

2011 Highland Council Survey of Performance and Attitudes

Suirbhidh Chomhairle na Gàidhealtachd air Coileanadh is Beachdan 2011

Dear Panel Member

Thank you for agreeing to be involved in the Citizens' Panel.

We conduct a survey like this every year to find out about satisfaction with council services. This helps us to identify where we need to improve.

Last year in addition to our normal question set we asked you important questions about how the council could save money given the challenging economic environment and reductions in public sector funding. Your responses were very helpful in assisting the council set its budget for 2011/12 and I have enclosed a detailed report on the feedback you provided, how it was used and the budget decisions that were made as a result.

The survey this year returns to focus on satisfaction with council services, but also asked important questions on your voter experience, along with some attitudinal questions on equalities and climate change. The survey should take around 30 minutes to complete.

Any information we receive from you will be treated in the strictest confidence and will not be used for any purposes other than this research.

We will take your responses to the questions very seriously.



Yours faithfully

Alistair Dodds, Chief Executive, The Highland Council

If you would like someone to help you complete this questionnaire, or, if you would like to receive it in an alternative format, e.g. large print, Braille, e-mail, audio tape, or suitable language, please telephone:
01463 702006

Please return your completed questionnaire in the reply paid envelope provided by 30th May 2011. NO STAMP IS NECESSARY

THANK YOU FOR TAKING PART IN THIS SURVEY

We will review panel membership in 2012 and replace a third of the panel through random selection.

SECTION A: CONTACT WITH THE COUNCIL

EARRANNA: A' CUR FIOS CHUN NA COMHAIRLE

1 Did you make contact with The Highland Council (in person, by telephone or online) during the period 1 April 2010 - 31 March 2011?

(Please tick one box only)

Yes ₁ *(Continue to question 2)*

No ₂ *(Go to question 7)*

2 Thinking about your most recent contact with The Highland Council, **what was your reason for making contact?**

(Please tick all that apply)

To make a payment (e.g. Rent, Council Tax) ₁

To make an enquiry..... ₂

To request a service..... ₃

To make a complaint..... ₄

To speak to your Councillor..... ₅

Other *(Please specify)*:.....

3 a How did you make this contact?

(Please tick all that apply)

Personal visit to Council Office..... ₁

Personal visit to Service Point..... ₂

By telephone..... ₃

By letter..... ₄

On-line (e.g. Council's website or home computer, e-mail)..... ₅

On-line (through public access computer e.g. school, library)..... ₆

During a visit at home by Council staff..... ₇

Through a Ward or City Forum..... ₈

Other *(Please specify)*:.....

3 b Where you aware you could access the information through the following?

(Please tick one box only for each)

Webcasting of Council meetings Yes ₁

No ₂

Social networking (Facebook, Twitter) Yes ₁

No ₂

3 c Did you make this contact in Gaelic?

(Please tick one box only)

Yes ₁

No ₂

4 If you contacted an office in person:

(Please state)

What town/village was the office located in?.....

What type of office was it (e.g. Service Point, Housing Service)?.....

5 When you last contacted the Council, was your request dealt with by the first person you contacted?

(Please tick one box only)

Yes ₁

No ₂

N/A - I used the website ₃

6 Please give your views on the service you received when you made this contact:

(If a statement does not apply to you, tick N/A for not applicable)

a) For all types of contact	Good	Average	Poor	N/A
Helpfulness of staff.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
How well the staff understood what you wanted.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Overall satisfaction with service given.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b) For personal visits to Council Office/Service Point	Good	Average	Poor	N/A
Waiting time.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Privacy.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Ability to reach the right person.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Facilities for people with a disability.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Opening hours.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
c) For telephone contact	Good	Average	Poor	N/A
Speed with which the telephone was answered.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
How easy was it to get through to someone who could help you.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Opening hours.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
d) For letter / email / leaflet	Good	Average	Poor	N/A
Length of time taken for a response.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Usable format (other language, print size).....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
e) Council's website, www.highland.gov.uk	Good	Average	Poor	N/A
Home page content.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
General content.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Ease of use:				
A to Z.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Navigation.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Search.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Links on Homepage.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Webcasting Council meetings.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Social Networking e.g. Facebook, Twitter.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

7 How satisfied are you with the information you get on The Highland Council services?

(Please tick one box only)

Very Satisfied	Fairly Satisfied	Neither Satisfied /Dissatisfied	Fairly Dissatisfied	Very Dissatisfied
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

8 If all of the following additional methods for receiving information or contacting the Council were available to you, which would you use?

(Please tick all that apply)

Interactive/Digital TV..... 1

Text to and from your mobile..... 2

9 Overall do you find it easy to contact The Highland Council when you need to?

(Please tick one box only)

Yes 1 **No** 2

SECTION B: SATISFACTION WITH SERVICES

EARRANN B: RIARACHAS LE SEIRBHEISEAN

10 The Highland Council provides a wide range of services. Please identify the service(s) you have used over the period 1 April 2010 - 31 March 2011 and express your satisfaction with each by placing a tick in the boxes below.

	Have Not Used Service	Very Satisfied	Fairly Satisfied	Neither Satisfied /Dissatisfied	Fairly Dissatisfied	Very Dissatisfied	
1	Council Service Points	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
2	Payment of Council Tax	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
3	Advice on Benefits	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
4	Swimming pools	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
5	Other sports facilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
6	Museums	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
7	Libraries	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
8	Public Parks and other open spaces	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
9	Countryside ranger service	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
10	Walking routes, e.g. Great Glen Way	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
11	Cycling paths	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
12	Planning for future land use (Local Plan)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
13	Planning applications and building warrants	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
14	Winter road maintenance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
15	Road repairs and pot holes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
16	Street cleaning	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
17	Street lighting	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
18	Pavement maintenance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
19	Dealing with flooding	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
20	Refuse/bin collection	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
21	Recycling facilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
22	Economic development / Business Gateway	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
23	Environmental Health Service	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
24	Trading Standards	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
25	Public conveniences	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
26	Registrars for Births, Deaths and Marriages	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
27	Housing information and advice	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
28	Burials and cremations	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
29	Pre-school services	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
30	Primary education	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
31	School transport	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
32	Secondary education	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
33	Community learning / adult education	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

		Have Not Used Service	Very Satisfied	Fairly Satisfied	Neither Satisfied /Dissatisfied	Fairly Dissatisfied	Very Dissatisfied
34	Home care services	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
35	Residential homes for disabled / elderly people	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
36	Community Occupational Therapy	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
37	Services to reduce offending	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
38	Breakfast and After School Clubs	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
39	School meals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
40	Services to protect children from harm	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
41	Services to protect adults at risk of harm	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

11 From the full list shown above and on the previous page, please indicate, in order of preference, which **five** services are **most important** to you.

(e.g. if Primary education is most important to you, write '30' in the first box, etc)

1st choice 2nd choice 3rd choice 4th choice 5th choice

12 Overall, are you satisfied with the services The Highland Council provides?

(Please tick one box only)

Yes 1 No 2

13 Overall, are you more or less satisfied with The Highland Council services than you were last year?

(Please tick one box only)

More Satisfied 1 Less Satisfied 2 About the Same 3

14 If you have made a complaint about the Council in the past year - how satisfied were you with how the Council handled your most recent complaint?

(Please tick one box only)

Very Satisfied 1 Fairly Satisfied 2 Neither Satisfied /Dissatisfied 3 Fairly Dissatisfied 4 Very Dissatisfied 5 No Complaint Made 6

15 If you were dissatisfied with how a complaint was handled, please identify the reasons by selecting all that apply

(Please tick all that apply)

Timescale 1 Quality of Response 2 Outcome 3 Other 4

If other, please detail:

16 Please give your views of the Council against the qualities shown below.

(Please indicate to what extent you agree or disagree with the following statements)

The Council:		Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
1	Maintains good quality local services.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2	Listens to local people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3	Involves people in how it spends money.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4	Treats all residents fairly.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5	Tells local people what it is doing.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
6	Provides value for money.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
7	Is efficient.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
8	Is helpful.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
9	Is approachable.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
10	Is a fair employer.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
11	Is aware of people's needs.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
12	Represents your views.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
13	Is environmentally friendly.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

17 From the list above, please indicate which are most important:

(From the full list on the above page, please indicate in order of preference, which five qualities are most important to you? e.g. if to listen to local people is most important to you put a 2 in the 1st box and so on)

1st choice 2nd choice 3rd choice 4th choice 5th choice

18 Thinking generally about what you expect from The Highland Council, would you say the Council:

(Please tick one box only)

Greatly exceeds your expectations

1

Slightly exceeds your expectations

2

Is about what you expect

3

Falls slightly short of your expectations

4

Falls a long way short of your expectations

5

19 The Council is committed to providing information on its performance and wants to provide this in the best format possible. From the list below which are your preferred means of communication?

(Please tick all that apply)

- Written information from Service Points and other offices..... 1
- Published on the Council's web pages..... 2
- Included with the booklet received with council tax bill..... 3
- A separate newsletter..... 4
- As a newspaper insert..... 5
- Provided directly from the service..... 6
- Through contact with your Councillor..... 7
- Through Ward or City Forums..... 8
- Leaflets and notices in council facilities..... 9
- By email..... 10

20 If you are a current Council tenant please indicate the extent to which you agree or disagree with the following statements about the Council as your landlord. If you are not a Council tenant please go to question 22.

(Please indicate to what extent you agree or disagree with the following statements)

The Council:	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
Is able to help you if you have a problem.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Maintains its homes in good condition.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Is an efficient landlord.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Cares about its tenants.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Is good at helping tenants with rent arrears sort out their problems.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Listens to its tenants.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Gives good value for money for the rent you pay.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Will help you sort out neighbour problems.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Has enough money to do a good job.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

21 Do you think that housing services are:

(Please tick one box only)

- Improving..... 1
- Staying the same..... 2
- Getting worse..... 3

SECTION C: COMMUNITY LIFE EARRANN C: BEATHA COIMHEARSNACHD

22 To what extent does the area where you live provide you with a sense of belonging to a community?

(Please tick one box only)

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| To a great extent | To some extent | Not really | Not at all |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 |

23 How involved are you in the life of your community?

(Please tick one box only)

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| Very involved | Fairly involved | Not really | Not at all |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 |

24 To what extent do you feel your community is accepting of people coming to live here from outside the Highlands?

(Please tick one box only)

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| To a great extent | To some extent | Not really | Not at all |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 |

25 To what extent do you feel "well disposed" to the Gaelic language?

(Please tick one box only)

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| To a great extent | To some extent | Not really | Not at all |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 |

26 To what extent does your community feel like a safe place to be in for you, your family and others?

(Please tick one box for each line)

	To a great extent	To some extent	Not really	Not at all
You.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Your family.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Older people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Parents & toddlers.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Young children.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Teenagers (girls).....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Teenagers (boys).....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Adults at risk of harm.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
New residents to the area.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Ethnic minorities.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

27 To what extent are you worried about any of the following activities in your neighbourhood?

(Please tick one box for each line)

	To a great extent	To some extent	Not really	Not at all
Vandalism, graffiti or other damage to property.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Child abuse.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Abuse of adults at risk.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Noisy neighbours or regular loud parties.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Speeding cars.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Anti-social behaviour by young people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Violence against women.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Dog fouling/littering.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Drug mis-use or dealing.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Alcohol misuse.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

28 Taking everything into account, how do you rate the area within 15 minutes walk of your home as a place to live?

(Please tick one box only)

A very safe area	A fairly safe area	Rather unsafe area	A very unsafe area	No Opinion
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

29 How would you rate your community in terms of the following amenities?

(Please tick one box for each line)

	Very Good	Good	Acceptable	Poor
Transport.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Health care.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Shops.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Schools.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Leisure facilities/events.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Availability of housing.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Other services.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

30 Thinking now about the neighbourhood or community you live in, how would you rate it as a place to live?

(Please tick one box only)

Very Good
 1

Fairly Good
 2

Fairly Poor
 3

Very Poor
 4

No Opinion
 5

31 Have you contacted your Community Council, as opposed to The Highland Council, in the past year?

Yes 1 *(Go to question 33)*

No 2 *(Continue to question 32 and then 34)*

32 Please state the reason why you have not made contact:

(Please tick one box only)

I don't know what Community Councils do..... 1

I had no need to contact them..... 2

I don't know how to contact the Community Council..... 3

33 Please state the reason why you made contact:

(Please tick one box only)

A planning and development issue..... 1

About a change in local services..... 2

Improving the amenities of your area..... 3

Other *(Please specify)*:.....

SECTION D: VOLUNTEERING EARRANN D: GU SAOR-THOILEACH

34 Do you currently volunteer in any capacity?

Yes 1 *(Please go to question 37)* **No** 2 *(Please continue to questions 35 & 36, then go to question 42)*

35 No - What best describes your reasons for not volunteering?

(Please tick all that apply)

Do not want to..... 1

Not sure how to..... 2

Lack of time..... 3

Disclosure requirements..... 4

Other *(Please specify)*:.....

.....
.....
.....

36 What do you think would encourage you to undertake work or activities on a voluntary basis?

(Please tick all that apply)

- Information about local opportunities 1
- Information about the commitment required 2
- If training and support were available 3
- If I was certain that it would not affect my benefits 4
- If I was sure I would not be out of pocket 5
- If someone I knew volunteered with me 6
- If there were more people like me volunteering 7
- If I had more confidence 8
- If I thought I could help others 9
- If someone asked me to do something 10
- If it would improve my skills 11
- If it helped me gain qualifications 12
- If it would improve my career/job prospects 13
- If it fitted with my other commitments 14
- If it fitted with my interests and skills 15
- If it was good fun 16
- If I could volunteer when I felt like it 17

37 Yes - How many voluntary activities are you involved in?

(Please tick one box only)

- | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|
| ONE | TWO | THREE | OVER THREE |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 |

38 In what capacity do you volunteer?

(Please tick all that apply)

- In your community 1
- In your local school 2
- For a voluntary organisation, charity or community group 3
- In your local hospital / care home 4
- For your local church / religious group 5
- As part of management committee/Board 6
- Other *(Please specify)*:

39 Is your voluntary work with:

(Please tick all that apply)

- A local group e.g. Scouts, Youth Club, Lunch Club 1
- Older people 2
- Children and younger people 3
- People with a disability 4
- An emergency service 5
- A social enterprise, community company or community trust 6
- Other *(Please specify)*:

40 How frequently do you usually volunteer?

(Please tick one box only)

- Every day..... 1
- Several times a week..... 2
- About once a week..... 3
- Several times a month..... 4
- About once a month..... 5
- Several times a year..... 6
- Once a year..... 7

41 If you are a volunteer, to what extent do you think The Highland Council should support voluntary organisations and their work?

(Please tick one box only)

- | | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| To a great extent | To some extent | Not really | Not at all | Don't know |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 |

SECTION E: VOTER EXPERIENCE
EARRANN E: EÒLAS BHÒTAIDH

In the United Kingdom people have the right to say who governs them. They therefore have a right to vote (or not to vote) in secret, for who they want, in a way that is easy for them, and to have their vote counted. The Electoral Commission sets standards to be achieved in the running of elections. We are seeking your views on your awareness of the elections on May 5th 2011, your satisfaction with information provided by the Council and the arrangements the Council made for voting. This will help us to plan for improvements.

42 Do you wish to comment on your voter experience?

- Yes 1 No 2 *(If no please continue to question 50)*

43 Other than receiving your polling card or postal vote, how aware do you feel you were made of the opportunity to vote at the Scottish Parliamentary Election and the UK Referendum on 5th May 2011?

(Please tick one box only)

- Very aware..... 1
- Quite aware..... 2
- Aware..... 3
- Not very aware..... 4
- Not aware..... 5

44 What sources of information helped to raise your awareness?

(Please tick all that apply)

- Electoral Commission website 1
- Council website 2
- Other website/internet 3
- Newspapers 4
- TV 5
- Radio 6
- Council leaflet 7
- Candidate leaflets 8
- Public meetings held by candidates 9
- Candidate canvassing 10
- Receipt of polling card or postal vote 11
- Telephoning the Council Service Centre 12
- Council office/building 13
- Other – please state
-
-

45 Method of voting, how did you vote?

(Please tick one box only)

- At a polling station 1
- By postal vote 2
- By proxy vote 3
- Assisted to vote 4

46 How satisfied were you with the information provided by the Council?

(Please express your satisfaction by placing a tick in the boxes below)

	Have Not Used Service	Very Satisfied	Fairly Satisfied	Neither Satisfied /Dissatisfied	Fairly Dissatisfied	Very Dissatisfied
Council Leaflet.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Council Website.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Telephoning the Council.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
At the Polling Station.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Dealing with complaints.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

47 If you voted in person at a polling station, how satisfied were you with the following arrangements?

(Please express your satisfaction by placing a tick in the boxes below)

	Very Satisfied	Fairly Satisfied	Neither Satisfied /Dissatisfied	Fairly Dissatisfied	Very Dissatisfied
Signage outside the polling station.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Accessibility of the building.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Signage inside the polling station.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Privacy to vote.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Assistance from polling staff.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Length of time taken to vote.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Suitability of venue.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

48 If you voted at a polling station or by postal vote, how easy was the process to understand?

(Please tick all that apply)

- Very easy to understand..... 1
- Easy to understand..... 2
- It was ok..... 3
- Difficult to understand..... 4
- Very difficult to understand..... 5

49 If you found that the process was not easy to understand please tell us why, otherwise please go to Q50.

(Please tick all that apply)

- The number of ballot papers..... 1
- The information on the ballot paper..... 2
- Guidance notes for postal voters..... 3
- Guidance at the polling station..... 4
- Too much information..... 5

SECTION F: ATTITUDES TO EQUALITIES & DISCRIMINATION

EARRANN F: BEACHDAN A THAOBH CHO-IONANNACHDAN & LETHBHREITH

As a public body, the Council has a duty to give regard to the need to:

- eliminate discrimination, harassment and victimisation;
- advance equality of opportunity; and
- foster good relations.

We have an interest in understanding public attitudes towards discrimination in Highland and would like to explore attitudes to discrimination in relation to the equality characteristics protected by anti-discrimination legislation in Great Britain: age, disability, gender, race, religion or belief, pregnancy and maternity, gender reassignment, marriage and civil partnership, and sexual orientation.

50 Have the attempts to give equal opportunities to the following groups in Scotland gone too far or not gone far enough?

(Please tick one box for each group)

Groups	Gone much too far	Gone too far	About right	Not gone far enough	Not gone nearly far enough
Women.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Black and Asian people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Gay men and lesbians.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Disabled people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Older people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Young people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

51 Which statement below comes closest to your own view?

(Please tick one box only)

- 1 Highland should do everything it can to get rid of all kinds of prejudice..... 1
- 2 Sometimes there is good reason for people to be prejudiced against certain groups..... 2

52 How much do you agree or disagree that the Highlands would begin to lose its identity if more people from the groups below came to live in the area?

(Please tick one box for each group)

Groups	Agree strongly	Agree	Neither agree not disagree	Disagree	Disagree strongly
Muslim.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Eastern European (for example Poland or Latvia).....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Black and Asian people.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

53 Some people say they would be happy if a close relative of theirs married or formed a long-term relationship with someone from particular groups while others say they would be unhappy about this, even if the couple themselves were happy.

How would you feel if a close relative of yours married, or is in a civil partnership, or formed a long-term relationship with someone from the groups mentioned below?

(Please tick one box for each group)

Groups	Very happy	Happy	Neither happy nor unhappy	Unhappy	Very unhappy	(It depends)
Black and Asian.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Muslim.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Hindu.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Jewish.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Christian.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Someone who experiences depression from time to time.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Gypsy/Traveller.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Someone of the same sex as themselves.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
Someone who cross-dresses in public.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

54 People from outside Britain who come to live in Highland make it a better place?

(Please tick one box only)

Agree strongly	Agree	Neither agree or disagree	Disagree	Disagree strongly
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

55 Would you rather live in an area...

(Please tick one box only)

...with lots of different kinds of people?..... 1

or

...where most people are similar to you?..... 2

56 Please tick one box for each statement below to show how much you agree or disagree with it.

(Please tick **one** box on **each** line)

	Agree strongly	Agree	Neither agree nor disagree	Disagree	Disagree strongly	Can't choose
a) Gay or lesbian couples should have the right to marry one another if they want.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
b) Business premises should be forced to make access easier for disabled people, even if this leads to higher prices.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
c) People from ethnic minorities take jobs away from other people in the Highlands.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
d) People who come here from Eastern Europe take jobs away from other people in the Highlands.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
e) People who come here from outside Britain bring skills and diversity to the workforce in the Highlands.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

57 Do you personally know anyone from the following groups?

(Please tick one box for each group)

Groups	No	Yes - a member of my family	Yes - a friend I know fairly well	Yes - someone I do not know very well	Yes - someone at work	Yes - someone else	Not sure
Physical disability.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Learning disability or difficulty.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Different racial or ethnic background to you.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Gay or lesbian.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
People who use British Sign Language (BSL).....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Muslim.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
Affected by mental health problem....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

SECTION G: CLIMATE CHANGE EARRANN G: ATHARRACHADH AIMSIR

The Climate Change (Scotland) Act 2009 places a duty on The Highland Council to tackle this issue. The Council is expected to exercise its functions:

- in the way best calculated to contribute to the delivery of the climate change targets set out in the Act;
- in the way best calculated to help deliver any climate change programme laid before the Scottish Parliament;
- in a way that the Council considers is most sustainable.

We want to understand public attitudes to climate change.

58 Which of these statements about climate change, if any, comes closest to your own view?

(Please tick all that apply)

- Climate change is an immediate and urgent problem..... 1
- Climate change is more of a problem for the future..... 2
- Climate change is not really a problem..... 3
- I'm still not convinced that climate change is happening..... 4
- None of these..... 5
- Don't know..... 6

59 There are many things that The Highland Council can do to help tackle climate change. Which actions do you feel are the most important?

(Please rank in order of importance - 1 most important to 7 least important)

- Energy efficiency measures in Council buildings and schools
- Energy efficient street lighting.....
- Installing renewable energy technologies in Council Buildings and schools.....
- Reduce, Re-use and Recycle waste.....
- Promote sustainable transport and travel options.....
- Education and awareness raising.....
- Promoting renewable energy in the Highlands.....

60 There are many things that individuals can do to tackle climate change. Please give us your view on the actions below.

(Please indicate how often you undertake the actions below)

	I do this often	I do this now and then	I never do this but should	I would do this if I had more support	I can't do this	I won't do this
1 Reduce car use by using public transport	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
2 Reduce car use by car sharing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
3 Reduce car use by walking or cycling	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
4 Fly less	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
5 Avoid travel (e.g. use internet or telephone)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
6 Reduce, Re-use and Recycle waste	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
7 Compost food waste	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
8 Buy local products	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
9 Grow your own food	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
10 Reduce energy use in the home (e.g. energy efficient light bulbs, insulation)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
11 Install renewable energy technologies in the home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
12 Conserve water in the home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

61 One of the impacts of climate change in the future could be an increase in the frequency and severity of weather events in the Highlands. Considering current responses to such weather events have you been adversely affected by a weather event in the past three years?

Yes 1 No 2

62 What type of severe weather event adversely affected you?

(Please tick all that apply)

- High winds or storms 1
- Flooding 2
- Heavy snow 3
- Severe frost 4
- Heat wave/drought 5
- Fog or poor visibility 6

63 Did The Highland Council assist you to deal with the impact of this event?

(Please tick one box only)

- Yes, I received assistance without requesting it 1
- Yes, I received assistance following request to the Council 2
- No, I did not require assistance 3
- No, I did not receive assistance although requested it 4

64 Overall, would you say that you were satisfied with the response you received from the Council?

Yes 1 No 2

SECTION H: ABOUT YOU

EARRANN H: THU FHÈIN

65 How long have you lived in The Highland Council area?

(Please tick one box only)

Less than 1 year	1-2 years	3-5 years	5-10 years	Over 10 years
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

66 Which of these best applies to you?

(Please tick one box only)

Working for a single employer full-time	<input type="checkbox"/> 1	Retired	<input type="checkbox"/> 7
Working for a single employer part-time	<input type="checkbox"/> 2	Looking after the home or family	<input type="checkbox"/> 8
Working for more than one employer	<input type="checkbox"/> 3	In full-time education	<input type="checkbox"/> 9
Self-employed	<input type="checkbox"/> 4	Unable to work - disability	<input type="checkbox"/> 10
Unable to work - long-term sickness	<input type="checkbox"/> 5	Carer	<input type="checkbox"/> 11
Unemployed	<input type="checkbox"/> 6		

67 Which of the following best describes your current housing situation?

(Please tick one box only)

Own home / mortgage	<input type="checkbox"/> 1	House comes with job	<input type="checkbox"/> 4
Rent from a housing association	<input type="checkbox"/> 2	Private rented	<input type="checkbox"/> 5
Rent from the Council	<input type="checkbox"/> 3	Living with parents	<input type="checkbox"/> 6

68 Gender

(Please tick one box only)

Male 1 Female 2

69 Age

(Please tick one box only)

18 - 24 1 25 - 34 2 35 - 44 3 45 - 54 4 55 - 64 5
 65 - 74 6 Over 75 7

70 Disability

Do you consider yourself to have a disability (i.e. a physical or mental impairment which has a substantial and long-term adverse effect upon your ability to carry out normal day-to-day activities)?

(Please tick one box only)

Yes 1 No 2

71 Families with children

Are there school age children in your household?

(Please tick one box only)

Yes 1 No 2

72 How would you describe your ethnicity?

(Please tick one box from one section only)

A WHITE

- Scottish 1 English 2 Welsh 3
- Irish 4 Northern Irish 5 British 6
- Gypsy/Traveller 7 Polish 8
- Other *(please state)*9

B MIXED or MULTIPLE ETHNIC GROUPS

- Any Mixed or multiple ethnic group *(please state)*10

C ASIAN, ASIAN SCOTTISH or ASIAN BRITISH

- Pakistani, Pakistani Scottish or Pakistani British 11
- Indian, Indian Scottish or Indian British 12
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British 13
- Chinese, Chinese Scottish or Chinese British 14
- Other *(please state)*15

D AFRICAN, CARIBBEAN or BLACK

- African, African Scottish or African British 16
- Caribbean. Caribbean Scottish or Caribbean British 17
- Black, Black Scottish or Black British 18
- Other *(please state)*19

E OTHER ETHNIC BACKGROUND

- Other *(please state)*20

73 How have you found being a panel member?

(Please tick one box for each)

- My views have been listened to Yes 1 No 2
- Useful Yes 1 No 2
- Time consuming Yes 1 No 2
- Worthwhile Yes 1 No 2

74 Would you like to complete future surveys electronically?

(Please tick one box only)

- Yes 1 No 2

If yes please provide your email address below (your anonymity will be protected):

Email address