

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.

### Physical Activity

In Start Active, stay active (2011) Sport England define state that, "physical activity includes all forms of activity, such as everyday walking or cycling to get from A to B, active play, work-related activity, active recreation (such as working out in a gym), dancing, gardening or playing active games, as well as organised and competitive sport".

#### Moderate intensity activity

Start Active, stay active (2011) defines a moderate intensity physical activity as requiring an amount of effort that noticeably accelerates the heart rate eg brisk walking, housework and domestic chores.

**1**

In a typical week, including the time spent at a paid job, how much moderate intensity activity would you normal do to the nearest half hour? Up to...

PLEASE TICK ONE OPTION ONLY

None	1/2 an hour	1 hour	1 1/2 hours	2 hours	2 1/2 hours	3 hours	3 1/2 hours	4 hours	More than 4 hours
<input type="checkbox"/>									

## Vigorous intensity activity

Start Active, stay active (2011) defines a vigorous intensity physical activity as requiring a large amount of effort that causes rapid breathing and a substantial increase in heart rate eg running and climbing briskly up a hill.

**2**

**In a typical week, including times spent at a paid job, how much vigorous intensity activity would you normally do the nearest quarter of an hour? Up to...**

PLEASE TICK ONE OPTION ONLY

None	1/4 an hour	1/2 an hour	3/4 of an hour	1 hour	1 1/4 hours	1 1/2 hours	1 3/4 hours	2 hours	More than 2 hours
<input type="checkbox"/>									

**3**

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

PLEASE WRITE IN

**4**

**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	<input type="checkbox"/>				
People being drunk or rowdy in public places	<input type="checkbox"/>				
-----					
Problem neighbours	<input type="checkbox"/>				
Noise nuisance	<input type="checkbox"/>				
-----					
Vandalism, graffiti or deliberate damage	<input type="checkbox"/>				
Vehicle anti-social behaviour (eg road rage, dangerous driving)	<input type="checkbox"/>				

**5****Thinking about your local area, which of the following community safety issues...****a) ...are the biggest problems?**PLEASE TICK A MAXIMUM OF **FIVE** OPTIONS FOR STATEMENT A)**b) ...are not a problem?**

PLEASE TICK AS MANY OPTIONS AS APPLY FOR STATEMENT B)

	a) biggest problems	b) not a problem
Alcohol related violence	<input type="checkbox"/>	<input type="checkbox"/>
Arson	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Bicycle theft	<input type="checkbox"/>	<input type="checkbox"/>
Burglary in the home	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Business crime	<input type="checkbox"/>	<input type="checkbox"/>
Child abuse or neglect	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Child sexual exploitation	<input type="checkbox"/>	<input type="checkbox"/>
Domestic abuse and violence	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Drug dealing	<input type="checkbox"/>	<input type="checkbox"/>
Gender related harassment or abuse	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Race/religion related harassment or abuse	<input type="checkbox"/>	<input type="checkbox"/>
Reoffending	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Rural crime (including wildlife crime)	<input type="checkbox"/>	<input type="checkbox"/>
Sexual offences	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Sexual orientation related harassment or abuse	<input type="checkbox"/>	<input type="checkbox"/>
Street robbery and mugging	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Terrorism and extremism	<input type="checkbox"/>	<input type="checkbox"/>
Theft from garden, grounds, shed, garage etc	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Vandalism to buildings	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle arson	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Vehicle damage	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle theft	<input type="checkbox"/>	<input type="checkbox"/>

**6****How do you feel the level of crime in your local area compares with the following areas? The level of crime in my local area is...**

PLEASE TICK ONE OPTION ONLY FOR EACH AREA

	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"/>					
The UK	<input type="checkbox"/>					

**7****Thinking about the 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"/>				
Alcohol	<input type="checkbox"/>				
<hr/>					
Repeat offending	<input type="checkbox"/>				
Unemployment	<input type="checkbox"/>				
<hr/>					
Gang membership	<input type="checkbox"/>				
Poverty	<input type="checkbox"/>				
<hr/>					
Mental health	<input type="checkbox"/>				
Learning difficulties	<input type="checkbox"/>				

**8**

**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"/>				
Anti-social behaviour	<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
Offenders get tough enough sentences	<input type="checkbox"/>				
I would report crime and/or anti-social behaviour to the police	<input type="checkbox"/>				
I would report crime and/or anti-social behaviour to my local authority	<input type="checkbox"/>				
If I report a crime, the incident will get investigated	<input type="checkbox"/>				

# Police and Crime Commissioner

The following questions are asked on behalf of the Office of the Lancashire Police and Crime Commissioner.

The Police and Crime Commissioner for Lancashire is responsible for setting the strategic direction for Lancashire Constabulary and ensuring that local people's views are taken into consideration when it comes to developing the Police and Crime Plan for the county. Your responses to the following questions will help us update the Police and Crime Plan.

**10**

**Thinking about where you live...**

**a) which five of the policing issues below do you think should be the highest priority?**

**b) which five of the policing issues below do you think should be the lowest priority?**

PLEASE TICK A MAXIMUM OF FIVE OPTIONS FOR EACH QUESTION

	a) highest priority	b) lowest priority
Protecting children and young people from sexual exploitation and abuse	<input type="checkbox"/>	<input type="checkbox"/>
Providing assistance and support to victims and witnesses of crime	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Investigating and resolving major crimes such as murder and rape	<input type="checkbox"/>	<input type="checkbox"/>
Providing support to those at risk of domestic violence	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Providing visible policing in your area	<input type="checkbox"/>	<input type="checkbox"/>
Investigating and resolving local crimes and anti-social behaviour	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Providing counter terrorism and organised crime services to support national policing requirements	<input type="checkbox"/>	<input type="checkbox"/>
Providing information to you about crime in your area through email alerts or social media	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Providing policing for major events (political demonstrations, big events etc)	<input type="checkbox"/>	<input type="checkbox"/>
Answering and responding promptly to non-emergency calls	<input type="checkbox"/>	<input type="checkbox"/>
-----		
Providing a roads policing service dealing with traffic management, road collisions and motoring offences	<input type="checkbox"/>	<input type="checkbox"/>
Providing crime prevention advice and neighbourhood watch	<input type="checkbox"/>	<input type="checkbox"/>

**11**

**Thinking about the issues that you feel are the highest priority, why do you feel they are a high priority?**

PLEASE TICK AS MANY AS APPLY

I believe these are real issues where I live

I have heard/seen reports and coverage about these issues in press or news

I have heard/seen on social media (eg Facebook) that these are issues

I know someone personally who is affected by these issues

I have been affected personally by these issues

Other (please write in below)

**12**

**The Police and Crime Commissioner recently announced his intention to raise the council tax precept that helps to pay towards the police by 1.99% - that is the equivalent of 6p per week for those living in band D properties and less for those in lower banded homes.**

**This money will go towards safeguarding a number of police officer jobs as it will raise £1.2m across Lancashire. It will not increase the number of officers as Lancashire Police is facing significant budget reductions as a result of cuts to the police grant provided by the Government.**

**Do you think the decision to increase the precept by 1.99% is...?**

PLEASE TICK ONE OPTION ONLY

Fair

Unfair

Don't know

**13**

**Please say why you have responded this way.**

PLEASE WRITE IN

**14**

Are you willing to join a focus group to discuss police and crime issues? If you say yes, you agree to us passing on your contact details (name, telephone number, email, address) and some other basic details (age, gender, ethnicity and whether you have a disability) to the Office of the Police and Crime Commissioner so they can contact you about the group. If you are interested in the focus groups but would prefer to provide information yourself then please contact: [commissioner@lancashire-pcc.gov.uk](mailto:commissioner@lancashire-pcc.gov.uk).

Are you willing to join a focus group to discuss police and crime issues?

PLEASE TICK ONE OPTION ONLY

Yes

No  → go to Q16

**15**

Have you ever been a victim of crime?

PLEASE TICK ONE OPTION ONLY

Yes

No

## Alcohol

**16**

Do you drink alcohol?

PLEASE TICK ONE OPTION ONLY

Yes

No  → go to end

**17**

How often do you drink alcohol?

PLEASE TICK ONE OPTION ONLY

Once a month or less

2-3 times a month

Once a week

2-3 times a week

Most days a week

Every day

**18**

**On which days do you usually drink alcohol?**

PLEASE TICK AS MANY AS APPLY

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

**19**

**Do you regularly drink alcohol...?**

PLEASE TICK ONE OPTION ONLY FOR EACH PLACE

- |                                        | Yes                      | No                       |
|----------------------------------------|--------------------------|--------------------------|
| In your home                           | <input type="checkbox"/> | <input type="checkbox"/> |
| In a friend's/relative's home          | <input type="checkbox"/> | <input type="checkbox"/> |
| In places such as pubs, bars and clubs | <input type="checkbox"/> | <input type="checkbox"/> |

**20**

**How often, if ever, do you drink alcohol on your own?**

PLEASE TICK ONE OPTION ONLY

- Never
- Sometimes
- Regularly

**21****If you drink at pubs, bars or clubs, do you do any of the following?**

PLEASE TICK AS MANY AS APPLY

Drink at home before going out Drink alcohol purchased from elsewhere in  
between or alongside drink bought at the pub,  
bar or club Drink alcohol after coming home from the  
pub, bar or club I don't do any of these things **22****How many of the following drinks did you have to drink in the last seven days?**

PLEASE TICK ONE OPTION ONLY FOR EACH DRINK YOU DRANK IN THE LAST SEVEN DAYS

	1-3	4-6	7-9	10-12	More than 12
Pint or large bottle/can of beer, lager or cider	<input type="checkbox"/>				
Small bottle/can of beer, lager or cider	<input type="checkbox"/>				
Large glass of wine (250ml)	<input type="checkbox"/>				
Standard glass of wine (175ml)	<input type="checkbox"/>				
Double measure of spirits or liqueurs (50ml)	<input type="checkbox"/>				
Single measure of spirits or liqueurs (25ml)	<input type="checkbox"/>				

**23****Would you say the amount of alcohol you drank in the last seven days was similar to the amount you typically drink?**

PLEASE TICK ONE OPTION ONLY

Yes No, I drank more No, I drank less

**24**

**Do you ever have hangovers after drinking the day/night before?**

PLEASE TICK ONE OPTION ONLY

No, never

Yes, occasionally

Yes, often

Yes, every time

**25**

**Do you ever drink more than you initially intend to?**

PLEASE TICK ONE OPTION ONLY

No, never

Yes, occasionally

Yes, often

Yes, every time

**26**

**As a result of drinking, have you ever had any injuries or accidents that have led to...?**

PLEASE TICK AS MANY AS APPLY

A visit to accident and emergency (A&E)

A visit to a GP or non-emergency hospital visit

Time off work

**27**

**Have you ever taken advantage of special offers in supermarkets or shops to bulk buy alcohol for your own consumption?**

PLEASE TICK ONE OPTION ONLY

Yes

No

**28**

**Are you aware of Dry January and, if so, have you ever participated?**

PLEASE TICK ONE OPTION ONLY

No

Yes, but have not participated

Yes, I participated and achieved 1 - 7 days

Yes, I participated and achieved 8 - 14 days

Yes, I participated and achieved 15 - 28 days

Yes, I participated and completed the month

**29**

**Are you aware of the guidance that you should have two or more consecutive alcohol free days a week?**

PLEASE TICK ONE OPTION ONLY

Yes

No

**Please return the questionnaire in the reply-paid envelope.**

Thank you for being part of Living in Lancashire.