

## **Have your say about our draft Community Transport Strategy**

Community transport provides services in areas where either there is no public transport or existing public transport cannot be used. We want your views on our updated strategy for community transport services in East Sussex

We would like to hear the views of as many people as possible, including local residents, businesses and anyone interested in community transport in East Sussex. Your views will help us to find out what people think about the vision we have for the county and how we plan to achieve this.

The draft Community Transport Strategy sets out our aims and priorities for improving and supporting community transport in the county. This strategy has been updated alongside our draft Local Transport Plan 2011 - 2026.

A summary of the draft Community Transport Strategy and other related documents are available from local libraries and council offices around the county. Alternatively, paper copies can be provided on request.

The survey should take about 10 minutes to complete.

Please read each question carefully and mark the box with an 'x' to show your answer.

In most cases you will only have to mark an 'x' in one box but please read the directions carefully, as occasionally you may need to mark 'x' in more than one box or write in an answer instead.

Please return your completed survey by 4 January 2011 to:

East Sussex County Council  
Transport & Environment  
Community Transport Consultation  
FREEPOST (LW43)  
County Hall, Lewes,  
East Sussex, BN7 1BR

All responses received will be treated in the strictest confidence. The Council will use the collective responses from this survey for research purposes.

Please contact Roger Williams by phone on 01273 482272 or email [passenger.transport@eastsussex.gov.uk](mailto:passenger.transport@eastsussex.gov.uk) if you have any queries about this survey or you need a copy of it in a different format such as large print, Braille or in a different language.

Your responses will be considered and will be used to shape the final document which will be published in April 2011.

**What do you think about the approach we are taking?**

**Q1 To what extent do you agree or disagree with the following statements about the draft community transport strategy?**

Please select one answer in each row

	strongly agree	agree	neither agree nor disagree	disagree	strongly disagree	don't know
I am happy with the strategy overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The vision will help to improve the strategic direction of community transport provision in East Sussex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The approach outlined in the draft strategy will help to deliver better community transport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The approach is right for me as an individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I share the objectives in the community transport strategy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The document is easy to read and understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q2 Is there anything else that should be covered in the Strategy? If yes, please provide details**

**Q3 Are there any other comments or suggestions you would like to make about this strategy? If yes, please provide details**

**Delivering the Strategy**

**Q4 Is there anything that you individually, your organisation, forum or group would be interested in contributing in relation to the strategy?**

Yes (please go to Q4a)  No (Please go to Q5)

**Q4a If yes, please provide your contact details below**

Contact details .....

## About You...

You do not have to complete this section of the survey but it helps us if you do. We collect this information to ensure that we are seeking the views of everyone in our community and to demonstrate that we are complying with relevant diversity and equalities legislation. **Any responses you give will be treated in the strictest confidence.**

**Q5 Are you completing this survey as an individual or on behalf of an organisation (e.g. Parish Council, voluntary organisation, etc).**

As an individual (go to Q6)

On behalf of an organisation (go to Q14)

**Q6 Are you.....? Please select one answer**

Male

Female

Prefer not to say

**Q7 Is your gender identity the same as the gender you were assigned at birth?**

Please select one answer

Yes

No

Prefer not to say

**Q8 Which of these age groups do you belong to? Please select one answer**

18-24

45-54

65-74

25-34

55-59

75+

35-44

60-64

Prefer not to say

**Q9 What is your postcode?**

The Disability Discrimination Act (DDA) describes a person disabled if they have a longstanding physical or mental condition that has lasted or is likely to last at least 12 months; and this condition has a substantial adverse effect on their ability to carry out normal day to day activities. People with some conditions (cancer, multiple sclerosis and HIV/AIDS, for example) are considered to be disabled from the point that they are diagnosed.

**Q10 Do you consider yourself to be disabled as set out in the DDA?**

Please select one answer

Yes

No

Prefer not to say

**Q10a If you answered yes to Q10, please tell us the type of impairment that applies to you.**

You may have more than one type of impairment, so please select all that apply. If none of these apply to you please select other and write in the type of impairment you have.

Physical impairment

Mental health condition

Sensory impairment (hearing and sight)

Learning disability

Long standing illness or health condition, such as cancer, HIV, heart disease, diabetes or epilepsy

Prefer not to say

Other

If other, please specify

**Q11 To which of these ethnic groups do you feel you belong?** (source: 2001 census)

Please select one answer

- White British
- White Irish
- White Gypsy/Roma
- White Irish Traveller
- Mixed White and Black Caribbean
- Mixed White and Black African
- Mixed White and Asian
- Asian or Asian British Indian
- Asian or Asian British Pakistani
- Asian or Asian British Bangladeshi
- Black or Black British Caribbean
- Black or Black British African
- Chinese
- Prefer not to say
- Other ethnic group\*

\*If your ethnic group was not specified in the list please describe your ethnic group.

**Q12 Do you regard yourself as belonging to any particular religion or belief?**

Please select one answer

- Yes                                       No                                       Prefer not to say

**Q12a If you answered yes to Q12 which one?** Please select one answer

- Christian                       Hindu                       Muslim                       Any other religion  
 Buddhist                       Jewish                       Sikh

Please specify

**Q13 Are you...** Please select one answer

- Bi/Bisexual                       Gay woman/Lesbian                       Other  
 Heterosexual/Straight                       Gay Man                       Prefer not to say

**Q14 If you are answering on behalf of an organisation please provide the following information**

Organisation name.....

Your Name.....

Your position in the organisation ...

Contact details .....

**Thank you for taking part in this survey, your views are important to us.**