



Comhairle Chontae Chill Chainnigh
Kilkenny County Council



Local Community Safety Survey for Young People

The purpose of this study is to understand what feeling safe means to you. We'll also collect general demographic information.

* Required

Demographic Information

All your information is highly confidential and for internal use only. Please contact us if you have any concerns.

1. Your gender

- ☐ Male
- ☐ Female
- ☐ Non-binary
- ☐ Prefer to not say

2. Your age

- ☐ 12-14
- ☐ 15-16
- ☐ 17-18

3. In which town do you live in Kilkenny?

Feelings of Safety

4. How safe do you feel in your local community?

- ☐ Very safe
- ☐ Somewhat safe
- ☐ Not very safe
- ☐ Not safe at all

5. Are there places in your community where you do not feel safe?

- ☐ Yes
- ☐ No

6. If you answered yes to question 2, please list the places and explain why? *

7. What times of day do you feel most unsafe in your community? *

- ☐ Daytime
- ☐ After school
- ☐ Evening
- ☐ Night
- ☐ Never feel unsafe

Causes of Feeling Unsafe

8. What makes you feel unsafe in our community? (Tick all that apply)

- ☐ Groups hanging around
- ☐ Drugs or alcohol
- ☐ Poor lighting of dark areas
- ☐ Vandalism/graffiti
- ☐ Crime (e.g. theft, assault)
- ☐ Lack of trusted adults around
- ☐ Bullying or harassment
- ☐ Other

9. Have you ever been involved in or witnessed any unsafe or violent incident in your community?

- ☐ Yes
- ☐ No

10. If you have answered yes to question 6, would you like to describe it? (optional)

Solutions & Improvements

11. What would make your community feel safer? (Tick all that apply)

- ☐ More lighting in streets and parks
- ☐ More visible Gardaí or community officers
- ☐ Youth spaces or clubs
- ☐ CCTV cameras in certain areas
- ☐ Activities to bring people together
- ☐ Less Litter/vandalism
- ☐ Education on safety and respect
- ☐ Anti - Bullying Campaign
- ☐ Other

12. Do you think young people should have a say in how to make the community safer?

- ☐ Yes
- ☐ No
- ☐ Not Sure

13. If yes, how do you think young people could be involved?

14. Is there anything else you'd like to say about safety in your community?

15. You can download the Data Privacy Statement for the **Local Community Safety Partnership – Community Safety Survey** at the following link. You will need to confirm that you understand and agree to it before you submit the completed survey <https://kilkennycoco.ie/LCSPdataprivacystatement> *

- ☐ Yes
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