

NNPCF Diversity Questionnaire

The National Network of Parent Carer Forums (NNPCF) Steering Group (SG) recognises that people with different backgrounds, skills, attitudes and experiences bring fresh ideas and perceptions and has adopted equality, diversity and inclusion as core values. We need to collect this data to enable us to provide clear statements to our members and to our funders. Our Equality & Diversity Policy can be found here <https://nnpcf.org.uk/>

The NNPCF SG recognises that there is a general expectation from its members and other stakeholders that any personal information the organisation holds about them will be stored and handled to the highest standards of confidentiality and integrity. The organisation actively promotes awareness of and compliance with the Data Protection Act 1998 ('DPA 1998') as a code of practice for good information management and handling. The requirements of the DPA 1998 are set out in our Data Protection Policy <https://nnpcf.org.uk/>

Diversity questions (protected characteristics under the Equality Act 2012)

1. From the list of age bands below, please indicate the category that includes your current age in years:

| | |
|-------------------|--|
| 16 – 24 | |
| 25 – 34 | |
| 35 – 44 | |
| 45 – 54 | |
| 55 – 64 | |
| 65+ | |
| Prefer not to say | |

2. What is your gender?

| | |
|-------------------|--|
| Female | |
| Male | |
| Prefer not to say | |

3. The Equality Act 2010 generally defines a disabled person as someone who has a mental or physical impairment that has a substantial and long-term adverse effect on the person's ability to carry out normal day-to-day activities.

(a) Do you consider yourself to have a disability according to the definition in the Equality Act?

| | |
|-------------------|--|
| Yes | |
| No | |
| Prefer not to say | |

Please note: If an individual has a condition which fits the Equality Act definition, they should tick 'Yes' to this question even if they do not feel in any way limited by that condition.

(b) Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

| | |
|-----------------------|--|
| Yes, limited a lot | |
| Yes, limited a little | |
| No | |
| Prefer not to say | |

Thank you for taking part in this survey!