

CHANGEX BURREN

Community Wellbeing Questionnaire

Important: Please read all questions carefully. Where applicable, please **circle** the appropriate answer. If there are any questions you do not want to answer, simply move on to the next one. On behalf of ChangeX Burren, we would like to thank you for taking the time to complete this questionnaire.

1. On a scale of 1-10 how satisfied are you with your local area as a place to live? (please circle the appropriate number)

<i>Very Dissatisfied</i>		—————→						<i>Very Satisfied</i>	
1	2	3	4	5	6	7	8	9	10

2. List three things that you are satisfied with in your local area:

1 _____

2 _____

3 _____

3. List three things that you are dissatisfied with in your local area:

1 _____

2 _____

3 _____

4. How well does your local community cater for:

	<i>Very Poorly</i>	<i>Poorly</i>	<i>Fair</i>	<i>Well</i>	<i>Very Well</i>	<i>Don't know</i>
Children	1	2	3	4	5	6
Teenagers and young adults in their 20s	1	2	3	4	5	6
People in their 30s, 40s and 50s	1	2	3	4	5	6
People in their 60s and older	1	2	3	4	5	6

5. How would you rate the adequacy of the following in your local community?

	<i>Very Unsatisfactory</i>	<i>Unsatisfactory</i>	<i>Fair only</i>	<i>Satisfactory</i>	<i>Very Satisfactory</i>	<i>Don't know</i>
General Health Services	1	2	3	4	5	6
Special Needs Services	1	2	3	4	5	6
Mental Health Services	1	2	3	4	5	6
Childcare Services	1	2	3	4	5	6
Schools	1	2	3	4	5	6
Recreational Activities for Youth	1	2	3	4	5	6
Recreational Activities for Adults	1	2	3	4	5	6
Active Retirement Groups/ Organisations	1	2	3	4	5	6
Further Education/ Adult Education Opportunities	1	2	3	4	5	6
Transport Services	1	2	3	4	5	6
Political Representation and Support	1	2	3	4	5	6

6. Do you agree or disagree with the following statements (please circle the appropriate number on each line).

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
I can influence decisions that affect my local area	1	2	3	4	5
I am not restricted in any way from living the life I want to live	1	2	3	4	5
I have trust in my local elected officials	1	2	3	4	5
I trust most people living in my local area	1	2	3	4	5
People from all different backgrounds (social groups, race etc.) get on well in my local area	1	2	3	4	5
There are equal opportunities for everyone in this area	1	2	3	4	5

7. Do you agree or disagree with the following statements (please circle the appropriate number on each line)

	<i>Strongly Disagree</i>	<i>Disagree</i>	<i>Neither Agree nor Disagree</i>	<i>Agree</i>	<i>Strongly Agree</i>
I am proud to tell people I live here	1	2	3	4	5
I feel that I belong to this area	1	2	3	4	5
I feel I have the support of friends and/or neighbours in this area	1	2	3	4	5
I have a strong family network here	1	2	3	4	5
I feel safe living here	1	2	3	4	5
My local heritage and culture is very important to me	1	2	3	4	5
I would like to be living in this area three years from now	1	2	3	4	5

8. Do you participate in the activities of any of the following organisations?

	<i>Never</i>	<i>Occasionally</i>	<i>Regularly</i>
Sports clubs (Parish, GAA, Golf, Other), gym, exercise classes	1	2	3
Political parties, trade unions	1	2	3
Environmental groups, sustainability groups	1	2	3
Landscape or heritage groups	1	2	3
Parent-teacher associations, tenants groups, residents groups, neighbourhood watch, youth groups, other community action groups	1	2	3
Church or other religious groups	1	2	3
Evening classes, arts or music groups, education activities	1	2	3
Social clubs (e.g. mother & toddler group, rotary club, women/men's groups, elderly group)	1	2	3
Voluntary work (charitable or voluntary organisations (e.g. collecting for charity, helping the sick, elderly))	1	2	3
Other, please specify:			

9. On a scale of 1-10 how satisfied you are with each of the following items (please circle one number on each line).

	<i>Very Dissatisfied</i>	—————→								<i>Very Satisfied</i>
	1	2	3	4	5	6	7	8	9	10
Your current job	1	2	3	4	5	6	7	8	9	10
Your income	1	2	3	4	5	6	7	8	9	10
Your education	1	2	3	4	5	6	7	8	9	10
Your accommodation	1	2	3	4	5	6	7	8	9	10
Your community	1	2	3	4	5	6	7	8	9	10
Your social life	1	2	3	4	5	6	7	8	9	10
Your health	1	2	3	4	5	6	7	8	9	10
Your family life	1	2	3	4	5	6	7	8	9	10
Your current standard of living	1	2	3	4	5	6	7	8	9	10
Your surrounding environment	1	2	3	4	5	6	7	8	9	10

10. How would you define wellbeing? Please list a maximum of 5 key words or phrases.

11. What is it that contributes to your wellbeing? Please list three main factors.

12. On a scale of 1-10, how would you rate your own personal wellbeing?

<i>Very Poor</i>	—————→								<i>Excellent</i>
1	2	3	4	5	6	7	8	9	10

13. How do you feel (if at all) your wellbeing could be improved?

14. Would you be willing to fill in a similar questionnaire next year?

Yes

No

15. Have you any additional comments?

<p>16. Your townland: _____</p>	<p>22. Do you share your accommodation with:</p> <p>Family <input type="checkbox"/></p> <p>Live alone <input type="checkbox"/></p> <p>Share with people <input type="checkbox"/></p>
<p>17. Are you:</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p>	<p>23. How many people are in your household?</p> <p>_____</p>
<p>18. What age category do you fall into:</p> <p>18-24 <input type="checkbox"/> 55-64 <input type="checkbox"/></p> <p>25-34 <input type="checkbox"/> 65-74 <input type="checkbox"/></p> <p>35-44 <input type="checkbox"/> 75+ <input type="checkbox"/></p> <p>45-54 <input type="checkbox"/></p>	<p>24. Is your home:</p> <p>Privately owned <input type="checkbox"/></p> <p>Social/Council housing <input type="checkbox"/></p> <p>Privately rented <input type="checkbox"/></p> <p>Other (please specify) <input type="checkbox"/></p> <p>_____</p>
<p>19. Are you:</p> <p>Single <input type="checkbox"/></p> <p>Married <input type="checkbox"/></p> <p>In a relationship <input type="checkbox"/></p> <p>Separated <input type="checkbox"/></p> <p>Divorced <input type="checkbox"/></p> <p>Widowed <input type="checkbox"/></p>	<p>25. Employment Status:</p> <p>Working full time (≥ 30 hrs) <input type="checkbox"/></p> <p>Working part time (< 30hrs) <input type="checkbox"/></p> <p>Self employed (incl. farmers) <input type="checkbox"/></p> <p>Unemployed <input type="checkbox"/></p> <p>Home duties <input type="checkbox"/></p> <p>Retired <input type="checkbox"/></p> <p>Student <input type="checkbox"/></p>
<p>20. Nationality?</p> <p>_____</p>	<p>26. Highest level of education completed:</p> <p>Primary (incl. no formal education) <input type="checkbox"/></p> <p>Secondary (Junior/Leaving Cert.) <input type="checkbox"/></p> <p>Third level (non-degree) <input type="checkbox"/></p> <p>Third level (degree qualification) <input type="checkbox"/></p>
<p>21. First language?</p> <p>_____</p>	

Thank you again for taking the time to complete this questionnaire.