

Your Membership Number is:



**in Lancashire**

1. Please read the instructions carefully.
2. Please check you have answered all the appropriate questions.
3. Return your completed questionnaire in the reply paid envelope provided by 4 June.

## CRIME AND DISORDER

Crime and Disorder Reduction Partnerships (CDRPs), also known as Community Safety Partnerships (CSPs) were formed under the 1998 Crime and Disorder Act to enable Local Authorities, Police and other key agencies to work together to reduce crime and disorder within their areas.

There are 14 CDRPs/CSPs in Lancashire. Each has a published strategy for reducing crime and disorder (available to view at [www.saferlancashire.co.uk](http://www.saferlancashire.co.uk)). As part of this work, the CDRP carries out a three-yearly audit of crime and disorder in their area to update the crime and safety strategy. Consultation with the public about their views on crime and disorder in their local area is a key part of this audit and helps to form priorities for the next strategy.

The CDRPs/CSPs are interested in your views and experiences of safety where you work, rest and play. The following questions address the issues they need your views on.

## EXPERIENCE OF CRIME

**1**

**Have you been a victim of crime in the past 12 months?**

PLEASE TICK ONE BOX ONLY

Yes 13% → GO TO Q2

No 87% → GO TO Q4

**2**

If you have been a victim of crime in the past 12 months, write in below the details of the crime and indicate how many times you have been a victim. If you have been a victim of more than one type of crime please write in details of ALL crimes of which you have been a victim.

FOR EXAMPLE:

**Type of crime:**  
PLEASE WRITE IN

	Once (1)	Twice (2)	Three times (3)	More than 3 times (4)
Crime 1: House burgled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 2: Computer stolen from car	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FILL IN THE TABLE BELOW GIVING DETAILS OF ALL CRIMES EXPERIENCED IN THE PAST 12 MONTHS ONLY:

**Type of crime:**  
PLEASE WRITE IN

	Once (1)	Twice (2)	Three times (3)	More than 3 times (4)
Crime 1:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 3:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 4:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 5:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**3**

**Did you report the crime/s to the Police or your Local Authority?**

PLEASE TICK ONE BOX ONLY

Reported it/all of them to the Police	62%
Reported only some of them to the Police	14%
Reported it/all of them to the Local Authority	-
Reported only some to them to the Local Authority	1%
Did not report it/any of them	23%

**4**

**Have you witnessed a crime in the past 12 months?**

PLEASE TICK ONE BOX ONLY

Yes 14% → GO TO Q5

No 86% → GO TO Q6

**5**

If you have witnessed a crime in the past 12 months, write in below the details of the crime and indicate how many times you have witnessed this type of crime. If you have been a witness to more than one type of crime please write in details of ALL crimes of which you have been a witness.

FOR EXAMPLE:

Type of crime: PLEASE WRITE IN	Once (1)	Twice (2)	Three times (3)	More than 3 times (4)
Crime 1: Car being stolen	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 2: Vandalism	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FILL IN THE TABLE BELOW GIVING DETAILS OF ALL CRIMES WITNESSED IN THE PAST 12 MONTHS ONLY:

Type of crime: PLEASE WRITE IN	Once (1)	Twice (2)	Three times (3)	More than 3 times (4)
Crime 1:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 2:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 3:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 4:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crime 5:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## PERCEPTIONS OF SAFETY

**6**

Thinking about the neighbourhood you live in, how safe would you say you feel on your own in each of the following situations during the day?

PLEASE TICK ONE BOX FOR EACH SITUATION ONLY

	Very safe (1)	Fairly safe (2)	Slightly unsafe (3)	Very unsafe (4)	Don't know/ unsure (5)
Your own home	52%	44%	3%	1%	*
Your workplace	44%	40%	8%	2%	7%
Travelling around	18%	63%	16%	2%	1%
Out and about in the nearest town centre	14%	58%	23%	4%	1%
Out shopping	17%	64%	17%	2%	*
Visiting a pub/club in the nearest town centre	6%	39%	35%	12%	8%
Visiting a pub/club in your neighbourhood	16%	51%	19%	7%	6%

**7****And how safe would you feel on your own in each of these situations after dark?**

PLEASE TICK ONE BOX FOR EACH SITUATION ONLY

	Very safe (1)	Fairly safe (2)	Slightly unsafe (3)	Very unsafe (4)	Don't know/ unsure (5)
Your own home	45%	47%	6%	2%	*
Your workplace	26%	43%	18%	4%	9%
Travelling around	7%	45%	38%	8%	1%
Out and about in the nearest town centre	3%	27%	44%	22%	3%
Out shopping	6%	43%	38%	11%	2%
Visiting a pub/club in the nearest town centre	2%	22%	40%	27%	8%
Visiting a pub/club in your neighbourhood	10%	37%	33%	14%	7%

**8****Whilst out walking in your neighbourhood, how worried do you feel about being intimidated or harassed due to any of the following?**

PLEASE TICK ONE BOX FOR EACH FACTOR TO SHOW HOW WORRIED YOU ARE

	Very worried (1)	Fairly worried (2)	Slightly worried (3)	Not at all worried (4)	Don't know/ unsure (5)
Your skin colour	2%	2%	8%	85%	2%
Your age	2%	5%	2%	1%	5%
Your religion	2%	1%	5%	88%	3%
Your ethnic origin	2%	2%	6%	87%	3%
Your sexual orientation	1%	2%	6%	88%	3%
Your gender (male/female)	1%	5%	22%	70%	2%

Other (PLEASE WRITE IN THE BOX)

**9**

**Thinking about the neighbourhood you live in, how much of a problem are the following? PLEASE TICK ONE BOX FOR EACH FACTOR TO SHOW HOW BIG A PROBLEM IT IS IN YOUR NEIGHBOURHOOD**

	A very big problem (1)	A fairly big problem (2)	A slight problem (3)	Not a problem at all (4)	Don't know/unsure (5)
Rowdy behaviour	5%	9%	42%	43%	2%
Groups of young people hanging around	10%	17%	43%	29%	1%
Homeless people	0%	0%	6%	87%	7%
Adults drinking on street corners	3%	5%	19%	70%	3%
Empty/deserted buildings	4%	4%	14%	75%	5%
Boarded/broken windows	3%	5%	13%	75%	3%
Abandoned/burnt out vehicles	1%	1%	11%	82%	4%
Solvent abuse	2%	2%	13%	64%	19%
Vandalised telephone kiosks	4%	9%	30%	50%	7%
Rubbish and litter lying around	13%	19%	45%	20%	1%
Graffiti	5%	7%	37%	48%	3%
Youths drinking on street corners	8%	12%	34%	43%	4%
Used needles/syringes lying around	2%	3%	11%	69%	15%
People using or dealing drugs	5%	6%	18%	52%	19%
Dog fouling	14%	23%	47%	14%	1%
Inadequate lighting	5%	11%	33%	50%	1%
Beer/wine bottles lying around	6%	10%	35%	46%	3%
Damaged street lamps	2%	4%	16%	72%	5%
Stray dogs	2%	3%	16%	73%	7%
Overgrown bushes	4%	9%	30%	53%	4%
Deliberate fire setting	3%	4%	12%	72%	9%
Isolated areas	3%	3%	25%	59%	9%

Other (PLEASE WRITE IN THE BOX)

**10**

**Thinking about the neighbourhood you live in, how much do each of the following influence how unsafe you feel?** PLEASE TICK ONE BOX FOR EACH FACTOR TO SHOW HOW MUCH IT MAKES YOU FEEL UNSAFE IN YOUR NEIGHBOURHOOD

	A great deal (1)	Quite a lot (2)	A little (3)	Not at all (4)	Don't know/ unsure (5)
Rowdy behaviour	9%	16%	37%	37%	1%
Groups of young people hanging around	12%	19%	39%	37%	1%
Homeless people	1%	2%	11%	80%	7%
Adults drinking on street corners	6%	9%	22%	60%	4%
Empty/deserted buildings	3%	4%	17%	71%	5%
Boarded/broken windows	3%	6%	17%	70%	4%
Abandoned/burnt out vehicles	2%	4%	12%	76%	6%
Solvent abuse	4%	6%	15%	63%	12%
Vandalised telephone kiosks	5%	8%	24%	58%	6%
Rubbish and litter lying around	8%	13%	29%	48%	1%
Graffiti	4%	7%	25%	61%	3%
Youths drinking on street corners	13%	16%	30%	38%	3%
Used needles/syringes lying around	8%	8%	11%	60%	13%
People using or dealing drugs	12%	11%	16%	48%	12%
Dog fouling	9%	14%	30%	44%	2%
Inadequate lighting	7%	13%	30%	47%	3%
Beer/wine bottles lying around	6%	10%	27%	53%	4%
Damaged street lamps	5%	9%	19%	62%	5%
Stray dogs	2%	6%	18%	69%	5%
Overgrown bushes	4%	9%	28%	55%	4%
Deliberate fire setting	8%	8%	13%	64%	7%
Isolated areas	6%	10%	24%	54%	7%

Other (PLEASE WRITE IN THE BOX)

**11**

**Has anything happened in the last 12 months to make you feel that substance misuse has increased or decreased in your area?**

PLEASE TICK ONE BOX ONLY

Something has happened to make me feel it has **increased** 11% → **GO TO Q12**

Something has happened to make me feel it has **decreased** 2% → **GO TO Q12**

Nothing has happened 87% → **GO TO Q13**

**12****If something has happened, what was it?**

PLEASE WRITE IN THE BOX

**13****Has anything happened in the last 12 months to make you feel less safe or more safe walking around the streets of your neighbourhood?**

PLEASE TICK ONE BOX ONLY

Something has happened to make me feel **less safe** 16% → GO TO Q14

Something has happened to make me feel **more safe** 5% → GO TO Q14

Nothing has happened 79% → GO TO Q15

**14****If something has happened, what was it?**

PLEASE WRITE IN THE BOX

**15****How much of a problem do you think street robbery or mugging is in your neighbourhood?** PLEASE TICK ONE BOX ONLY

A very big problem 2%

A fairly big problem 5%

A slight problem 29%

Not a problem at all 47%

Don't know/not sure 17%

## VEHICLE AND TRANSPORT SAFETY

**16****In your neighbourhood, how much of a problem are the following?**

PLEASE TICK ONE BOX FOR EACH OPTION

	A very big problem (1)	A fairly big problem (2)	A slight problem (3)	Not a problem at all (4)	Don't know/unsure (5)
Damage to vehicles	6%	10%	41%	33%	11%
Theft of vehicles	2%	7%	35%	37%	20%
Reckless driving of stolen cars (joy-riding)	5%	7%	24%	45%	19%
Theft from vehicles	3%	9%	36%	32%	20%
Setting fire to vehicles deliberately	1%	3%	14%	62%	20%

**17****How safe do you think your vehicle is when parked in the following locations? PLEASE TICK ONE BOX FOR EACH OPTION**

	Very safe (1)	Fairly safe (2)	Slightly unsafe (3)	Very unsafe (4)	Don't use a car (5)
At home in a garage/driveway	30%	49%	10%	1%	9%
At home, on the street	13%	45%	28%	9%	6%
In a public car park	3%	30%	48%	13%	6%
In a private car park	7%	46%	36%	5%	6%
Outside school/college when dropping/collecting children	8%	44%	23%	4%	21%

**18****Thinking about when you are out driving in the car, how much do the following influence how unsafe you feel? PLEASE TICK ONE BOX FOR EACH FACTOR TO SHOW HOW MUCH IT MAKES YOU FEEL UNSAFE**

	A great deal (1)	Quite a lot (2)	A little (3)	Not at all (4)	Don't use a car (5)
Speeding cars	22%	27%	32%	10%	9%
Aggressive drivers	27%	30%	29%	7%	7%
Fear of having personal property stolen	6%	15%	50%	23%	7%

**19****Thinking about when you are travelling on public transport, how much do the following influence how unsafe you feel? PLEASE TICK ONE BOX FOR EACH FACTOR TO SHOW HOW MUCH IT MAKES YOU FEEL UNSAFE**

	A great deal (1)	Quite a lot (2)	A little (3)	Not at all (4)	Don't use public transport (5)
Damaged bus shelters	9%	19%	30%	13%	29%
Fear of harassment	8%	16%	34%	17%	25%
Defaced/dirty public transport	9%	20%	31%	16%	25%
Anti-social behaviour on public transport	16%	27%	24%	8%	25%
Fear of having personal property stolen	6%	14%	36%	20%	25%
Fear of intimidation	9%	16%	33%	18%	25%
Other users of the transport	5%	11%	36%	23%	25%
Fear of assault	7%	11%	36%	22%	25%

**20****Has anything happened in the last 12 months to make you feel less safe or more safe when travelling? PLEASE TICK ONE BOX ONLY**

- Something has happened to make me feel **less safe** 8% → GO TO Q21
- Something has happened to make me feel **more safe** 1% → GO TO Q21
- Nothing has happened 91% → GO TO Q22



**21****If something has happened, what was it?**

PLEASE WRITE IN THE BOX

## SAFETY IN YOUR HOME

**22****How concerned are you about the security of your home in the following situations?**

PLEASE TICK ONE BOX FOR EACH FACTOR TO SHOW YOUR LEVEL OF CONCERN

	Very concerned (1)	Fairly concerned (2)	Slightly concerned (3)	Not concerned (4)	Don't know/ unsure (5)
Whilst in your home	3%	12%	33%	52%	0%
Whilst you are out	15%	25%	46%	15%	0%

**23****How much do you feel each of the following influence how unsafe you feel in your own home?** PLEASE TICK ONE BOX FOR EACH FACTOR

	A great deal (1)	Quite a lot (2)	A little (3)	Not at all (4)	Don't know/ unsure (5)
Neighbour nuisance	6%	8%	19%	66%	1%
Vandalism to your property	6%	9%	28%	54%	2%
Noise from neighbours	5%	8%	23%	64%	1%
Noise from the street in general	5%	10%	33%	52%	0%
Previous experience of crime	7%	8%	29%	53%	4%
Fires being set on your property deliberately	5%	4%	9%	78%	5%
Bogus callers	6%	12%	40%	39%	2%
Media/news reports	4%	9%	36%	48%	3%
General crime levels in your area	5%	10%	40%	40%	5%

Other (PLEASE WRITE IN THE BOX)

**24****Has anything happened in the last 12 months to make you feel less safe or more safe in your own home?** PLEASE TICK ONE BOX ONLY

- Something has happened to make me feel **less safe** 13% → GO TO Q25
- Something has happened to make me feel **more safe** 2% → GO TO Q25
- Nothing has happened 85% → GO TO Q26

**25****If something has happened, what was it?**

PLEASE WRITE IN THE BOX

**26****And finally, do you think your own quality of life is affected by crime?**

PLEASE TICK ONE BOX ONLY

Yes 30% → **GO TO Q27**No 70% → **GO TO Q28****27****If yes, in what way?**

PLEASE WRITE IN THE BOX

## LANCASHIRE RECORD OFFICE

The Lancashire Record Office in Preston collects and preserves archives and documents relating to the history of Lancashire and the people who have lived here from the 12<sup>th</sup> century onwards. Anyone may visit the Record Office free of charge. You can start to trace your family tree, discover the history of your house and the land on which it was built, or research the history of any part of Lancashire. The Record Office also has more recent records that you might need to look at for official purposes: baptism certificates, school attendance records and building plans, for example.

**28****Which, if any, of the following things do you think you (or someone in your household) will do in the next three years?** PLEASE TICK AS MANY AS APPLY

Research family history	35%
Research the history of your home	15%
Research the history of your village/town/local area	21%
Research the history of another building	8%
Research information about yourself	10%
School/college project about Lancashire's history	10%
Historical research about Lancashire for legal or other business purposes	4%
Historical research about Lancashire for work or study purposes	8%
Visit the Record Office in Preston to see what services are offered	15%
Visit the Record Office's website	25%
Write to or email the Record Office about one of the above	9%

Other (PLEASE WRITE IN THE BOX)

None of these 42%

**29****Before you received this questionnaire, had you ever heard of the Lancashire Record Office?** PLEASE TICK ONE BOX ONLY

Yes	43%
Yes, but I didn't know what it was called	14%
No, never heard of it	43%

At the Lancashire Record Office people may deposit records free of charge to be preserved for posterity and made available for research. You may deposit family letters, papers and diaries, as well as records of businesses, societies and other organisations. These documents provide an insight into life in Lancashire that can be used by future generations to research their past.

**30****Before you received this questionnaire, were you aware of this service?** PLEASE TICK ONE BOX ONLY

Yes	20%
No	80%

**31****Do you think that you (or someone in your household) will deposit any records at the Lancashire Record Office in the next three years?** PLEASE TICK ONE BOX ONLY

Yes	3%
No	51%
Maybe	46%

**32****Have you contacted the Lancashire Record Office in the last three years?** PLEASE TICK AS MANY AS APPLY

No, have not contacted them	92%	→ GO TO Q36
Yes, visited in person	5%	→ GO TO Q33
Yes, by post	1%	→ GO TO Q33
Yes, by telephone	1%	→ GO TO Q33
Yes, by email	1%	→ GO TO Q33
Yes, by fax	-	→ GO TO Q33
Yes, visited the Lancashire Record Office website	3%	→ GO TO Q33

**33****For what purpose(s) have you contacted or visited the Lancashire Record Office?** PLEASE TICK AS MANY AS APPLY

Research family history	54%
Research the history of your home	15%
Research the history of your village/town/local area	-
Research the history of another building	-
Research information about yourself	-
School/college project about Lancashire's history	8%
Historical research about Lancashire for legal or other business purposes	7%
Historical research about Lancashire for work or study purposes	15%
Other	24%

**34****The last time you contacted the Lancashire Record Office, were they able to help you?** PLEASE TICK ONE BOX ONLY

Yes 79%

No 21%

**35****On that occasion, how satisfied or dissatisfied were you with the outcome?** PLEASE TICK ONE BOX ONLY

Very satisfied 48%

Fairly satisfied 35%

Neither satisfied nor dissatisfied 10%

Fairly dissatisfied 4%

Very dissatisfied 3%

**36****The Record Office wants to know when people would be most likely to use their services regardless of current opening times. Please indicate below when you would be most likely to use the Record Office.** PLEASE TICK THE THREE TIMES YOU WOULD BE MOST LIKELY TO USE THE RECORD OFFICE**Most likely to use**

	Monday-Friday (1)	Saturday (2)
9am – 12 noon	36%	39%
12 noon – 2pm	23%	27%
2pm – 5pm	37%	29%
5pm – 8pm	38%	

**To find out more about the Lancashire Record Office:**

- visit [www.archives.lancashire.gov.uk](http://www.archives.lancashire.gov.uk)
- email [record.office@ed.lancscc.gov.uk](mailto:record.office@ed.lancscc.gov.uk)
- fax us on 01772 533050
- write to Bruce Jackson, County Archivist, Lancashire Record Office, Bow Lane, Preston, PR1 2RE
- telephone us on 01772 533039

**...AND FINALLY****37****...what topics/services would you like to give your views on in future Life in Lancashire research?** PLEASE WRITE IN THE BOX

**Please return the questionnaire in the reply paid envelope by 4 June 2004.**  
Thank you for being part of Life in Lancashire.