



Questions about you



These questions let us know more about the people who come to the workshop.



You don't have to answer the questions if you don't want to.



We will keep what you tell us private. No one will know who you are from the answers that you give.



If you are filling in this survey for someone else please answer these questions about them.



Question 1: How old are you?

Please tick 1 box

Younger than 18

18 to 30

31 to 54

55 to 64

Older than 65

I don't want to say



Question 2: What is your **ethnic group**? Your **ethnic group** is your race, background and culture.

Please tick 1 box



White.

This includes:

- English, Welsh, Scottish, Northern Irish, or British
- Irish
- Gypsy or Irish Traveller
- Any other white background.
Please tell us in this box:



Mixed ethnic group.

This includes:

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed ethnic background.

Please tell us in this box:



Asian, or Asian British:

This includes:

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian or Asian British background.

Please tell us in this box:



Black or Black British:

This includes:

- African
- Caribbean
- Any other Black or Black British background.

Please tell us in this box:



I don't want to say what my ethnic group is



Question 3: What is your gender?

Tick 1 box or tell us what gender you are.



I am a man



I am a woman



I am non-binary.
This means you do not see yourself as a man or a woman



I don't want to say



Or you can write your gender in this box:



When you are born, a doctor or nurse says if you are a boy or a girl.



But as you grow up you might feel that this is not right.



You might have been told you are a boy but live your life as a girl.



Or you might have been told you are a girl and live your life as a boy.



Question 4: Has this happened to you?





Question 5: What is your Sexual orientation?

Sexual orientation mostly means who you are attracted to.

Please tick 1 box or tell us what sexual orientation you are.



I am a man who is attracted to women or a woman who is attracted to men



I am man who is attracted to other men.

Or I am a woman who is attracted to other women.



I am attracted to both men and women



I don't want to say



Or you can write your sexual orientation in this box:



Question 6: Do you have a disability, illness or health condition?



Yes



No



I don't want to say



If you ticked **yes**, please tell us what disability or health condition you have. Write your answer in this box.



Question 7: What is your experience of PIP?



I already get PIP



I am a disabled person who does not get PIP



I am a family member, carer or supporter for someone who gets PIP



I am a family member, carer or supporter for someone who does not get PIP



I give people advice or support about benefits



I came to the workshop for another reason. Please tell us here:



I don't want to say.