



A survey about recreation and sports centres from Christchurch City Council



September 2022

What is this document about?

Christchurch
City Council



This Easy Read document is a **survey** from Christchurch City Council.



A **survey** is when we ask people questions about something to find out what they think.



This survey is to find out what people think about **recreation and sports centres** in the Christchurch area of New Zealand.



A **recreation and sports centre** is a building where you can do activities for fun / play different sports.



The survey will ask you 16 questions.



It will take you around 5 to 10 minutes to complete the survey.



We would like you to answer all of the questions.

For each question you will be asked to do 1 of these 3 options:



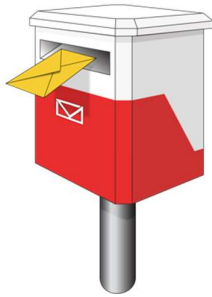
- tick the box to show your answer
- write your answer on the line below the question
- circle YES or NO.



YES	NO
-----	----

You can send us your completed survey:

by post to:



Southern Centre

PO Box 73033

Christchurch

8154

by email to:



southern.centre@ccc.govt.nz

Tell us what you think about recreation and sports centres



The following questions are about what you think about recreation and sports centres.

Some of the questions are about **being active**.



In this survey **being active** could be things like:

- doing sports
- doing another physical activity like dancing
- lifting heavy weights
- using a swimming pool.



We would like you to answer all of the questions.



We want you to answer the questions truthfully so that we can use them to help us find out what people think.



You can ask someone to support you with answering the questions.



The survey questions begin on the next page.

Survey questions



1. What is your favourite way to be active

and

can you tell us why?



Please write your answer on the lines below:



2. What kinds of things make it hard for you to be active?

☒ Please tick as many as you like:

☐

I am too busy / the times that activities happen are not good for me

☐

I do not have anyone to do it with / I do not feel confident enough

☐

I am not fit enough / I am too tired / I find it hard to want to be active.



There are more options on the next page.

2. continued:



**What kinds of things make it
hard for you to be active?**

☒ Please tick as many as you like:

☐

It is too hard for me to get to
a recreation centre /
I cannot afford transport

☐

There are no good activities
for me / I do not know what
activities I could do

☐

I do not enjoy being active /
I prefer to do other things.



There are more options on the next
page.

2. continued:

What kinds of things make it hard for you to be active?

☒ Please tick as many as you like:

☐

It costs too much money for me

☐

I do not have the equipment I need

☐

I need to look after children

☐

I do not feel safe.



3. Please share any other kinds of things that make it hard for you to be active.



Please write your answer on the lines below:

4. Would you like to be more active?



Please circle YES or NO:

YES	NO
-----	----



5. What kind of things do you think would help you be more active?

☒ Please tick as many as you like:

☐

Things that did not cost so much money

☐

Better / more transport options

☐

More activities / events for people like me

☐

Better advertising of activities.



There are more options on the next page.

5. continued:



What kind of things do you think would help you be more active?

☒ Please tick as many as you like:

☐

A reward for being more active like:

- my first visit is free
- free food / kai
- an activity is free for a short time

☐

The option for a smaller number of people in a class.



There are more options on the next page.



5. continued:

What kind of things do you think would help you be more active?

☒ Please tick as many as you like:

☐

Same **gender** activities



Gender is if you are:

- a man
- a woman
- someone of another gender like non-binary.



There are more options on the next page.



5. continued:

What kind of things do you think would help you be more active?

☒ Please tick as many as you like:

☐

Activities that are good for families

☐

Activities that are low sensory like those in quiet / not bright rooms

☐

More support from friends / family

☐

I do not want to be more active.



6. Is there anything else you think would make you more likely to be more active that we have not listed?



Please write your answer on the lines below:



7. What would be the best way for us to contact you so you can share your ideas about any activities we might offer in the future?

☒ Please tick as many as you like:


☐

By email so I can email my suggestions at any time


☐

A place online on a website where I can put my suggestions


☐

A real box at recreation and sport centres where I can put my suggestions.



There are more options on the next page.

7. continued:



What would be the best way for us to contact you so you can share your ideas about activities we might offer in the future?

☒ Please tick as many as you like:

☐

An interview by telephone

☐

A survey I can do online

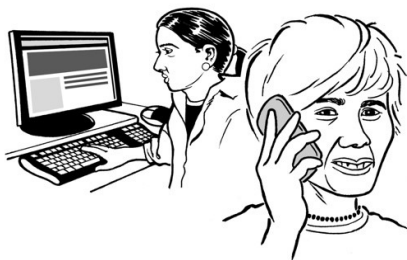
☐

A meeting at my school / workplace.



There are more options on the next page.

7. continued:



What would be the best way for us to contact you so you can share your ideas about activities we might offer in the future?

☒ Please tick as many as you like:

☐

A meeting with a group of people to share ideas called a focus group

☐

I am not interested in sharing my ideas in the future.



8. Which of the following things would you be likely to use at a recreation centre?

☒ Please tick as many as you like:


☐

Fun swimming pools


☐

Sports swimming pools


☐

Spa / hydrotherapy pools


☐

Dive well / Manu pool

☐

Learning to swim pool.


☐

Hydrosides



There are more options on the next page.

8. continued:



**Which of the following things
would you be likely to use at a
recreation centre?**

☒ Please tick as many as you like:

☐

Sensory areas

☐

Dance / circus studio

☐

Gym / exercise classes.



There are more options on the next
page.

8. continued:



**Which of the following things
would you be likely to use at a
recreation centre?**

☒ Please tick as many as you like:

☐

Indoor sport courts

☐

Outdoor fields

☐

Cafés

☐

Community meeting rooms /
birthday party room

☐

I would not use any.



9. What kinds of activities would you like to be able to do at our recreation centres?



Please write your answer on the lines below:



10. Is there anything else you would like to tell us about?



Please write your answer on the lines below:



In this next section all the questions are about you.



These questions will help us better understand who we are hearing from.

We would like you to answer all of the questions in this section.



You can ask someone to support you with answering the questions.

11. How old are you?

☒ Please tick 1 of the options:

☐

5 to 11 years old

☐

12 to 17 years old

☐

18 to 24 years old

☐

25 to 34 years old

☐

35 to 49 years old

☐

50 to 64 years old.



There are more options on the next page.

11. continued:

How old are you?

☒ Please tick **1** of the options:

☐

65 to 79 years old

☐

Over 80 years old.

12. Which gender do you identify as?



☒ Please tick **1** of the options:

☐

Male

☐

Female

☐

Non-binary

☐

Prefer not to say.



If your gender is not listed here
please write it on the line below.

13. Which ethnic group do you identify with?



An **ethnic group** is a group of people who are connected to each other because they share things in common like their:

- race
- language
- nationality which is where they come from
- culture like their beliefs and their art.

The options begin on the next page.



13. continued:

Which ethnic group do you identify with?

☒ Please tick as many as you identify with:

☐

New Zealand European

☐

Māori

☐

Pacific Peoples

☐

Asian.



There are more options on the next page.



13. continued:

Which ethnic group do you identify with?

☒ Please tick as many as you identify with:

☐

Middle Eastern

☐

Latin American

☐

African

☐

Other European.



If your ethnic group is not listed here
please write it on the line below.



14. Do you have difficulty with any of the following because of a disability or health condition?

☒ Please tick as many as you like:


☐

I cannot see very well even if I am wearing glasses


☐

I cannot hear very well even if I am wearing a hearing aid


☐

I find it hard to get around like:

- walking
- climbing stairs.



There are more options on the next page.

14. continued:



Do you have difficulty with any of the following because of a disability or health condition?

☒ Please tick as many as you like:

☐

I have trouble focusing on things like:

- remembering things
- concentrating on things

☐

I find it hard to look after myself like getting washed / dressed.



There are more options on the next page.

14. continued:



Do you have difficulty with any of the following because of a disability or health condition?

☒ Please tick as many as you like:

☐

I find it hard to communicate with people when using my usual language like:

- understanding other people
- being understood

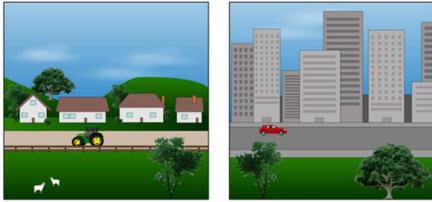
☐

None of the above

☐

I would prefer not to answer.

15. Where in Christchurch do you live?



Please tell us the suburb / area you live in.



Please write your answer on the line below:

16. Are you filling in this survey:



- **for someone else**
- **for an organisation you work for / with?**

Please circle YES or NO:

YES	NO
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This page is **optional** – that means you can give us your contact details only if you want to.



Your name:



Your phone number:



Your email address:



This survey has been written by Christchurch City Council.



It has been translated into Easy Read by the Make It Easy service of People First New Zealand Inc. Ngā Tāngata Tuatahi.



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