

Student Well-being Survey

Creating a better UCLan one survey at a time

Hello,

Your well-being matters to the University, so we are researching into what improves student well being.

Before starting please read this important information about how the data is being collected and used before consenting to participate. You can also find out more about the project, researchers and how your data will be used on our [website](#).

If at any point you wish to withdraw from the survey, please close the page and reset the browser.

The data collected will be anonymised and will remain confidential. It will only be used to understand general patterns and trends. Any access to the data will be bound by the same confidentiality requirements.

The survey asks **optional** questions about your student number and postcode, which will only be used to link this to other surveys and geographical areas.

This survey asks about your well-being, your relationships with others and your lifestyle. Please note that none of the questions are designed to diagnose anything, but if they raise issues that make you feel uncomfortable or distressed, the back page has detailed links to support services set up by the university or there are two websites below with helpful links to support services.

[Headroom SU](#)

[UCLan Student Support Services](#)

1. If you have read the information above and have fully understood it and want to participate in the research please tick the boxes below. * *Required*

Please select exactly 2 answer(s).

- I have read the above information and fully understand it
- I consent to participate in the research

Well-being

2. Which of these best fits your understanding of well-being? *(select one only)*

- Feeling in charge of your life
- Having enough money to live how you want
- Feeling happy
- Having good health and personal resilience
- Having good relationships with family and friends

3. Below is a list of things which might affect your well-being. Please indicate how satisfied you are with each one.

Please don't select more than 1 answer(s) per row.

	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
Your standard of living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your physical health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your ability to influence what happens in your life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Achieving your current goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your accommodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The area you live in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling part of a community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure activities/hobbies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your sleeping pattern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The amount of time you spend on work/study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The amount of time you spend on leisure/socialising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The balance between work/study and leisure/socialising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The distance you have to travel for daily/weekly activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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4. Please select the option that best describes your experience of the following over the last **two weeks**?

Please don't select more than 1 answer(s) per row.

	None of the time	Rarely	Some of the time	Often	All of the time
Feeling optimistic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling useful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling relaxed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling respected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dealing with problems well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thinking clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling close to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being able to make up my own mind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.a. List **three** things that could improve your well-being

4.b. List **three** things that could reduce your well-being

About you

5. Which School are you in?

- Not sure/ School not listed
- Art, Design and Fashion
- Business
- Centre of excellence in Learning and Teaching (CELT)
- Community Health and Midwifery
- Dentistry
- Engineering
- Forensic and Applied Sciences
- Health Sciences
- Humanities and Social Sciences
- Journalism, Media and Performance
- Language and Global Studies
- Lancashire Law School
- Management
- Medicine
- Myerscough College (Associate School)
- Nursing
- Pharmacy and Biomedical Sciences
- Physical Sciences and Computing
- Psychology
- Social Work, Care and Community
- Sport and Wellbeing

6. If you are not sure which School you are based in please write the main subject you are studying in the space provided below. The subject will later be replaced by a school name.

7. Are you full-time or part-time student?

- Full-time Part-time

8. Which year of study are you in?

- Foundation
 First year of taught course
 Second year of taught course
 Placement, sandwich year or year abroad before 2nd/3rd/4th year
 Third year of taught course
 Postgraduate taught
 Postgraduate Research (Masters)
 PhD

9. Which year of PhD are you in?

1

2

3

4

5

6

7

8

Longer

10. Are you a:

- Home student EU student International student (outside the EU)
- Other

11. Where is your course based?

- Preston
 Cyprus
 West Lakes
 Burnley
 Other

11.a. If you selected Other, please specify:

12. Have you re-located to study?

- Yes No

13. What type of accommodation are you living in?

- Halls of residence At home with parent(s)/guardian(s) or other family members Rented accommodation
- Own home

14. Do you live alone?

- Yes No

15. Who do you live with?

- Family (e.g. partner, parents, children)
- Friends
- Others (e.g. landlord/lady, lodger)

16. Do you have a religion or faith?

- Yes
- No
- I would rather not say

17. Do you consider yourself to have a disability?

- Yes
- No
- I would rather not say

18. Please specify your employment status?

- Do not work
- Working full -time (30 hours or more per week)
- Working part-time (less than 30 hours per week)
- Looking for work
- Other

18.a. If you selected Other, please specify:

19. Do you currently volunteer?

- No
- Yes, volunteering full-time (30 hours or more per week)
- Yes, volunteering part-time (less than 30 hours per week)
- Looking for voluntary work
- Other

19.a. If you selected Other, please specify:

20. How do you identify yourself?

- Male
- Female
- Prefer not to say
- Other

20.a. If you selected Other, please specify:

21. How old are you?

Please enter a whole number (integer).
Please make sure the number is between 17 and 99.
Your answer should be no more than 2 characters long.

22. Are you:

- Single
- Partnered
- Prefer not to say

Travel and Time-use

23. Did you travel at all yesterday?

Yes

No

24. How much time did you spend **travelling yesterday**, for what reasons and by what means? *Please give an approximate number of hours and minutes, leave blank the ones you didn't use.*

	Walk	Cycle	Bus/tram	Train	Car driver	Car passenger
Education	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Work	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Shopping	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Leisure	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Health (doctors, dentists, etc.)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Other	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)

25. Was this typical for a weekday?

- Yes
- No
- No because it was the weekend

26. How did this differ from a typical weekday? (e.g. I had a hospital appointment)

27. How much time do you spend **travelling** for the following reasons by what means on a **typical weekday**?
 Please give an approximate number of hours and minutes, **leave blank the ones you didn't use**.

	Walk	Cycle	Bus/tram	Train	Car driver	Car passenger
Education	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Work	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Shopping	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Leisure	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Health (doctors, dentists, etc.)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)
Other	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)	<input type="text"/> (hh:mm)

28. Think about **yesterday**, approximately how many **hours** and **minutes** did you spend on these activities? Please include travel time involved and **leave blank the ones you didnt use**.

	Time spent
Paid work	<input type="text"/> (hh:mm)
Voluntary work for people outside the household	<input type="text"/> (hh:mm)
Learning (lectures, seminars, revising, assignments, reading, etc.)	<input type="text"/> (hh:mm)
Caring for people in your household	<input type="text"/> (hh:mm)
Maintaining, improving the home, vehicles, garden, (housework, pet care, DIY, etc.)	<input type="text"/> (hh:mm)
Personal business (banking, shopping, etc.)	<input type="text"/> (hh:mm)
Worship, prayer, spiritual activities	<input type="text"/> (hh:mm)
Sports and exercise	<input type="text"/> (hh:mm)
Socialising out of the home	<input type="text"/> (hh:mm)
Watching TV, videos, films, using computer games, listening to radio and other forms of media	<input type="text"/> (hh:mm)
Hobbies and past times	<input type="text"/> (hh:mm)
Sleep and rest	<input type="text"/> (hh:mm)
Personal care	<input type="text"/> (hh:mm)
Eating and food preparation	<input type="text"/> (hh:mm)

29. Was this a typical day?

Yes

No

No because it was the weekend

30. How did this differ from a typical day? (e.g. I had a hospital appointment)

31. Think about a **typical day**, approximately how many **hours** and **minutes** did you spend on these activities? *Please include travel time involved and leave blank the ones you didnt use.*

	Time spent
Paid work	<input type="text"/> (hh:mm)
Voluntary work for people outside the household	<input type="text"/> (hh:mm)
Learning (lectures, seminars, revising, assignments, reading, etc.)	<input type="text"/> (hh:mm)
Caring for people in your household	<input type="text"/> (hh:mm)
Maintaining, improving the home, vehicles, garden, (housework, pet care, DIY, etc.)	<input type="text"/> (hh:mm)
Personal business (banking, shopping, etc.)	<input type="text"/> (hh:mm)
Worship, prayer, spiritual activities	<input type="text"/> (hh:mm)
Sports and exercise	<input type="text"/> (hh:mm)
Socialising out of the home	<input type="text"/> (hh:mm)
Watching TV, videos, films, using computer games, listening to radio and other forms of media	<input type="text"/> (hh:mm)
Hobbies and past times	<input type="text"/> (hh:mm)
Sleep and rest	<input type="text"/> (hh:mm)

Personal care

(hh:mm)

Eating and food preparation

(hh:mm)

32. In total, how many **hours** do you spend a **day** in front of a screen (TV, computer, phone, etc.)?

0

0-2

2-4

4-6

6-8

8-10

10-12

12-14

14-16

16-18

19-20

20+

Housing and Environment

33. Which of these best describes the home(s) you live in during term time?

- Detached house Semi detached house Halls of residence
 Flat Other

33.a. If you selected Other, please specify:

34. How many bedrooms are in your accommodation?

Please enter a whole number (integer).

Please make sure the number is between 1 and 25.

Your answer should be no more than 2 characters long.

35. Do you have any of the following problems with your accommodation or the area you live in?

Please don't select more than 1 answer(s) per row.

	Lots of problems	Quite a few problems	Some problems	Not many problems	No problems
Damp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cold	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Draughts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise (neighbours/noise from the street)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pollution (outside the building)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overcrowding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

36. Please tell us about the building you live in (by energy efficiency we mean the effectiveness of the energy, for example whether heat is rapidly lost or electricity wasted because of inefficient equipment)

Please don't select more than 1 answer(s) per row.

	Very poor	Poor	Neutral	Good	Very good
Overall condition of building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy efficiency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount of natural light	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
View	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meets my needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

37. What is your postcode? This will only be used to link data to geographical areas.

38. To what extent do you agree, if at all, with the following statements?

Please don't select more than 1 answer(s) per row.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
People have a duty to recycle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Earth has very limited room and resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If things continue on their current course, we will soon experience a major environmental disaster	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
We are close to the limit of the number of people the earth can support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For the sake of the environment, car users should pay higher taxes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would only travel by bus if I had no other choice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

People who fly should bear the cost of the environmental damage that air travel causes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't pay much attention to the amount of water I use where I live	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The so called 'environmental crisis' facing humanity has been greatly exaggerated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It would embarrass me if my friends thought my lifestyle was purposefully environmentally friendly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being green is an alternative lifestyle its not for the majority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find it hard to change my habits to be more environmentally friendly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It's only worth doing environmentally-friendly things if they save money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The effects of climate change are too far in the future to worry me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It's not worth me doing things to help the environment if others don't do the same	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It's not worth Britain trying to combat climate change because other countries will just cancel out what we do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

39. Which of these best describes how you feel about your current lifestyle and the environment?

- I'd like to do a lot more to help the environment
- I'd like to do a bit more to help the environment
- I'm happy with what I do at the moment

40. Please indicate below the actions you take to reduce negative environmental impacts?

- Reuse water bottles
- Reuse plastic bags
- Purchase locally sourced products
- Purchase organic/fair trade food
- Purchasing food with little or no packaging
- Purchase used goods (Clothes, furniture, etc.)
- Grow your own food
- Recycle (e.g. glass, cardboard and paper)
- Alter your dietary choice (vegetarian, purchasing in season goods, etc.)

Income and Relationships

41. How would you rate your current financial situation

- I have more than I need
- I have enough to live comfortably
- I have just enough to get me by
- I'm struggling to make ends meet
- I rely on payday loans, credit cards, overdraft, or other debt to support myself

42. Considering the last **2 weeks**, how often have you felt:

Please don't select more than 1 answer(s) per row.

	Hardly ever	Occasionally	Some of the time	Often	Very Often
a lack of companionship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
left out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
isolated from others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

43. In what ways have you been involved in a **student community** in the past **2 weeks**? *Please tick all that apply*

- Used an NUS card
- Used the University or SU website
- Used Blackboard
- Attended additional events, talks or training
- Got a job either on campus or with the SU
- Got help from the University or SU in finding a job
- Attended any society meetings
- Attended any sports teams or sports clubs clubs
- Attended any clubs or other groups
- Represented any societies, sports teams, clubs or other groups as a committee member
- Been a Course Rep or School Rep
- Been in the Student Council or on the SU Committee
- Volunteered with the University or the SU

44. Which communities do you identify with? Please rank in order of importance and leave blank ones you feel you don't identify with.

Please don't select more than 1 answer(s) per row.

Please don't select more than 1 answer(s) in any single column.

	1	2	3	4	5	6	7	8	9
University community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
school community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
staff/student community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
student community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
residential community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sports community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
learning community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
social community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

45. Which **university services** have you used in the past **2 weeks**? *Please tick all that apply*

- The <l>
- WISER
- The library
- Accommodation services
- Cafeterias around campus
- Computer rooms around campus
- The Multi-Faith Centre

46. Which services have you used that are run by the **SU** in the past **2 weeks**? *Please tick all that apply*

- Student shop (Essentials and The Print Shop), cafe (The Atrium) or bar (Source)
- The Opportunities Centre (SU)
- Sought advice or support from the SU (e.g. the advise centre)
- Listened to SU radio (Frequency), watched SU TV (PSTV) or read the SU newspaper (Pluto)

47. Please indicate your agreement with the following statements?

Please don't select more than 1 answer(s) per row.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I identify with many student and share ideas with them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My opinions and ideas are valued by many other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Few people know who I am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can influence my surroundings to benefit myself and other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I campaign or volunteer to benefit myself and other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I take part in social activities that involve many other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I respond to calls for support from other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I do take part in recreational activities (like clubs, teams or societies) that are set up by students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I take part in some social, political or representational roles, councils or groups that involve other students (e.g. course reps, councils, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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48. Indicate your agreement with the following statements, based on the last **2 weeks**?

Please don't select more than 1 answer(s) per row.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
I could have found someone to listen to me when I felt down	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I could have found people that made me feel better when I felt down	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I could have found a source of satisfaction for myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was able to cheer up and get into a better mood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I could relax and easily forget my problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often communicated with family via instant messaging (text, Imessage, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often communicated with family via phone calls or FaceTime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often saw family face to face	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often communicated with close friends via instant messaging (text, Imessage etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often communicated with close friends via phone calls or FaceTime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I often saw close friends
face to face



49. What is your student number? This will only be used to link this survey to surveys in the future.

End of the survey

Thank you for completing the survey.

If you want to find out more about the project, researchers and how your data will be used go to our [website](#) or send us an [email](#).

If any of these questions caused any stress or upset don't hesitate to contact UCLan's large support network which are:

Counselling

UCLan counselling service which is staffed by a team of professionally trained and experienced therapists who offer a free, confidential service to all registered UCLan students. Counselling is based on campus in **Foster Building 119** and can be requested in the following ways via [Email](#) and Telephone enquires: **01772 892572**.

Mental Health

Mental Health Advisors are based in Student Support & Wellbeing reception in **Foster Building 119** and available throughout the year. An appointment to see a Mental Health Advisor can be requested via [Email](#) and Telephone enquires: **01772 894190**.

Student Well-being service

The Well-being service can provide guidance on issues relating to your well-being, and our advisors offer support and advice to all students as a confidential, professional service, ensuring that you receive individual support. Student well-being service is based in **the <i> which is based on the ground floor of the main campus Library** and can be contacted via [Email](#) and Telephone enquires: **01772 895000**.

Financial Support

Any queries or enquiries about financial support contact UCLan's support network via [Email](#) and Telephone: **01772 892583**.
