



Have your say on our Youth Activities Offer

Survey for the **wider community**, including **parents and carers**, and **community and statutory organisations**

At South Gloucestershire Council, as part of our youth work offer, we aim to provide all young people with a range of things to do, places to go and people to talk to in their own time. It's been three years since we arranged the locations, types of activities and who provides them, so before we re-commission our youth activities in 2024 we want to get a better picture of which activities are needed in South Gloucestershire, where they should be, and how they should be provided with our available resources.

You can have your say by completing this survey and returning it by Freepost to the address at the end of the survey by **Tuesday 23rd August 2022**

Please note: this survey is NOT for children and young people or current or potential providers of positive activities ; specific surveys for these groups can be found in libraries, one stop shops or at: consultations.southglos.gov.uk/consult.ti/PAYP2022

Are you completing this survey as:

- | | |
|---|---|
| <input type="checkbox"/> A young person | <input type="checkbox"/> On behalf of a business, community or statutory organisation |
| <input type="checkbox"/> A parent or carer of someone aged 0 - 18 years old | <input type="checkbox"/> Local resident |
| <input type="checkbox"/> An Individual in a professional capacity | <input type="checkbox"/> Other / none of the above |
| <input type="checkbox"/> A current or potential service provider | |

Nature of professional capacity (if applicable):

Name of organisation (if applicable):

To what extent do you agree or disagree that young people in your local area are **easily able to access** the following activities if they want to:

	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree
Physical activities outside (e.g. team sports, tennis, running, skateboarding)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical activities indoors (e.g. dancing, yoga, bouldering, badminton, boxing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Creative activities (e.g. music, performing in theatre, writing, painting, cooking, film-making, photography, vlogging)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Outdoor / countryside pursuits (e.g. hiking, camping, mountain biking, riding)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social activities (e.g. meeting friends, seeing films, online gaming, board games)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Volunteering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth centre / clubs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

To what extent do you agree or disagree that children and young people in your local area currently have enough access to the following:

	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree
Personal skills (e.g. improving self-confidence, communication, self-awareness, problem-solving, teamwork)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Practical life skills (e.g. cooking, money management, becoming independent)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Healthy lifestyle (e.g. healthy eating, sexual health, drugs and alcohol)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional health and wellbeing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Work-related activities (e.g. work tasters, workplace behaviour, CV and interview skills)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

To what extent do you agree or disagree that the current range of activities successfully...

	Strongly agree	Tend to agree	Neither agree nor disagree	Tend to disagree	Strongly disagree
Connects young people with their communities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Promotes the positive physical, mental and emotional wellbeing of young people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Offer young people opportunities in safe environments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improves the personal and social development of young people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helps those at risk of dropping out of learning or not achieving their full potential	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Raises young people's aspirations, builds their resilience and informs their decisions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Future delivery of youth activities

Which of the following factors are you aware of stopping or discouraging young people from taking part in youth or play activities in your area?

- | | |
|--|--|
| <input type="checkbox"/> No quick or easy way to get there or back | <input type="checkbox"/> Not interested in the activities |
| <input type="checkbox"/> No safe way to get there and back | <input type="checkbox"/> Cost |
| <input type="checkbox"/> Caring duties for family member(s) | <input type="checkbox"/> Staff being unfriendly or not welcoming |
| <input type="checkbox"/> Fear of bullying | <input type="checkbox"/> None of the above/ nothing |
| <input type="checkbox"/> Feeling of not fitting in | <input type="checkbox"/> Other, please list as many other reasons as you like: |

Are you aware of any of the following groups of young people which require specific activities to be provided, above what is already offered?

- Female
- Male
- Specific age group(s) within under-18s; *please specify below*
- Specific ethnic group(s); *please specify below*
- Religion or belief; *please specify below*
- LGBTQ+
- Children in care
- Young people experiencing mental health difficulties; *please specify below*
- Young people with disabilities or learning difficulties; *please specify below*
- Young carers
- Young people at risk of homelessness
- Young people who are engaged in the justice system
- Young people not in education, employment or training
- No, I'm not aware of any of these groups needing additional activity provision

Please tell us more about any of the groups you have selected, especially what we could provide for them:

About You

This section is really important as it helps us to gain a better understanding of the needs of different people, and how they could be affected by any changes. This information will remain confidential and will be used for analysis purposes only. Your personal information will not be published and individuals will not be identified.

If you are responding on behalf of an organisation or in a professional capacity you do not need to answer these questions.

Please tick if you are any of the following:

- South Gloucestershire Council employee
- Current provider of youth services
- Previous or potential provider of youth services
- Town or Parish Council
- A school or college employee
- Youth worker or volunteer
- None of the above

Please tell us your full postcode:

Your gender:

- Female
- Male
- Prefer not to say

Your age:

- 18 or under
- 19 - 24
- 25 - 44
- 45 - 64
- 65 - 74
- Over 75
- Prefer not to say

Your age:

- Under 13
- 13 - 15
- 16-18
- Over 18
- Prefer not to say

Your ethnicity:

- | | |
|---|---|
| <input type="checkbox"/> Arab/Arab British | <input type="checkbox"/> Mixed/Multiple Ethnic Groups – White & Asian |
| <input type="checkbox"/> Asian/Asian British – Bangladeshi | <input type="checkbox"/> Mixed/Multiple Ethnic Groups – White & Black African |
| <input type="checkbox"/> Asian/Asian British – Indian | <input type="checkbox"/> Mixed/Multiple Ethnic Groups – White & Black Caribbean |
| <input type="checkbox"/> Asian/Asian British – Pakistani | <input type="checkbox"/> Mixed/Multiple Ethnic Groups – Other (please state) |
| <input type="checkbox"/> Asian/Asian British – Chinese | <input type="checkbox"/> White – English/Welsh/Scottish/Northern Irish/British |
| <input type="checkbox"/> Asian/Asian British – Other (please state) | <input type="checkbox"/> White – Irish |
| <input type="checkbox"/> Black/African/Caribbean/Black British – African | <input type="checkbox"/> White – Other (please state) |
| <input type="checkbox"/> Black/African/Caribbean/Black British – Caribbean | <input type="checkbox"/> Other ethnic group (please state) |
| <input type="checkbox"/> Black/African/Caribbean/Black British – Other (please state) | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Gypsy or Traveller of Irish Heritage | |

Other, please tell us:

Are you currently or have you previously served in the UK Armed Forces?

- No
 Yes - currently serving
 Yes - previously served in Regular Armed Forces
 Yes - previously served in Reserve Armed Forces

Do you consider yourself to be disabled?

- | | |
|---|--|
| <input type="checkbox"/> No | <input type="checkbox"/> Yes - Mental health condition, such as depression, anxiety or schizophrenia |
| <input type="checkbox"/> Prefer not to say | <input type="checkbox"/> Yes - Learning disability/difficulty (such as Down's Syndrome, dyslexia, dyspraxia) or cognitive impairment (such as autism spectrum condition) |
| <input type="checkbox"/> Yes - Physical impairment, such as difficulty using arms or mobility issues which may mean using a wheelchair or crutches | <input type="checkbox"/> Yes - Long standing illness or health condition, such as cancer, HIV, diabetes, chronic heart disease or epilepsy |
| <input type="checkbox"/> Yes - Sensory impairment such as being blind/ having serious visual impairment, or being deaf/ having a serious hearing impairment | <input type="checkbox"/> Yes - Other (please state) |

If other, please tell us:

Sexual Orientation:

- | | | |
|--|--|--|
| <input type="checkbox"/> Bisexual | <input type="checkbox"/> Heterosexual / Straight | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Gay / Lesbian | <input type="checkbox"/> Other | |

Do you identify as transgender?

- Yes No Prefer not to say

Religion/ belief

- | | | |
|------------------------------------|---------------------------------|--|
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> Jewish | <input type="checkbox"/> Any other religion (please state below) |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Muslim | <input type="checkbox"/> No religion |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Sikh | <input type="checkbox"/> Prefer not to say |

If other, please tell us:

Do you have any children under the age of 18 living in your household?

- No Skip the next 2 questions Yes

Which of the following age groups do the children in your household fall into:

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Under 4 | <input type="checkbox"/> 13 to 15 |
| <input type="checkbox"/> 5 to 10 | <input type="checkbox"/> 16 to 18 |
| <input type="checkbox"/> 11 to 12 | <input type="checkbox"/> Not applicable |

Do any of the children you care for face any of the following challenges?

- | | |
|---|---|
| <input type="checkbox"/> Physical impairment, such as difficulty using arms or mobility issues which may mean using a wheelchair or crutches | <input type="checkbox"/> Learning disability/difficulty (such as Down's Syndrome, dyslexia, dyspraxia) or cognitive impairment (such as autistic spectrum disorder) |
| <input type="checkbox"/> Sensory impairment such as being blind/ having serious visual impairment, or being deaf/ having a serious hearing impairment | <input type="checkbox"/> Long standing illness or health condition (such as diabetes or epilepsy) |
| <input type="checkbox"/> Mental health condition, such as depression, anxiety or schizophrenia | <input type="checkbox"/> No/ none of the above |
| | <input type="checkbox"/> Prefer not to say |

Thank you for taking the time to respond to this survey. Please return this survey or any comments before Tuesday 23rd August by post to:
FREEPOST RTXL-YJXJ-BXEX , South Gloucestershire Council, Corporate Research & Consultation Team, Youth Activities Offer, Council offices, Badminton Road, Yate, BRISTOL, BS37 5AF

Any personal information that you have supplied will be held by South Gloucestershire Council in accordance with the Data Protection Act. This information will only be used as part of this exercise and personal information will not be published or passed onto any other organisation.