

RICHMOND

RICHMOND JEWISH POPULATION SURVEY -- 1983

QUESTIONNAIRE

CARD 1

TIME \_\_\_\_\_

ID \_\_\_\_\_

COL 1-4

COL 5 "1"

PHONE \_\_\_\_\_

COL 6-12

COL 13

## LOCATING THE INTERVIEWEE

1. Dial the first/next number on the provided list.
2. Record if number not in use, busy, or temporarily disconnected. Start over.
3. When answered, ask for head of household (Miss, Mr., Mrs.). (Talk only to an adult.) If not head of household, fill out questionnaire as if head of household answered. Make note that answers were given by son, daughter, sister, etc.

This is           (your name)          . The Jewish Community Federation is conducting a survey of the Jewish population. Your phone number came up at random. I do not know your name. Would you please tell me, is there anyone Jewish in your household?

If answer is NO: Thank you. End.

If answer is YES: Could you please give me a few minutes of your time to answer some questions.

FOOTNOTES: Reason for Survey: To find out the size of the Jewish community and to obtain information for use in planning and developing community services.

### Definitions:

JEW -- anyone whose religious preference is Jewish or anyone who was raised Jewish.

ADULT -- 18 years of age or over or somebody under 18 years of age and married.

HEAD OF HOUSEHOLD -- Either husband or wife are considered head of household in the case of married couples.

START INTERVIEW HERE....

CARD 1
COLS

Q-1: A. CIRCLE SEX OF HEAD OF HOUSEHOLD		
Male . . . . .	1	14
Female . . . . .	2	
B. In which zip code do you live? _____		15-17
C. How many years have you lived in this dwelling? _____		18-19
D. How many years have you lived in this general neighborhood? _____		20-21
Q-2: A. How old were you on your last birthday? _____		22-23
B. Where were you born?...		
Richmond (or Richmond area). . . . .	1 SKIP TO Q-3	24
Other southern location _____	2 SKIP TO D	
Elsewhere in U.S. _____	3 SKIP TO D	
Foreign country _____	4	
C. How long have you been in the U.S.? _____		25-26
D. How long have you been in Richmond? _____		27-28
E. What brought you to Richmond? _____		29
Q-3: A. Do you have any plans to move from your current dwelling?		30
Within the next year . . . . .	1	
Within the next 10 years . . . . .	2	
No . . . . .	3	SKIP TO Q-4
Other _____	4	SKIP TO Q-4

Q-3: B.	Where are you planning to move? _____		
	Within Richmond area . . . . .	1	31
	Outside Richmond area. . . . .	2	
	Don't know yet . . . . .	3	
		LOCATION CODE _____	32
C.	What is (are) the reason(s) for this move? (CIRCLE ONE OR TWO)		
	To smaller home/house to apartment . . . . .	.01	33-34
	To larger home/apartment to house. . . . .	.02	35-36
	Retirement . . . . .	.03	
	Climate/health needs . . . . .	.04	
	Safety . . . . .	.05	
	Better schools . . . . .	.06	
	Better neighborhood. . . . .	.07	
	Larger Jewish community. . . . .	.08	
	To be closer to children . . . . .	.09	
	To be closer to parents. . . . .	.10	
	Work opportunity . . . . .	.11	
	Other _____	12	
Q-4: A.	What is your present employment status?		
	Employed full time . . . . .	1	SKIP TO C 37
	Employed part time . . . . .	2	SKIP TO C
	Retired. . . . .	3	SKIP TO C
	Laid off, unemployed . . . . .	4	SKIP TO C
	Student, not working . . . . .	5	
	Student, working part-time . . . . .	6	
	At home/keeping house. . . . .	7	
	Other _____	8	
B.	Were you ever gainfully employed?		
	YES. . . . .	1	38
	NO . . . . .	2	SKIP TO Q-5

Q-4: C. What kind of work do you/did you do on your main job?  
 (EXACTLY WHAT DOES THIS PERSON DO?) CODE \_\_\_\_\_ 39-40

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. Where do/did you work, in which industry? CODE \_\_\_\_\_ 41-42

\_\_\_\_\_

E. Do you/did you work for yourself, someone else, or whatever? 43

Self employed. . . . . 1

Someone else . . . . . 2

Other \_\_\_\_\_ 3

\_\_\_\_\_

(ASK Q-5A ONLY IF NOT ALREADY TOLD)

Q-5: A. What is your religion? 44

Jewish . . . . . 1

Protestant . . . . . 2 SKIP TO Q-6

Catholic . . . . . 3 SKIP TO Q-6

None (born Jewish) . . . . . 4 SKIP TO Q-6

None (not born Jewish) . . . . . 5 SKIP TO Q-6

Other (born Jewish) \_\_\_\_\_ 6 SKIP TO Q-6

Other (not born Jewish) \_\_\_\_\_ 7 SKIP TO Q-6

B. Were you.... 45

Born Jewish. . . . . 1

Converted. . . . . 2

In process of conversion . . . . . 3

Not formally, but feel Jewish. . . . . 4

Other \_\_\_\_\_ 5

\_\_\_\_\_

Q-5: C. Do you identify yourself with a particular branch of Judaism, such as....

- Orthodox . . . . . 1
- Conservative . . . . . 2
- Reform . . . . . 3
- Other \_\_\_\_\_ 4
- None . . . . . 5

46

Q-6: A. What is your present marital status?

- Single, never married. . . . . 1
- Married. . . . . 2
- Widowed. . . . . 3
- Separated. . . . . 4
- Divorced . . . . . 5

SKIP TO Q-11 (page 7)  
ASK C AND GO TO Q-7

47

B. Was your husband/wife....

- Born Jewish. . . . . 1
- Converted. . . . . 2
- In process of conversion . . . . . 3
- Not formally, but feels Jewish . . . 4
- Other \_\_\_\_\_ 5

48

C. How many times have you been married altogether, including your present (last) marriage? \_\_\_\_\_

49

IF RESPONDENT IS NOT MARRIED  
SKIP TO Q-11.

Now I would like to ask you some questions about your husband/wife.

Q-7: A.

CIRCLE SPOUSE'S SEX

- MALE . . . . . 1
- FEMALE . . . . . 2

50

B. How old was your husband/wife on his/her last birthday? \_\_\_\_\_

51-52

Q-7: C. Where was your husband/wife born?

- Richmond (or Richmond area) . . . . . 1
- Other southern location \_\_\_\_\_ 2
- Elsewhere in U.S. \_\_\_\_\_ 3
- Foreign country \_\_\_\_\_ 4

53

Q-8: A. What is your husband's/wife's employment status?

- Employed full time . . . . . 1 SKIP TO C
- Employed part time . . . . . 2 SKIP TO C
- Retired. . . . . 3 SKIP TO C
- Laid off, unemployed . . . . . 4 SKIP TO C
- Student, not working . . . . . 5
- Student, working part-time . . . . . 6
- At home/keeping house. . . . . 7
- Other \_\_\_\_\_ 8

54

B. Was he/she ever gainfully employed?

- YES. . . . . 1
- NO . . . . . 2 SKIP TO Q-9

55

C. What kind of work does/did your husband/wife do?  
(WHAT EXACTLY DOES THIS PERSON DO?)

CODE \_\_\_\_\_

56-57

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. Where does/did he/she work, in which industry?

CODE \_\_\_\_\_

58-59

\_\_\_\_\_

E. Does/did your husband/wife work for himself/herself, someone else,  
or whatever?

- Self . . . . . 1
- Someone else . . . . . 2
- Other \_\_\_\_\_ 3

60

Q-9: A. What is your husband's/wife's religion?

- Jewish . . . . . 1
- Protestant . . . . . 2 SKIP TO D
- Catholic . . . . . 3 SKIP TO D
- None (born Jewish). . . . . 4 SKIP TO D
- None (not born Jewish) . . . . . 5 SKIP TO D
- Other (born Jewish) \_\_\_\_\_ 6 SKIP TO D
- Other (not born Jewish) \_\_\_\_\_ 7 SKIP TO D

61

B. Was/he/she born Jewish?

- Born Jewish. . . . . 1
- Converted. . . . . 2
- In process of conversion . . . . . 3
- Not formally Jewish, but considers  
himself/herself Jewish. . . . . 4
- Other \_\_\_\_\_ 5

62

C. Does he/she identify with a particular branch of Judaism,  
such as....

- Orthodox . . . . . 1
- Conservative . . . . . 2
- Reform . . . . . 3
- Other \_\_\_\_\_ 4
- None . . . . . 5

63

D. How many times has he/she been married altogether, including  
your present marriage? \_\_\_\_\_

64

Q-10: A. Does your family consider itself Jewish?

- YES. . . . . 1
- NO . . . . . 2 SKIP TO Q-11
- Other \_\_\_\_\_ 3

65

B. Does this family consider itself....

- Orthodox . . . . . 1
- Conservative . . . . . 2
- Reform . . . . . 3 SKIP TO Q-11
- Other \_\_\_\_\_ 4 SKIP TO Q-11
- None . . . . . 5 SKIP TO Q-11

66



CARD 1

COLS

Q-10: C. Do you keep kosher?

YES . . . . . 1

67

NO . . . . . 2 SKIP TO Q-11

D. Are you Shomer Shabbos? YES . . . . 1 NO . . . . 2

68

Q-11: A. Do any other people live in this household?

YES . . . . . 1

69

NO . . . . . 2 SKIP TO Q-13

B. Please tell me who they are and some information about them....

INCLUDE ALL WHOSE MAIN/LEGAL RESIDENCE IT IS.

CARD 2  
COL 1-4 ID

RELATIONSHIP TO HEAD OF HOUSEHOLD	AGE	SEX	MARITAL STATUS	IS PERSON JEWISH	
C. CODE	D.	E.	F.	G.	
	6	7-8	9	10	11
	12	13-14	15	16	17
	18	19-20	21	22	23
	24	25-26	27	28	29
	30	31-32	33	34	35
	36	37-38	39	40	41
	42	43-44	45	46	47
	48	49-50	51	52	53

SEX	
Male	1
Female	2

YES	1
NO	2

MARITAL STATUS TABLE	
Single	1
Married	2
Widowed	3
Separated	4
Divorced	5

H. FAMILY SIZE: \_\_\_\_\_

54

IF THERE ARE NO CHILDREN IN THE HOUSEHOLD, SKIP TO Q-13.

Q-12: A. Are any of the children adopted?

YES. . . . . 1 How many? \_\_\_\_\_

55, 56

NO . . . . . 2

B. Are any of the children from previous marriages?

YES. . . . . 1 How many? \_\_\_\_\_

57, 53

NO . . . . . 2

C. Are any of the children in college?

YES. . . . . 1 How many? \_\_\_\_\_

59, 60

NO . . . . . 2 SKIP TO Q-13

D. Where do they go to college?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q-13: A. Are there any grown children from this household who have established their own homes?

YES. . . . . 1

61

NO . . . . . 2 SKIP TO H

CARD 3  
COL 1-4 ID  
COL 5 "3"

Q-13: B. Please tell me their ages, sex, marital status, and where they are located.

AGE	SEX	MARITAL STATUS	IS SPOUSE BORN JEWISH OR?...		WHERE LOCATED	CODE
			D.	E.		
6-7			8	9	10	11
12-13			14	15	16	17
18-19			20	21	22	23
24-25			26	27	28	29
30-31			32	33	34	35
36-37			38	39	40	41

SEX	
Male	1
Female	2

MARITAL STATUS TABLE	
Single	1
Married	2
Widowed	3
Separated	4
Divorced	5

BORN JEWISH	
Born Jewish	1
Convert	2
Other Religion	3
No Religion	4

IF FAMILY DOES NOT CONSIDER ITSELF JEWISH  
END OF INTERVIEW.

H. IF THERE IS NO ONE IN THIS HOUSEHOLD UNDER 18 YEARS OF AGE,  
SKIP TO Q-18 (p. 13).

I now want to ask you about the children's Jewish education, for those children under the age of 18. Let's start with the eldest child....

CARD 4  
COL 1-4 ID  
COL 5 "4"

	Child 1	Child 2	Child 3	Child 4
	6-7	8-9	10-11	12-13
Q-14: A. Age. . . . .				
<div style="border: 1px solid black; padding: 2px; display: inline-block;">                     UNDER SIX YEARS...ASK Q-15                      SIX YEARS OR OVER...SKIP TO Q-16                 </div>				
Q-15: A. Is this child in a day care facility?	14	15	16	17
YES. . . SKIP TO C . . . . .	1	1	1	1
NO . . . . .	2	2	2	2
B. Will child be in day care in the future?	18	19	20	21
YES. . . . .	1	1	1	1
NO . . . SKIP TO D . . . . .	2	2	2	2
Maybe. . . . .	3	3	3	3
C. Which day care facility?	22	23	24	25
D. Do you plan to give this child a Jewish education?	26	27	28	29
YES. . . . .	1	1	1	1
NO . . . SKIP TO F . . . . .	2	2	2	2
Maybe. . . . .	3	3	3	3
E. What kind? (Sunday school? Day School?...)	30	31	32	33

F. If not, reason. \_\_\_\_\_

NEXT CHILD Q-14, IF NO MORE GO TO Q-17 (p. 12)

IF MORE THAN FOUR CHILDREN USE SUPPLEMENT

	Child 1	Child 2	Child 3	Child 4	CARD 4 COLS
Q-16: A. Is he/she receiving a Jewish education?	34	35	36	37	
YES. . . . .	1	1	1	1	
NO . . . SKIP TO C . . . . .	2	2	2	2	
B. What kind of school or program?	38	39	40	41	
Sunday/Saturday at synagogue/temple	1	1	1	1	
Afternoon or afternoon and weekend at synagogue/temple . . . . .	2	2	2	2	
All day school. . . . .	3	3	3	3	
Other _____	4	4	4	4	
GO TO NEXT CHILD Q-14. IF NO MORE, GO TO Q-17					
C. Was he/she ever enrolled in a Jewish school before now?	42	43	44	45	
YES. . . . .	1	1	1	1	
NO . . . . .SKIP TO E. . . . .	2	2	2	2	
D. What kind was this?	46	47	48	49	
Sunday/Saturday at synagogue/temple	1	1	1	1	
Afternoon or afternoon and weekend at synagogue/temple . . . . .	2	2	2	2	
All day school. . . . .	3	3	3	3	
Other _____	4	4	4	4	
E. Do you think that you will enroll him/her in a Jewish school at some point in the future?	50	51	52	53	
YES. . . . .	1	1	1	1	
NO . . . . .	2	2	2	2	
Maybe. . . . .	3	3	3	3	

	Child 1	Child 2	Child 3	Child 4
Q-16: F. Is there a particular reason why child is not now receiving a Jewish education?	54	55	56	57
Ended with Bar Mitzvah or Confirmation . . . . .	1	1	1	1
Cost too much . . . . .	2	2	2	2
Transporation problem . . . . .	3	3	3	3
Parents not interested. . . . .	4	4	4	4
Child doesn't want it . . . . .	5	5	5	5
Other _____	6	6	6	6

CARD 4  
COLS

GO TO NEXT CHILD Q-14. If NO MORE GO TO Q-17.

IF MORE THAN FOUR CHILDREN USE SUPPLEMENT

Q-17: A. Have any of the children participated in overnight or day camp programs which provide Jewish content?  
 YES. . . . . 1 SKIP TO C 58  
 NO . . . . . 2  
 If not, why? \_\_\_\_\_

B. Do you plan to enroll them in any such camp programs in the future?  
 YES. . . . . 1 59  
 NO . . . . . 2  
 Don't know, maybe. . . 3  
 If not, why? \_\_\_\_\_

C. Do any of the children belong to or participate in other Jewish youth programs?  
 YES. . . . . 1, Which? \_\_\_\_\_ 60  
 NO . . . . . 2

D. Have any of the children visited Israel through organized youth programs?  
 YES. . . . . 1 SKIP TO Q-18 61  
 NO . . . . . 2  
 If not, why? \_\_\_\_\_

Q-17: E. Do you plan for them to participate in any youth programs in the future?

YES. . . . . 1

NO . . . . . 2

Don't know, maybe. . . 3

If yes which? \_\_\_\_\_

62

Q-18: A. Is there any member of this family living in an institution due to physical or mental handicap?

YES. . . . . 1

NO . . . . . 2

If yes, who? \_\_\_\_\_

Where? \_\_\_\_\_

What disability? \_\_\_\_\_

63

B. Is there any member of this household limited in his/her activities due to a physical or mental handicap or chronic disability?

YES. . . . . 1 How many \_\_\_\_\_

NO . . . . . 2 SKIP TO E (p. 14)

64

Person 1	Person 2
----------	----------

C. What is this person's age?

_____	_____
-------	-------

65-66, 67-68

D. Is his/her disability or handicap....

Visual \_\_\_\_\_

1	1
---	---

69, 70

Hearing \_\_\_\_\_

2	2
---	---

Physical, Orthopedic \_\_\_\_\_

3	3
---	---

Mental \_\_\_\_\_

4	4
---	---

Emotional \_\_\_\_\_

5	5
---	---

Multiple \_\_\_\_\_

6	6
---	---

Other \_\_\_\_\_

7	7
---	---

Q-18: E. Is there anyone in this household who is in need of adult day care services? (A PLACE TO SPEND THE DAY FOR AN ELDERLY OR HANDICAPPED PERSON WHERE SUBSTITUTE CARE SERVICES ARE PROVIDED, INCLUDING RECREATIONAL ACTIVITIES, MEALS, ETC.)

- YES. . . . . 1
- NO . . . . . 2

71

Q-19: A. Do you or anyone else in your household belong to a temple or synagogue?

- Family belongs to one. . . . . 1 SKIP TO Q-20
- Family belongs to two. . . . . 2 SKIP TO Q-20
- Each spouse belongs to different . . . . 3 SKIP TO Q-20
- Respondent only. . . . . 4 SKIP TO Q-20
- Spouse only. . . . . 5 SKIP TO Q-20
- Other \_\_\_\_\_ 6
- No one in household. . . . . 7

72

B. Is there any particular reason why you are not a member of a synagogue?

- Not religious. . . . . 1
- Children not of age. . . . . 2
- Too expensive. . . . . 3
- Too far. . . . . 4
- Lack of transportation . . . . . 5
- Physically unable. . . . . 6
- Other \_\_\_\_\_ 7

73

Q-20: A. Have any members of this family been to Israel?

- Family . . . . . 1 SKIP TO Q-21
- Respondent and/or spouse . . 2 SKIP TO Q-21
- Children only. . . . . 3
- Other \_\_\_\_\_ 4
- No one . . . . . 5

74



Q-20: B.	Do you plan to go?		
	YES. . . . .	1	75
	NO . . . . .	2	
Q-21: A.	Does anyone in your family use the JCC?		
	YES. . . . .	1	76
	NO . . . . .	2	
B.	Is anyone in your family a member of the JCC?		
	YES. . . . .	1 SKIP TO E	77
	NO . . . . .	2	
C.	Have you ever belonged?		
	YES. . . . .	1	78
	NO . . . . .	2	
D.	Can you tell me why you don't belong?		
	Not interested . . . . .	.1	79
	Too expensive. . . . .	.2	
	Transportation problem . . . . .	.3	
	Too far. . . . .	.4	
	No time. . . . .	.5	
	Program unsuitable . . . . .	.6	
	Other _____		
	_____	7	
E.	What is your opinion of the JCC?		
<hr/>			
<hr/>			
	INTERVIEWER: RECORD R's GENERAL ATTITUDE		
	Positive . . . . .	.1	80
	Negative . . . . .	.2	
	In between . . . . .	.3	
	Don't know . . . . .	.4	

CARD 5  
COL 1-5 ID  
COL 5 "5"

- Q-22: A. Are you aware of the activities of the Jewish Community Federation? COLS
- YES. . . . . 1 ASK B | 6
  - NO . . . . . 2 ASK C |
- B. Have you participated in the Jewish Community Federation's activities? |
- YES. . . . . 1 | 7
  - NO . . . . . 2 |
- C. What is your opinion of the work of the Jewish Community Federation? |

INTERVIEWER: RECORD R's GENERAL ATTITUDE

- Positive . . . . . 1 | 8
- Negative . . . . . 2 |
- In between . . . . . 3 |
- Don't know . . . . . 4 |

- Q-23: A. Are you familiar with Rudlin Torah Academy? |
- YES. . . . . 1 | 9
  - NO . . . . . 2 SKIP TO Q-24 |

- B. Would you use it or recommend it to friends? |
- YES. . . . . 1 | 10
  - NO . . . . . 2 |

- Q-24: A. Are you familiar with the services of Jewish Family Service? |
- YES. . . . . 1 | 11
  - NO . . . . . 2 SKIP TO Q-25 |

- B. Would you use or refer its services? |
- YES. . . . . 1 | 12
  - NO . . . . . 2 Why? \_\_\_\_\_ |

Q-25: A.	Are you familiar with the services of Beth Shalom Home?	
	YES. . . . . 1	13
	NO . . . . . 2 SKIP TO Q-26	
B.	Would you use it or recommend it to friends?	
	YES. . . . . 1	14
	NO . . . . . 2 Why? _____	
Q-26: A.	Are you familiar with the services of Beth Shalom Woods?	
	YES. . . . . 1	15
	NO . . . . . 2 SKIP TO Q-27	
B.	Would you use it or recommend it to friends?	
	YES. . . . . 1	16
	NO . . . . . 2 Why? _____	
Q-27: A.	Are you familiar with Masada-Hillel program at V.C.U.?	
	YES. . . . . 1	17
	NO . . . . . 2 SKIP TO Q-28	
B.	Do you have any opinion about it?	
<hr/>		
	INTERVIEWER: RECORD R's GENERAL ATTITUDE	
	Positive . . . . . 1	18
	Negative . . . . . 2	
	In between . . . . . 3	
	Don't know . . . . . 4	

Q-28: Do you or anyone in your household belong to any other Jewish organizations?

YES. . . . . 1

NO . . . . . 2 SKIP TO Q-29

19

If yes, which?

Active in it?  
(CHECK)

YES NO

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

BELONG TO \_\_\_\_\_

20

ACTIVE IN \_\_\_\_\_

21

Q-29: A. Do you feel the need for social, educational, or welfare services which are not presently offered by the Jewish community?

YES. . . . . 1

NO . . . . . 2

22

B. If yes, what are they? \_\_\_\_\_

\_\_\_\_\_

Q-30: A. Can you tell me what leisure time activities you/your family enjoy?

\_\_\_\_\_

\_\_\_\_\_

Q-31: A. Are you active in any organization in the general community?

YES. . . . . 1

NO . . . . . 2

23

B. Are you a contributor to the United Way of Greater Richmond?

YES. . . . . 1

NO . . . . . 2

24

19  
END OF INTERVIEW

Thank you for your cooperation. May I have your permission to call back if I have further questions?

YES. . . . . 1 ASK NEXT QUESTIONS  
NO . . . . . 2 FINISH

When is a good time to call?

Anytime. . . . . 1  
Weekdays A.M.. . . . . 2  
Weekdays afternoon . . . . . 3  
Weekdays evening . . . . . 4  
Saturday . . . . . 5  
Sunday . . . . . 6  
Other (specify) \_\_\_\_\_ 7

WAS RESPONDENT....

Cooperative. . . . . 1  
Impatient. . . . . 2  
Difficult. . . . . 3  
Other (comment) \_\_\_\_\_ 4

Time of interview in minutes \_\_\_\_\_ Date \_\_\_\_\_

Interviewer \_\_\_\_\_