

# JERSEY ANNUAL SOCIAL SURVEY 2008

To be completed by the person living at this address who is aged 16 years or over and who has the next birthday

States   
of Jersey

Dear Jersey resident,

2<sup>nd</sup> July 2008

Please find enclosed the Jersey Annual Social Survey 2008. **Your household has been chosen at random to complete the questionnaire.**

The survey is designed to gather information on Jersey residents' opinions and behaviours. This information is used to directly **inform policy decisions**, and to **monitor and improve** aspects of Island life.

To make sure we have a random sample of adults covered by the survey, **we ask that the questionnaire is completed by the person living at this address who is 16 years or older and who has the next birthday.**

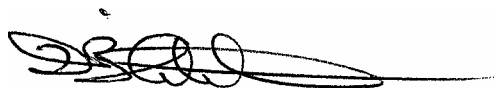
Please could you return the completed form to the Statistics Unit by **Friday 18<sup>th</sup> July 2008**. A **pre-paid envelope** is enclosed for your convenience.

The information you provide will be treated with the **strictest confidence** and will **only** be used to produce total numbers. Identifiable individual information will **not** be passed to any other States Department.

If you have **any questions** relating to completing the questionnaire, or wish to discuss any aspect of the survey, please contact Sarah Davis, tel: 440418.

**Thank-you** in advance for your time, and we look forward to receiving the completed questionnaire.

Yours faithfully,



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The survey is run **independently** by the Statistics Unit on behalf of other States departments. You can find out more about the Statistics Unit and our other projects and publications at [www.gov.je/statistics](http://www.gov.je/statistics).

**Se necessitar de algum esclarecimento relacionado com este questionário, e favor de contatar au Customer Service Centre através do telefone 445500.**

**Jesli potrzebuje pani pomocy w wypelnieniu tego kwestionariusza, prosze o kontakt z bbiurem obslugi klienta pod numerem 445500.**



# JERSEY ANNUAL SOCIAL SURVEY 2008

To be completed by the person living at this address who is aged 16 years or over and who has the next birthday

All responses will be treated with the strictest confidence and only used to produce total numbers. Identifiable individual information will not be passed to anyone outside the Statistics Unit.

To make best use of the data collected by this survey, we firstly need to know a little about you and your household. Please complete Section 1 fully before completing the rest of this form.

## Section 1: About You

1.1 Are you? (Please tick one box only)

<sup>01</sup>  Male

<sup>02</sup>  Female

1.2 In what year were you born?

1.3 What is your marital status? (Please tick one box only)

<sup>01</sup>  Single (never married)

<sup>02</sup>  Cohabiting (not married)

<sup>03</sup>  Married (first marriage)

<sup>04</sup>  Re-married

<sup>05</sup>  Separated (but still legally married)

<sup>06</sup>  Divorced

<sup>07</sup>  Widowed

1.4 Where were you born? (Please tick one box only)

<sup>01</sup>  Jersey

<sup>02</sup>  Elsewhere in the British Isles\* or the Republic of Ireland

<sup>03</sup>  Portugal/Madeira

<sup>04</sup>  Poland

<sup>05</sup>  Other European country (please specify country) \_\_\_\_\_

<sup>06</sup>  Elsewhere (please specify country) \_\_\_\_\_

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

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 What is your cultural and ethnic background?

White: <sup>01</sup>  Jersey      <sup>02</sup>  British      <sup>03</sup>  European

Asian: <sup>11</sup>  Bangladeshi    <sup>12</sup>  Chinese      <sup>13</sup>  Indian      <sup>14</sup>  Pakistani    <sup>15</sup>  Other Asian

Black: <sup>21</sup>  African      <sup>22</sup>  Caribbean

Mixed/Other: <sup>31</sup>  Please specify \_\_\_\_\_

## Education

- 1.7** What is your highest **educational** qualification?  
(Please exclude any professional qualifications) (Please tick one box only)
- <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 an O-Level, GSCE or equivalent level of qualification, **at Grade C or above** in:
- a)** English Language?      <sup>01</sup>  Yes      <sup>02</sup>  No
- b)** Maths?      <sup>01</sup>  Yes      <sup>02</sup>  No
- c)** Other Language?      <sup>01</sup>  Yes      <sup>02</sup>  No
- If Yes, please specify language(s)* \_\_\_\_\_

## Employment

- 1.9** Are you currently? (Please tick the **one box** which is most appropriate to you)
- |   |  |
|---|--|
| <sup>01</sup> <input type="radio"/> Working for an employer                             | <sup>06</sup> <input type="radio"/> Retired                      |
| <sup>02</sup> <input type="radio"/> Self-employed, employing others                     | <sup>07</sup> <input type="radio"/> In full-time education       |
| <sup>03</sup> <input type="radio"/> Self-employed, not employing others                 | <sup>08</sup> <input type="radio"/> A homemaker                  |
| <sup>04</sup> <input type="radio"/> Unemployed, looking for work                        | <sup>09</sup> <input type="radio"/> Other (please specify) _____ |
| <sup>05</sup> <input type="radio"/> Unable to work due to long-term sickness/disability |  |
- If you are not in employment please go to question 1.19 "About your household"**
- 1.10** Which industry do you work in? (Please tick the **one box** which is most appropriate to you)
- <sup>01</sup>  Agriculture and fishing
- <sup>02</sup>  Finance (including legal work)
- <sup>03</sup>  Construction and tradesmen
- <sup>04</sup>  Wholesale & retail
- <sup>05</sup>  Transport and communications (including Jersey Airport, Harbours, Post & Telecom)
- <sup>06</sup>  Private education or Private health
- <sup>07</sup>  Hotels, restaurants and bars
- <sup>08</sup>  Electricity, gas and water
- <sup>09</sup>  Public sector
- <sup>10</sup>  Other, (please specify) \_\_\_\_\_
- 1.11** How many hours do you **usually** work in your main job each week?  
(Do not count overtime and meal breaks)  per week

- 1.12** Do you earn less than £6 per hour gross (*before* deductions for tax, social security, accommodation and food provided by your employer and *excluding* overtime and bonuses? (*Please tick one box only*)
- <sup>01</sup>  Yes ...please go to the next question
- <sup>02</sup>  No ...please go to question 1.16
- 1.13** If yes, which earnings band are you currently in? (*Please tick one box only*)
- <sup>01</sup>  Between £5.80 and £6.00 per hour
- <sup>02</sup>  Less than £5.80 per hour
- 1.14** Are you a trainee earning the Trainee rate of £4.35 per hour?
- <sup>01</sup>  Yes
- <sup>02</sup>  No
- 1.15** Are you exempt from the minimum wage (e.g. therapeutic worker) or a volunteer?
- <sup>01</sup>  Yes
- <sup>02</sup>  No

- 1.16** How many people work in your main place of employment?
- <sup>01</sup>  Less than 25 people
- <sup>02</sup>  25 or more
- 1.17** Do you supervise any other employees?
- <sup>01</sup>  Yes
- <sup>02</sup>  No
- 1.18** Which of the following best describes the work you do?
- <sup>01</sup>  **Routine, or 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**  
*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 and for finance) e.g. finance manager - chief executive*

## About Your Household

1.19 What type of property does your household occupy? *(Please tick one box only)*

- 01 Bedsit  
 02 Flat/maisonette  
 03 Semi-detached/terraced house  
 04 Detached house/bungalow

1.20 What is the type of accommodation? *(Please tick one box only)*

- 01 Owner occupied  
 02 Sheltered/disabled\*  
 03 Old peoples/retirement home  
 04 States/Parish rent  
 05 Housing trust rent  
 06 Qualified Private rent  
 07 Staff/service accommodation  
 08 Lodger paying rent in private household  
 09 Registered lodging house  
 10 Other Non-qualified accommodation

*\*Sheltered/disabled housing is designed so that elderly or physically disabled people can live independently. The homes are often built in groups and provided with a warden or emergency call facilities.*

1.21 How many **bedrooms** are there for use by your household?

1.22 How many **cars** do you have for use by your household? *(include company cars and vans)*

1.23 Does anyone in your household have residential qualifications\*? *(Please tick one box only)*

- 01 Yes ...please go to the next question  
 02 No ...please go to question 1.25

*\* A person who is qualified under Jersey Housing Law and entitled to purchase a property in Jersey*

1.24 If yes, which residential category are they qualified under? *(Please tick any that apply to the adults in your household)*

- A to H category *(through a time of living on the Island or through family connections)*  
 J category *(“Essentially employed”, approved by the Housing Department)*  
 K category *(consent given on social or economic grounds)*  
 I don't know

1.25 How many people, **including yourself**, live in your household?  
(Please enter numbers in boxes below, excluding any lodgers).

Adults (aged 16 and over)

...Of which  are pensioners (females aged 60 or older,  
males aged 65 or older)

Children aged 0 to 4

Children aged 5 to 10

Children aged 11 to 15

## Your thoughts on... Family Policy

1.26 What do you think is the ideal number of children for a family to have?

**Currently in Jersey employees do not automatically have rights to maternity, paternity, adoption or other parental leave (whether paid or unpaid), unless their employer offers such rights. The States is currently considering introducing rights to parental leave for employees.**

1.27 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 1.29

1.28 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 \_\_\_\_\_

1.29 Are you a parent with any children currently under 16 years of age?

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

<sup>02</sup>  No ...please go to question 1.32 ("Your thoughts on... Registration cards")

1.30 Are you currently looking after your children *and not* employed?

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

<sup>02</sup>  No ...please go to question 1.32 ("Your thoughts on... Registration cards")

1.31 If you are not currently working, and are looking after your children, what would encourage or enable you to return to work sooner?

## Your thoughts on... Registration cards

There is a proposal that all adult residents will be issued with a combined registration card. The card would include your name, social security number and residential status. It would be used as identification for your employer, housing and social security benefits.

- 1.32** Do you feel the use of the card should be extended so that it can be used as an identity card to enable individuals to prove their identity when required e.g. as proof of age; to open a bank account or utility account; when using public services?
- <sup>01</sup>  Yes
- <sup>02</sup>  No
- 1.33** In your opinion how acceptable would it be to include a photograph of the individual on the card?
- <sup>01</sup>  Highly acceptable
- <sup>02</sup>  Acceptable
- <sup>03</sup>  Unacceptable
- <sup>04</sup>  Highly unacceptable
- <sup>05</sup>  Don't know
- 1.34** In your opinion, how acceptable would it be to include a higher security feature such as a finger print on the card?
- <sup>01</sup>  Highly acceptable
- <sup>02</sup>  Acceptable
- <sup>03</sup>  Unacceptable
- <sup>04</sup>  Highly unacceptable
- <sup>05</sup>  Don't know



## Section 2: Housing Standards

The following questions are all about the dwelling that you currently live in.

- 2.1** Approximately when was the property you live in built?
- 01 Don't know
  - 02 1930s or earlier
  - 03 1940s or 1950s
  - 04 1960s
  - 05 1970s
  - 06 1980s
  - 07 1990s
  - 08 2000 or later
- 2.2** What heating system(s) does your dwelling use? *(Tick more than one if you have combination heating systems)*
- Electrical
  - Bottled gas
  - Mains gas
  - Solid fuel – e.g. coal, logs
  - Oil fired central heating
  - Other (please specify) \_\_\_\_\_
- 2.3** What wall insulation does your dwelling currently have? *(Please tick one only)*
- 01 Cavity wall insulation
  - 02 Solid wall insulation
  - 03 No insulation
  - 04 Don't know
- 2.4** What loft insulation does your dwelling currently have? *(Please tick one only)*
- 01 Less than 100mm
  - 02 100-150mm
  - 03 More than 150mm
  - 04 No insulation
  - 05 Don't know thickness
  - 06 No loft as part of our dwelling
- 2.5** How much of your dwelling is double-glazed? *(Please tick one only)*
- 01 All double glazed
  - 02 Partial double-glazing
  - 03 No double-glazing
- 2.6** Does your dwelling have any of these other energy saving measures? *(Please tick all that apply)*
- A condensing boiler (a more efficient type of central heating boiler)
  - Draught proofing
  - Hot water cylinder insulation jacket

## Accommodation Agreements

- 2.7** Do you currently live in rented or lodging accommodation?  
 01  Yes ...please go to the next question  
 02  Neither ...please go to question 2.13 "Deposit Disputes"
- 2.8** Do you have a written agreement about terms and conditions with your landlord?  
 01  Yes ...please go to the next question  
 02  No ...please go to question 2.11
- 2.9** Do you feel your agreement adequately includes standard terms applicable to your type of accommodation?  
 01  Yes ...please go to question 2.11  
 02  No ...please go to the next question
- 2.10** If no, please list up to 3 terms you think are missing (e.g. provisions for return of deposit, sub-letting conditions, insurance, alterations, maintenance, notice periods)  
 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

- 2.11** Did you pay a deposit when you began living in your *current* accommodation?  
 01  Yes ...please go to the next question  
 02  No ...please go to question 2.13 "Deposit Disputes"
- 2.12** If yes, how much was the deposit?  
 01  Up to £500  
 02  Up to £1000  
 03  Up to £1500  
 04  Over £1500

## Deposit Disputes

If you have lived in rented or lodging accommodation in the last 5 years, please answer the following 2 questions, otherwise move onto the next section.

- 2.13** In the last 5 years, have you had a dispute with a landlord over the return of a deposit?  
 01  Yes ...please go to the next question  
 02  No ...please go to Section 3
- 2.14** If yes, please answer the next two questions in the table below. Fill in one column for each dispute you have had in the last 5 years. If you have just had one dispute, just fill in the first column.

|  | Dispute 1  | Dispute 2  | Dispute 3  |
|--|--|--|--|
| <b>What type of accommodation was the dispute about?</b> | 01 <input type="radio"/> Qualified<br>02 <input type="radio"/> Non-qualified   | 01 <input type="radio"/> Qualified<br>02 <input type="radio"/> Non-qualified   | 01 <input type="radio"/> Qualified<br>02 <input type="radio"/> Non-qualified   |
| <b>How was the dispute resolved?</b>                     | 01 <input type="radio"/> Through the Court<br>02 <input type="radio"/> Between yourself and the landlord<br>03 <input type="radio"/> It was not, the deposit was not returned<br>04 <input type="radio"/> Other (e.g. with advice from the Citizens Advice Bureau) | 01 <input type="radio"/> Through the Court<br>02 <input type="radio"/> Between yourself and the landlord<br>03 <input type="radio"/> It was not, the deposit was not returned<br>04 <input type="radio"/> Other (e.g. with advice from the Citizens Advice Bureau) | 01 <input type="radio"/> Through the Court<br>02 <input type="radio"/> Between yourself and the landlord<br>03 <input type="radio"/> It was not, the deposit was not returned<br>04 <input type="radio"/> Other (e.g. with advice from the Citizens Advice Bureau) |

## Section 3: The Jersey to UK Ferry Service

Jersey currently has a conventional passenger ferry service to Portsmouth all year round, 6 days a week. It is served by a fast ferry to Weymouth at least weekly in the winter and daily in the summer. The Poole fast ferry runs a summer service at least twice a week from Easter and builds to at least one a day in August.

**3.1** In the last 12 months, how many times have you **travelled between England and Jersey by ferry?** (Count a return journey as **two** trips)

By fast ferry:  trips in the last 12 months

By conventional ferry:  trips in the last 12 months

**If you did not go to England by ferry in the last year, please go to question 3.5**

**3.2** Did you take your car when you went to England on the ferry?

<sup>01</sup>  Yes – all the times

<sup>02</sup>  Yes – some of the times

<sup>03</sup>  No – none of the times

**3.3** Why did you choose to go by ferry? (*Please tick all that apply*)

- To be able to take my vehicle
- Because of the reliability of the service
- Because of the reasonable price
- Because of the location of the ports
- Because of the onboard facilities
- The times and days of the crossings were convenient
- Prefer to travel by sea
- Other – please specify \_\_\_\_\_

**3.4** If you *have* taken your car to England by ferry, did you consider when choosing your method of travel:

Going by plane and hiring a car in England? <sup>01</sup>  Yes <sup>02</sup>  No

Going by plane and freighting your car to England? <sup>01</sup>  Yes <sup>02</sup>  No

**3.5** Please indicate your views on the following statements:

|  | Strongly agree                      | Agree                               | No opinion                          | Disagree                            | Strongly disagree                   |
|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| The ferry service should operate all year round                          | <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"/> |
| There should be a conventional ferry service between Jersey and England  | <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"/> |
| There should be a fast ferry taking 3-4 hours between Jersey and England | <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"/> |

3.6 In summer the ferry service should operate:

- 01 6 - 7 times a week
- 02 4 - 5 times a week
- 03 2 - 3 times a week
- 04 Once a week
- 05 Less than once a week
- 06 No preference

3.7 In winter the ferry service should operate:

- 01 6 - 7 times a week
- 02 4 - 5 times a week
- 03 2 - 3 times a week
- 04 Once a week
- 05 Less than once a week
- 06 No preference

3.8 If you did not use the car ferry to go to the UK in the last 12 months please indicate why (*Please tick all that apply*).

- I did not travel to England
- Too expensive
- Not reliable enough
- Not frequent enough
- Inconvenient times of service
- Inconvenient locations of ports
- Prefer to go by plane and hire a car in England
- Prefer to go by plane and freight car across
- Other – Please specify \_\_\_\_\_

## Overall

3.9 What is important to you when booking a Jersey – UK combined car and passenger ferry service? (*Please rank **three** of the following in order of importance: place a “1” beside the factor that you think is the most important, a “2” beside the factor that is second most important, and a “3” beside the factor that is third most important.*)

- Having a conventional ferry service
- Reliability of the service
- Having a fast ferry with shorter crossing times
- Cost of the service
- Having a service running all year round

## Section 4 Travel and Transport

### Going Shopping in Town

- 4.1 How often do you go shopping in town by car/van?
- 01  Never ... (If you never go shopping in town by car or van, please go to question 4.3)
- 02  Less than once a month
- 03  About once a month
- 04  About once a week
- 05  Several times a week
- 4.2 If you drive a car or van to go shopping in town, where do you park? *(Please tick one box only)*
- 01  Public multi storey car park
- 02  Other public car park
- 03  Private parking provided by work
- 04  Private parking you pay for
- 05  Other, please specify \_\_\_\_\_

### Going to Work

- 4.3 How do you usually travel to work the majority of the time? *(Please tick one box only)*
- 01  Motorbike/moped
- 02  Walk
- 03  Cycle
- 04  Bus
- 05  Taxi
- 06  I work from home / I live at place of work
- 07  I do not work
- 08  Car or van as the driver
- 09  Car or van as a passenger

*If you do not travel to work by car or van, please go to question 4.7*

### Going to Work by Car or Van

- 4.4 If you travel to work by car or van, how many adults and school-children (**including yourself**) are usually in the car at the beginning of your journey?  adults  school-children
- 4.5 Do you work in town?
- 01  Yes ... Please go to the next question
- 02  No ... Please go to question 4.7 "Going to School"
- 4.6 If you work in town, where do you park? *(Please tick one box only)*
- 01  Public multi storey car park
- 02  Other public car park
- 03  Private free parking provided by work
- 04  Private parking you pay for
- 05  Other, please specify \_\_\_\_\_

## Going to School

4.7 Are there any children in your household who are still at school?

01  Yes ...please go to the next question

02  No ...please go to question 4.10 "Car Parking in Town"

4.8 Please enter the age(s) of the children who are still at school in your household:

| Child 1                  | Child 2                  | Child 3                  | Child 4                  | Child 5                  |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="text"/> yrs | <input type="text"/> yrs | <input type="text"/> yrs | <input type="text"/> yrs | <input type="text"/> yrs |

4.9 How does each child travel to school? (Please tick one box in each row for each child)

|         | (as part of parent's journey to work) | (with parent as a specific journey to school) | (lift in another household's car) | Main Bus                 | School Bus               | Cycle                    | Walk                     | Motorbike                | Other -Please specify    |
|---------|---------------------------------------|---|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|         | Car                                   | Car   | Car                               |                          |                          |                          |                          |                          |                          |
| Child 1 | 01 <input type="radio"/>              | 02 <input type="radio"/>                      | 03 <input type="radio"/>          | 04 <input type="radio"/> | 05 <input type="radio"/> | 06 <input type="radio"/> | 07 <input type="radio"/> | 08 <input type="radio"/> | 09 <input type="radio"/> |
| Child 2 | 01 <input type="radio"/>              | 02 <input type="radio"/>                      | 03 <input type="radio"/>          | 04 <input type="radio"/> | 05 <input type="radio"/> | 06 <input type="radio"/> | 07 <input type="radio"/> | 08 <input type="radio"/> | 09 <input type="radio"/> |
| Child 3 | 01 <input type="radio"/>              | 02 <input type="radio"/>                      | 03 <input type="radio"/>          | 04 <input type="radio"/> | 05 <input type="radio"/> | 06 <input type="radio"/> | 07 <input type="radio"/> | 08 <input type="radio"/> | 09 <input type="radio"/> |
| Child 4 | 01 <input type="radio"/>              | 02 <input type="radio"/>                      | 03 <input type="radio"/>          | 04 <input type="radio"/> | 05 <input type="radio"/> | 06 <input type="radio"/> | 07 <input type="radio"/> | 08 <input type="radio"/> | 09 <input type="radio"/> |
| Child 5 | 01 <input type="radio"/>              | 02 <input type="radio"/>                      | 03 <input type="radio"/>          | 04 <input type="radio"/> | 05 <input type="radio"/> | 06 <input type="radio"/> | 07 <input type="radio"/> | 08 <input type="radio"/> | 09 <input type="radio"/> |

## Car Parking in Town

4.10 How easy is it to find a parking space when you need one in the following zones?

|                                 | Very easy                | Easy                     | Difficult                | Very difficult           | Don't know / Don't use   |
|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Public parking up to 20 minutes | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Public parking up to one hour   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Public parking up to 3 hours    | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| All day public parking          | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Over night public parking       | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |

4.11 How do you currently pay for parking in town? (Please tick one box only)

01  By paycard

02  By season ticket

03  I have free parking

04  I pay privately

05  Paid by my employer

**4.12** How convenient is the paycard or season ticket payment system for public parking for you? *(Please tick one box only)*

- 01  Very convenient  
 02  Convenient  
 03  Inconvenient  
 04  Very inconvenient  
 05  Not applicable to me

**4.13** What payment method for public parking would you prefer? *(Please tick one box only)*

- 01  Happy with paycard or season ticket system, don't want change  
 02  Pay by account (a system that records your car within the car park and charges you accordingly)  
 03  New monthly season ticket - Monday-Friday only, priced accordingly  
 04  New quarterly season ticket  
 05  New consecutive 5 day scratch-card  
 06  Other – please specify \_\_\_\_\_

## Parking Control

**4.14** In your opinion, how much of a problem is each of the following parking issues in town? *(Please tick one box in each row)*

|  | A major problem          | A minor problem          | Not a problem            | Don't Know               |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>A</b> Abuse of disabled parking bays  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>B</b> Parking on pavements  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>C</b> Misuse of paycards (e.g. people failing to display one, overstaying the time paid for, or changing paycards hourly in one hour zones) | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>D</b> Parking on yellow lines   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>E</b> Parking outside of marked bays  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>F</b> Abuse of unloading bays   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>G</b> Vehicles causing obstructions   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>H</b> Illegal parking on a bus stop or taxi rank  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| <b>I</b> Other <i>(Please specify)</i> _____   | 01 <input type="radio"/> | 02 <input type="radio"/> |                          |                          |

**4.15** To what extent do you agree or disagree with the following statements? *(Please tick one box in each row)*

|  | Strongly agree           | Tend to agree            | Tend to disagree         | Strongly disagree        | Don't know               |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| The working relationship between Parking Control Officers and the public is good   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| I think the Parking Control Officers do their jobs well                            | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| I am confident I would be treated fairly by a Parking Control Officer              | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| I think the current uniform for a Parking Control Officer presents the right image | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |

**4.16** During the last 12 months, how do you think the Parking Control Officers have been doing in each of these areas? *(Please tick one box in each row)*

|  | Very good                | Good                     | Poor                     | Very poor                | Don't know               |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Directing traffic in an emergency                                | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Ensuring fair use of parking places in car parks                 | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Ensuring fair use of parking places on streets                   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Reporting people who break the Parking Laws                      | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Booking people who park on a yellow line                         | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Keeping traffic flowing by minimising obstructions and tailbacks | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |

## Recycling

**4.17** How could you recycle these items if you wanted to? *(Please tick one box in each row)*

|                           | Take to a recycling facility | Other                    | No way to do this        | Don't know               |
|---------------------------|------------------------------|--------------------------|--------------------------|--------------------------|
| Newspapers and magazines  | 01 <input type="radio"/>     | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Other paper and cardboard | 01 <input type="radio"/>     | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Glass bottles and jars    | 01 <input type="radio"/>     | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Cans                      | 01 <input type="radio"/>     | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Plastic                   | 01 <input type="radio"/>     | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Clothes/textiles          | 01 <input type="radio"/>     | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Batteries                 | 01 <input type="radio"/>     | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |

**4.18** How much of each of the following items do you and your household recycle (i.e. take to a recycling facility)? *(Please tick one box in each row)*

|                           | All                      | Most                     | Some                     | None                     | Don't know               |
|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Newspapers and magazines  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Other paper and cardboard | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Glass bottles and jars    | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Cans                      | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Plastic                   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Clothes/textiles          | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Batteries                 | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |

**4.19** Would you recycle any of these items if they were collected from your doorstep? *(Please tick one box in each row)*

|                           | All                      | Most                     | Some                     | None                     | Don't know               |
|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Newspapers and magazines  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Other paper and cardboard | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Glass bottles and jars    | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Cans                      | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Plastic                   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Clothes/textiles          | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |
| Batteries                 | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/> |



**4.20** For what reasons, if any, have you (or your household) not regularly recycled bottles/paper/cans in the last 12 months? *(Please tick all that apply)*

- Recycling facilities too far away
- I don't know where recycling facilities are
- No kerbside collections
- Will have little effect on the environment
- Lack of suitable storage space in your home
- No recycling facilities at all
- Lack of time or desire
- Little or no glass/cans/paper
- Recycle as much as possible
- Other (please specify) \_\_\_\_\_

**4.21** Which, if any, of the following might prevent you from using a doorstep recycling service? *(Please tick all that apply)*

- Too much trouble to separate waste/too busy to separate waste
- Don't have space to store different types of waste
- Don't think recycling is important
- Nothing
- Don't know
- Other (please specify) \_\_\_\_\_

**4.22** Do you do anything to reduce the amount of waste produced in your household?

*(Please tick one box in each row)*

|                              | Always                   | Often                    | Occasionally             | Never                    |
|------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Reuse carrier bags           | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Use paper as scrap paper     | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Use rechargeable batteries   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Refill printer cartridges    | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |
| Other (please specify) _____ | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |

**4.23** Does your kitchen or garden waste get composted?

- 01  Yes - always
- 02  Yes - sometimes
- 03  No
- 04  Don't know

**4.24** What prevents you from composting your kitchen or garden waste, or from composting more? (*Please tick **one main reason***)

- 01  Don't have a garden
- 02  Too much trouble to separate waste/too busy to separate waste
- 03  Don't have space to store waste
- 04  Waste might smell
- 05  Waste might be a health hazard
- 06  Don't think recycling is important
- 07  Nothing
- 08  Don't know

**4.25** If you were offered a weekly door-step collection service for kitchen and garden waste, how often would you use it?

- 01  Always
- 02  Usually
- 03  Sometimes
- 04  Never
- 05  Don't know

## The Bus Service

**4.26** Do you know about the "TextMyBus" Service?

- 01  Yes                   ...please go to question 4.27
- 02  No                         ...please go to question 4.29

**4.27** Have you used the "TextMyBus" Service?

- 01  Yes
- 02  No

**4.28** How useful do you think the "TextMyBus" service is?

- 01  Very useful
- 02  Quite useful
- 03  Not very useful
- 04  Not at all useful
- 05  Don't know

**4.29** Have you used Liberation Station (the new bus station)?

- 01  Yes
- 02  No

**4.30** How would you rate Liberation Station overall?

- 01  Very good
- 02  Good
- 03  Adequate
- 04  Poor
- 05  Very poor
- 06  Don't know

**4.31** How easy is it to find out information at Liberation Station?

<sup>01</sup>  Very easy

<sup>02</sup>  Quite easy

<sup>03</sup>  Quite difficult

<sup>04</sup>  Very difficult

<sup>05</sup>  Don't know

**4.32** Do you think Liberation Station is better than the Weighbridge?

<sup>01</sup>  Yes

<sup>02</sup>  No

<sup>03</sup>  Don't know

## How are we doing?

### Jersey's Roads

| 4.33 | <i>How do you generally rate the following aspects of managing road works operations?</i> | Very good                | Good                     | Poor                     | Very poor                |                            |
|------|---|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------|
|      | Public awareness of works prior to them taking place                                      | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |                            |
|      | Traffic management around works   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |                            |
|      | Reinstatement of the road surface   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |                            |
|      | The efficiency of the way the work was carried out  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> |                            |
| 4.34 | <i>How would you rate the state of repair/smoothness of the roads in Jersey?</i>          | Very good                | Good                     | Poor                     | Very poor                | Don't know/<br>I don't use |
|      | Condition of the Island's <b>main</b> roads   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Condition of the Island's <b>other</b> roads  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |

### Parks

| 4.35 | <i>How do you rate the following in Jersey?</i> | Very good                | Good                     | Poor                     | Very poor                | Don't know/<br>I don't use |
|------|---|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------|
|      | Standard of Howard Davis park                   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard of Millbrook ("Coronation") Park       | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard of Sir Winston Churchill Park          | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard of Gorey Gardens                       | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard of other public gardens                | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard/quality of Railway Walk                | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |

### Sports Fields

| 4.36 | <i>How do you rate the following in Jersey?</i> | Very good                | Good                     | Poor                     | Very poor                | Don't know/<br>I don't use |
|------|---|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------|
|      | Standard of Springfield Playing Field           | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard of Les Quennevais Playing Field        | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard of FB Fields                           | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Standard of other playing fields in the Island  | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |

### Cleanliness

| 4.37 | <i>How do you rate the following in Jersey?</i> | Very good                | Good                     | Poor                     | Very poor                | Don't know/<br>I don't use |
|------|---|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------|
|      | Cleanliness of our pavements and roads          | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Cleaning of Public Toilets                      | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |
|      | Cleanliness of main and fish market in town     | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> | 04 <input type="radio"/> | 05 <input type="radio"/>   |

## Section 5 – The Fire and Rescue Service

5.1 Have you had a fire in your home in the past 12 months?

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

<sup>02</sup>  No ...please go to question 5.3

5.2 If yes, was the Fire and Rescue Service called?

<sup>01</sup>  Yes

<sup>02</sup>  No

5.3 Have you called the Fire and Rescue Service for any other type of incident in the last 12 months?

No

Yes - Road Traffic Collision

Yes - Sea Rescue

Yes - Cliff Rescue

Yes - Locked out

Yes - Flooding

Yes - Other reason: \_\_\_\_\_

### Fire Service Satisfaction

If you **have** called the Fire Service in the last 12 months, **for any reason**, please answer the next four questions, otherwise please go to question 5.8 “Fire Safety in the Home”.

5.4 If you have called the Fire & Rescue Service for any emergency within the last 12 months, how would you rate your **phone-call** to 999?

<sup>01</sup>  Highly effective

<sup>02</sup>  Somewhat effective

<sup>03</sup>  Not effective

5.5 If you called the Fire & Rescue Service for an emergency within the last 12 months, was the arrival of the Fire & Rescue Service:

<sup>01</sup>  Faster than expected

<sup>02</sup>  As expected

<sup>03</sup>  Slower than expected

5.6 Were you satisfied with the level of service you received at your fire or other incident?

<sup>01</sup>  Very satisfied

<sup>02</sup>  Fairly satisfied

<sup>03</sup>  Unsatisfied

<sup>04</sup>  Very unsatisfied

5.7 If you were *not* satisfied with the level of service you received, why was this?

<sup>01</sup>  Took too long to arrive

<sup>02</sup>  Service was ineffective

<sup>03</sup>  Staff were not professional

<sup>04</sup>  Other – please specify \_\_\_\_\_

## Fire Safety in the Home

**5.8** Do you have any of the following safety measures in your home? *(Please tick all that apply)*

- Planned escape route
- Fire extinguisher
- Fire blanket
- Sprinkler system
- Smoke detector/alarm

**5.9** Do you take any of the following precautions? *(Please tick all that apply)*

- Keep matches away from children
- Never leave cooking unattended
- Close doors at night
- Use a fire guard
- Only use tea-lights/candles in suitable holders

**5.10** Do you own a chip pan (*not* an electric deep fat fryer)?

- <sup>01</sup> Yes                   ...please go to the next question
- <sup>02</sup> No                     ...please go to question 5.12

**5.11** How often do you use your chip pan?

- <sup>01</sup> Every day
- <sup>02</sup> A few times a week
- <sup>03</sup> Once or twice a fortnight
- <sup>04</sup> Less often
- <sup>05</sup> Never

**5.12** How interested are you about receiving advice about fire safety in your home?

- <sup>01</sup> Very interested
- <sup>02</sup> Fairly interested
- <sup>03</sup> Not interested

## Fire and Rescue Services

**5.13** How would you most like to access advice and information about your Fire and Rescue Service? *(Please tick all that apply)*

- Telephone
- Visit to Fire station
- Website
- Mail/Letter
- E-mail
- Fax
- Local media (TV, Radio, JEP)
- Leaflet (Libraries, Public buildings etc)
- Home visit

**5.14** Which of the following services offered by the Fire and Rescue service are you aware of? *(Please tick all that apply)*

- Home fire safety check
- Commercial fire awareness training
- Inspection of commercial and business premises
- Information on service performance
- Technical fire safety advice
- Petroleum licensing
- Fireworks advice

**5.15** In your opinion how accessible is your Fire & Rescue Service for advice and information?

- <sup>01</sup> Very accessible
- <sup>02</sup> Fairly accessible
- <sup>03</sup> Fairly inaccessible
- <sup>04</sup> Very inaccessible
- <sup>05</sup> Don't know

## Retained Fire-fighters

**A third of your Fire and Rescue Service is made up of part-time ("retained"), paid fire-fighters.**

**5.16** Would you consider becoming a part-time (retained) fire-fighter?

- <sup>01</sup> Yes                      ...please go to next section
- <sup>02</sup> No                         ...please go to question 5.17

*For more information about becoming a part-time (retained) fire-fighter, call 445906, or go to [www.gov.je/HomeAffairs/Fire](http://www.gov.je/HomeAffairs/Fire).*

**5.17** If not, why wouldn't you consider becoming a part-time (retained) fire-fighter? *(Please tick all that apply)*

- Not interested
- Not physically able
- Not enough spare time
- Not supported by current employer
- Does not pay well enough
- Other – please specify \_\_\_\_\_

## Section 6 – Your Health, Lifestyle and Leisure activities

6.1 Over the last 12 months, would you say your health on the whole has been:

- <sup>01</sup>  Good  
<sup>02</sup>  Fairly good  
<sup>03</sup>  Not good

6.2 Do you have any longstanding illness, disability or infirmity?

*(By longstanding, we mean anything that has troubled you over a period of time, or that is likely to affect you for a period of time.)*

- <sup>01</sup>  Yes ...please go to the next question  
<sup>02</sup>  No ...please go to question 6.4

6.3 Do any of these illnesses or disabilities limit your activities in any way?

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

6.4 Which of the following best describes you?

- <sup>01</sup>  Very underweight  
<sup>02</sup>  Underweight  
<sup>03</sup>  About the right weight  
<sup>04</sup>  Overweight  
<sup>05</sup>  Very overweight  
<sup>06</sup>  I am not sure about my weight

6.5 How tall are you? *(Answer in EITHER metres OR feet and inches)*

metres,  cm    **OR**     feet,  inches

6.6 How much do you weigh? *(Answer in EITHER kilograms, OR stones and pounds)*

kilograms    **OR**     stone,  pounds

### How to measure your waist

- Note – it is different to belt size!
- Take off your shirt and loosen your belt
- Place a tape measure halfway between the bottom of your ribcage and the top of your hip bone
- Measure your waist circumference whilst breathing out, and relaxed

6.7 What is your waist measurement? *(Answer in EITHER centimetres OR inches)*

centimetres     inches



## Lifestyle

### What counts as “one portion of fruit or vegetable”?

**YES:** fresh, frozen, canned, dried or cooked fruit or vegetables, including pulses, beans and lentils

**NO:** potatoes, chips, yams

Only count fruit juice once, no matter how much you drink.

**Examples of “one portion” size:** 1 apple/orange/banana; 2 plums/kiwis; a full tablespoon of dried fruit; a small bowl of salad; 2 heaped tablespoons of greens; 3 heaped tablespoons of carrots, sweetcorn, beans or peas.

6.8 How many portions of fruit and vegetables have you eaten in the **last 24 hours**?  portions

### What counts as “moderate physical activity”?

Any activity that means you breathe a little fast, be slightly out of breath (but able to maintain a conversation), feel warmer and have a slightly faster heartbeat

**Examples:** walking, cycling, gardening, DIY, housework, swimming, manual work, keep fit, dancing, sport

6.9 How many times do you undertake at least moderate physical activity for 30 minutes or more in a normal week?

times a week

6.10 Here are a number of reasons why people do not do more physical activity.

*Please rank those which apply to you, by placing a “1” beside the most important reason, a “2” beside the second most important reason, and so on, for as many reasons as are applicable to you.*

- I do enough physical activity
- Not enough time
- Not enough money
- I have nobody to go with
- I prefer to do other things
- Ill health, injury or disability
- Worry about road safety
- No confidence
- I feel too fat / overweight
- Other – please specify \_\_\_\_\_

## Smoking habits

6.11 Which of the following best describes you? (*Please tick one box only*)

- <sup>01</sup> I have never smoked/ I don't smoke
- <sup>02</sup> I used to smoke occasionally but don't now
- <sup>03</sup> I used to smoke daily but don't now
- <sup>04</sup> I smoke occasionally but not everyday
- <sup>05</sup> I smoke daily

6.12 If you smoke **everyday**, how much do you smoke on average per day?

Number of cigarettes  per day

Number of cigars  per day

Ounces of tobacco  per day

6.13 If you smoke **occasionally**, how much do you smoke on average per week?

Number of cigarettes  per week

Number of cigars  per week

Ounces of tobacco  per week

## Drinking habits

6.14 On average, how often do you have a drink containing alcohol?

<sup>01</sup>  Never/rarely

<sup>02</sup>  Less than once a week

<sup>03</sup>  1 or 2 times a week

<sup>04</sup>  3 or 4 times a week

<sup>05</sup>  5 or 6 times a week

<sup>06</sup>  Everyday

### What counts as a “unit of alcohol”?

**1 unit** = Half pint of ordinary strength beer, lager or cider  
Small glass of wine  
Small glass of sherry, port or vermouth  
Single measure of spirit or liqueur (25ml, gin, whisky, vodka, cointreau, tia maria)

**1½ units** = One bottle of alcopop

**2 units** = Standard glass of wine  
Half pint of extra strength beer, lager or cider  
One pint of ordinary beer, lager or cider  
Double measure of spirit or liqueur (50ml)

**3 units** = One large glass of wine

**4 units** = One pint of extra strength beer, lager or cider

6.15 Please complete the chart below, indicating how many units of alcohol you drank on each day over the last week (enter zero if none):

|           |                      |       |          |                      |       |
|-----------|----------------------|-------|----------|----------------------|-------|
| Monday    | <input type="text"/> | units | Saturday | <input type="text"/> | units |
| Tuesday   | <input type="text"/> | units | Sunday   | <input type="text"/> | units |
| Wednesday | <input type="text"/> | units |          |                      |       |
| Thursday  | <input type="text"/> | units |          |                      |       |
| Friday    | <input type="text"/> | units |          |                      |       |

6.16 What type of alcohol do you **mostly** drink? (Please tick one only)

<sup>01</sup>  Strong beer/lager/cider

<sup>02</sup>  Normal strength beer/lager/cider

<sup>03</sup>  Wine

<sup>04</sup>  Alcopops

<sup>05</sup>  Spirits

<sup>06</sup>  Sherry/fortified wine

<sup>07</sup>  Low alcohol drinks

6.17 What do you think are the recommended maximum **daily** units for men and women?

units a **day** for **men**

units a **day** for **women**

6.18 How often do you buy **alcohol** from the following places?

|                              | 3 or more<br>times a<br>week | Once or<br>twice a<br>week | A few<br>times a<br>month | A few<br>times a<br>year | Less than<br>once a<br>year | Never                    |
|------------------------------|------------------------------|----------------------------|---------------------------|--------------------------|-----------------------------|--------------------------|
| Supermarkets                 | 01 <input type="radio"/>     | 02 <input type="radio"/>   | 03 <input type="radio"/>  | 04 <input type="radio"/> | 05 <input type="radio"/>    | 06 <input type="radio"/> |
| Wine shop / Off-licence      | 01 <input type="radio"/>     | 02 <input type="radio"/>   | 03 <input type="radio"/>  | 04 <input type="radio"/> | 05 <input type="radio"/>    | 06 <input type="radio"/> |
| Bar / pub / nightclub        | 01 <input type="radio"/>     | 02 <input type="radio"/>   | 03 <input type="radio"/>  | 04 <input type="radio"/> | 05 <input type="radio"/>    | 06 <input type="radio"/> |
| Corner-shop                  | 01 <input type="radio"/>     | 02 <input type="radio"/>   | 03 <input type="radio"/>  | 04 <input type="radio"/> | 05 <input type="radio"/>    | 06 <input type="radio"/> |
| Restaurant / when eating out | 01 <input type="radio"/>     | 02 <input type="radio"/>   | 03 <input type="radio"/>  | 04 <input type="radio"/> | 05 <input type="radio"/>    | 06 <input type="radio"/> |
| Duty free                    | 01 <input type="radio"/>     | 02 <input type="radio"/>   | 03 <input type="radio"/>  | 04 <input type="radio"/> | 05 <input type="radio"/>    | 06 <input type="radio"/> |

## Food Poisoning

6.19 Have you had a bout of diarrhoea and/or vomiting in the last 12 months that you felt was caused by food you had eaten on the island?

01  Yes ...please go to the next question

02  No ...please go to question 6.23 "Volunteering"

6.20 Did the bout of illness last more than 3 days (72 hrs)?

01  Yes

02  No

6.21 Was this illness caused by food prepared in the home, or food prepared out of the home?

01  Food prepared at home

02  Food prepared out of the home

6.22 Who did you report the incident to?

01  GP

02  Health Protection / Public Health

03  Place where you bought or ate the food

04  I did not report the incident

05  Other – please specify \_\_\_\_\_

## Volunteering

We are interested in any volunteering you do – that is, work that you do without receiving any payment (except perhaps expenses). Voluntary activities might be organising or helping to run events, raising money, providing transport, coaching or tuition.

**This does not include time spent solely supporting your own family members.**

**6.23** In the last 4 weeks, how many hours have you spent volunteering in the following areas? (*Enter "0" if none*)

- a) Sports activities or organisations.....  hours in last 4 weeks
- b) Arts and theatre volunteering.....  hours in last 4 weeks
- c) School helper.....  hours in last 4 weeks
- d) Other charities .....  hours in last 4 weeks
- e) Other – please specify \_\_\_\_\_.....  hours in last 4 weeks

## Section 7 – Spending Habits

We are interested in purchases people make outside of Jersey - by mail order, phone, over the internet and while on holiday, for their own personal use or as gifts.

### Buying goods by **MAIL ORDER** or over the Phone

7.1 In the last 12 months, have you made any purchases by **mail order** or over the **phone** from **companies outside of Jersey**, to be delivered to your home?

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

<sup>02</sup>  No ...please go to question 7.3

7.2 What are the reasons why you would purchase goods and services **by mail order or phone** from companies outside of the Island rather than from within the Island? *(Please tick all that apply)*

- Better choice / availability
- Faster than ordering locally
- Better prices for goods or services
- Better service
- I can shop at any time or any place
- Other – please specify \_\_\_\_\_

### Buying goods over the **INTERNET**

7.3 In the last 12 months, have you made any purchases over the **internet** from companies **outside of Jersey**?

<sup>01</sup>  Yes ...please answer 7.4 below

<sup>02</sup>  No ...please answer 7.5 below

7.4 *If you HAVE made any purchases over the internet from companies outside of Jersey in the last 12 months*, What are the reasons why you would purchase goods and services over the internet from outside of the Island rather than from within the Island? *(Please tick all that apply)*

- Better choice / availability
- Faster than ordering locally
- Better prices for goods or services
- Better service
- I can shop at any time or place
- Other – please specify \_\_\_\_\_

7.5 *If you HAVE NOT made any purchases over the internet from companies outside of Jersey in the last 12 months*, For what reasons have you NOT used the internet to purchase goods in the last 12 months? *(Please tick all that apply)*

- Don't know how
- Limited access to internet
- Worried about security (e.g. of bank details over the internet)
- Prefer to support local retailers
- Prefer to see product before I buy it
- Other, please specify \_\_\_\_\_

If you have **not** made any purchases over the internet, *or* by mail order or over the phone from companies outside of Jersey in the last 12 months, please go to question 7.7

## Spending by MAIL ORDER, Phone AND over the INTERNET:

7.6 In the last 12 months, approximately how much have you spent by **mail order or over the phone, and over the internet** from companies **outside of Jersey**, on the following items?

| <i>(Please give approximate amounts to the nearest £10)</i>                           | By MAIL<br>ORDER<br>or Phone | Over the<br>INTERNET   |
|---|------------------------------|------------------------|
| <b>Clothing</b> <i>(including fashion shoes)</i>                                      | £ <input type="text"/>       | £ <input type="text"/> |
| <b>Sporting equipment</b> <i>(including sports shoes, racquets, weights etc)</i>      | £ <input type="text"/>       | £ <input type="text"/> |
| <b>Household goods</b> <i>(including furniture, lighting, utensils)</i>               | £ <input type="text"/>       | £ <input type="text"/> |
| <b>DIY</b> <i>(including tools, building materials)</i>                               | £ <input type="text"/>       | £ <input type="text"/> |
| <b>Computer equipment</b> <i>(hardware and software such as PC games)</i>             | £ <input type="text"/>       | £ <input type="text"/> |
| <b>Media and books</b> <i>(including CDs, DVDs, downloading music)</i>                | £ <input type="text"/>       | £ <input type="text"/> |
| <b>Electrical goods</b> <i>(including white goods, TVs, DVD players, MP3 players)</i> | £ <input type="text"/>       | £ <input type="text"/> |
| <b>Holidays</b> <i>(including flights, ferry, accommodation, car hire)</i>            | £ <input type="text"/>       | £ <input type="text"/> |
| <b>Other - please specify</b> _____   | £ <input type="text"/>       | £ <input type="text"/> |

## Spending whilst TRAVELLING outside of Jersey

7.7 Have you made any purchases **to bring back to Jersey whilst travelling outside of Jersey** in the last 12 months?

<sup>01</sup>  Yes ...please go to question 7.8

<sup>02</sup>  No ...please go to question 7.10 "Overall Spending"

7.8 If you have travelled outside of Jersey in the last 12 months, approximately how much did you spend on the following items?

| <i>(Please give approximate amounts to the nearest £10)</i>                           | While travelling<br>outside Jersey |
|---|------------------------------------|
| <b>Clothing</b> <i>(including fashion shoes)</i>                                      | £ <input type="text"/>             |
| <b>Sporting equipment</b> <i>(including sports shoes, racquets, weights etc)</i>      | £ <input type="text"/>             |
| <b>Household goods</b> <i>(including furniture, lighting, utensils)</i>               | £ <input type="text"/>             |
| <b>DIY</b> <i>(including tools, building materials)</i>                               | £ <input type="text"/>             |
| <b>Computer equipment</b> <i>(hardware and software such as PC games)</i>             | £ <input type="text"/>             |
| <b>Media and books</b> <i>(including CDs, DVDs)</i>                                   | £ <input type="text"/>             |
| <b>Electrical goods</b> <i>(including white goods, TVs, DVD players, MP3 players)</i> | £ <input type="text"/>             |
| <b>Food &amp; Drink</b>   | £ <input type="text"/>             |
| <b>Other - please specify</b> _____   | £ <input type="text"/>             |

7.9 What are the reasons why you would purchase goods whilst away from the Island, in order to bring back to the Island, rather than from within the Island? *(Please tick all that apply)*

- Better choice / availability
- Faster than ordering locally
- Better prices for goods or services
- Better service
- Other – please specify \_\_\_\_\_

### Overall spending

7.10 When buying goods and services from outside of Jersey, what is your *preferred* method of purchasing? *(Please tick any that apply)*

- Mail Order
- Internet
- Telephone
- Whilst Abroad
- I do not buy goods and services from outside of Jersey

### Internet shopping in Jersey

7.11 In the last 12 months, have you used any **Jersey-based** company websites to:

- a) Research prices, availability and range of products or services?      <sup>01</sup>  Yes      <sup>02</sup>  No
- 
- b) Order goods or services?      <sup>01</sup>  Yes      <sup>02</sup>  No

## Section 8 – Work, Pensions and Long-term care

8.1 Does this statement apply to you: “I am currently of **working age** and I am **not working**” ?  
(Working age is between 16 and 65 for men and 16 and 60 for women).

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

<sup>02</sup>  No ...please go to question 8.3

8.2 Please tick the reason(s) why you are not currently working. (Please tick all that apply.)

I don't want to work

I am unable to work

I would consider working in the future

I can't afford suitable childcare

I can't find suitable childcare

I need re-training

I need rehabilitation

I can't find suitable full-time work

I can't find suitable part-time work

I would be worse off financially

## Pensions

All the questions in this section are to do with the Social Security Pension scheme (and not private or employer's pensions).

There will be an increasing proportion of pensioners in the population over the next 20 to 30 years. This will put pressure on existing Social Security pension arrangements unless steps are taken in the next few years.

8.3 To counter the impact of our ageing population, what are your views on Social Security taking the following steps?

|  | Agree strongly                      | Agree                               | Disagree                            | Disagree strongly                   | Don't know                          |
|--|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| Reducing the amount of States pension payable                | <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"/> |
| Increasing the age at which the States pension is first paid | <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"/> |
| Increasing the contribution rate to the States pension       | <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"/> |

Currently, Social Security pensions can be paid (at a lower rate) for both men and women from age 63, or at the full rate from age 65. (Some women are still able to claim a pension aged 60).

8.4 What age do you think that people should be able to claim a full rate States pension in the future?

years

8.5 Should a reduced rate States pension be available at a lower age?

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

<sup>02</sup>  No ...please go to question 8.7



8.6 If yes, at what age should a reduced States pension first be available?

years

8.7 Should a higher rate States pension be available, if you claim it at a later age?

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

<sup>02</sup>  No ...please go to question 8.9

8.8 If yes, at what age should the higher rate States pension be available from?

years

8.9 At what age do you currently plan to stop working, or *did* you stop working?

*(If you have retired, please enter the age you retired at. If you're a home-maker and not planning on returning to work, or you are unable to work again for health reasons, please enter the age you were when you stopped paid employment)*

years

8.10 Which of the following would encourage you to work for longer beyond normal pension age?

|   | Major encouragement                 | Some encouragement                  | No difference at all                |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| Extra tax breaks for wages earned beyond normal pension age | <sup>01</sup> <input type="radio"/> | <sup>02</sup> <input type="radio"/> | <sup>03</sup> <input type="radio"/> |
| Opportunities for part-time working or job sharing          | <sup>01</sup> <input type="radio"/> | <sup>02</sup> <input type="radio"/> | <sup>03</sup> <input type="radio"/> |
| Less stressful job  | <sup>01</sup> <input type="radio"/> | <sup>02</sup> <input type="radio"/> | <sup>03</sup> <input type="radio"/> |
| Less physically demanding job                               | <sup>01</sup> <input type="radio"/> | <sup>02</sup> <input type="radio"/> | <sup>03</sup> <input type="radio"/> |
| Higher value pension when you retire later                  | <sup>01</sup> <input type="radio"/> | <sup>02</sup> <input type="radio"/> | <sup>03</sup> <input type="radio"/> |
| Other – please specify _____                                |                                     |                                     |                                     |

8.11 Please indicate how much you agree or disagree with the following:

|   | Agree strongly                      | Agree                               | Neither agree/disagree              | Disagree                            | Disagree strongly                   |
|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| I have a good occupational pension  | <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 have a good private pension or other income to use in my retirement   | <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 worried about my standard of living in retirement  | <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 relying on the States to look after me in retirement   | <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 States should provide a voluntary additional pension scheme for workers who wish to save extra for their retirement   | <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 States should introduce a compulsory additional scheme for workers who do not have an occupational or private pension | <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"/> |

## Long-term care

With an ageing population, there will be more individuals in Jersey needing long-term care in the future.

**8.12** If, in the future or at present, you need to be cared for on a daily basis and you cannot cope with all the activities of daily living by yourself, which of these options would you be most likely to choose? *(Please tick one only)*

- <sup>01</sup>  Being looked after by a relative or friend in your existing home
- <sup>02</sup>  A carer coming to your existing home
- <sup>03</sup>  Being looked after by a relative or friend in sheltered accommodation
- <sup>04</sup>  A carer looking after you in sheltered accommodation
- <sup>05</sup>  Living in a residential or nursing home

**8.13** Should the money for the Island's long-term care needs come from: *(Please tick one only)*

- <sup>01</sup>  The States of Jersey, e.g. through insurance schemes or taxes
- <sup>02</sup>  People themselves, e.g. through insurance schemes, savings or sale of property
- <sup>03</sup>  Don't know

**8.14** Should making sure people pay for the Island's long-term care needs be *(Please tick one only)*

- <sup>01</sup>  Compulsory
- <sup>02</sup>  Optional
- <sup>03</sup>  Don't know

**8.15** Should the money for the Island's long-term care needs be paid for by: *(Please tick one only)*

- <sup>01</sup>  All adults, including pensioners
- <sup>02</sup>  Only adults of working age
- <sup>03</sup>  Don't know

Some countries are introducing long-term care funding schemes. People make **compulsory contributions on a regular basis and, when they have made enough contributions, they are able to access financial assistance to help pay for a carer or residential care.**

**8.16** Please indicate how much you agree or disagree with the following aspects of a **long-term care scheme**

|   | Agree strongly                      | Agree                               | Neither agree/disagree              | Disagree                            | Disagree strongly                   |
|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| People should be supported to stay at home, even if it costs more than moving into a care home                        | <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"/> |
| Contributions to the scheme should be based on <b>total</b> income (including <i>unearned</i> income and pensions)    | <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"/> |
| People should be able to use the scheme to pay towards more expensive care, if they make up the difference themselves | <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

A lodger is defined as a person or persons staying in your property who is paying rent but is not part of your household.

In order to ensure the findings are accurate we need to survey members of the whole population, and would like to send a survey form for lodgers to complete.

9.1 Do you have any lodgers staying in your household? *(Please tick one box only)*

<sup>01</sup>  Yes

If Yes, how many separate lodging households are in your house?

<sup>02</sup>  No

**Thank-you** for taking the time to fill out JASS 2008

Your responses will help us to monitor and improve our performance, and inform policy developments.

The final report will be published around January 2009

Do you have any other comments on the survey?

Please return your completed form using the **pre-paid envelope provided**, or alternatively send by **freepost** to:

Business reply service  
Licence No: J.E. 65  
Statistics Unit  
P.O. Box 140  
Cyril Le Marquand House  
The Parade  
St Helier  
Jersey  
JE1 1AE

Please return your completed form using the **pre-paid envelope provided**, or alternatively send by **freepost** to:

Business reply service  
Licence No: J.E. 65  
Statistics Unit  
P.O. Box 140  
Cyril Le Marquand House  
The Parade  
St Helier  
Jersey  
JE1 1AE

This reference number is needed for our filing system only. It is not used to identify individuals or during analysis.

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