**GG questionnaire.doc**

**IMPETUS questionnaire**

The aim of this questionnaire is to learn about Your perception of neighbourhood in terms of your well-being, climate changes, environmental issues and urban design.

It refers to YOUR NEIGHBOURHOOD – the place where you live and its nearest surrounding within of 15 minutes walking distance.

The questionnaire is anonymous and takes about 15 minutes to finish. It is divided into 5 sections with questions.

The results will be published on ……………………. (give the webpage link).

Thank you for your time.

**Section 1**

Perception of living area

This part refers to your perception of your neighbourhood design.

**1. Is your neighbourhood**

*Mark only one oval per row*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **No** | **Partly** | **Yes** | **I do not know** |
| **nicely designed with well-structured streets and buildings?** |  |  |  |  |
| **with basic services within walking distance?** |  |  |  |  |
| **equipped with electricity, sanitation, drinking water infrastructure?** |  |  |  |  |
| **combined with enough green spaces and parks?** |  |  |  |  |
| **walkable, easy to walk around?** |  |  |  |  |
| **supported by public transport?** |  |  |  |  |
| **supported by cycling routs?** |  |  |  |  |
| **friendly to children and family activities?** |  |  |  |  |
| **friendly to disabled or alter adults?** |  |  |  |  |
| **where you can do outdoor sports?** |  |  |  |  |

**Section 2**

Perception of subjective well-being

This part refers to your perception of your well-being.

**2. What do you feel regarding living in your neighbourhood?**

*Mark only one oval per row.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **No** | **Rather no** | **Rather yes** | **Yes** | **I do not know** |
| **being happy** |  |  |  |  |  |
| **being secure** |  |  |  |  |  |
| **being satisfied with life** |  |  |  |  |  |
| **being isolated** |  |  |  |  |  |
| **being discriminated** |  |  |  |  |  |
| **being depressed** |  |  |  |  |  |

**3. What is your subjective perception of your well-being level?**

*Mark only one oval.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** |  |
| **very low** |  |  |  |  |  | **very high** |

**4. Which of following issues impact your well-being?**

*Tick all that apply.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1 Not at all** | **2** | **3** | **4** | **5 very much** |
| **physical condition** |  |  |  |  |  |
| **economic condition** |  |  |  |  |  |
| **social relations** |  |  |  |  |  |
| **emotional live** |  |  |  |  |  |
| **psychological condition** |  |  |  |  |  |
| **neighbourhood development** |  |  |  |  |  |
| **engaging activities work** |  |  |  |  |  |

**Section 3**

Neighbourhood environmental condition

This part refers to your perception of pollution and disturbances you may experience in your neighbourhood.

**5. Is this pollution a serious problem in your neighbourhood? It can be either subjective or objective opinion.**

*Mark only one oval per row.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **I know it is not a problem** | **I suspect it is not a problem** | **I suspect it is a problem** | **I know it is a problem** | **I do not know** |
| **drinking water pollution** |  |  |  |  |  |
| **open water (pond, stream, sea, lake) pollution** |  |  |  |  |  |
| **air pollution** |  |  |  |  |  |
| **light pollution** |  |  |  |  |  |
| **noise pollution** |  |  |  |  |  |
| **odour pollution** |  |  |  |  |  |
| **microplastic pollution** |  |  |  |  |  |

**6. Please share your views concerning this topic.**

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**Section 4**

Awareness of climate change effects

This section refers to your perception of climate change and exposure to climate change effects and your actions.

**7. How much do you concern about environmental issues of your neighbourhood?**

*Mark only one oval.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **1** | **2** | **3** | **4** | **5** |  |
| **I do not concern at all.** |  |  |  |  |  | **I do concern very much.** |

**8. Are you exposed to**

*Mark only one oval per row.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **No** | **Rather no** | **Rather yes** | **Yes** | **I do not know** |
| **floods?** |  |  |  |  |  |
| **shortage of drinking water?** |  |  |  |  |  |
| **thermal extremes?** |  |  |  |  |  |
| **droughts?** |  |  |  |  |  |
| **none of them.** |  |  |  |  |  |

**9. If you are engaged in activities, what are the determinants of your participation (please tick the appropriate boxes).**

*Tick all that apply.*

|  |  |
| --- | --- |
|  | **I have the resources, skills and knowledge to participate** |
|  | **I have a sense of attachment that reinforces participation** |
|  | **I am involved by official bodies or voluntary groups** |
|  | **I see evidence that my views have been considered** |
|  | **other** |

**10. How often are you engaged in activities listed below?**

*Mark only one oval per row.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Never** | **Sometimes** | **Often** | **Always** | **I do not know** |
| **Monitoring the quality of city environment (floods, air pollution, etc.)** |  |  |  |  |  |
| **Participating in city / local planning discussions** |  |  |  |  |  |
| **Participating in Non-Governmental Organisation projects** |  |  |  |  |  |
| **Volunteering for healthcare improvement** |  |  |  |  |  |
| **Improving the appearance of the surroundings** |  |  |  |  |  |
| **Electing for neighbourhood associations** |  |  |  |  |  |
| **Implementing energy, water and greenery saving solutions** |  |  |  |  |  |

**11. Please share your views concerning this topic.**

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**Section 5**

Respondent’s data

**12. Please specify year of your birth**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**13. Please specify your education level**

*Mark only one oval.*

|  |  |
| --- | --- |
|  | **Primary school level** |
|  | **Secondary school level** |
|  | **Bachelor level** |
|  | **Master level** |
|  | **Postgraduate level and higher** |

**14. Please specify your status**

*Mark only one oval.*

|  |  |
| --- | --- |
|  | **Student** |
|  | **Unemployed** |
|  | **Employed** |
|  | **Retired** |
|  | **Other** |

**15. Country**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**16. City**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**17. Street**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**18. GPS Coordinates (approx. the middle of your neighbourhood)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**19. Post-code**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Thank you!**

*If you have further questions please contact ……………………….*