than 30 hours a week)
- ☐ On government supported training
- ☐ Unemployed and available for work
- ☐ On maternity or paternity leave
- ☐ Retired and not working at all

Go to  
Q79

- ☐ Full-time education at school, college or University

Go to  
Q88

- ☐ Looking after home or family
- ☐ Permanently sick or disabled
- ☐ Doing something else

Go to  
Q79

- ☐ Don't know
- ☐ Prefer not to say

Go to  
Q88

### Q79 Are you at present at school or 6th form college or enrolled on any full-time or part-time education course excluding leisure classes?

- ☐ Yes
- ☐ No



If you **are currently** in full-time or part-time employment please go to Q80.

If you **are currently** on government supported training, on maternity/paternity leave, retired, in full-time education, or permanently sick or disabled, please go to Q88.

If neither of the above applies to you, please go to Q86.

**Q80 In which of these places do you work in your current job?**  
**If you have more than one job, please think about the main one.**

➡ Please cross all that apply ☒

- ☐ At or from home
- ☐ At one or more workplaces, for example office, shop, hospital or school
- ☐ On the move, for example moving goods or carrying out services
- ☐ Somewhere else (please write in)



If you work at one or more fixed workplaces (e.g. office, shop, hospital or school), please go to Q81.

If you work on the move (e.g. moving goods or carrying out services) or somewhere else, but **not** at one or more fixed workplaces, please go to Q82.

If you **only** work at or from home, please go to Q83.

**Q81 How far away from your home is your workplace?**  
**If you have more than one workplace please think about the one you travel to most often.**

- ☐ Within a 15-20 minute walk from my home
- ☐ Further away but still in my local area
- ☐ Not in my local area

Go to  
Q84

**Q82 How far away from your home do you usually travel when working?**

- ☐ Within a 15-20 minute walk from my home
- ☐ Further away but still in my local area
- ☐ Not in my local area

Go to  
Q84

**Q83 How far away from your home is the company you work for based?**

- ☐ Within a 15-20 minute walk from my home
- ☐ Further away but still in my local area
- ☐ Not in my local area

Go to  
Q84

**Q84 How many hours in total do you usually work in a week in your job?**  
**Please include both paid and unpaid hours. If you have no usual hours, please give an average.**

- ☐ 0-10 hours
- ☐ 11-20 hours
- ☐ 21-30 hours
- ☐ 31-40 hours
- ☐ 41-50 hours
- ☐ 50+ hours
- ☐ Don't know

**Q85** The next questions are about how you feel about your current job.  
How much of the time do you feel each of the following statements applies to your job?

➡ Please cross one box per row ☒

	All of the time	Most of the time	Some of the time	Hardly ever	Never	Don't know	Prefer not to say
I find my job fulfilling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I enjoy the type of job I do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel productive when I am working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find purpose in my job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



If you answered Q85, please move on to Q88

**Q86** These are things which some people have said makes it difficult for them to find work. Which of the following statements apply to you?

➡ Please cross all that apply ☒

- ☐ There aren't many jobs where I live
- ☐ I haven't got the skills or qualifications I need to get a job or training place
- ☐ I don't know how to go about finding a job or training place
- ☐ There aren't enough available courses locally to me
- ☐ I haven't had enough advice or support to find a job or training place
- ☐ If I was in a job or studying, I would be worse off financially compared to now
- ☐ I would need to move away from my local area to find a job I would enjoy
- ☐ There are not any interesting job opportunities where I live
- ☐ There isn't enough public transport where I live for me to get to and from work
- ☐ Childcare is too expensive for me to work
- ☐ Not many of my friends are working or studying
- ☐ I haven't been able to find suitable childcare so I can work or study
- ☐ I'm not interested in getting a job or studying
- ☐ None of these

**Q87** When you think about getting a job in the future, how confident do you feel about:

➡ Please cross one box per row ☒

	Very confident	Fairly confident	Not very confident	Not at all confident
Contacting people for advice about getting a job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Going for a job interview	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Convincing someone you are the best person for a job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being prepared to start a new job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q88 How confident would you feel in each of the following situations?**

➡ Please cross one box per row ☒

	Very confident	Fairly confident	Neither confident nor unconfident	Not very confident	Not at all confident	Don't know
Meeting new people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working with other people in a team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being the leader of a team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explaining my ideas clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaking in public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seeing things from other people's viewpoints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expressing myself to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaking up in a group of people I don't know well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



If you have a partner, please go to Q89, otherwise go to Q90

**Q89 What is your partner's current working status?**

➡ Please cross one box only ☒

- ☐ Working full time (30+hours a week)
- ☐ Working part time (less than 30 hours a week)
- ☐ On government supported training
- ☐ Unemployed and available for work
- ☐ On maternity or paternity leave
- ☐ Retired and not working at all
- ☐ Full-time education at school, college or University
- ☐ Looking after home or family
- ☐ Permanently sick or disabled
- ☐ Doing something else
- ☐ Prefer not to say

**Q90 Have you achieved a qualification at degree level or above? For example degree, foundation degree, HND or HNC, NVQ level 4 and above, teaching or nursing.**

- ☐ Yes ➡ [Go to Section 18](#)
- ☐ No

**Q91 Have you achieved any other qualifications?**

➡ Please cross all that apply ☒

**GCSEs or equivalent**

- ☐ 5 or more GCSEs (A\* to C, 1 to 9), O levels (passes) or CSEs (grade 1)
- ☐ Any other GCSEs, O levels or CSEs (any grades) or Basic Skills course

**AS, A level or equivalent**

- ☐ 2 or more A levels, 4 or more AS levels
- ☐ 1 A level, 2-3 AS levels
- ☐ 1 AS level

**NVQ or equivalent**

- ☐ NVQ level 3, BTEC National, OND or ONC, City and Guilds Advance Craft
- ☐ NVQ level 2, BTEC General, City and Guilds Craft
- ☐ NVQ level 1

**Other or no qualifications**

- ☐ Any other qualification, equivalent unknown
- ☐ No qualifications

## Section 18: Income

The next questions are on income. This includes earnings from employment or self-employment, income from benefits and pensions, and income from other sources such as interest from savings.

It is important for us to collect this so we can understand how it influences people's experiences. Please remember that all the information collected is completely confidential and will only be used for the purposes of producing statistics.

**Q92 Please can you tell us your personal total income before any deductions such as income tax or National Insurance. Please include income from earnings, self-employment, benefits, pensions, and interest from savings.**

➡ Please give one amount, either weekly, monthly/every four weeks or annually depending on which is easiest

**Weekly**

£	£	£	£	£	£	.	P	P
---	---	---	---	---	---	---	---	---

**Monthly/Every four weeks**

£	£	£	£	£	£	£	.	P	P
---	---	---	---	---	---	---	---	---	---

**Annually**

£	£	£	£	£	£	£	£	.	P	P
---	---	---	---	---	---	---	---	---	---	---

- ☐ Don't know
- ☐ Prefer not to say

**Q93 Which of these statements best describes your current financial situation?**

➔ Please cross one box only ☒

- ☐ I am saving a lot
- ☐ I am saving a little
- ☐ I am just managing to make ends meet
- ☐ I am having to draw on savings
- ☐ I am running into debt
- ☐ Don't know
- ☐ Prefer not to say

**Q94 Next a question about how you feel about your life. Overall, how satisfied or dissatisfied are you with each of the following...**

➔ Please cross one box per row ☒

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know	Prefer not to say
Your income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Section 19: Future research

**Q95 This survey is conducted by Verian, an independent social research organisation. We may like to contact you again, with questions relating to this survey or to help with other connected research for the Government or a charity. Would it be okay for us to contact you within the next two years?**

This will involve us keeping a secure record of your name, postal address and telephone number for two years. Your contact details will not be used for any other purposes and will be destroyed after two years. If you answer 'yes', you are giving your permission for us to re-contact you within the next two years to discuss taking part in follow-up research. You are not agreeing to take part in any research.

- ☐ Yes
- ☐ No

**Q96 If follow up research related to this survey was being conducted on behalf of the government or a charity would you be willing for Verian to securely pass your name, contact details and information from this survey to another research organisation, so they could contact you within the next two years?**

This will involve us keeping a secure record of your name, postal address and telephone number for two years. Your contact details will only be shared for valid research purposes and will be destroyed after two years.

If you answer 'yes', you are giving your permission to be re-contacted to discuss taking part in follow-up research within the next two years by another research organisation. You are not agreeing to take part in any research.

- ☐ Yes
- ☐ No



If you said 'Yes' at Q95 or Q96, go to Q97. If you said 'No' to both Q95 and Q96, go to Q100

**Q97** If you answered yes to being recontacted for any follow up research, we would like to collect a few contact details from you. Firstly, please enter your full name in the boxes below.

First name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Last name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Q98** Please enter your telephone number in case we want to contact you for any follow up research.

Telephone number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Q99** Please enter your email address in case we want to contact you for any follow up research.

Email address:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Q100** The Community Life Survey is conducted on behalf of the government. The quality of data is very important so please confirm below that all your answers were given honestly and represent your own personal views.

➡ Please cross one box only ☒

- ☐ Yes, all my answers were given honestly and represent my own personal views
- ☐ No

D	D	M	M	Y	Y
---	---	---	---	---	---

Today's Date

**Thank you for completing the questionnaire.  
Please return it to us in the envelope provided.**

**As a thank you for this, a £10 shopping voucher will be posted to your address. We aim for you to receive it within 15 working days.**

**For some participants, the survey questions may have raised uncomfortable or upsetting issues. In the event that you feel upset about any of the topics covered, we want to ensure that you have the contact details of organisations who you can talk to if needed and who can help you.**

**Please visit [www.commlife.co.uk/support](http://www.commlife.co.uk/support) for a list of support resources**