

THE JEWISH COMMUNITY STUDY OF NEW YORK: 2002

SCREENING QUESTIONS and SURVEY QUESTIONNAIRE

UJA-Federation of New York

Ukeles Associates, Inc.

International Communications Research (ICR)

March 2002

Final Version

The Jewish Community Study of New York: 2002

SCREENING QUESTIONS

Introduction:

Hello, I am calling on behalf of the New York Jewish Population Survey, an important study sponsored by UJA-Federation of New York.

S2 Were you born in New York State?

Yes	1
No	2
Refused	R

S3 Including yourself, how many people usually live in your household?

[GET ANSWER THEN ASK:] **Does that include everyone for whom this is the primary residence, including students temporarily away from home at college or graduate school.** [IF YES CONTINUE. IF NO, RE-ASK FOR CORRECT NUMBER.]

_____ [RECORD #.]

S1 Are you 18 years of age or older?

[INTERVIEWER: **We can only speak to people 18 years of age or older – may I please speak to someone who is...**]

[QUESTION S1 ASKED AS THIRD QUESTION ONLY WHEN NECESSARY.]

Yes, on the phone	1	CONTINUE.
Yes, coming to phone	2	REPEAT INTRODUCTION, THEN ASK QUESTION S2. CONTINUE IF AT LEAST 18 YEARS OLD.
Not home/Not available	3	CALL BACK OPTIONS.
Refused	R	THANK AND TERMINATE.

S4 Many people living in New York identify with an ethnic or religious group. Do you consider yourself to be Jewish or non-Jewish?

Jewish	1	SKIP TO MAIN QUESTIONNAIRE.
Jewish and Something Else	2	CONTINUE WITH QUESTION S4a.
Not Sure	3	CONTINUE WITH QUESTION S4a.
Non-Jewish	4	IF ONLY ONE PERSON IN HOUSEHOLD, SKIP TO QUESTION S6. IF MORE THAN ONE, SKIP TO QUESTION S5.
Messianic Jew; Jew for Jesus, “Completed Jew”	5	SKIP TO QUESTION S9.
Refused	R	IF ONLY ONE PERSON IN HOUSEHOLD, SKIP TO QUESTION S6. IF MORE THAN ONE, SKIP TO QUESTION S5.

S4a [IF RESPONSE TO QUESTION S4 WAS: “JEWISH AND SOMETHING ELSE”
or “NOT SURE” ASK:]

**So that we can properly understand your answer, would you please tell
me the ways in which you consider yourself “Jewish and “Something Else”
[or what you mean that you are “not sure”]?**

[RECORD VERBATIM.]

[IF ANSWER INDICATES “MESSIANIC” JEW, JEW FOR JESUS, JESUS WAS A JEW,
“COMPLETED” JEW, CHRISTIAN HEBREW/JEWISH CHRISTIAN”, RECORD AND SKIP
TO QUESTION S9.]

[NOTE: SAYING “I FEEL JEWISH AND I FEEL CHRISTIAN” OR “WE CELEBRATE
SOME JEWISH HOLIDAYS AND SOME NON-JEWISH HOLIDAYS” IS NOT
THE SAME AS SAYING “MESSIANIC JEW” – PLEASE PROBE FOR DETAILS
GRACIOUSLY.]

MESSIANIC KEY WORDS LISTED BELOW.

Jesus was a Jew	1	ASK QUESTIONS S9,S10,S11,S11a AND GRACIOUSLY TERMINATE INTERVIEW.
Jew for Jesus, Jewish Christian, Messianic Jew, “Completed Jew”	2	
Other (Specify)_____ PROBE ON JEWISH AND SOMETHING ELSE DUAL IDENTITY	3	SKIP TO MAIN QUESTIONNAIRE.
Don’t Know	D	CONTINUE.
Refused	R	CONTINUE.

S5 [IF MORE THAN ONE PERSON IN HOUSEHOLD:]

Does ANY OTHER ADULT MEMBER of your household consider himself/herself Jewish?

Yes	1	SKIP TO QUESTION S5b.
Jewish and Something Else	2	SKIP TO QUESTION S5a.
Not sure if person considers self Jewish, No, no one Jewish	3	SKIP TO QUESTION S6.
Don't Know	D	
Refused	R	

S5a [IF "JEWISH AND SOMETHING ELSE" ASK:]

So that we can properly understand your answer, would you please tell me the ways in which that person considers himself/herself "Jewish."

[RECORD VERBATIM.]

[IF ANSWER INDICATES "MESSIANIC" JEW, JEW FOR JESUS, JESUS WAS A JEW, "COMPLETED" JEW, CHRISTIAN HEBREW/JEWISH CHRISTIAN, RECORD AND SKIP TO QUESTION S6.]

NOTE: SAYING "I FEEL JEWISH AND I FEEL CHRISTIAN" IS NOT NECESSARILY A "MESSIANIC JEW" – PLEASE PROBE FOR DETAILS GRACIOUSLY.

MESSIANIC KEY WORDS LISTED BELOW.

Jesus was a Jew	1	ASK QUESTIONS S9,S10,S11,S11a AND GRACIOUSLY TERMINATE INTERVIEW.
Jew for Jesus, Jewish Christian, Messianic Jew, "Completed Jew"	2	
Other (Specify) _____ PROBE ON JEWISH AND SOMETHING ELSE DUAL IDENTITY	3	SKIP TO QUESTION S5b.

S5b Is this person who is Jewish, your spouse or partner, another relative, or a roommate?
 [INTERVIEWER: IF MORE THAN 1, DETERMINE IF ALL ARE ROOMMATES.]

Spouse, Unmarried partner, (Volunteer) Boy/Girlfriend/Fiancée, Other relative	1	SKIP TO MAIN QUESTIONNAIRE.
Roommate/Housemate	2	ROOMMATE INTERVIEW SEQUENCE INITIATED – READ SCRIPT – ASK TO SPEAK TO JEWISH ROOMMATE.

Since this study is being done for the Jewish community of New York and you have told us that you have (a roommate/roommates) who (do consider/considers) themselves to be Jewish, we would like to speak with (your roommate/one of those roommates). May I please speak with that person?

[NOTE: IF RESPONDENT CANNOT DECIDE WHICH ROOMMATE, SINCE MORE THAN 1 JEWISH, ASK TO SPEAK WITH THE ONE WHO MOST RECENTLY HAD A BIRTHDAY.]

ONCE ROOMMATE COMES TO THE PHONE, REINTRODUCE THEN RE-ASK QUESTION S2 & S4/4A (IF JEWISH AND SOMETHING ELSE) THEN SKIP TO THE MAIN QUESTIONNAIRE.

IF ROOMMATE NOT AVAILABLE, ASK QUESTIONS S9, S10, S11, S11a AND INDICATE THAT ICR WILL CALL BACK TO SPEAK WITH ROOMMATE.

S6 Did either of your parents or any of your grandparents consider themselves to be Jewish?

Yes	1	CONTINUE.
No	2	IF MORE THAN ONE PERSON IN HOUSEHOLD, ASK QUESTION S8. OTHERWISE, SKIP TO QUESTION S9.
Don't Know, Not Sure	D	
Refused	R	

ASK QUESTION S7 SERIES ONLY IF JEWISH ORIGIN RESPONDENT – NO ADULT IN HOUSEHOLD CONSIDERS SELF JEWISH BUT RESPONDENT HAS A PARENT OR GRANDPARENT WHO IS JEWISH.

S7a We understand that you do not consider yourself to be Jewish now, but a few quick questions.

Was there any time in your life that you considered yourself to be Jewish?

Yes	1	ASK QUESTION S7b.
No, Don't Know, Refused	2 D R	SKIP TO QUESTION S8.

S7b Could you please tell me the reason that you no longer consider yourself Jewish?

[RECORD VERBATIM.]

[PROBE FOR DETAILS, FOCUSING ON REASONS RESPONDENT NO LONGER CONSIDERS SELF TO BE JEWISH.]

S8 The other adult members of the household – did any of them have any parent or grandparent who considered themselves Jewish?

Yes	1
No	2

S9 Thank you - final quick questions.

What is your ZIP Code?

S10 RECORD RESPONDENT GENDER.

Male	1
Female	2

S11 Excluding cell phones, how many different telephone numbers - - different telephone lines, not extensions - - do you have coming into your household?

_____ [RECORD #.]

[IF MORE THAN ONE TELEPHONE NUMBER, ASK QUESTION S11a.]

S11a How many of these phone numbers are usually used as a business phone, for a fax machine, or for a computer?

_____ [RECORD #.]

Once again, I would like to thank you for your time and cooperation for graciously completing this survey.

The 2002 Jewish Community Study of New York

SURVEY INTERVIEW QUESTIONS

Your answers to the survey questions will be used to identify Jewish community needs and to help plan for services. The interview is confidential and anonymous. Again, we are not selling anything and absolutely will not be asking for contributions.

1 [IF RESPONDED “YES” TO QUESTION S2 ON SCREENER SURVEY, ASK:]

You mentioned that you were born in New York State.

In what borough or county were you born?

[IF RESPONDENT SAYS “IN NEW YORK CITY” ASK WHICH BOROUGH?]

The Bronx	01
Brooklyn (Kings County)	02
Manhattan (New York County)	03
Nassau County	04
Queens County	05
Staten Island (Richmond County)	06
Suffolk County	07
Westchester County	08
Somewhere Else in New York State (Specify)	09

1a **You mentioned that you were not born in New York. Where were you born?**

[IF NECESSARY – WERE YOU BORN IN THE USA? IF YES: IN WHICH STATE; IF NO: IN WHAT COUNTRY?]

The Bronx	01					
Brooklyn (Kings County)	02					
Manhattan (New York County)	03					
Nassau County	04					
Queens County	05					
Staten Island (Richmond County)	06					
Suffolk County	07					
Westchester County	08					
Somewhere Else in New York State	09					
New Jersey	10					
Florida	11					
Other USA State [SPECIFY]_____	12					
Former Soviet Union, Russia, USSR [SPECIFY]_____	13	<p>QUESTION 1b In what year did you come to the US to live? _____RECORD RESPONSE</p> <p>QUESTION 1c Are you a U.S. citizen now?</p> <table border="1"> <tr> <td>Yes</td> <td>1</td> </tr> <tr> <td>No</td> <td>2</td> </tr> </table>	Yes	1	No	2
Yes	1					
No	2					
Other Eastern Europe	14					
Europe – Western Europe	15					
Israel	16					
Canada	17					
Latin America	18					
Other non-USA [SPECIFY]	19					

ASK EVERYONE

2 In which New York State county/borough do you live now?

[READ LIST IF NEEDED; IF RESPONDENT MENTIONS MORE THAN ONE PLACE, ASK FOR PLACE WHERE RESPONDENT IS RIGHT NOW.]

The Bronx	01
Brooklyn (Kings County)	02
Manhattan (New York County)	03
Nassau County	04
Queens County	05
Staten Island (Richmond County)	06
Suffolk County	07
Westchester County	08

2a What is your zip code?

_____ [RECORD ZIPCODE.]

2b Is this place where I reached you your only place of residence?

[READ IF NECESSARY: Do you have another permanent place of residence where you live for part of the year – such as in Florida, or in another part of New York – in a vacation home or condo?]

Yes, only residence	1	SKIP TO QUESTION 4.
No, have another residence	2	CONTINUE WITH QUESTION 3.

3 Where is the other residence that you have?

[READ LIST ONLY IF NECESSARY.]

The Bronx	01	CONTINUE WITH QUESTION 3a.
Brooklyn (Kings County)	02	
Manhattan (New York County)	03	
Nassau County	04	
Queens County	05	
Staten Island (Richmond County)	06	
Suffolk County	07	
Westchester County	08	
Somewhere else in New York State	09	SKIP TO QUESTION 4.
New Jersey	10	
Florida	11	
Other USA State [SPECIFY] _____	12	
Former Soviet Union, Russia, USSR [SPECIFY] _____	13	
Other Eastern Europe	14	
Europe - Western Europe	15	
Israel	16	
Canada	17	
Latin America	18	
Other non-USA [SPECIFY] _____	19	

3a **Which do you consider your primary residence? Which place do you consider to be your primary home?**

[READ LIST. ACCEPT ONE.]

The place where I reached you just now	1	SKIP TO QUESTION 4.
Your other residence	2	ASK QUESTION 3b.

3b **What is the zip code of your primary residence in _____?**

[INSERT RESPONSE FROM QUESTION 3.]

_____ [RECORD RESPONSE.]

4+ [FOR QUESTIONS 4 AND 4a RESIDENCE INSERTED IS THE RESPONDENT'S PRIMARY RESIDENCE – FROM QUESTION 2, OR QUESTION 3 IN SOME CASES.]

4 **For how many years have you lived in your residence in _____?**

[INSERT RESPONSE FROM QUESTION 2 OR 3.]

_____ (RECORD YEARS)	CONTINUE WITH QUESTION 4a.
Less than 1 year (LL)	
Always lived there (NN)	SKIP TO QUESTION 6.

4a **Just before you moved into your residence in _____, where did you live?**

[READ LIST IF NECESSARY.]

The Bronx	01
Brooklyn (Kings County)	02
Manhattan (New York County)	03
Nassau County	04
Queens County	05
Staten Island (Richmond County)	06
Suffolk County	07
Westchester County	08
Somewhere else in New York State	09
New Jersey	10
Florida	11
Other USA State (Specify)_____	12
Former Soviet Union, Russia, USSR (Specify)_____	13
Other Eastern Europe	14
Europe – Western Europe	15
Israel	16
Canada	17
Latin America	18
Other non-USA (Specify)_____	19

5 DELETED

6 In what year were you born?

_____ [RECORD YEAR.]

INTERVIEWER: IF RESPONDENT STILL REFUSES AGE – “I UNDERSTAND YOUR RELUCTANCE TO GIVE YOUR AGE, BUT THIS INFORMATION IS TOTALLY CONFIDENTIAL AND IS IMPROTANT FOR PLANNING PROGRAMS IN THE JEWISH COMMUNITY, ESPECIALLY HEALTH CARE.” IF STILL REFUSED ASK QUESTION 6aa.

6aa Could you please tell me if you are between the ages of...?

18 and 29	1
30 and 49	2
50 and 69	3
70 or Older	4

6b Record gender of respondent.

Male	1
Female	2

6c **What is your marital status?**

[READ LIST IF NECESSARY.]

Married	1	CONTINUE WITH QUESTION 6d.
Living Together, Have a Partner	2	SKIP TO QUESTION 6e.
Separated	3	SKIP TO QUESTION 7.
Divorced	4	
Widowed	5	
Never Married [Single]	6	

6d [QUESTION 6d ASKED OF MARRIED RESPONDENTS.]

In what year did you get married to your current spouse?

_____ [RECORD YEAR.]

(Don't know)

(Refused)

6dd [IF RESPONDED "DON'T KNOW" OR REFUSED, THEN ASK QUESTION 6dd.]

For how many years have you been married?

_____ [NUMBER OF YEARS.]

(Don't know)

(Refused)

6e [QUESTION 6e ASKED OF RESPONDENTS WHO HAVE A PARTNER.]

For how many years have you been living together with your partner?

_____ [NUMBER OF YEARS.]

(Don't know)

(Refused)

A few questions now about your work and education.

7 Last week, were you...?

[READ FIRST THREE ITEMS AND PAUSE FOR ANSWER. ONLY READ ENTIRE LIST IF NECESSARY. READ SLOWLY. ACCEPT ALL THAT APPLY.]

Self-Employed	01	CONTINUE WITH QUESTION 7a.
Employed full time (35+ hours)	02	
Employed part time and not a full-time student	03	
Unemployed (looking for work in previous month)	04	
Not employed and not looking for work	05	SKIP TO QUESTION 8.
Homemaker	06	
Full-time Volunteer	07	
Full-time Student	08	
Retired	09	CONTINUE WITH QUESTION 7a.
Disabled and unable to work	10	
Other (specify) _____	11	SKIP TO QUESTION 8.

7a For 1,2,3,4 – What is your occupation?

For 9,10 – What was your occupation?

[RECORD RESPONSE VERBATIM.]

8 What is your highest education degree?

[ASK QUESTION AND PAUSE FOR ANSWER. READ LIST ONLY IF NECESSARY.]

Doctoral Level [e. g., M.D., D. D. S., Ph.D., Lawyer]	1
Graduate, Professional Training beyond Master's level [e. g., A. B. D.]	2
Masters Level - all Degrees [includes Rabbinical ordination]	3
Bachelors (include Nursing BSN)	4
Nursing Degrees (non-Bachelors: R.N., L. P. N.)	5
Associates Degree / Some College	6
High School Diploma	7
Technical School Certificate, Diploma	8
No High School Diploma, No Education	9

We have a few questions about religious identity.

9 What is YOUR religion, if any? Would you say it is...?

[READ CATEGORIES IN SEQUENCE – IF ASKED, NOTE THAT THIS IS NOT WHETHER YOU CONSIDER YOURSELF JEWISH, BUT WHETHER YOU CONSIDER YOURSELF AS HAVING A RELIGION.]

Judaism, Jewish	1	SKIP TO QUESTION 10.
Judaism and Something Else	2	ASK QUESTION 9a IF RESPONDED "JEWISH" OR "NON-JEWISH" TO SCREENER QUESTION S4. OTHERWISE, SKIP TO QUESTION 10.
Catholic, Protestant or other Christian Religion	3	ASK QUESTION 9a ONLY IF RESPONDED "JEWISH" TO SCREENER QUESTION S4. OTHERWISE, SKIP TO QUESTION 11.
Muslim, Islam	4	
Another Religion (Specify)	5	
NONE – no religion	6	SKIP TO QUESTION 11.
[DO NOT READ] Atheist, Agnostic	7	

9a **So that we can properly understand your answer, could you tell me the ways in which you consider yourself “Jewish and something else”?**

[IF ANY OTHER ANSWER – PROBE FOR JEWISH AND “SOMETHING ELSE”
DUAL IDENTITY – RECORD VERBATIM.]

[NOTE: SAYING “I FEEL JEWISH AND I FEEL CHRISTIAN” OR “WE CELEBRATE SOME JEWISH HOLIDAYS AND SOME NON-JEWISH HOLIDAYS” IS NOT THE SAME AS SAYING “MESSIANIC JEW” – PLEASE PROBE FOR DETAILS.]

Jesus was a Jew	1	SKIP TO QUESTION 66 AND QUESTION 66a.
Jew for Jesus	2	
Jewish Christian	3	
Messianic Jew	4	
“Completed Jew”	5	
ALL OTHER ANSWERS – PROBE ON JEWISH AND SOMETHING ELSE DUAL IDENTITY – RECORD VERBATIM	6	CONTINUE WITH QUESTION 10.

Do you consider yourself...?

[INTERVIEWER ROTATES 1-3; CODES 4-8 ALWAYS FOLLOW IN ORDER. READ FIRST THREE ITEMS AND PAUSE FOR ANSWER. ONLY READ ENTIRE LIST IF NECESSARY. READ SLOWLY.]

	Conservative	01
	Orthodox	02
	Reform	03
	Reconstructionist	04
	Secular Humanist	05
	No Denomination - Just Jewish	06
	A Messianic Jew (e.g., a Jew for Jesus – a Christian Hebrew - a Completed Jew) (ASK QUESTION 66 AND 66a. THEN TERMINATE)	07
	Something Else (Specify)_____	08
DO NOT READ	Conservadox (Conservative and Orthodox)	09
DO NOT READ	Traditional (Jewish)	10
DO NOT READ	Sephardic	11
DO NOT READ	Jewish Renewal	12
DO NOT READ	Hasidic Jew (volunteered: Satmar, Lubavitch, Chabad Bobov, Belz)	13
DO NOT READ	Haredi (Ultra-Orthodox, Agudah)	14
DO NOT READ	Buddhist Jew	16
DO NOT READ	Modern Orthodox	17

11 **Were you raised Jewish?**

Yes, Raised Jewish	1
Raised Jewish and Something else, Partially Jewish	2
No	3
Don't know	D

11a **Did your mother consider herself Jewish?**

11b **Did your father consider himself Jewish?**

	Yes	No
Mother Jewish	1	2
Father Jewish	1	2

11c [ASK QUESTION 11c ONLY IF RESPONDENT CONSIDERS SELF JEWISH NOW --
 SCREENER S4=1 OR S4=2 – AND RESPONDENT WAS NOT RAISED AS JEWISH AND
 NEITHER OF RESPONDENT'S PARENTS CONSIDERED THEMSELVES TO BE JEWISH.]

Did you have a formal conversion to Judaism?

Yes	1
No	2
[DO NOT READ - VOLUNTEERED] No, but consider self Jewish No, was not necessary	3

IF "1" PERSON HOUSEHOLD, SKIP TO QUESTION 20.

IF "MARRIED" OR "HAS PARTNER" [QUESTION 6c = 1 OR 2] ASK QUESTION 12+
 ABOUT SPOUSE/PARTNER. OTHERWISE, SKIP TO QUESTION 13.

A few questions about your (spouse, partner).

12 What is your (spouse's/partner's) age?

_____ [AGE]
(Don't know)
(Refused)

INTERVIEWER: IF RESPONDENT STILL REFUSES AGE – “I UNDERSTAND YOUR RELUCTANCE TO GIVE YOUR (SPOUSE'S / PARTNER'S) AGE, BUT THIS INFORMATION IS TOTALLY CONFIDENTIAL AND IS IMPORTANT FOR PLANNING PROGRAMS IN THE JEWISH COMMUNITY, ESPECIALLY HEALTH CARE.”

IF STILL REFUSED ASK QUESTION 12aa.

12aa Could you please tell me if your (spouse, partner) is between the ages of...?

18 and 29	1
30 and 49	2
50 and 69	3
70 or Older	4

12b I just need to verify, is your (spouse/partner) male or female?

Male	1
Female	2

12c **Where was (he/she) born?**

[INTERVIEWER NOTE: IF RESPONDENT BORN OUTSIDE U.S. AND UNSURE WHERE BIRTHPLACE IS, ASK IF THIS COUNTRY IS IN THE FORMER SOVIET UNION, SOMEWHERE ELSE IN EASTERN EUROPE, IN WESTERN EUROPE, OR SOMEWHERE ELSE.]

The Bronx	01	
Brooklyn (Kings County)	02	
Manhattan (New York County)	03	
Nassau County	04	
Queens County	05	
Staten Island (Richmond County)	06	
Suffolk County	07	
Westchester County	08	
Somewhere else in New York State	09	
New Jersey	10	
Florida	11	
Other USA State (Specify)_____	12	
Former Soviet Union, Russia, USSR [SPECIFY]	13	<p>QUESTION 12d In what year did (he/she) come to the U.S. to live? _____(YEAR)</p> <p>QUESTION 12e Is (he, she) a U.S. citizen now? Yes / No</p>
Other Eastern Europe	14	
Europe – Western Europe	15	
Israel	16	
Canada	17	
Latin America	18	
Other non-USA [SPECIFY]	19	

12f **Does (he/she) currently consider (himself/herself) Jewish?**

[INTERVIEWER: PLEASE NOTE – IF ASKED – THAT THIS IS NOT “IS YOUR SPOUSE’S RELIGION JEWISH?” BUT “DOES YOUR SPOUSE CONSIDER HIMSELF/HERSELF JEWISH?” EVEN IF NOT RELIGIOUS OR NO RELIGION.]

Yes, Jewish	1
Jewish and Something else, Partially Jewish	2
No	3
Don't know	D

12g **Was (he, she) raised Jewish?**

Yes, Raised Jewish	1
Raised Jewish and Something Else, Partially Jewish	2
No	3
Don't know	D

12h **Did (his/her) mother consider herself Jewish?**

12i **Did (his, her) father consider himself Jewish?**

	Yes	No
Mother Jewish	1	2
Father Jewish	1	2

- 12j [QUESTION 12j ASKED ONLY IF SPOUSE/PARTNER CONSIDERS SELF JEWISH NOW, AND WAS NOT RAISED AS JEWISH AND NEITHER OF SPOUSE/PARTNER'S PARENTS CONSIDERED THEMSELVES TO BE JEWISH.]

Did (he, she) have a formal conversion to Judaism?

Yes	1
No	2
[DO NOT READ] No, but consider self Jewish	3
[DO NOT READ] No, was not necessary	4

- 12k **In terms of a religious identity, what is your (spouse's/partner's) religion, if any? Would you say it is...?** [READ CATEGORIES]

Judaism, Jewish	1	CONTINUE WITH QUESTION 12 I.
Judaism and Something Else	2	CONTINUE WITH QUESTION 12 I.
Catholic, Protestant or other Christian Religion	3	SKIP TO QUESTION 13.
Muslim, Islam	4	
Another Religion (Specify)_____	5	
None – No Religion	6	
[DO NOT READ] Atheist, Agnostic	7	
[DO NOT READ] Unsure – Will not Commit Answer	8	ASK QUESTION 12 I.
Don't know	D	ASK QUESTION 12 I.
Refused	R	

12| **Does (he/she) consider (himself/herself) ...?**

[READ, ROTATE ANSWERS 1-3; ANSWERS 4-8 ALWAYS FOLLOW IN ORDER.]

[READ FIRST THREE ITEMS AND PAUSE FOR ANSWER. ONLY READ ENTIRE LIST IF NECESSARY. READ SLOWLY.]

	Conservative	01
	Orthodox	02
	Reform	03
	Reconstructionist	04
	Secular Humanist	05
	No Denomination - Just Jewish	06
	A Messianic Jew (e.g., a Jew for Jesus, a Christian Hebrew, a Completed Jew)	07
	Something Else (SPECIFY)_____	08
DO NOT READ	Conservadox (Conservative and Orthodox)	09
DO NOT READ	Traditional (Jewish)	10
DO NOT READ	Sephardic	11
DO NOT READ	Jewish Renewal	12
DO NOT READ	Hasidic Jew [VOLUNTEERED: Satmar, Lubavitch, Chabad, Bobov, Belz]	13
DO NOT READ	Haredi (Ultra-Orthodox, Agudah)	14
DO NOT READ	Buddhist Jew	16
DO NOT READ	Modern Orthodox	17

12m In terms of work and occupation, last week, was (he/she)...?

[READ FIRST THREE ITEMS AND PAUSE FOR ANSWER. ONLY READ ENTIRE LIST IF NECESSARY. READ SLOWLY. ACCEPT ALL THAT APPLY.]

Self-Employed	01	CONTINUE WITH QUESTION 12n.
Employed full time (35+ hours)	02	
Employed part time and not a full-time student	03	
Unemployed (looking for work in previous month)	04	
Not employed and not looking for work	05	SKIP TO QUESTION 12o.
Homemaker	06	
Full-time Volunteer	07	
Full-time Student	08	
Retired	09	CONTINUE WITH QUESTION 12n.
Disabled and unable to work	10	
Other (specify _____)	11	SKIP TO QUESTION 12o.

12n For 1,2,3,4 – What is (his/her) occupation?

For 9,10 – What was (his/her) occupation?

[RECORD RESPONSE VERBATIM.]

12o What is (his/her) highest education degree?

[ASK QUESTION AND PAUSE FOR ANSWER. READ LIST ONLY IF NECESSARY.]

Doctoral Level [e. g., M.D. , D. D. S., Ph.D., Lawyer]	1
Graduate, Professional Training beyond Master's level [e. g., A. B. D]	2
Masters Level - all Degrees [DO NOT READ: includes Rabbinical ordination]	3
Bachelors (include Nursing BSN)	4
Nursing Degrees (non-Bachelors: R.N., L. P. N.)	5
Associates Degree / Some College	6
High School Diploma	7
Technical School Certificate, Diploma	8
No High School Diploma, No Education	9

13 How would you best describe your relationship to the other people in the household? [READ LIST IF NECESSARY.]

One person household	01
Husband/father/stepfather in family (A head of household)	02
Wife/mother/stepmother (A head of household)	03
Unmarried partner (A head of household)	04
Other Head of Household (e. g., Roommate)	05
Adult Child Age 18+	06
Mother/Mother-in-law or Father/Father-in-law of Household Husband/Wife	07
Grandmother/Grandfather of Household Husband/Wife	08
Other relative of Household Husband/Wife	09
Other: [SPECIFY _____]	10

- 14 **Other than you (IF APPROPRIATE: and your spouse/partner) how many other persons age 18 or older live in the household?**

[GET ANSWER THEN ASK:] **Do you have any students temporarily living away from home, at a college, graduate school, or boarding school?**

[IF YES: ASK IF THEY ARE INCLUDED IN THE TOTAL. IF NOT PLEASE HAVE THEM ADD TO TOTAL.]

_____ [RECORD RESPONSE.]

[RECORD "0" IF NONE – SKIP TO QUESTION 16.]

- 15 **How old are these other adults? Please start from oldest to youngest.**

_____ [RECORD RESPONSE.]

(Don't know)

(Refused)

INTERVIEWER: IF RESPONDENT STILL REFUSES AGE – "I UNDERSTAND YOUR RELUCTANCE TO GIVE THE AGE, BUT THIS INFORMATION IS TOTALLY CONFIDENTIAL AND IS IMPORTANT FOR PLANNING PROGRAMS IN THE JEWISH COMMUNITY, ESPECIALLY HEALTH CARE." IF STILL REFUSED, ASK QUESTION 15aa BEFORE MOVING TO NEXT ADULT.

- 15aa **Please tell me if he/she is:**

18 – 29	1
30 – 49	2
50 – 69	3
70 or Older	4

RECORD AGE FOR ALL OTHER ADULTS IN HOUSEHOLD
THEN ASK QUESTIONS 15a – 15c FOR EACH ADULT... BEGINNING WITH OLDEST ADULT...
ASK ALL QUESTIONS FOR EACH ADULT THEN ASK SERIES FOR NEXT ADULT.

15a **Is the person who is [INSERT AGE OR AGE RANGE], male or female?**

Male	1
Female	2

15b **What is his/her relationship to you?**

[INTERVIEWER: OTHER ADULTS BESIDES RESPONDENT AND SPOUSE/PARTNER SHOULD NOT BE "1" OR "2" – CLARIFY ANSWER.]

Spouse (husband/wife)	01	REVIEW SEQUENCE.
Partner – Unmarried	02	REVIEW SEQUENCE.
Boyfriend/Girlfriend/Fiancee	03	
Roommate/House-mate	04	
Son	05	
Stepson	06	
Daughter	07	
Step daughter	08	
Grandson	09	
Granddaughter	10	
Mother/Mother-in-law	11	
Father/Father-in-law	12	
Child of partner	13	
Other relative	14	
Other (Specify)_____	97	

15c1 **Where was (he/she) born?**

The Bronx	01
Brooklyn (Kings County)	02
Manhattan (New York County)	03
Nassau County	04
Queens County	05
Staten Island (Richmond County)	06
Suffolk County	07
Westchester County	08
Somewhere else in New York State	09
New Jersey	10
Florida	11
Other USA State (Specify)_____	12
Former Soviet Union, Russia, USSR (Specify)_____	13
Other Eastern Europe	14
Europe – Western Europe	15
Israel	16
Canada	17
Latin America	18
Other non-USA (Specify)_____	19

15c **Does the [INSERT AGE AND RELATIONSHIP]_____ currently consider himself/herself Jewish?**

[IF ASKED: PLEASE NOTE THAT THIS IS NOT "IS HIS/HER RELIGION JEWISH," BUT "DOES HE/SHE CONSIDER HIMSELF/HERSELF JEWISH," EVEN IF NOT RELIGIOUS OR NO RELIGION.]

Yes, Jewish	1
Yes, Jewish and Something Else, Partially Jewish	2
No	3

16 **How many children 17 years of age or younger live in the household?**

[GET ANSWER THEN ASK: **Does this include children 17 years or younger who are temporarily living away at a boarding school or college?**

IF YES: ASK IF THEY ARE INCLUDED IN THE TOTAL. IF NOT PLEASE HAVE THEM ADD TO TOTAL.]

_____ [RECORD NUMBER OF CHILDREN: "0" IF NONE.]

IF NO CHILDREN IN HOUSEHOLD, SKIP TO QUESTION 20 IF RESPONDENT IS JEWISH.

16a1 **Were all of your children born in the United States?**

Yes	1	CODE ALL CHILDREN AS BORN IN USA IN QUESTION 16c1.
No	2	ASK COUNTRY OF BIRTH FOR EACH CHILD IN QUESTION 16c1.

16a [IF CHILDREN IN HOUSEHOLD UNDER AGE 18]

How old are these children. Please start with the oldest child?

[IF RESPONDENT IS HESITANT]: **It's important for us to know the ages of children in the Jewish community, in order to plan for pre-school programs, Jewish educational programs, and recreational and camping programs.**

_____[RECORD RESPONSE.]

[IF RESPONDENT REFUSES AFTER EXPLANATION, ASK QUESTION 16aa:]

16aa **Please tell me if he/she is:** [READ]

5 years old or younger	1
Between 6 and 12 years old, or	2
Between 13 years old and 17	3

RECORD AGE FOR EACH CHILD.
THEN ASK QUESTIONS 16b-16d FOR EACH CHILD, BEGINNING WITH OLDEST CHILD.

16b **Is the [INSERT AGE] child, male or female?**

Male	1
Female	2

16c **What is (his/her) relationship to you? Is (he/she) your son/daughter, stepson/stepdaughter?** [READ IF NECESSARY.]

Son	01
Stepson	02
Adopted Son	03
Daughter	04
Stepdaughter	05
Adopted Daughter	06
Grandson	07
Granddaughter	08
Child of partner	09
Other relative	10
Other [Specify:_____]	00

IF ALL CHILDREN NOT BORN IN USA, ASK
QUESTION 16c1 FOR EACH CHILD.

16c1 Where was (insert age and relationship) born?

USA	00
Former Soviet Union, USSR	01
Other Eastern Europe	02
Europe Western Europe	03
Israel	04
Canada	05
Latin America	06
Other non-USA (Specify)_____	07

IF RESPONDENT IS "ORTHODOX" (CODES 2, 13, 14, 17 IN QUESTION 10) AND
MORE THAN ONE CHILD IN HOUSEHOLD, ASK QUESTION 16c2.

16c2 Are all of your children 17 years of younger being raised Jewish?

Yes	1	AUTOCODE QUESTION 16d = 1 FOR EVERY CHILD, THEN MOVE TO NEXT QUESTION.
No	2	ASK QUESTION 16d FOR ALL CHILDREN.

16d **Is this child being raised...?**

[READ LIST]

Jewish	1
Jewish and Something Else	2
Not Being Raised Jewish	3
Have not decided yet if the child will be raised Jewish	4

ASK QUESTION 17 ONLY IF ANY CHILD/CHILDREN FIVE YEARS OLD OR YOUNGER.

17 [FOR EACH CHILD AGE 5 OR YOUNGER, ASK:]

Is your [INSERT AGE AND RELATIONSHIP] **currently enrolled in a Jewish pre-school program or Jewish day care?**

Yes	1	SKIP TO QUESTION 18 AS APPROPRIATE.
No	2	CONTINUE WITH QUESTION 17a.

17a **Has this child ever been enrolled in a Jewish pre-school program or in Jewish day care?**

Yes	1
No	2

IF ANY CHILDREN AGE 6-17 IN HOUSEHOLD, CONTINUE WITH QUESTION 18+
ASK QUESTION 18+ FOR EACH CHILD AGES 6-17.

IF NO CHILDREN AGES 6-17, SKIP TO QUESTION 20 IF RESPONDENT IS JEWISH, OR
QUESTION 35 IF RESPONDENT IS NOT JEWISH.

18+ A few questions about the education of the children ages 6-17.

IF RESPONDENT IS "ORTHODOX" (CODES 2, 13, 14, 17 IN QUESTION 10) AND MORE THAN ONE CHILD IN HOUSEHOLD, ASK QUESTION 18a1.

18a1 Did all of your children ages 6 to 17 attend a Jewish preschool or Jewish daycare program when they were younger?

Yes	1	AUTOCODE QUESTION 18 = 1 FOR EVERY CHILD, THEN MOVE TO NEXT QUESTION.
No	2	ASK QUESTION 18 FOR ALL CHILDREN.

18 Did your [INSERT AGE AND RELATIONSHIP] attend a Jewish pre-school or Jewish daycare program when he/she was younger?

Yes	1
No	2

QUESTION 18a+ CHILDREN'S JEWISH EDUCATION SEQUENCE WILL BE ASKED ONLY FOR CHILDREN WHO ARE BEING RAISED "JEWISH", or "JEWISH & SOMETHING ELSE."

BEGIN WITH OLDEST CHILD AGES 6 – 17.

18a **What type of school is your [INSERT AGE AND RELATIONSHIP] going to on a full-time basis?** [READ LIST.]

Full-time Jewish All-Day School	1	SKIP TO NEXT CHILD UNTIL SEQUENCE COMPLETED FOR ALL CHILDREN 6-17.
Public School	2	CONTINUE WITH QUESTION 18b FOR EACH CHILD AS APPROPRIATE.
Private School – Not Jewish	3	
At Home Full-time Schooling	4	
[DO NOT READ] Already Completed School	5	

18b **Has this child ever participated in any type of Jewish education?**

Yes	1	CONTINUE.
No	2	SKIPS TO NEXT CHILD (IF APPLICABLE).

18c **Altogether, how many years of any type of formal Jewish education has (he/she) completed?**

_____ [RECORD YEARS.]

- 18d **Is [INSERT AGE AND RELATIONSHIP] currently PARTICIPATING in any type of Jewish education at a synagogue supplementary Jewish after-school or Sunday program, or a Jewish supplementary school in another place?**

Yes	1
No	2

- 18e **Has your [INSERT AGE AND RELATIONSHIP] ever attended an all-day, full-time Jewish Day School or yeshiva?**

Yes	1
No	2

ASK QUESTION 19 OF ALL RESPONDENTS WITH ANY CHILD AGES 6-17.

- 19+ **Have ANY of your children ages 6-17 ever...?**
[IF ONLY ONE CHILD AGES 6-17, INSERT:] **Has your child ever...?**

Yes	1
No	2

- 19a **Been involved in Jewish youth group activities?**
19b **Gone to a summer overnight camp with Jewish content?**
19d **Been to Israel?**
19e **Been involved in athletic or other extra-curricular activities at a JCC, a synagogue or temple, or other Jewish setting?**

ASK QUESTIONS 20 – 34 FOR **JEWISH RESPONDENTS** ONLY
IF RESPONDENT IS NOT JEWISH, SKIP TO QUESTION 35.

- 20 **Now I'd like to ask you about YOUR own Jewish education. As a child, did you ever receive any formal Jewish education, such as Day School, Hebrew School, Sunday School or private tutoring?**

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 21.

- 20a **Altogether, how many years of any type of formal Jewish education did you receive?**

_____ [RECORD RESPONSE.]

- 20b **Did you ever attend a full time, all-day Jewish Day School?**

Yes	1
No	2

- 21+ **As a child, teenager, or as a young adult, did you ever [INSERT ITEM] ...?**

Yes	1
No	2

- 21a **Attend a college-level Jewish Studies course?**
 21b **Travel to Israel?**
 21c **Attend or work at a summer camp with Jewish content?**
 21d **Belong to a Jewish or Zionist youth group?**

22 **Right now, how important is being Jewish in your life? Is it...?**

[ROTATE 1-4 / 4-1.]

Very important	1
Somewhat important	2
Not very important	3
Not at all important	4

23 **Right now, how important is it to you to be part of a Jewish community?
Is it ...?**

[ROTATE 1-4 / 4-1.]

Very important	1
Somewhat important	2
Not very important	3
Not at all important	4

24 **In the past year or two, have you visited a Jewish museum, or attended a Jewish cultural event (such as a festival, film, musical performance)?**

Yes	1
No	2

25 **During the past year did you participate in any organized adult Jewish education programs? [READ IF NECESSARY:] (such as a lecture, a class or a study group?)**

Yes	1
No	2

- 26 **To what extent do you feel like you are a part of a Jewish community in the New York area?** [READ LIST.]

A lot	1
Some	2
Only a little	3
Not at all	4

- 27+ **How important to you is** [INSERT ITEM]_____?

[ROTATE SCRAMBLED 27a-g. MAKE SURE 27c ALWAYS DIRECTLY FOLLOWS 27b.]

Very important	1
Somewhat important	2
Not very important	3
Not at all important	4

- 27a **Learning about Jewish history and culture?**
27b **Giving your children a Jewish education?**
27c **Giving children a college or university education?**
27d **The survival of the state of Israel?**
27e **The Jewish goal of making the world a better place?**
27f **The Jewish value of Tzedakah?**
27g **Jewish art, Jewish music, Jewish theater?**

28+ **How important do you think it is for the Jewish community in New York to support the following. How about [READ ITEM]?**

[ROTATE 28a-g / 28g-a IN SEQUENCE.]

Very important	1
Somewhat important	2
Not very important	3
Not at all important	4

28a **Programs for the Jewish poor and/or the Jewish elderly?**

28b **Programs for Jewish children and Jewish families in crisis?**

28c **Programs to help rescue Jews who are persecuted or in distress throughout the world?**

28d **Programs for the NON-Jewish poor/or the non-Jewish elderly?**

28e **Programs for interfaith families and children?**

28f **Programs to support Jewish education for children and adults?**

28g **Programs to support Israel?**

29 DELETE

30 DELETE

31 DELETE

32 **During the last year, did you visit any Jewish web sites on the internet?**

Yes	1
No	2

33 Do you personally fast on Yom Kippur?

Yes [VOLUNTEERED: All Day]	1
[DO NOT READ] Yes, Part of the Day	2
No, do not fast	3
[DO NOT READ] Cannot fast because of health reasons, pregnancy, nursing	4

34 About how often do you personally attend any type of synagogue, temple, or organized Jewish religious service?

[READ IF NECESSARY, ACCEPT ONLY ONE ANSWER; USE THE HIGHEST NUMBER CATEGORY IF MORE THAN ONE ANSWER IS GIVEN.]

Not at all	01
Once or twice a year	02
Only on special occasions, i. e., Bar Mitzvah, wedding	03
Only on High Holidays (Rosh Hashanah, Yom Kippur)	04
A few times a year (3+)	05
About once a month	06
Several times a month	07
About once a week	08
Several times a week	09
Daily	10

ASK ALL RESPONDENTS.

35 [IF MORE THAN ONE PERSON IN HOUSEHOLD, READ PARENTHESES.]

Do you (or any member of your household) belong to a synagogue or temple in the New York area?

Yes	1
No	2

36 **In the past year, have you (or any other member of your household) gone to any program or activity at a New York area Jewish “Y” or a JCC – Jewish Community Center?**

Yes	1	ASK QUESTION 36a.
No	2	SKIP TO 36b.

36a **Do you (or any other member of your household) pay dues to or belong to a New York area Jewish “Y” or a JCC – Jewish Community Center?**

Yes	1
No	2

36b **Other than a synagogue or temple, a Jewish “Y” or a Jewish Community Center, do you (or any other member of your household) belong to or regularly participate in the activities of any other Jewish organization in New York, such as Hadassah or the Anti-Defamation League?**

Yes	1
No	2

37 DELETED

38+ **In the past five years, has financial cost prevented you (or your family) from**
[READ ITEM]?

[ROTATE 38a-c. ASK 38d ONLY IF RESPONDENT HAS A CHILD 6-17 YEARS OLD.]

Yes	1
No	2

38a **Belonging to a Temple or Synagogue?**

38b **Going to Israel?**

38c **Belonging to a Jewish Community Center?**

38d **Sending a child to a Jewish full-time day school?**

39+ **Do you (or does someone else in the household) always, usually, sometimes, never** [READ ITEMS]?

[DO NOT ROTATE 1-4 / 4-1. SCRAMBLE 39a-c, ALWAYS ASK 39d LAST.]

Always	1
Usually	2
Sometimes	3
Never	4

39a **Light Sabbath candles on Friday night?**

39b **Attend a Passover Seder (“Say-der”) in your home or somewhere else?**

39c **Light Chanukah candles during Chanukah? (“Hah-new-kah”)**

39d **Have a Christmas tree?** [IF ORTHODOX, NOT ASKED – AUTOCODED “4” NEVER.]

40 **Do you (or does your household) keep a kosher home?**

Yes	1
No	2
[DO NOT READ] Vegetarian Household – volunteered	3
[DO NOT READ] Other [SPECIFY: _____]	4

41 DELETED

42 **As an adult, have you ever traveled to Israel?**

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 43.

42a **How many times?**

_____ [RECORD NUMBER.]

[IF “LIVED IN ISRAEL” – CODE 97.]

- 43 **How important to you is the spiritual side of your life? – Is it very important, somewhat important, not very important, not at all important?**

[ROTATE LIST 1-4/4-1.]

Very important	1
Somewhat important	2
Not very important	3
Not at all important	4

- 44+ **A few health insurance and health-related questions.**

- 44a **Do you (does everyone in your household) currently have some sort of health insurance coverage? (IF NECESSARY READ: This includes not only private insurance, but also Medicare or Medicaid, and school health insurance?)**

Yes	1	CONTINUE WITH QUESTION 44b.
No	2	SKIP TO QUESTION 45.

- 44b **At any time in the past twelve months, (have you / has anyone in your household) been without any health insurance coverage temporarily? (IF YES READ: Not even Medicare or Medicaid, or school health insurance?)**

Yes	1
No	2

45 **In the past twelve months, did you (or anyone else in the household) seek [INSERT ITEM]?**

Yes	1
No	2

45a **Help in coping with a serious or chronic illness?**

45b **Assistance for an alcohol or drug problem?**

45c **HIV/AIDS services or testing?**

45d **Would you say that your own health is excellent, good, fair or poor?**

Excellent	1
Good	2
Fair	3
Poor	4

46 **During the past year, have you volunteered your time for any type of charitable organization?**

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 47.

- 46a **Was that volunteering for Jewish organizations or causes, for groups that are not specifically Jewish only, or have you volunteered your time for both?**

Only Jewish organization	1
Only groups that are not specifically Jewish	2
Both Jewish and non-Jewish	3

- 47 DELETED

- 48 **Is your residence owned or rented by you (or someone else in your household)?**

Owned	1
Rented	2

- 49 **Is your residence...?** [READ ITEMS 1-4. ONLY IF NECESSARY READ ITEMS 5-7. DO NOT ROTATE.]

A single family private house	1
A two - four family house	2
A co-op or condo in an apartment house	3
A rental in an apartment house	4
A retirement facility	5
A nursing home	6
Some other type of housing [SPECIFY _____]	7

50+ **The following questions will help the Jewish community learn about services that can be provided by Jewish organizations.**

IF "YES" TO 50b AND/OR 50c, ASK RESPONDENT 50b1 AND/OR 50c1 IMMEDIATELY. FOR ALL – IF "YES," ASK QUESTION 50, 51, 51a, 51aa IN A SERIES FOR EACH ITEM BEFORE MOVING TO THE NEXT ITEM.

In the past twelve months, did you (or any member of your household) seek:
[INSERT ITEM.]

[DO NOT ROTATE; REPEAT QUESTION AS NEEDED.]

Yes	1
No	2

50a **Assistance with infant or child daycare?**

50b **Services for an older adult?**

50c **Services for a person with a disability?**

50d **Services for refugees, such as resettlement?**

50e **Help in finding a job or choosing an occupation?**

50f **Personal, marriage, or family counseling?**

50b1 [ASK QUESTION 50b1 IF QUESTION 50b = 1.]

What sort of services did you seek for an older person?

[PROMPTS ONLY IF NECESSARY:] **Was this help needed for a nursing home or for assisted living? Was this for help in their own home or apartment, such as cleaning, or shopping, or transportation? Did you contact a senior center or JCC, or want to find one to go to?)**

[RECORD VERBATIM.]

50c1 [ASK QUESTION 50c1 IF QUESTION 50c = 1.]

What sort of services did you seek for a person with a disability?

[PROMPTS ONLY IF NECESSARY:] **Did you seek services at a halfway house or a group home, seek services in their own home or apartment, or at a rehab center?)**

[RECORD VERBATIM]

51(a-f) [ASK QUESTION 51 (a-f) FOR ANY "YES" RESPONSE TO QUESTION 50 (a-f).]

When you (or someone else in the household) sought help or assistance with
[INSERT SERVICE FROM QUESTION 50a – 50f] ... **were you able to get the help or assistance that you wanted?**

Yes	1	CONTINUE WITH QUESTION 51a (a-f) AND 51aa (a-f) FOR EACH SERVICE RECEIVED HELP.
No	2	ASK ABOUT NEXT SERVICE "SOUGHT" - SKIP TO QUESTION 52 ONLY WHEN ALL "SEEK" SERVICES IN QUESTION 50a-50f HAVE BEEN ASKED: QUESTION 51a (a-f), QUESTION 51aa (a-f).

51a (a-f) [QUESTION 51a (a-f) ASKED ONLY FOR THOSE WHO RECEIVED HELP IN 51(a-f).]

How easy was it to find the help that was needed. Was it?

[READ LIST:]

Easy to find help	1
Not easy to find help	2

51aa (a-f)

At any time during your effort to seek help or assistance with [INSERT SERVICE], were you helped by a Jewish agency?

Yes	1	CONTINUE WITH QUESTION 51 (a-f) FOR EACH SERVICE RECEIVED HELP.
No	2	ASK ABOUT NEXT SERVICE "SOUGHT" - SKIP TO QUESTION 52 IF ALL "SEEK" SERVICES WERE NOT "FOUND".

QUESTION 73a SHIFTED TO THIS POSITION.
--

73a Are there any services or programs that you or your family need that are not available now that you think should be provided by the Jewish community?

Answer _____ given _____ RECORD	1
No, nothing	2

52 At any time, not just in the past twelve months, have you (or any member of your household) ever sought help or assistance in adopting a child?

Yes	1	ASK QUESTION 52a.
No	2	SKIP TO 52d.

52a **When you (or someone else in the household) sought help in adopting a child, were you able to get the help or assistance that you wanted?**

Yes	1	ASK QUESTIONS 52b AND 52c.
No	2	SKIP TO QUESTION 52d.

52b **How easy was it to find the help that was needed? Was it...?**
[READ LIST.]

Easy to find help	1
Not easy to find help, but got help	2

52c **At any time during your effort to seek help or assistance in adopting a child were you helped by a Jewish agency?**

Yes	1
No	2

52d [ASKED ONLY IF THERE ARE ANY CHILDREN IN THE HOUSEHOLD AGES 17 OR YOUNGER.]

In terms of services for children, do any children in your household have a learning disability of any kind?

Yes	1	CONTINUE
No	2	SKIP TO QUESTION 53

52e **Has your child's learning disability...?** [READ LIST.]

Prevented him or her from getting a Jewish education	1
Made it very difficult for him or her to get a Jewish education, or	2
Has it not been an issue in terms of Jewish education	3

A few questions for statistical purposes.

53 **Are you registered to vote in New York?**

Yes	1
No	2

53a **Did you vote in the last presidential election between Bush and Gore?**

Yes	1
No	2

54+ I would like to remind you that we are NOT asking for contributions. The next few questions are designed to help the Jewish community understand more about how NEW YORK Jewish households contribute to or do not contribute to charitable causes, both Jewish and non-Jewish.

54 After the September 11th World Trade Center attack, did you (or any other member of your household) contribute to any of the charities specifically set up to help the victims of the attack, or their families?

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 54b.

54a In total - as best you can estimate - was the amount you (or your household) contributed to these September 11th charities [READ LIST.]?

Less than \$100	1
Between \$100 and \$1,000	2
Between \$1,000 and \$5,000	3
\$5,000 or more	4

54b Excluding any contributions made as a result of the September 11th tragedies, during 2001, did you (or any member of your household) contribute to any charity or cause that is NOT specifically Jewish – like the United Way, a cancer charity, a hospital, etc.?

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 55.

- 54c **In total, was the amount you (or your household) contributed in 2001 to Non-Jewish charities [READ LIST]? (IF UNSURE: As best as you can estimate.)**

Less than \$100	1
Between \$100 and \$1,000	2
Between \$1000 and \$5,000	3
\$5,000 or more	4

- 55 **In 2001, did you (or your household) contribute to the United Jewish Appeal-Federation of New York?**

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 55d.

- 55a **How were you contacted by the United Jewish Appeal Federation before you made your contribution? Were you contacted...?**

[READ LIST. ROTATE ITEMS 1-6. ENTER ALL THAT APPLY.]

By Telephone	01
Through the mail	02
At an event	03
In person	04
At Work	05
By the Internet, or	06
In some other way [Specify_____]	97

- 55b **In total, was the amount you (or your household) contributed in 2001 to UJA-FEDERATION of New York (READ LIST)? (IF UNSURE: As best as you can estimate.)**

Less than \$100	1
Between \$100 and \$1,000	2
Between \$1000 and \$5,000	3
\$5,000 or more	4

- 55d [QUESTION 55d ASKED ONLY IF RESPONDED "NO" TO QUESTION 55.]

In 2001, were you (or anyone else in your household) asked to make a donation to United Jewish Appeal - Federation of New York, either through the mail, on the telephone, in person, at work, at an event, or even on the internet?

Yes, contacted	1	CONTINUE.
No, not contacted	2	SKIP TO QUESTION 56.

- 55e **How were you contacted? Were you contacted...?**

[READ LIST. ROTATE LIST 1-6. ENTER ALL THAT APPLY.]

By Telephone	01
Through the mail	02
At an event	03
InPerson	04
At Work	05
By the Internet, or	06
In Some Other Way [Specify_____]	97

56 [IF QUESTION 55 WAS "YES" READ PARENTHESES.]

During 2001, (OTHER than to United Jewish Appeal-Federation) did you (or anyone in your household) contribute to ANY OTHER JEWISH CHARITY, CAUSE, OR ORGANIZATION or to a Synagogue or Temple?

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 57 IF CONTRIBUTED TO UJA-FEDERATION OF NY IN 2001 (QUESTION 55 = 1). SKIP TO QUESTION 59 IF NO CONTRIBUTION TO UJA-FEDERATION OF NEW YORK (QUESTION 55 = 2).

56a **In total, was the amount you (or your household) contributed in 2001 to all Jewish causes and organizations – EXCLUDING UNITED JEWISH APPEAL [READ LIST]? (IF UNSURE: As best as you can estimate.)**

Less than \$100	1
Between \$100 and \$1,000	2
Between \$1000 and \$5,000	3
\$5,000 or more	4

QUESTION 57 ASKED ONLY IF RESPONDENT CONTRIBUTED TO EITHER UJA-FEDERATION OF NEW YORK OR ANY OTHER JEWISH CHARITY [QUESTION 55 =1 AND/OR QUESTION 56 = 1]. OTHERWISE SKIP TO QUESTION 59.

57+ How important were the following issues to you in your decision to contribute to a Jewish organization in 2001? [INSERT ITEM.]

Very important	1
Somewhat important	2
Not very important	3
Not at all important	4

57a The Jewish value of Tzedakah (“Suh-dak-kah)?

57b The responsibility that Jews have to take care of needy Jews throughout the world?

57c DELETED

57d Combating Anti-Semitism?

57e The fact that I could contribute to United Jewish Appeal and have one gift help meet many different needs?

58 DELETED

59 In general, how familiar are you with UJA-Federation of New York? Are you [READ LIST. ROTATE 1-4/4-1.] with what it is and what it does?

Very familiar	1
Somewhat familiar	2
Not very familiar	3
Not at all familiar	4

60 DELETED

61+ **A few final, but very important questions.**

[IF NECESSARY: **Please remember that all information is confidential and totally anonymous.**]

61a **Do you have a will or an estate planning document?**

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 62.

61b **Does it contain a provision for any charity or cause?**

Yes	1	CONTINUE.
No	2	SKIP TO QUESTION 62.

61c **Does this charity provision include a Jewish cause?**

Yes	1
No	2

62 Which of these statements best describes your household's financial situation?

[READ STATEMENTS.]

[IF NECESSARY: **These questions are very important to help plan for the entire New York Jewish community.**]

Cannot make ends meet	1
Just managing to make ends meet	2
Have enough money	3
Have some extra money	4
Wealthy	5

63 For statistical purposes only - in 2001 - was your household's total income before taxes under or over \$35,000? [IF NECESSARY, "Was it under or over \$3,000 a month, or \$700 a week?]

Under \$35,000	1	CONTINUE WITH QUESTION 64.
\$35,000 or over	2	SKIP TO QUESTION 65.
DONT KNOW	D	READ NOTE BELOW TO RESPONDENT REPEAT QUESTION 63 AFTER EXPLANATION IF STILL REFUSAL, SKIP TO QUESTION 66.
REFUSED	R	

[IF RESPONDENT IS RELUCTANT OR REFUSES, READ:]

The categories are quite broad. Income is an important variable for community leaders to help them plan for the community and to convince political leaders to develop new programs. All responses are confidential and anonymous. If you are still uncomfortable, then you obviously do not have to answer. But, please remember that your answers are totally anonymous.

[REPEAT QUESTION 63.]

64 ONLY 1 SUB-PART OF QUESTION 64 WILL BE ASKED OF ANY RESPONDENT.

QUESTION 64+ SEQUENCE HAS TWO GOALS.

- (1) TO ESTABLISH HOUSEHOLD INCOME AND,
- (2) TO ALLOW FOR POVERTY REPORT ANALYSIS BY UTILIZING POVERTY GUIDELINES, ESPECIALLY THE 150% POVERTY GUIDELINES USED BY THE NEW YORK METROPOLITAN COORDINATING COUNCIL ON JEWISH POVERTY.

2002 POVERTY GUIDELINES ARE INCORPORATED INTO QUESTION 64, WITH AMOUNTS TYPICALLY ROUNDED UPWARDS TO THE NEAREST THOUSAND.

IF HOUSEHOLD INCOME IS UNDER \$35,000 IN QUESTION 63,
QUESTION 64 IS ASKED AS APPROPRIATE TO SIZE OF THE HOUSEHOLD.

64a IF HOUSEHOLD SIZE = 1.

Was your total household income in 2001 under \$9,000 annually, between \$9,000 and \$13,000, or at least \$13,000?

Under \$9,000	1	SKIP TO QUESTION 66.
Between \$9,000 and \$13,000	2	
\$13,000 or more	3	
Refused	R	

64b IF HOUSEHOLD SIZE = 2.

Was your total household income in 2001 under \$12,000 annually, between \$12,000 and \$18,000, or at least \$18,000?

Under \$12,000	1	SKIP TO QUESTION 66.
Between \$12,000 and \$18,000	2	
\$18,000 or more	3	
Refused	R	

64c IF HOUSEHOLD SIZE = 3.

Was your total household income in 2001 under \$15,000 annually, between \$15,000 and \$22,000, or at least \$22,000?

Under \$15,000	1	SKIP TO QUESTION 66.
Between \$15,000 and \$22,000	2	
\$22,000 or more	3	
Refused	R	

64d IF HOUSEHOLD SIZE = 4.

Was your total household income in 2001 under \$18,000 annually, between \$18,000 and \$27,000, or at least \$27,000?

Under \$18,000	1	SKIP TO QUESTION 66.
Between \$18,000 and \$27,000	2	
\$27,000 or more	3	
Refused	R	

64e IF HOUSEHOLD SIZE = 5.

Was your total household income in 2001 under \$21,000 annually, between \$21,000 and \$32,000, or between \$32,000 and \$35,000?

Under \$21,000	1	SKIP TO QUESTION 66.
Between \$21,000 and \$32,000	2	
Between \$32,000 and \$35,000	3	
Refused	R	

64f IF HOUSEHOLD SIZE = 6.

Was your total household income in 2001 under \$24,000 annually, or between \$24,000 and \$35,000?

Under \$24,000	1	SKIP TO QUESTION 66.
Between \$24,000 and \$35,000	2	
Refused	R	

64g IF HOUSEHOLD SIZE = 7.

Was your total household income in 2001 under \$27,000 annually, or between \$27,000 and \$35,000?

Under \$27,000	1	SKIP TO QUESTION 66.
Between \$27,000 and \$35,000	2	
Refused	R	

64h IF HOUSEHOLD SIZE = 8 OR LARGER.

Was your total household income in 2001 under \$30,000 annually, or between \$30,000 and \$35,000?

Under \$30,000	1	SKIP TO QUESTION 66.
Between \$30,000 and \$35,000	2	
Refused	R	

QUESTION 65 ASKED IF RESPONDENT ANSWERED \$35,000 OR MORE AS TOTAL HOUSEHOLD IN QUESTION 63.

65 **Was it between \$35,000 and \$50,000, between \$50,000 and \$100,000, between \$100,000 and \$150,000, or over \$150,000?**

Over \$150K	1	SKIP TO QUESTION 66.
\$100K but less than \$150K	2	
\$50K but less than \$100K	3	
\$35K but less than \$50K	4	CONTINUE.
Refused	R	SKIP TO QUESTION 66.

65a [IF HOUSEHOLD SIZE = 7 OR MORE AND HOUSEHOLD INCOME IS BETWEEN \$35,000 AND \$50,000, ASK:]

Was your total household income in 2001 under \$41,000 annually, between \$41,000 and \$45,000, or between \$45,000 and \$50,000?

Under \$41,000	1
Between \$41,000 and \$45,000	2
Between \$45,000 and \$50,000	3
Refused	R

66 **How many different telephone numbers – different telephone lines, not extensions – do you have coming into your household?**

_____ [RECORD RESPONSE.]

IF MORE THAN ONE TELEPHONE NUMBER, CONTINUE WITH QUESTION 66a
OTHERWISE, SKIP TO QUESTION 67.

IF MESSIANIC JEWISH HOUSEHOLD [BASED ON QUESTION 9A OR 10], THEN
THANK GRACIOUSLY AND TERMINATE.

66a **How many of these phone numbers coming into your household are dedicated and exclusively used as a business phone, for a fax machine, or for a computer?**

_____ [RECORD RESPONSE.]

66b **How many of these phone numbers are cell phones?**

_____ [RECORD RESPONSE.]

ASK QUESTION 67 ONLY IF RESPONDENT OR SPOUSE/PARTNER IS AGE 70+.

67 [IF NOT MARRIED/NO PARTNER, AND RESPONDENT IS AGE 70+, ASK:]

Do you have any adult children – over 21 years old - living in the New York area – not including those living with you?

[IF MARRIED/PARTNER, AND EITHER IS 70+, ASK:]

Do you or your (spouse/partner) have any adult children - over 21 years old - living in the New York area – not including those living with you?

Yes	1
No	2

68 DELETED

ASK QUESTION 69 ONLY IF RESPONDENT WAS BORN OUTSIDE U.S.A (BASED ON QUESTION 1) AND RESPONDENT WAS BORN PRIOR TO 1946 (RESPONDENT IS AT LEAST 56 YEARS OLD.

69 **You mentioned that you were born in [INSERT RESPONSE FROM QUESTION1:___]. Between 1933 and 1945, did you live in or flee from a country that was under NAZI rule, NAZI occupation, or under the direct influence or control of the Nazis?**

Yes	1
No	2

ASK QUESTION 70+ ONLY IF SPOUSE/PARTNER WAS BORN OUTSIDE U. S. A. (BASED ON QUESTION 12c) AND SPOUSE/PARTNER WAS BORN PRIOR TO 1946 (SPOUSE/PARTNER IS AT LEAST 56 YEARS OLD).

70+ INTERVIEWER PROMPTS ONE OF TWO VARIANTS.

IF RESPONDENT WAS ASKED QUESTION 69a, READ:

70 **What about your spouse/partner? Between 1933 and 1945, did (he/she) live in or flee from a country that was under NAZI rule, NAZI occupation, or under the direct influence or control of the Nazis?**

IF RESPONDENT WAS NOT ASKED QUESTION 69a, READ:

You mentioned that your (spouse, partner) was born in [INSERT YEAR OF BIRTH]. Between 1933 and 1945, did (he/she) live in or flee from a country that was under NAZI rule, NAZI occupation, or under the direct influence or control of the Nazis?

Yes	1
No	2

QUESTION 71 ASKED ONLY IF THERE ARE OTHER ADULTS IN THE HOUSEHOLD AGE 56+ BESIDES THE RESPONDENT AND SPOUSE/PARTNER.

71 **Between 1933 and 1945, other than you and your (spouse/ partner), did any of the other adults in the household live in or flee from a country that was under NAZI rule, NAZI occupation, or under the direct influence or control of the Nazis?**

Yes	1
No	2

ASK QUESTION 72 IF SAMPLING FRAME RDD UNLISTED
OTHERWISE, SKIP TO QUESTION 73.

72+ Please do not give me your exact street address – but we want to be able to draw a map of the areas in which New York Jewish households live.

72a Would you please tell me the name of the street/avenue on which you live?

[IF NECESSARY STRESS CONFIDENTIALITY: REPEAT “YOU CAN CALL 1-800-905-1656 TO FIND OUT MORE ABOUT THIS STUDY.”]

_____ [RECORD RESPONSE.]

IF REFUSED STREET NAME, SKIP TO QUESTION 72b, ASK FOR
CROSS STREET, THEN CONTINUE - DO NOT ANTAGONIZE IF
RESPONDENT SEEMS TO BE VERY UNCOMFORTABLE.

IF GAVE STREET NAME, ASK QUESTION 72b ONLY – UNLESS
REFUSES, THEN ASK QUESTION 72c+ GENTLY AND RESPECTFULLY.

72b Please tell me the name of a nearby cross street? _____

72c [IF REFUSES IN QUESTION 72a OR 72b, ASK]:

Could you tell me the name of a nearby major intersection? _____

73 **We greatly appreciate your taking the time to answer these questions, and giving so much of yourself. Your answers will be extremely helpful in shaping future decisions about Jewish community programs and services.**

There may be some group discussions/focus groups that will be held later to talk more about some of the questions we have asked you. Would it be okay if we called you in a few months to see if you have the time to join the group discussions?

Yes	1	ADD: QUESTION 73aa: It is usually easier to call you back if we have a first name to ask for. Is that okay? RECORD _____
Not Sure - Hesitant	2	
No	3	

Once again, I would like to thank you for your time and cooperation for graciously completing this survey.

PLEASE END INTERVIEW GRACIOUSLY.

- **NO PHONE NUMBER CONFIRMATION**
- **LANGUAGE OF INTERVIEW RECORDED**