

Response ID BHLF-52PE-EF2S-C

Submitted to **Rough Sleeping: Homelessness Strategy Consultation**

Rough Sleeping: Homelessness Prevention Strategy Consultation

1 What is your name?

Name:

2 What is your email address?

Email:

3 What best describes your interest in this consultation?

Someone with experience of homelessness/rough sleeping

Please state:

4 Do you agree to our overall approach of the strategy?

Yes

If you selected no or not sure to this question please tell us why?:

5 Do you agree with our universal level approach and actions for preventing rough sleeping?

Yes

If you selected no or not sure to this question please tell us why? :

6 Do you agree with our targeted actions and approach to preventing rough sleeping?

Yes

If you selected no or not sure to this question, please tell us why?:

7 Do you agree with our rough sleeping crisis response approach and actions?

Yes

If you selected no or not sure, please tell us why?:

8 Do you agree with the approach to rough sleeping recovery and additional actions?

Yes

If you selected no or not sure, please tell us why?:

9 Do you agree with the approach and priority actions for helping people to move-on from rough sleeping?

Yes

If you selected no or not sure, please tell us why?:

10 Any further comments?

Please use box below if you would like to make any further comments:

11 About You: Please state your age group.

Age group:

65 and over

12 About you: What is your gender?

Gender:

Male

13 About You: What best describes your ethnicity?

Ethnicity:

White: English/Welsh/Scottish/Northern Irish/British

14 About you: What is your sexual orientation?

Sexual Orientation:

Heterosexual

15 About you: What best describes your religion or belief?

Religious Belief:

Prefer not to say