

Pack 7

Similar Conditions or Learning Disability

Down Syndrome Act 2022:
draft guidance





Down Syndrome Act 2022: draft guidance

Tell us what you think



This survey is for:

- People with Down syndrome and their families and carers.
- People with similar conditions or a learning disability and their families and carers.

People with similar conditions or a learning disability



Question: Should the guidance think about the needs of people with similar conditions or a learning disability?



Yes



No



I don't know



Question: Does the guidance make it clear what services should do to support people with similar conditions or a learning disability?



Yes



No



I don't know

More questions about you



These questions let us know about the people we get answers from.



You don't have to answer the questions if you don't want to.



We will keep what you tell us private.
No one will know who you are from
the answers that you give.



If you are filling in this survey for someone else please answer these questions about them.

Question: How old are you?

Tick 1 box.



Under 16

16 to 24

25 to 34

35 to 44

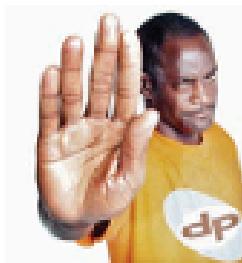
45 to 54

55 to 64

65 to 74

75 or older

I don't want to say



Question: What is your sex?

Tick 1 box.

 Male Female I don't want to say

Question: Is your gender now different to the one you were given when you were born?



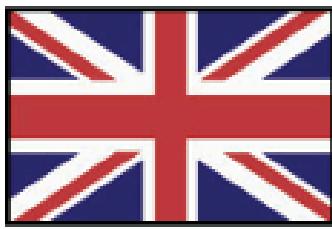
Yes



No



I don't want to say



Question: Where do you live?

Tick 1 box.

England

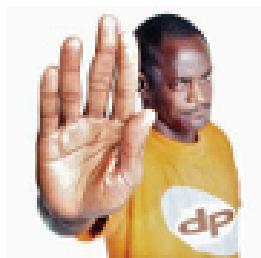
Scotland

Wales

Northern Ireland



I live outside the UK



I don't want to say



Question 19: If you live in England, tell us what part of England you live in. **Tick 1 box.**

North East England

North West England

Yorkshire and the Humber

East of England

East Midlands

West Midlands

South East England

South West England

London

I don't want to say

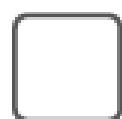




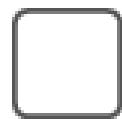
Ethnicity is your race, background and culture.

Question: What is your **ethnicity**?

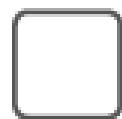
Please tick 1 box.



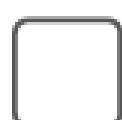
White



Black, African, Caribbean or
Black British



Asian or British Asian



Mixed ethnic group





Other ethnic group



I don't want to say



Question: Do you have a disability or a long term illness or health condition?

Long term means it lasts for 12 months or more.



Yes



No



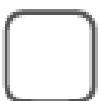
I don't want to say



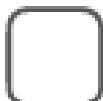
If you ticked **yes**, please tell us what disability or health condition you have. Write your answer in this box.

Question: If you have a condition, does it affect how you do everyday things?

Things like cleaning, shopping or making meals.



Yes



No



I don't want
to say