

Appendix 1: Survey instrument

QUESTIONNAIRE FOR MEETING PARTICIPANTS

Thank you for answering these 20 quick questions. Your answers will help the Culture Contrasts in Coalitions study learn how groups can work together better.

We will keep your answers confidential. (If we quote you or anyone from today's meeting, we will change the name of the person and the organization.)

Your first name _____ Your neighborhood / town _____

Please circle one answer for each question or write on the line provided.

1. Before today's meeting, how many meetings of this group have you attended?

None - today is my first One Two or three Many

2. Your race/ethnicity _____

3. Your gender Male Female _____

4. Where were you born? City/State _____ Country _____

5. Please tell us one of your favorite:

Meals _____

TV or radio shows _____

Musicians _____

6. Which of these take up most of your time?

Job Student Unemployed Homemaker / at-home parent

Self-employed Other _____

If you have a job, what's your occupation? _____ Employer? _____

Do you have kids? Yes No Age(s) _____

7. In what decade were you born?

1990s 1980s 1970s 1960s 1950s 1940s 1930s

8. Are you religious? Yes No If yes, which faith tradition? _____

9. Do you live in a ...

House or condo you own Apartment or house you rent Shelter Other _____

10. What was the last school you completed?

10th grade or less High School 2-year College 4-year College Graduate degree

11. Are you a veteran? Yes _____ No _____ (Please turn sheet over to see more questions.)

Please tell us a little about your family background.

Thinking back to the household you lived in when you were about 12 years old . . . :

12. Did your family (or guardians) Own their home? Rent their home? Or other? _____

13. How much education did your parent(s) or guardian(s) have?
(Circle one for each parent or guardian you lived with **at age 12**)

Father?

10th Grade or less High School 2-year College 4-year College Graduate degree

Mother?

10th Grade or less High School 2-year College 4-year College Graduate degree

Other guardian(s)?

10th Grade or less High School 2-year College 4-year College Graduate degree

14. What was the greatest source of income of your parent(s) or guardian(s)?

Hourly wages Salary Small business Welfare Investments

15. Where were your parent(s) or guardian(s) born?

Father _____ Mother _____ Other guardian(s) _____

16. Did you grow up in any particular religious tradition? _____

Now we'd like to know some of your opinions related to this group.

18. In your opinion, the amount of time that this group has spent talking about how people work with each other is . . .

Too much Just right Too little

19. Thinking back over today's meeting, do you feel it went . . .

Very well OK Not very well Very badly

Thank you very much for your information.

WOULD YOU BE INTERESTED IN EARNING \$25 FOR A ONE-HOUR INTERVIEW?

If so, please give us your contact information:

Name _____

Phone number _____ E-mail (if any) _____

Best time of day to reach you _____

We may get in touch with you to schedule a phone interview at your convenience