

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 (include any problems related to old age)?	YES	NO	Prefer Not to Say											
	1	30	2											
														Totals
What is your ethnic origin	White: British	White: Irish	White: Gypsy/Roma or Traveller	White: AOB	Black or Black British: African	Black or Black British: Caribbean	Black or Black British: Somali	Black or Black British: AOB	Asian or Asian British: Bangaladeshi	Asian or Asian British: Indian	Asian or Asian British: Pakistani	Asian or Asian British: AOB		
	44			1	1	1			8	1		2		58
What is your ethnic origin	Mixed/Dual Heritage: White & Black African	Mixed/Dual Heritage: White & Asian	Mixed/Dual Heritage: White & Black Carribean	Mixed/Dual Heritage: AOB	Other Ethnic Groups: Vietnamese	Other Ethnic Groups: Chinese	Other Ethnic Groups: Arab	Other Ethnic Groups:	Other Ethnic Groups/AOB	Prefer Not To Say	OTHER/Unkown			
		1		2						3	13			19
How would you define your sexual orientation?	Bisexual	Gay man	Gay woman/lesbian	Heterosexual/straight	Prefer not to say	Prefer to self describe:								
				29	4									77
	MALE	FEMALE	Not Known											
	40	34	3	Total		77								