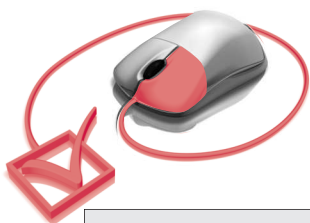


Your membership number is:



Your Living in Lancashire survey

1. Please read the instructions carefully and use blue or black pen to fill in the questionnaire.
2. Please check you have answered all the appropriate questions.
3. Return your completed questionnaire in the reply-paid envelope provided.

Public transport

1

In the last 12 months, have you used bus services in Lancashire?

PLEASE TICK ONE BOX ONLY

Yes → go to Q2

No → go to Q5

2

And in the last 12 months, how frequently would you say that you have used bus services in Lancashire?

PLEASE TICK ONE BOX ONLY

Every or most days

A few times a week

A few times a month

Less often

3

Generally, what do you use bus services in Lancashire for?

PLEASE TICK AS MANY AS APPLY

Shopping eg, supermarket, local market

Getting to entertainment/leisure activities

Accessing healthcare services (eg, dentist, GP)

Visiting friends and/or relatives

Work/commuting

Other reason (please write in)

4

How do you find out information on bus services in Lancashire?

PLEASE TICK A MAXIMUM OF **THREE** BOXES

Bus station information offices

Traveline website

Transport Direct website

Paper leaflets

Leaflets downloaded from the Lancashire County
Council website

'Next Buses' online service

'Next Buses' mobile phone application

Traveline SMS text message service

Timetables at bus stops

I don't find out information

Other (please write in)

Go to Q6

5

What are the factors that most prevent you from travelling on the bus?

PLEASE TICK A MAXIMUM OF **THREE** BOXES

The cost of the service is too high compared to alternative modes of transport

The buses are not regular enough

Journey times on public transport are too long compared to other forms of transport (eg, car)

It is difficult to find information about the services I need

There isn't a convenient bus stop near my home

Buses do not travel to the destination/s I require

I feel unsafe when travelling on my local bus services

The condition of bus stations and bus stops discourages me from using public transport

Other reason (please write in)

Roads and streets

In the following questions, by local area we mean the area within two miles of your home.

6

How satisfied or dissatisfied are you with each of the following?

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Very satisfied	Fairly satisfied	Fairly dissatisfied	Very dissatisfied	Don't know
The condition of road surfaces in your local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The condition of road surfaces in Lancashire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The condition of pavement surfaces in your local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The condition of pavement surfaces in Lancashire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7

Over the past six months do you feel the following have got better, stayed the same or got worse?

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Got better	Stayed the same	Got worse	Don't know
The condition of road surfaces in your local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The condition of road surfaces in Lancashire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The condition of pavement surfaces in your local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The condition of pavement surfaces in Lancashire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8**How strongly do you agree or disagree with the following statements?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree	Don't know
The number of potholes on roads in your local area has reduced over the past six months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The number of potholes on roads in Lancashire has reduced over the past six months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The number of potholes on footpaths in your local area has reduced over the past six months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The number of potholes on footpaths in Lancashire has reduced over the past six months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9**How strongly do you agree or disagree with the following statements?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree	Don't know
Over the past six months the time taken to identify and repair potholes has improved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Over the past six months pothole repairs conducted have been long lasting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Over the past six months pothole repairs have been completed with a smooth finish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The overall quality of pothole repair has improved over the past six months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Community Safety

In the following questions, by local area we mean the area within 15 minutes walk of your home.

10

How satisfied or dissatisfied are you with the following in your local area?

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied
Cleanliness of the streets and pavements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to green areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appearance of the buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dog fouling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

11

How safe or unsafe do you consider your local area to be?

PLEASE TICK ONE OPTION ONLY

Very safe	<input type="checkbox"/>
Fairly safe	<input type="checkbox"/>
Fairly unsafe	<input type="checkbox"/>
Very unsafe	<input type="checkbox"/>
Don't know	<input type="checkbox"/> → go to Q13

12

Briefly, what is the one main reason why you feel safe or unsafe?

PLEASE WRITE IN

13**Overall, how much of a problem is anti-social behaviour in your local area?**

PLEASE TICK ONE OPTION ONLY

A very big problem

A fairly big problem

Not a very big problem

Not a problem at all

Don't know

14**Thinking of your local area how much of a problem do you think each of the following are?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

A very big problem

A fairly big problem

Not a very big problem

Not a problem at all

Don't know

Rubbish or litter

People being drunk or rowdy in public places

Noisy neighbours or loud parties

Vandalism, graffiti or deliberate damage

Dangerous driving

15**Thinking about the following types of discrimination, do you think there is now less than 5 years ago, about the same or more than 5 years ago?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

Less than 5 years ago

About the same

More than 5 years ago

Don't know

Age

Gender

Sexuality

Disability

Race

Religion

16**How do you feel the levels of crime in your local area compare with the following?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	A lot worse	A little worse	About the same	A little better	A lot better	Don't know
Other areas of Lancashire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The UK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17**Thinking about your local area, how much of a problem do you think each of the following are?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	A very big problem	A fairly big problem	Not a very big problem	Not a problem at all	Don't know
Violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Robbery, burglary or theft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sexual exploitation of children or vulnerable adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organised crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

People using or dealing drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18**In regards to root causes of crime, how much of a problem do you think each of the following are?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	A very big problem	A fairly big problem	Not a very big problem	Not a problem at all	Don't know
Drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>					
Repeat offending	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unemployment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>					
Gang membership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poverty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>					
Mental health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19**How much are you concerned about the following?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Concerned a great deal	Concerned to some extent	Not very concerned	Not at all concerned
Having your home burgled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Theft from your garden/grounds, shed, garage or farm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20**How much are you concerned about the following?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Concerned a great deal	Concerned to some extent	Not very concerned	Not at all concerned
Having a car broken into/vandalised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having a car or other vehicle stolen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Having a bicycle stolen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arson to your home, land or outbuildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Vandalism or damage to your property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bogus callers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Drug related incident/crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street robbery/mugging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Drunk people causing you a problem during the day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drunk people causing you a problem at night	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Being insulted or bothered by people who live close by	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being bullied in workplace/school/college	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Road rage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21

How much are you concerned about the following?

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Concerned a great deal	Concerned to some extent	Not very concerned	Not at all concerned
Being sexually assaulted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being sexually harassed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being harassed because of your colour, race, religion or sexual orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being assaulted because of your colour, race, religion or sexual orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22

To what extent do you agree or disagree that the police and other local public services are successfully dealing with the following issues in your local area?

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree	Don't know
Crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23**How strongly do you agree or disagree with the following statements?**

PLEASE TICK ONE OPTION ONLY FOR EACH STATEMENT

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree	Don't know
Offenders get tough enough sentences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would report crime and/or anti-social behaviour to the police	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would report crime and/or anti-social behaviour to my local authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I report a crime, the incident will get investigated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Living in Lancashire regularly looks at how it operates. To help us become more efficient, we are trying to get as many people as possible to complete our surveys online. If you participate online you will get an email when we run a survey with a link to our online questionnaire, which is exactly the same as our paper questionnaire. If you have an email address and you wouldn't mind completing our questionnaires online, please let us know in the box below.

24**Would you like to opt in to completing future questionnaires online?**

PLEASE TICK ONE OPTION ONLY

Yes No

If yes, please write your email address here

Please return the questionnaire in the reply-paid envelope.

Thank you for being part of Living in Lancashire.