

Dear householder,

Your household has been randomly chosen to take part in the  
**JERSEY OPINIONS & LIFESTYLE SURVEY.**

**We haven't yet received your response.**

(If you have already responded, our letters may have crossed in the post so please ignore this reminder).

➔ **What do I do?**

Please could the person in your household who has the next birthday (and is 16 years old or over) fill in the survey by **29 July 2016**.

➔ **How do I fill it in?**

Online at [www.gov.je/survey2016](http://www.gov.je/survey2016) using this reference: **123-456-789**  
Or on paper and return in the FREEPOST envelope.

➔ **Why do I need to fill it in?**

This survey collects information about residents' opinions and lifestyle so that government can plan and improve public services in the Island.

Your address has been randomly chosen from all Jersey households, your response will represent you and people like you in Jersey.

➔ **Confidentiality**

Information you give is anonymous and will be treated in the strictest confidence. No individual identifiable data will be shared with any other States department.

➔ **Any questions?**

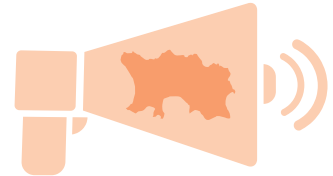
Email us at [statistics@gov.je](mailto:statistics@gov.je), or phone Sarah Davis on 440418.

Thank you,



Duncan Gibaut  
Chief Statistician

[www.gov.je/statistics](http://www.gov.je/statistics)



JERSEY  
OPINIONS  
& LIFESTYLE  
SURVEY



## About you

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### 1.1 Are you? *(Tick one only)*

- <sup>01</sup>  Male  
<sup>02</sup>  Female
- 

### 1.2 In what year were you born?

### 1.3 What is your marital status? *(Tick one only)*

- <sup>01</sup>  Single  
<sup>02</sup>  Married / Civil partnership  
<sup>03</sup>  Cohabiting (includes same sex couples)  
<sup>04</sup>  Separated (includes same sex couples)  
<sup>05</sup>  Divorced  
<sup>06</sup>  Widowed
- 

### 1.4 Where were you born? *(Tick one only)*

- <sup>01</sup>  Jersey  
<sup>02</sup>  Elsewhere in the British Isles\* or the Republic of Ireland  
<sup>03</sup>  Portugal or Madeira  
<sup>04</sup>  Poland  
<sup>05</sup>  Other European country, *specify country:* \_\_\_\_\_  
<sup>06</sup>  Elsewhere, *specify country:* \_\_\_\_\_

\* includes: England, Wales, Scotland, Northern Ireland, other Channel Islands, Isle of Man.

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### 1.5 When did your present period of continuous residence in Jersey begin?

*(Ignore periods of absence on holiday and absences during the Occupation years)*

- <sup>01</sup>  At birth            or            In (year):
- 

### 1.6 Which cultural and ethnic group do you consider you belong to? *(Tick one only)*

#### White:

- <sup>11</sup>  Jersey      <sup>12</sup>  British      <sup>13</sup>  Irish      <sup>14</sup>  Polish      <sup>15</sup>  Portuguese / Madeiran

#### Asian:

- <sup>21</sup>  Bangladeshi    <sup>22</sup>  Chinese    <sup>23</sup>  Indian    <sup>24</sup>  Pakistani    <sup>25</sup>  Thai

#### Black:

- <sup>31</sup>  African      <sup>32</sup>  Caribbean

#### Other, or mixed:

- <sup>41</sup>  *Please specify:* \_\_\_\_\_

**1.7 What is your highest educational qualification? (Tick one only)**

*Please exclude any professional qualifications.*

- <sup>01</sup> No formal qualifications
- <sup>02</sup> GNVQ/BTEC Introductory Diploma (Foundation)
- <sup>03</sup> 'O' levels/CSE/GCSE/ BTEC First/ GNVQ (Intermediate)
- <sup>04</sup> AS-Level
- <sup>05</sup> A/ A2-Level/ BTEC National/ GNVQ (Advanced)
- <sup>06</sup> First Degree
- <sup>07</sup> Higher Degree (e.g. Masters/PhD)
- <sup>08</sup> Other, *please specify:* \_\_\_\_\_
- 

**1.8 Do you have residential qualifications? (Tick one only)**

*In other words are you entitled to buy a property, or rent 'qualified accommodation', in Jersey under the current 'Control of Work and Housing Law'?*

- <sup>01</sup> Yes
- <sup>02</sup> No
- <sup>03</sup> Don't know
- 

**1.9 Have you been resident in Jersey for 5 years or more? (Tick one only)**

- <sup>01</sup> Yes
- <sup>02</sup> No
- <sup>03</sup> Don't know
- 

**1.10 Approximately, what is your total gross household income?**

- |   |   |
|---|---|
| <input type="radio"/> <sup>01</sup> Less than £10,000 | <input type="radio"/> <sup>06</sup> £50,000 - £59,999 |
| <input type="radio"/> <sup>02</sup> £10,000 - £19,999 | <input type="radio"/> <sup>07</sup> £60,000 - £69,999 |
| <input type="radio"/> <sup>03</sup> £20,000 - £29,999 | <input type="radio"/> <sup>08</sup> £70,000 - £79,999 |
| <input type="radio"/> <sup>04</sup> £30,000 - £39,999 | <input type="radio"/> <sup>09</sup> £80,000 - £89,999 |
| <input type="radio"/> <sup>05</sup> £40,000 - £49,999 | <input type="radio"/> <sup>10</sup> £90,000 or more   |
- 

## Employment – your main job

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**2.1 Are you currently? (Tick the one which is most appropriate to you)**

- |   |   |
|---|---|
| <input type="radio"/> <sup>01</sup> Working for an employer                             | <input type="radio"/> <sup>06</sup> Unemployed, looking for work            |
| <input type="radio"/> <sup>02</sup> Self-employed, employing others                     | <input type="radio"/> <sup>07</sup> Unemployed, <i>not</i> looking for work |
| <input type="radio"/> <sup>03</sup> Self-employed, not employing others                 | <input type="radio"/> <sup>08</sup> In full-time education                  |
| <input type="radio"/> <sup>04</sup> Retired   | <input type="radio"/> <sup>09</sup> A homemaker                             |
| <input type="radio"/> <sup>05</sup> Unable to work due to long-term sickness/disability | <input type="radio"/> <sup>10</sup> Other, <i>please specify:</i> _____     |
- 

► If you are not in employment go to question 3.1 "Finding out information"

**2.2 Is your employment status 'Licensed' – that is are you an 'essential employee' or 'J category' person?**

*(Tick one only)*

- <sup>01</sup> Yes  
<sup>02</sup> No  
<sup>03</sup> Don't know
- 

**2.3 Which of the following best describes the work you do for your main job? *(Tick one only)***

- <sup>01</sup> **Routine, Semi-routine, Manual or Service occupation**  
*e.g. HGV or van driver, cleaner, porter, packer, sewing machinist, messenger, labourer, waiter/waitress, bar staff, postal worker, machine operative, security guard, caretaker, farm worker, catering assistant, receptionist, sales assistant*
- <sup>02</sup> **Technical or Craft occupation** *e.g. motor mechanic, fitter, inspector, plumber, printer, tool maker, electrician, gardener*
- <sup>03</sup> **Clerical or intermediate occupation** *e.g. secretary, personal assistant, clerical worker, office clerk, call centre agent, nursing auxiliary, nursery nurse*
- <sup>04</sup> **Professional occupation (normally requiring a professional qualification)**  
*e.g. accountant, solicitor, medical practitioner, scientist, civil / mechanical engineer, teacher, nurse, physiotherapist, social worker, welfare officer, artist, musician, police officer (sergeant or above), software designer, fund administrator*
- <sup>05</sup> **Middle or Junior Manager** *e.g. office manager, retail manager, bank manager, restaurant manager, warehouse manager, publican*
- <sup>06</sup> **Senior Manager** *(usually responsible for planning, organising and co-ordinating work) e.g. finance manager, chief executive*
- <sup>07</sup> **Not sure**
- 

**2.4 How many people work in your main place of employment?**

- <sup>01</sup> Just myself  
<sup>02</sup> 2 - 4  
<sup>03</sup> 5 - 10  
<sup>04</sup> 11 - 25  
<sup>05</sup> More than 25
- 

**2.5 Which industry do you work in, for your main job? *(Tick the one which is most appropriate to you)***

- <sup>01</sup> Agriculture and fishing  
<sup>02</sup> Finance (including legal & insurance)  
<sup>03</sup> Construction & tradesmen  
<sup>04</sup> Wholesale & retail  
<sup>05</sup> Transport & storage (including Jersey Airport, Harbours, Post)  
<sup>06</sup> Information & communication services (Including IT, Telecoms, Marketing, Advertising)  
<sup>07</sup> Private education or Private health  
<sup>08</sup> Hotels, restaurants and bars  
<sup>09</sup> Public sector  
<sup>10</sup> Other, *please specify:* \_\_\_\_\_

2.6 What is your job title (for your main job)?

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2.7 How many hours are you *contracted* to work each week, in your main job?

hours per week *(write '0' if you are on a zero hours contract)*

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2.8 How many hours do you *usually* work each week, in your main job?

hours per week

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2.9 Do you currently do any other paid employment, in addition to your main job, for more than 3 hours a week?

- Yes – for an employer  
 Yes – self-employed  
 No ... ► [go to question 2.12](#)
- 

2.10 How many additional jobs do you have? *Enter a number below, entering '0' if none*

*jobs in addition to my main job*

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2.11 How many hours do you usually work each week, in your additional jobs?

*(Do not count overtime and meal breaks)*

hours per week

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2.12 Would you prefer to work longer hours at your current basic rate of pay if you were given the opportunity? (in either your main job or any additional jobs)

*"Basic rate of pay" does not include overtime or enhanced pay rates*

- <sup>01</sup>  Yes – how many extra hours a week? *write in:*  hours  
<sup>02</sup>  No
- 

## Finding out information

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3.1 Which of the following do you use to access the internet? *Please tick all that apply*

- Home computer or laptop  
 Work computer or laptop  
 Smartphone  
 Tablet (iPad or similar)  
 Internet enabled TV or Games console  
 Computer at library or café
- 

3.2 Do you use Twitter?

- <sup>01</sup>  Yes  
<sup>02</sup>  No

## Your household

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### 4.1 How many people live in your household (including yourself):

Please enter numbers in the boxes below. Write '0' if none.

Pensioners aged 65 years or older:

Adults aged 16 to 64 years:

Children aged 11 to 15 years:

Children aged 5 to 10 years:

Children aged 0 to 4 years:

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### 4.2 Does anyone in your household look after children from another household *in your home* on a regular basis (including looking after relatives such as grandchildren, or unrelated children)?

Yes

No

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## Care for your children

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### 5.1 Do you have any children under 16 years living in your household? *(Tick one only)*

Yes ...please go to the next question

No ...please go to question 6.1 "Maternity, paternity and adoption leave"

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### 5.2 Do any friends or relatives (such as grandparents) from another household regularly look after your children while the adults in your household work?

Yes ...please go to the next question

No ...please go to question 6.1 "Maternity, paternity and adoption leave"

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### 5.3 During term-time, how many days in a typical week do friends or relatives from another household help to look after your children while the adults in your household work?

5 or more days a week

1 – 4 days a week

Less often

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### 5.4 During school holidays, how many days in a typical week do friends or relatives from another household help to look after your children while the adults in your household work?

5 or more days a week

1 – 4 days a week

Less often

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### 5.5 On a typical day when your friends or relatives from another household help look after your children while you are at work, how long do they help for?

Less than 2 hours

Between 2 and 5 hours

More than 5 hours

## Care for your children continued...

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**5.6 Which of the following reasons best describes why friends or relatives from another household help to look after your children whilst you are at work?** *Please tick all that apply*

- Other childcare options not available
  - Cannot afford other childcare options
  - Other childcare options not suitable for my child(ren)
  - Prefer friends or relatives to look after child(ren)
  - Other childcare options do not fit around working hours
  - To cover emergencies or sickness
- 

**5.7 Which of the following do your friends or relatives provide for your children regularly?**

*Please tick all that apply*

- Transport to and from school/childcare settings
  - Transport to and from after-school activities
  - Meals
  - Indoor and/or outdoor activities
  - Other – *please specify* \_\_\_\_\_
- 

**5.8 Do you give any payment to your friends or relatives for the childcare they provide whilst you are at work?**

- <sup>01</sup>  Yes
- <sup>02</sup>  No



## Maternity, paternity and adoption leave

Since 1 September 2015, employees in Jersey have had the right to take a period of maternity, paternity or adoption leave and return to the same job afterwards.

**6.1 Do you think parents should be able to share their parental leave between them in any proportion they wish?** For example to make up a total of 18 weeks leave, the father could take 4 weeks, and the mother 14 weeks, or the mother could take 2 weeks and the father 16 weeks.

<sup>01</sup> Yes ...please go to the next question

<sup>02</sup> No ...please go to question **6.3**

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**6.2 Why should parents be able to share their parental leave?**

*Please tick what you consider to be the **one** most important reason:*

<sup>01</sup> It would be more practical financially

<sup>02</sup> It would allow both parents to be involved in childcare

<sup>03</sup> It would be easier to fit childcare around work

<sup>04</sup> Don't know

<sup>05</sup> Other, *please specify* \_\_\_\_\_

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**6.3 Do you think parents should be able to share their parental leave with the child's grandparent(s), if the grandparent(s) are in work?**

<sup>01</sup> Yes

<sup>02</sup> No

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**6.4 Are you a parent with any children currently under 5 years of age?**

<sup>01</sup> Yes ...please go to the next question

<sup>02</sup> No ...please go to question 7.1 "Your general health"

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**6.5 Have you taken any maternity, paternity or adoption leave in the last 5 years?**

<sup>01</sup> Yes ...please go to the next question

<sup>02</sup> No ...please go to question 7.1 "Your general health"

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**6.6 How many weeks leave did you take (for your youngest child if you have had more than one child in the last 5 years)?** *(Enter '0' if none)*

\_\_\_ weeks paid maternity/paternity/adoption leave

\_\_\_ weeks unpaid maternity/paternity/adoption leave

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**6.7 Would you have liked to have taken more maternity/paternity/adoption leave?**

<sup>01</sup> Yes ...please go to the next question

<sup>02</sup> No ...please go to question 7.1 "Your general health"

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**6.8 If yes, what prevented you from taking more maternity/paternity/adoption leave?**

*Please tick the **one** most important reason*

<sup>01</sup> Length of leave limited by employer

<sup>02</sup> Financial reasons

<sup>03</sup> Other reason – *please specify* \_\_\_\_\_

## Your general health

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### 7.1 How is your health in general? Would you say it was

- <sup>01</sup> Very good
  - <sup>02</sup> Good
  - <sup>03</sup> Fair
  - <sup>04</sup> Bad
  - <sup>05</sup> Very Bad
- 

### 7.2 Do you have any longstanding illness, disability or infirmity?

*(By longstanding, we mean any condition that has lasted, or is expected to last, at least 12 months. Include any problems related to old age.)*

- <sup>01</sup> Yes      ...please go to the next question
  - <sup>02</sup> No      ...please go to question 8.1 "Socialising"
- 

### 7.3 Are your day to day activities limited because of your health problem or disability?

- <sup>01</sup> Yes, a lot
  - <sup>02</sup> Yes, a little
  - <sup>03</sup> No
- 

## Socialising

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### 8.1 If you were in trouble, do you have relatives or friends you can count on to help you whenever you need them?

- <sup>01</sup> Yes, in Jersey
  - <sup>02</sup> Yes, but not in Jersey
  - <sup>03</sup> No
- 

### 8.2 How often do you socialise (face to face) with people outside of your household?

- <sup>01</sup> Daily
  - <sup>02</sup> Weekly
  - <sup>03</sup> Monthly
  - <sup>04</sup> Rarely
  - <sup>05</sup> Never
- 

## Drinking

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### 9.1 How often do you have a drink containing alcohol?

- <sup>01</sup> Never      .... please go to question 10.1 "Smoking"
- <sup>02</sup> Once a month or less
- <sup>03</sup> 2-4 times a month
- <sup>04</sup> 2-3 times a week
- <sup>05</sup> 4 or more times a week

## Drinking continued

If you do not drink alcohol, please go to question 10.1 "Smoking"

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### Definition of 1 unit of alcohol:



Half pint of regular beer, lager or cider



1 small glass of wine



1 single measure of spirits



1 small glass of sherry



1 single measure of aperitifs

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### 9.2 How many units do you have on a typical day when you are drinking?

- 01 1 or 2
  - 02 3 or 4
  - 03 5 or 6
  - 04 7 to 9
  - 05 10 or more
- 

### 9.3 How many units do you have in a typical week when you are drinking?

- 01 1 to 4
  - 02 5 to 9
  - 03 10 to 14
  - 04 15 to 19
  - 05 20 or more
- 

### 9.4 How many alcohol free days do you have in a typical week?

- 01 None
  - 02 1
  - 03 2
  - 04 3 or more
- 

### 9.5 How often have you had six or more units if female, or eight or more if male, on a single occasion in the last year?

- 01 Never
  - 02 Less than monthly
  - 03 Monthly
  - 04 Weekly
  - 05 Daily or almost daily
- 

### 9.6 How often in the last year have you failed to do what was normally expected of you because of your drinking?

- 01 Never
- 02 Less than monthly
- 03 Monthly
- 04 Weekly
- 05 Daily or almost daily

## Drinking continued

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**9.7 How often in the last year have you been unable to remember what happened the night before because you had been drinking?**

- 01 Never
- 02 Less than monthly
- 03 Monthly
- 04 Weekly
- 05 Daily or almost daily

---

**9.8 Has a relative, friend, doctor or other health-worker been concerned about your drinking or suggested that you cut down?**

- 01 No
- 02 Yes, but not in the last year
- 03 Yes, during the last year

## Smoking

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**10.1 Does anyone smoke regularly inside your home (for example household members, regular visitors)?**

- 01 Yes
- 02 No

---

**10.2 Do you use electronic cigarettes ('e-cigarettes')?**

- 01 I use them everyday
- 02 I use them often (more than once a week)
- 03 I use them sometimes (more than once a month)
- 04 I've tried them once or twice
- 05 I've never used them
- 06 I've never heard of them

---

**10.3 This question focuses on smoking tobacco products only, not e-cigarettes. Which of the following best describes you?**

- 01 I have never smoked / I don't smoke
- 02 I used to smoke occasionally, but don't now
- 03 I used to smoke daily, but don't now
- 04 I smoke occasionally, but not every day
- 05 I smoke daily

---

**If you smoke, please answer the next questions**

**If you do not currently smoke, please go to question 11.1 "Mental Health"**

## Smoking continued...

If you do not currently smoke, please go to question 11.1 "Mental Health"

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### 10.4 Have you wanted to quit in the last year?

<sup>01</sup>  Yes

<sup>02</sup>  No

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### 10.5 Have you heard of the Help2Quit pharmacy service?

<sup>01</sup>  Yes

<sup>02</sup>  No

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### 10.6 If you smoke, how much do you smoke on average?

Enter amount here:

*delete as appropriate:*

Cigarettes per *day / week*

Roll-ups per *day / week*

Ounces of pipe tobacco per *day / week*

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### 10.7 Have you used an e-cigarette for any of the following reasons over the last year?

	Yes	No
To help cut down the amount you smoke	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>
In situations where you are not allowed to smoke	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>
To help during a serious quit attempt	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>

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### 10.8 Have you used any nicotine replacement products (e.g. patches, gum, sprays or inhalers) for any of the following reasons over the last year?

	Yes	No
To help cut down the amount you smoke	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>
In situations where you are not allowed to smoke	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>
To help during a serious quit attempt	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>

# Mental health

## 11.1 Below are some statements about feelings and thoughts.

Please tick one on each row that best describes your experience of each over the last 2 weeks.

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I've been feeling useful	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I've been feeling relaxed	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I've been dealing with problems well	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I've been thinking clearly	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I've been feeling close to other people	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I've been able to make up my own mind about things	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>

## 11.2 Have you experienced one or more of the following in the past year:

Death of a loved one, a serious illness yourself, a serious illness of a loved one, divorce or break up, a traffic accident or a crime?

- 01  Yes  
02  No

## 11.3 To what extent do you agree or disagree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
<i>(Please tick one on each row)</i>					
Anyone can have mental health problems	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
If someone close to me had a mental health problem I would know how to support them	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
If I had a mental health problem I would feel comfortable talking with a friend or family member	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
If I was living with a mental health problem, I wouldn't want people knowing about it	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
People are generally caring and sympathetic to people with mental health problems	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I wouldn't know what to say to someone with a mental health problem	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I know where to find local information on support for mental health problems	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>

## Work related stress or anxiety

If you didn't work in 2015, please go to question 13.1 "States of Jersey police"

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### 12.1 During 2015, did you have any time off work as a result of work-related stress or anxiety?

*(Please tell us about the most recent time you were off, if you were off more than once due to work-related stress or anxiety in 2015)*

- 01 Yes ...please go to the next question
- 02 No ...please go to question 12.3 "Accidents at work"
- 

### 12.2 How many days off work did you have in 2015 for work-related stress or anxiety?

*(Please tell us about the most recent time you were off, if you were off more than once due to work-related stress or anxiety in 2015)*

- 01 1 – 2 days
- 02 3 – 5 days
- 03 6 – 10 days
- 04 More than 10 days
- 

## Accidents at work

If you didn't work in 2015, please go to question 13.1 "States of Jersey police"

*(Please tell us about the most recent, if you had more than one work-related accident in 2015)*

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### 12.3 During 2015, did you have any accident resulting in injury at work, or in the course of your work?

- 01 Yes ...please go to the next question
- 02 No ...please go to question 12.7 "Other work related ill-health"
- 

### 12.4 Which of the following best describes the type of accident you had at work, or in the course of your work?

- 01 Fall from a height (including falls into depths)
- 02 Slips, trips or falls on the same level
- 03 Lifting or moving heavy objects
- 04 Caught in, under, or between objects
- 05 Other – *please specify* \_\_\_\_\_
- 

### 12.5 Which of the following best describes the injury you had at work, or in the course of your work?

- 01 Cuts / bruises / open wounds
- 02 Strain or sprain
- 03 Burns or scalds, including from chemicals
- 04 Broken bone(s) and dislocations
- 05 Other – *please specify* \_\_\_\_\_
- 

### 12.6 How many days off work did you have because of the work related accident?

- 01 1 – 2 days
- 02 3 – 5 days
- 03 6 – 10 days
- 04 More than 10 days

## Other work related ill-health

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**12.7 During 2015, did you have any time off work as a result of other work-related ill health?**

- <sup>01</sup> Yes      ...please go to the next question  
 <sup>02</sup> No      ...please go to question **13.1 "States of Jersey police"**
- 

**12.8 Which of the following best describes the work-related ill health?**

- <sup>01</sup> Problems with muscles, bones or joints  
 <sup>02</sup> Problems with breathing  
 <sup>03</sup> Skin diseases / dermatitis  
 <sup>04</sup> Other – *please specify* \_\_\_\_\_
- 

**12.9 How many days off work did you have in 2015 for work-related ill health?**

- <sup>01</sup> 1 – 2 days  
 <sup>02</sup> 3 – 5 days  
 <sup>03</sup> 6 – 10 days  
 <sup>04</sup> More than 10 days
- 

## States of Jersey police

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**13.1 How safe or unsafe do you consider your neighbourhood to be (within 5 minutes' walk of your home)?**

- <sup>01</sup> Very safe  
 <sup>02</sup> Fairly safe  
 <sup>03</sup> A bit unsafe  
 <sup>04</sup> Very unsafe  
 <sup>05</sup> Don't know
- 

**13.2 How worried are you that you might become a victim of the following in the next 12 months?**

	Very worried	Fairly worried	Not very worried	Not at all worried
Burglary	<input type="radio"/> <sup>01</sup>	<input type="radio"/> <sup>02</sup>	<input type="radio"/> <sup>03</sup>	<input type="radio"/> <sup>04</sup>
Violent crime	<input type="radio"/> <sup>01</sup>	<input type="radio"/> <sup>02</sup>	<input type="radio"/> <sup>03</sup>	<input type="radio"/> <sup>04</sup>
Verbally abused/threatened in the street	<input type="radio"/> <sup>01</sup>	<input type="radio"/> <sup>02</sup>	<input type="radio"/> <sup>03</sup>	<input type="radio"/> <sup>04</sup>
Vehicle stolen	<input type="radio"/> <sup>01</sup>	<input type="radio"/> <sup>02</sup>	<input type="radio"/> <sup>03</sup>	<input type="radio"/> <sup>04</sup>
Vehicle or property vandalised	<input type="radio"/> <sup>01</sup>	<input type="radio"/> <sup>02</sup>	<input type="radio"/> <sup>03</sup>	<input type="radio"/> <sup>04</sup>
Digital crime (e.g. online fraud, cyber bullying, scams etc)	<input type="radio"/> <sup>01</sup>	<input type="radio"/> <sup>02</sup>	<input type="radio"/> <sup>03</sup>	<input type="radio"/> <sup>04</sup>



## States of Jersey police continued

### 13.3 How much do you agree or disagree with the following statements about the States of Jersey Police?

	Strongly agree	Tend to agree	Tend to disagree	Strongly disagree	Don't know
States of Jersey Police do a good job of policing Jersey	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
States of Jersey Police are targeting the policing issues that matter most to the community	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
I am confident that the police would do a good job if I needed them	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>

### 13.4 Did you have any contact with the States of Jersey Police in 2015?

- 01  Yes ...please answer the next question
- 02  No ...please go to question 13.6

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

	Strongly agree	Slightly agree	Slightly disagree	Strongly disagree
The officer was helpful	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>
The officer was polite	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>
The officer listened to what I had to say	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>
The officer was impartial	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>
The officer acted on what I told him/her	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>

### 13.6 During 2015, do you believe you were a victim of prejudice or abuse on the basis of...

	Yes	No	No, but I witnessed it being done to other people
...your race?	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>
...your religion?	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>
...your disability?	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>
...your age?	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>
...your sexual orientation?	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>

If you were a victim or you witnessed someone being a victim of prejudice or abuse on the basis of the reasons listed above, please answer the next two questions, otherwise please go to question 13.9 on the next page

### 13.7 Did you report the incident(s) to the police?

- 01  Yes ...please go to question 13.9 on the next page
- 02  No ...please go to the next question

### 13.8 If you didn't report the incident(s) to the police, please tell us why?

\_\_\_\_\_

**States of Jersey Police** are currently focussing on the following objectives. What priority level do you consider each of these objectives to have?

		Low priority	Medium priority	High priority	Very high priority	Don't know
13.9	Respond quickly and effectively when people need their help	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.10	Be ready to respond effectively in the event of major incidents and emergencies	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.11	Help protect vulnerable people (e.g. tackling domestic violence, child abuse etc.)	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.12	Target persistent offenders	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.13	Tackle the supply of illegal drugs	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.14	Help ensure the safety of people in town at night by policing St Helier's nightlife	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
		Low priority	Medium priority	High priority	Very high priority	Don't know
13.15	Help protect Jersey against financial crime: e.g. fraud and money laundering	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.16	Help protect the safety of all road users	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.17	Work with local communities to tackle their neighbourhood safety concerns	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.18	Protect the public from terrorism and other extremist activity	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.19	Provide a visible policing presence in the community	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>
13.20	Help protect the Island of Jersey from digital crime (e.g. online fraud, cyber bullying and cyber attacks)	01 <input type="radio"/>	02 <input type="radio"/>	03 <input type="radio"/>	04 <input type="radio"/>	05 <input type="radio"/>

**13.21 Which of the following sources influence what you think of the States of Jersey Police?**

*(Please tick all that apply)*

- My own personal experiences here in Jersey
- What I read on the States of Jersey Police website, Facebook page or Twitter account
- What I read in the JEP
- What I hear on local TV and radio
- What other people tell me of their experiences
- Other – *please specify* \_\_\_\_\_

## Travelling to work If you do not work, go to question 15.1 "Cleanliness of public areas"

### 14.1 Do you work in town?

- <sup>01</sup>  Yes  
<sup>02</sup>  No

### 14.2 How do you usually travel to work, the majority of the time?

*Tick the box for the longest part, by distance, of your usual journey to work*

- <sup>01</sup>  Motorbike / moped  
<sup>02</sup>  Walk  
<sup>03</sup>  Cycle  
<sup>04</sup>  Bus  
<sup>05</sup>  Taxi  
<sup>06</sup>  I work from home / I live at place of work  
<sup>07</sup>  Car or van on my own  
<sup>08</sup>  Car or van with other people

▶ If you usually travel to work by car, van or taxi please answer the next question

▶ Otherwise go to question 15.1 "Cleanliness of public areas"

### 14.3 How often do you use any other ways to travel to work as the longest part of your journey?

*Tick one on each row*

	2 or more times a week	Once a week	At least once a month	Occasionally	Never
Walk	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Cycle	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Bus	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>

## Cleanliness of public areas

### 15.1 How do you rate the following in Jersey?

	Very good	Good	Poor	Very poor	Don't know
Cleanliness of roads and pavements	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Cleanliness of car parks	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Cleanliness of public toilets	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Cleanliness of main and fish market in town	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Cleanliness of promenades	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Cleanliness of beaches	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
Cleanliness of piers and areas around the harbour buildings	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>

## Road surfaces

15.2	How do you rate the following in Jersey?	Very good	Good	Poor	Very poor	Don't know
	Condition of the surfaces of <u>main</u> roads	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
	Condition of the surfaces of pavements	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
	Response to repair of pot holes on <u>main</u> roads	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>

**15.3** How strongly do you agree with the following statement: "I would prefer more road works and maintenance to be carried out at night to avoid traffic delays for most road users, even though it would be more expensive and less maintenance would be possible within the budget."

- <sup>01</sup>  Strongly agree
- <sup>02</sup>  Agree
- <sup>03</sup>  Disagree
- <sup>04</sup>  Strongly disagree
- <sup>05</sup>  Don't know

**15.4** Would you be prepared for road works to be carried out at night in your neighbourhood?

- <sup>01</sup>  Yes
- <sup>02</sup>  No

**15.5** How strongly do you agree with the following statement: "I think road closures for resurfacing works should be permitted during morning and peak hour traffic because despite the increased traffic disruption it reduces the cost and duration of the works."

- <sup>01</sup>  Strongly agree
- <sup>02</sup>  Agree
- <sup>03</sup>  Disagree
- <sup>04</sup>  Strongly disagree
- <sup>05</sup>  Don't know

**15.6** How strongly do you agree with the following statement: "I think resurfacing / road works should be carried out at weekends during daytime hours, to keep the duration of projects as short as possible"

- <sup>01</sup>  Strongly agree
- <sup>02</sup>  Agree
- <sup>03</sup>  Disagree
- <sup>04</sup>  Strongly disagree
- <sup>05</sup>  Don't know

## Bus tracking

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### 16.1 How often do you catch the bus?

- <sup>01</sup> 2 or more times a week
- <sup>02</sup> Once a week
- <sup>03</sup> At least once a month
- <sup>04</sup> Occasionally
- <sup>05</sup> Never

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### 16.2 How often do you use the 'Text my Bus' information service?

- <sup>01</sup> 2 or more times a week
- <sup>02</sup> Once a week
- <sup>03</sup> At least once a month
- <sup>04</sup> Occasionally
- <sup>05</sup> Never

---

### 16.3 Have you used the 'Track my Bus' information service introduced this year?

- <sup>01</sup> Yes      ...please answer questions 16.5 and 16.6
- <sup>02</sup> No      ...please answer the next question

---

### 16.4 If you haven't used the 'Track my Bus' information service, why is this?

- I don't know what it is
- I don't use the bus
- I don't have a smartphone
- Other – *please specify* \_\_\_\_\_

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If you haven't used the 'Track my Bus' service, please go to question 17.1 "Heritage in Jersey"

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### 16.5 If you have used the 'Track my Bus' information service, how useful did you find it?

- <sup>01</sup> Very useful
- <sup>02</sup> Fairly useful
- <sup>03</sup> Not very useful      ...please answer the next question
- <sup>04</sup> Not at all useful      ...please answer the next question

---

### 16.6 If you answered 'not very' or 'not at all' useful, why is this?

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## Heritage in Jersey

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### 17.1 In the last 12 months have you visited any of these places? *(Please tick all that apply)*

- A historic place of worship attended as a visitor (not to worship)
  - A historic fortification site (e.g. German bunker, Round Tower, Napoleonic guardhouse)
  - An archaeological site (e.g. dolmen, menhir, excavation)
  - A heritage attraction site (e.g. War Tunnels, Jersey Heritage or National Trust site)
  - A local history studies centre (e.g. Jersey Archive, Société Library, Local Studies resources at Jersey Library)
  - The Jersey Archive website to do historic research
  - None of the above
- 

### 17.2 Which (if any) of the following heritage oriented events or activities have you attended or participated in over the past 12 months? *(Please tick all that apply)*

- Organised historical walk or tour
  - Heritage exhibition or display
  - Heritage talk or workshop
  - Living history re-enactment or event
  - Heritage educational programme or event
  - Other heritage event or activity *(please specify: \_\_\_\_\_)*
  - None of the above
- 

### 17.3 Are you a member of any of the following organisations? *(Please tick one on each row)*

	Yes	No
Jersey Heritage	<input type="radio"/> 01	<input type="radio"/> 02
The Société Jersiaise	<input type="radio"/> 01	<input type="radio"/> 02
The National Trust for Jersey	<input type="radio"/> 01	<input type="radio"/> 02
The Jersey Archives	<input type="radio"/> 01	<input type="radio"/> 02
The Channel Islands Family History Society	<input type="radio"/> 01	<input type="radio"/> 02
The Channel Islands Occupation Society	<input type="radio"/> 01	<input type="radio"/> 02
Durrell	<input type="radio"/> 01	<input type="radio"/> 02
The Arts Centre	<input type="radio"/> 01	<input type="radio"/> 02
Amaizin! Maze	<input type="radio"/> 01	<input type="radio"/> 02
Tamba Park	<input type="radio"/> 01	<input type="radio"/> 02
Jersey Opera House	<input type="radio"/> 01	<input type="radio"/> 02

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### 17.4 Have you ever volunteered your time to help a heritage organisation (e.g. Jersey Heritage, Société Jersiaise, National Trust, Channel Islands Occupation Society, Channel Islands Family History Society)

- 01 Yes, in the last 12 months
- 02 Yes, between 1 and 3 years ago
- 03 Yes, more than 3 years ago
- 04 No, but I'd consider it in the future
- 05 No, and I wouldn't consider it in the future

## Heritage in Jersey continued

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**17.5 How interested would you be in volunteering opportunities where you could be involved with creating a heritage exhibition, event or a talk?**

- <sup>01</sup>  Very interested  
<sup>02</sup>  Quite interested  
<sup>03</sup>  Not very interested  
<sup>04</sup>  Not at all interested
- 

**17.6 Have you ever donated any money to a heritage organisation in Jersey?**

- <sup>01</sup>  Yes, in the last 12 months  
<sup>02</sup>  Yes, 1 to 3 years ago  
<sup>03</sup>  Yes, more than 3 years ago  
<sup>04</sup>  No, but I'd consider doing so in the future  
<sup>05</sup>  No, and I wouldn't consider doing so in the future
- 

**17.7 Have you ever been to any of these events or places, in Jersey or elsewhere? (Please tick one on each row)**

	Yes	No, but I'd be interested in going	No, and I wouldn't be interested in going
Rock or pop music festival	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>
Contemporary dance performance	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>
Art gallery or art exhibition	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>

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**17.8 The following statements are about your personal approach to life. How much do you agree or disagree with each statement?**

*(Please tick one on each row)*

	Definitely agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Definitely disagree
I consider myself to be a spiritual person	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
I am usually first amongst my friends to know what's going on	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
I am happiest seeing things that have a track record and proven popularity	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
The arts and culture are essential to my life	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
I am happy to do my own thing regardless of what others might think	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
I like to enjoy life and don't worry about the future	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>
I like to get out into the countryside wherever I can	<sup>01</sup> <input type="radio"/>	<sup>02</sup> <input type="radio"/>	<sup>03</sup> <input type="radio"/>	<sup>04</sup> <input type="radio"/>	<sup>05</sup> <input type="radio"/>

## Lodgers

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A lodger is a person / persons staying in your property who is paying rent and is not part of your household.

It is important that people in lodging accommodation have the opportunity to take part in the survey, so please can you indicate if there are any lodgers living at your address.

**We will then send a questionnaire(s) for your lodger(s) to fill in.**

**How many lodgers live in your property?** *(Enter '0' if none)*

lodgers

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**Do you have any other comments?**

**Thank you for filling in this survey – your response is very important to us.**

**The report will be published in winter 2016/17 on [www.gov.je/statistics](http://www.gov.je/statistics).**

**Please post back in the Freepost envelope, or to:**

**Business reply service JE65**

**Statistics Unit**

**PO Box 140**

**St. Helier**

**Jersey CI**

**JE1 1AE.**