

JCSSA Questionnaire

Jewish Community Survey of South Africa 2019

27 March 2019

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|--|
| Group A – Answered if Age is Odd or Not stated |
|--|

| |
|-----------------------------------|
| Group B – Answered if Age is Even |
|-----------------------------------|

1) Introductory screen

[Intro screen text - start]

The Jewish Community Survey of South Africa
HAVE YOUR SAY

antisemitism? assimilation?
Jewish education?
emigration? identity?

jpr / Institute for Jewish Policy Research Kaplan Centre JEWISH STUDIES JCSSA JEWISH COMMUNITY SURVEY OF SOUTH AFRICA

0%

Introduction

Welcome to the Jewish Community Survey of South Africa 2019. Thank you for choosing to take part in this important nationwide study.

This is a once-in-a-decade opportunity and the questionnaire will take around 45 minutes to complete. Your responses are saved as you go along.

We encourage you to try and complete the survey in one session, but you can close your browser at any time and after 15 minutes **return to the exact place you left off by simply re-clicking the link you used to start the survey.**

We do not recommend you answer this survey on a mobile phone as it has not been designed for small screens.

Please ensure your answers reflect your own views and experiences and not those of others.

All responses to this survey are anonymised and strictly confidential.

Do you want to proceed with the survey?

Yes
 No

Continue

You can close your browser any time and return to the exact place you left off by clicking the link used to start the survey.

For help and to provide feedback email: info@jcssa2019.co.za
Phone: 021 650 3062 | www.jcssa2019.co.za
[Click here](#) for further information about JCSSA 2019

This survey is supported by the [Isaac and Jessie Kaplan Centre for Jewish Studies and Research](#), at the University of Cape Town.

[Intro screen text - end]

2) Screener questions

| | |
|---|--------------------------|
| QS1 | Ask All |
| <p>This survey is only for people who:</p> <p>A) see themselves as being Jewish in any way at all, AND B) are aged 18 or over, AND C) currently live in South Africa.</p> <p>Does this include you?</p> <p><i>Please select one option</i></p> | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |

0%

Screener questions

This survey is only for people who:

A) see themselves as being Jewish in any way at all, AND
 B) are aged 18 or over, AND
 C) currently live in South Africa.

Does this include you?

Please select one option

Yes
 No

If QS1 EQ 2 (No) show:

0%

Introduction

Unfortunately you are ineligible to take part in this survey. Thank you for your interest in the Jewish Community Survey of South Africa 2019.

“Unfortunately you are ineligible to take part in this survey. Thank you for your interest in the Jewish Community Survey of South Africa 2019.”

****END OF SURVEY****

| | |
|-----|-------------|
| QS2 | If QS1 EQ 1 |
| | |

| | |
|--|--------------------------|
| Do you: | |
| <i>Please select one option</i> | |
| | |
| 1. Live alone? | <input type="checkbox"/> |
| 2. Live in a private household with at least one other person (whether or not related to you)? | <input type="checkbox"/> |
| 3. Other living arrangement? (E.g. aged care home) | <input type="checkbox"/> |

FLAG1: Lone individual, sole Jewish adult

If QS2 NE 2 flag respondent FLAG1_IND-LONE

| | |
|--|--|
| QS3 | Ask if QS2 EQ 2 (Live in a household with at least one other adult) |
| | |
| Other than yourself, is there anyone else living in your household who is also Jewish and aged 18 or above? | |
| <i>Please select one option</i> | |
| | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |

FLAG2: Household Reference Person (HRP), sole Jewish adult in household

If QS3 EQ 2 (in a household, sole Jewish adult) flag respondent FLAG2_HRP-SOLE

| | |
|--|---|
| QS4 | Ask if QS3 EQ 1 (two or more Jewish adults in household) |
| | |
| Of the Jewish people living in your household who are aged 18 and above, is your birthday the first to occur in the calendar year? (i.e. starting from January 1st) | |
| Note this question is important for quality control purposes and enhances the value of the data we collect. | |
| <i>Please select one option</i> | |
| | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |

FLAG3: HRP in a household with more than one Jewish adult

If QS4 EQ 1 (in a household with multiple Jewish adults and first birthday in year) flag respondent FLAG3_HRP-MULTI

FLAG4: Individual in a household with more than one Jewish adult

If QS4 EQ 2 (in a household with multiple Jewish adults and not first birthday in year) flag respondent FLAG4_IND-MULTI

3) You and your family

[Individual demographics sequence – start]

| | |
|--|---|
| Q4.1 | Ask if FLAG1_IND-LONE or FLAG4_IND-MULTI (individual) |
| What age were you at your last birthday? | |
| <i>Please select the age you turned from the drop menu</i> | |
| Drop menu (18-120) | |

| | |
|---------------------------------|---|
| Q4.2 | Ask if FLAG1_IND-LONE or FLAG4_IND-MULTI (individual) |
| Are you... | |
| <i>Please select one answer</i> | |
| 1. Male | <input type="checkbox"/> |
| 2. Female | <input type="checkbox"/> |
| 3. PNTS | |

| | |
|---------------------------------|---|
| Q4.3 | Ask if FLAG1_IND-LONE or FLAG4_IND-MULTI (individual) |
| And are you... | |
| <i>Please select one answer</i> | |
| 1. Jewish by birth | <input type="checkbox"/> |
| 2. Jewish by conversion | <input type="checkbox"/> |
| 3. Jewish in some other way [I] | <input type="checkbox"/> |
| 4. Not Jewish | <input type="checkbox"/> |

Info Button [I] at Q4.3 3 “You regard yourself as being Jewish but **not** by birth or by conversion. This could mean you identify as Jewish because of a Jewish parent or grandparent, a Jewish partner, or you have partially converted to Judaism, or are Jewish by cultural association etc.”

| | |
|--|---|
| Q8 | Ask if FLAG1_IND-LONE or FLAG4_IND-MULTI (individual) |
| How would you describe yourself in terms of population group? | |
| <i>Please select one answer</i> | |
| 1. Black African | <input type="checkbox"/> |
| 2. Coloured | <input type="checkbox"/> |
| 3. Indian or Asian | <input type="checkbox"/> |

| | |
|----------|--------------------------|
| 4. White | <input type="checkbox"/> |
| 5. Other | <input type="checkbox"/> |

[Individual personal demographics sequence – end]

[Householder demographics sequence – start]

| | | | | | |
|--|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Q10 | Ask if FLAG2_HRP-SOLE or FLAG3_HRP-MULTI (householder) | | | | |
| Ask for up to 10 household members | | | | | |
| Please list everyone who currently lives in your household, including children, in the grid below, starting with yourself in the first column. | | | | | |
| Please tell us each person's relationship to you, their age, sex, and whether or not they are Jewish. | | | | | |
| Please select the appropriate answers for each person in your household | | | | | |
| | You | Person 2 | Person 3 | Person 4 | As required (Up to Person 10) |
| A) Relationship to you | | | | | |
| Please select one answer per person | | | | | |
| 1. Partner or spouse | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Son or daughter (including step/adopted) | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Parent/Parent in law | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Brother/Sister (including step) | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Other relative | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Flatmate/housemate | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Unrelated domestic worker that lives in your household (e.g. carer, nanny, cleaner) | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Other non-relative | x | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B) Age turned at last birthday | Drop menu (18-120) | Drop menu (under 1, 1, 2, ... 120) | Drop menu (under 1, 1, 2, ... 120) | Drop menu (under 1, 1, 2, ... 120) | Drop menu (under 1, 1, 2, ... 120) |
| C) Sex | | | | | |
| Please select one answer per person | | | | | |
| 1. Male | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Female | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D) Is this person... | | | | | |
| Please select one answer per person | | | | | |
| 1. Jewish by birth | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Jewish by conversion | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Jewish in some other way [I] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 4. Not Jewish | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E) Person's population group... | | | | | |
| <i>Please select one answer per person</i> | | | | | |
| 1. Black African | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Coloured | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Indian or Asian | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. White | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

[Info Button \[I\] at Q10D 3](#) “This person may regard him or herself as being Jewish but **not** by birth or by conversion. This could mean he/she identifies as Jewish because of a Jewish parent or grandparent, a Jewish partner, or he/she has partially converted to Judaism, or is Jewish by cultural association etc.”

[\[householder personal demographics sequence – end\]](#)

| | |
|--|---|
| Q9.1 | Ask all |
| Do you have any children (including adult, step and/or adopted children) who do NOT currently live with you and, if so, how many? | |
| <i>Please select one answer</i> | |
| 1. No | <input type="checkbox"/> |
| 2. Yes, I have a child/children that I do not currently live with | Drop menu (1 child, 2 children, ... 20 children or more) |

| | |
|--|--|
| Q9.2 | Ask if Q9.1 EQ 2 (respondent has child/ren not at home) |
| Separate row for each child mentioned at Q9.1 | |
| How old is each of your children, including adult, step and adopted children, who do NOT live with you? | |
| <i>Please enter the ages for each child</i> | |
| | Age you child turned at last birthday |
| 1. Child 1 | Drop menu (under 1, 1, 2, ... 120) |
| As required | |

| | |
|--|---|
| Q12.1 | Ask if Q4.2 EQ 2 OR Q10C You EQ 2 (respondent is female) |
| How many times have you given birth, if at all? | |
| This question is used to provide important demographic information about the Jewish population. | |
| <i>Please count twins/triplets separately, i.e. as two/three births</i> | |
| | |

| | |
|-----------------------------|---------------------------------------|
| 1. I have never given birth | <input type="checkbox"/> |
| 2. I have given birth | Drop menu (Once, 2 times... 20 times) |
| 3. Prefer not to say | <input type="checkbox"/> |

| | |
|--|-------------------------------------|
| Q12.2 | Ask if Q12.1 EQ 2 (has given birth) |
| How old were you when you first gave birth? | |
| Please select one answer | |
| 1. Drop menu (Under 15, 15, 16... 70) | <input type="checkbox"/> |
| 2. Prefer not to say | <input type="checkbox"/> |

4) Partnerships

| | |
|--|--------------------------|
| Q43.1 | Ask All |
| What is your current legal <u>marital</u> status? | |
| Please select one answer | |
| 1. Single, that is never married | <input type="checkbox"/> |
| 2. Married and living with your spouse | <input type="checkbox"/> |
| 3. Married, but separated | <input type="checkbox"/> |
| 4. Divorced | <input type="checkbox"/> |
| 5. Widowed | <input type="checkbox"/> |
| 6. Something else | <input type="checkbox"/> |

| | |
|---|--|
| Q43.2 | Ask if Q43.1 NE 2 (not currently married and living with spouse) |
| And are you... | |
| Please select one answer | |
| 1. Currently living with a partner | <input type="checkbox"/> |
| 2. In a long-term partnership but not living together | <input type="checkbox"/> |
| 3. Not in any kind of long-term partnership | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

| | |
|---|--------------------------|
| Q46 | Ask all |
| Which of the following best describes how you think of yourself? | |
| Please select one answer | |
| 1. Heterosexual or straight | <input type="checkbox"/> |
| 2. Gay or lesbian | <input type="checkbox"/> |
| 3. Bisexual | <input type="checkbox"/> |

| | |
|------------------------------|--------------------------|
| 4. Other (please specify) | Write in |
| 5. I would prefer not to say | <input type="checkbox"/> |

| | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Q32.3 | Ask all, randomise 1-4 | | | |
| Excluding your current partner, if you have one, have you ever had a romantic relationship with a NON-JEWISH person who is: | | | | |
| <i>Please select one answer per column</i> | | | | |
| | A. Yes, seriously [I] | B. Yes, casually | C. No | D. Prefer not to say |
| 1. Black African | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Coloured | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Indian or Asian | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. White | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | | | | |

Info Button [I] at Q32.3 A “By ‘seriously’ we mean you moved in together and/or you considered marrying this person.”

[Divorce sequence - start]

| | |
|---|---|
| Q44.1 | Ask if Q43.1 EQ 2,3,4,5 (currently or previously married) |
| In what year did your current, or most recent, marriage begin? | |
| <i>Please select one answer</i> | |
| Please select the year | numeric input with a validation (2019 - 1900) |

| | |
|--|---|
| Q44.2 | Ask if Q43.1 EQ 2,3,4,5 (currently or previously married) |
| Was your current, or most recent, marriage held under Jewish religious auspices? | |
| <i>Please select one answer</i> | |
| 1. Yes | <input type="checkbox"/> |
| 2. No, although the person I married was Jewish | <input type="checkbox"/> |
| 3. No, the person I married was not Jewish | <input type="checkbox"/> |
| 4. No, the person I married was not Jewish, but our wedding included Jewish rituals | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> |

| | |
|---|--|
| Q45.1 | Ask if Q43.1 NE 1 (not single never married) |
| How many times, if at all, have you been divorced? | |
| <i>Please select one answer</i> | |

| | |
|------------------------|--------------------------|
| 1. Never | <input type="checkbox"/> |
| 2. Once | <input type="checkbox"/> |
| 3. Twice | <input type="checkbox"/> |
| 4. Three times or more | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> |

| | |
|--|--|
| Q45.2 | Ask if Q45.1 EQ 2,3,4 (previously divorced) |
| In what year did your (most recent) divorce take place? | |
| <i>Please select one answer</i> | |
| Please select the year | numeric input with a validation (2019 - 1900) |

| | |
|--|--|
| Q45.3 | Ask if Q45.1 EQ 2,3,4 (previously divorced) |
| Was this divorce from a Jewish religious wedding, and if so, was a 'get' (Jewish divorce document) granted? | |
| <i>Please select one answer</i> | |
| 1. No, not a Jewish religious wedding | <input type="checkbox"/> |
| 2. Yes, Jewish religious wedding and a 'get' was granted | <input type="checkbox"/> |
| 3. Yes, Jewish religious wedding but no 'get' was granted | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

[Divorce sequence - end]

5) Schooling

[Individual schooling sequence – start]

| | | |
|---|---|--------------------------------------|
| Q71 | Ask if FLAG1_IND-LONE or FLAG4_IND-MULTI (Flags 1 OR 4) (lone person or birthday not first in calendar year) | |
| What type of schools did you attend? | | |
| In cases where you attended more than one school per stage, please indicate the school you attended for the <u>longest period of time</u>. | | |
| <i>Please select one option for each stage</i> | | |
| A. Pre-Primary school | 1. Non-Jewish private school | <input type="checkbox"/> |
| | 2. Jewish school | <input type="checkbox"/> |
| | 3. A pre-primary school outside South Africa | <input type="checkbox"/> |
| | 4. Did not attend pre-primary school | <input type="checkbox"/> |
| | 5. Other | <input type="checkbox"/> |
| | 6. Don't know | <input type="checkbox"/> |
| | 1. Non-Jewish private school | <input type="checkbox"/> Show List C |

| | | |
|-------------------|--|--------------------------------------|
| B. Primary school | 2. Government (public) school | <input type="checkbox"/> Show List B |
| | 3. Jewish school | <input type="checkbox"/> Show List A |
| | 4. A primary school outside South Africa | <input type="checkbox"/> |
| | 5. Did not attend primary school | <input type="checkbox"/> |
| | 6. Other | <input type="checkbox"/> |
| | 7. Don't know | <input type="checkbox"/> |
| | | |
| C. High school | 1. Non-Jewish private school | <input type="checkbox"/> Show List F |
| | 2. Government (public) school | <input type="checkbox"/> Show List E |
| | 3. Jewish school | <input type="checkbox"/> Show List D |
| | 4. A high school outside South Africa | <input type="checkbox"/> |
| | 5. Did not attend high school | <input type="checkbox"/> |
| | 6. Other | <input type="checkbox"/> |
| | 7. Don't know | <input type="checkbox"/> |

[Individual schooling sequence – end]

[Householder schooling sequence2 – start]

| | | | |
|--|---|--|--|
| Q69 | Ask if FLAG2_HRP-SOLE or FLAG3_HRP-MULTI (Flags 2 OR 3) (householder in multi-person household) | | |
| <p>What type of schools did you and the following members of your household attend (or currently attend)?</p> <p>Please answer for all people CURRENTLY living in your household and who are <u>related to you</u>, including step children.</p> <p>In cases where more than one school per stage was attended, please indicate the school attended for the <u>longest period of time</u>.</p> <p><i>Please select one option for each stage for yourself and each person in your household</i></p> | | | |
| | You | Person 2 Show based on response to Q10 “Person 2 your <relationship>, aged <age>” Ask for each additional household member at Q10 if relationship EQ Partner, Parent, Child, Sibling. | Person 3 Show based on response to Q10 “Person 3 your <relationship>, aged <age>” As required |
| A. Pre-Primary school | 1. Non-Jewish private school | <input type="checkbox"/> | <input type="checkbox"/> |
| | 2. Jewish school | <input type="checkbox"/> | <input type="checkbox"/> |
| | 3. A pre-primary school outside South Africa | <input type="checkbox"/> | <input type="checkbox"/> |
| | 4. Did not attend pre-primary school | <input type="checkbox"/> | <input type="checkbox"/> |
| | 5. Other | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|-------------------|--|--------------------------------------|--------------------------------------|
| | 6. Don't know | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Primary school | 1. Non-Jewish private school | <input type="checkbox"/> Show List C | <input type="checkbox"/> Show List C |
| | 2. Government (public) school | <input type="checkbox"/> Show List B | <input type="checkbox"/> Show List B |
| | 3. Jewish school | <input type="checkbox"/> Show List A | <input type="checkbox"/> Show List A |
| | 4. A primary school outside South Africa | <input type="checkbox"/> | <input type="checkbox"/> |
| | 5. Did not attend primary school | <input type="checkbox"/> | <input type="checkbox"/> |
| | 6. Other | <input type="checkbox"/> | <input type="checkbox"/> |
| | 7. Don't know | <input type="checkbox"/> | <input type="checkbox"/> |
| C. High school | 1. Non-Jewish private school | <input type="checkbox"/> Show List F | <input type="checkbox"/> Show List F |
| | 2. Government (public) school | <input type="checkbox"/> Show List E | <input type="checkbox"/> Show List E |
| | 3. Jewish school | <input type="checkbox"/> Show List D | <input type="checkbox"/> Show List D |
| | 4. A high school outside South Africa | <input type="checkbox"/> | <input type="checkbox"/> |
| | 5. Did not attend high school | <input type="checkbox"/> | <input type="checkbox"/> |
| | 6. Other | <input type="checkbox"/> | <input type="checkbox"/> |
| | 7. Don't know | <input type="checkbox"/> | <input type="checkbox"/> |

[Alternative householder schooling sequence2 – end]

[List A: Jewish Primary Schools]

| |
|---|
| Ask if Q71 B EQ 3 OR Q69 B EQ 3 |
| Which school was this? |
| |
| 1. Bernard Patley Primary school (Johannesburg) |
| 2. Carmel College (Durban) |
| 3. Carmel School (Pretoria) |
| 4. Hebrew Academy (Cape Town) |
| 5. Herzlia (Cape Town) |
| 6. Hirsch Lyons (Johannesburg) |
| 7. Jewish Government School (Johannesburg) |
| 8. Johannesburg Cheder (Johannesburg) |
| 9. King David Schools (Johannesburg) |
| 10. Phyllis Jowell Jewish Day School (Cape Town) |
| 11. Sandton Sinai (Johannesburg) |
| 12. Shaarei Torah School (Johannesburg) |
| 13. Sinai Academy (Cape Town) |
| 14. Theodor Herzl (Port Elizabeth) |
| 15. Torah Academy (Johannesburg) |
| 16. Umhlanga Jewish Day School (Akiva College) (Durban) |
| 17. Yeshiva College (Johannesburg) |
| 18. Yeshiva Maharsha (Johannesburg) |
| 19. Other Jewish Primary School |

[List B: Government/Public Primary Schools]

| |
|--|
| Ask if Q71 B EQ 2 OR Q69 B EQ 2 |
| Which school was this? |
| |
| 1. Bedfordview Primary School (Johannesburg) |

| |
|---|
| 2. Camps Bay Primary School (Cape Town) |
| 3. Glenhazel Primary School (Johannesburg) |
| 4. Grove Primary School (Cape Town) |
| 5. King Edward VII Preparatory School (KEPS) (Johannesburg) |
| 6. Muizenberg Junior School (Cape Town) |
| 7. Northfield Primary School (Johannesburg) |
| 8. Rondebosch Boys' Preparatory School (Cape Town) |
| 9. Rustenburg Girls' Junior School (Cape Town) |
| 10. SACS Junior School (Cape Town) |
| 11. Sea Point Primary School (Cape Town) |
| 12. Tafelberg School (Cape Town) |
| 13. Wynberg Junior Schools (Cape Town) |
| 14. Other Government/Public Primary School |

[List C: Non-Jewish Private Primary Schools]

| |
|---|
| Ask if Q71 B EQ 1 OR Q69 B EQ 1 |
| Which school was this? |
| |
| 1. Bella Vista School (Johannesburg) |
| 2. Crawford College (Durban) |
| 3. Crawford College (Johannesburg) |
| 4. Crossroads School (Johannesburg) |
| 5. Eden Schools (Durban) |
| 6. Eden Schools (Johannesburg) |
| 7. Japari School (Johannesburg) |
| 8. Reddam House (Cape Town) |
| 9. Reddam House (Johannesburg) |
| 10. Redhill School (Johannesburg) |
| 11. St John's College (Johannesburg) |
| 12. Other non-Jewish Private Primary School |

[List D: Jewish High Schools]

| |
|--|
| Ask if Q71 C EQ 3 OR Q69 C EQ 3 |
| Which school was this? |
| |
| 1. Beis Yaakov Girl's High School (Johannesburg) |
| 2. Cape Town Torah High (Cape Town) |
| 3. Carmel College (Durban) |
| 4. Carmel School (Pretoria) |
| 5. Hebrew Academy (Cape Town) |
| 6. Herzlia (Cape Town) |
| 7. Hirsch Lyons (Johannesburg) |
| 8. Johannesburg Cheder (Johannesburg) |
| 9. King David Schools (Johannesburg) |
| 10. Mesivta Shaarei Torah High School (Johannesburg) |
| 11. Theodor Herzl (Port Elizabeth) |
| 12. Torah Academy (Johannesburg) |
| 13. Yeshiva College (Johannesburg) |

| |
|-------------------------------------|
| 14. Yeshiva Maharsha (Johannesburg) |
| 15. Other Jewish High School |

[List E: Government/Public High Schools]

| |
|---|
| Ask if Q71 C EQ 2 OR Q69 C EQ 2 |
| Which school was this? |
| |
| 1. Brynston High (Johannesburg) |
| 2. Camps Bay High School (Cape Town) |
| 3. Ellerslie Girl's High School (Cape Town) |
| 4. Good Hope Seminary (Cape Town) |
| 5. Greenside High School (Johannesburg) |
| 6. Highlands North Boys' High School (Johannesburg) |
| 7. Hydepark High School (Johannesburg) |
| 8. King Edwards Schools (KES) (Johannesburg) |
| 9. Muizenberg High School (Cape Town) |
| 10. Northview High School (Johannesburg) |
| 11. Parktown Boys' High School (Johannesburg) |
| 12. Parktown Girls' High School (Johannesburg) |
| 13. Pretoria Boys High School (Pretoria) |
| 14. Pretoria Girls High School (Pretoria) |
| 15. Rondebosch Boys High School (Cape Town) |
| 16. Rustenburg Girls High School (Cape Town) |
| 17. SACS High School (Cape Town) |
| 18. Sans Souci Girls' High School (Cape Town) |
| 19. Sandown High School (Johannesburg) |
| 20. Sandringham High School (Johannesburg) |
| 21. Sea Point School (Cape Town) |
| 22. Tafelberg School (Cape Town) |
| 23. Waverley Girls High School (Johannesburg) |
| 24. Westerford High School (Cape Town) |
| 25. Wynberg Boys' High School (Cape Town) |
| 26. Other non-Jewish Government/Public High School |

[List F: Non-Jewish Private High Schools]

| |
|--|
| Ask if Q71 C EQ 1 OR Q69 C EQ 1 |
| Which school was this? |
| |
| 1. Clifton School (Durban) |
| 2. Crawford College (Durban) |
| 3. Crawford College (Johannesburg) |
| 4. Durban Girls' College (Durban) |
| 5. Eden Schools (Johannesburg) |
| 6. Eden Schools (Durban) |
| 7. Reddam (Cape Town) |
| 8. Reddam (Johannesburg) |
| 9. Redhill (Johannesburg) |
| 10. St John's College (Johannesburg) |
| 11. Other non-Jewish Private High School |

| | |
|--|---|
| Q70 | Ask if at Q71 A=3 or B=4 or C=4, OR if at Q69 for 'You' A=3 or B=4 or C=4 (respondent attended a school outside SA), Rotate 1 and 2 |
| You mentioned you attended school outside South Africa. Did this include attendance at a Jewish school? | |
| <i>Please select one option</i> | |
| 1. Yes – attended a Jewish school outside South Africa | <input type="checkbox"/> |
| 2. No – did not attend a Jewish school outside South Africa | <input type="checkbox"/> |

6) Life in South Africa

| | |
|---|--------------------------|
| Q79.1 | Ask all |
| To what extent do you have a sense of belonging in South Africa? | |
| <i>Please select one option</i> | |
| 1. Very strong sense of belonging | <input type="checkbox"/> |
| 2. Quite strong sense of belonging | <input type="checkbox"/> |
| 3. Neutral (neither strong nor weak) sense of belonging | <input type="checkbox"/> |
| 4. Quite weak sense of belonging | <input type="checkbox"/> |
| 5. Very weak sense of belonging | <input type="checkbox"/> |
| 6. Don't know | <input type="checkbox"/> |
| 7. Prefer not to say | <input type="checkbox"/> |

| | |
|---|--------------------------|
| Q79.2 | Ask all |
| How satisfied are you with your life in South Africa as a whole? | |
| <i>Select one option</i> | |
| 1. Very satisfied | <input type="checkbox"/> |
| 2. Satisfied | <input type="checkbox"/> |
| 3. Neither satisfied nor dissatisfied | <input type="checkbox"/> |
| 4. Dissatisfied | <input type="checkbox"/> |
| 5. Very dissatisfied | <input type="checkbox"/> |
| 6. Don't know | <input type="checkbox"/> |

| | |
|--|---------------------|
| Q25 | Ask all, rotate 1-2 |
| In the last 12 MONTHS, have you considered permanently leaving South Africa to live in another country? | |
| <i>Select one option</i> | |
| | |

| | |
|----------------------|--------------------------|
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |
| 3. Not sure | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

| | | |
|---|-------------------------------|--|
| Q78 | Ask all, randomise 1-8 | |
| Generally speaking, do you think of yourself as being politically closer to the: | | |
| <i>Please select one option</i> | | |
| 1. African Christian Democratic Party (ACDP) | <input type="checkbox"/> | |
| 2. African National Congress (ANC) | <input type="checkbox"/> | |
| 3. Congress of the People (COPE) | <input type="checkbox"/> | |
| 4. Democratic Alliance (DA) | <input type="checkbox"/> | |
| 5. Economic Freedom Fighters (EFF) | <input type="checkbox"/> | |
| 6. Freedom Front Plus/Vryheidsfront (FF+) | <input type="checkbox"/> | |
| 7. Inkatha Freedom Party (IFP) | <input type="checkbox"/> | |
| 8. United Democratic Movement (UDM) | <input type="checkbox"/> | |
| 9. Other (please specify) | Write in | |
| 10. Undecided | <input type="checkbox"/> | |
| 11. Prefer not to say | <input type="checkbox"/> | |

| | | | | | | |
|---|---|--------------------------|-------------------------------------|--------------------------|----------------------------|--------------------------|
| Q91 | Ask all, randomise 1-7, rotate A-E | | | | | |
| Please indicate the extent to which you trust or distrust the following institutions in South Africa at present: | | | | | | |
| <i>Please select one option per row</i> | | | | | | |
| | A. Strongly trust | B. Somewhat Trust | C. Neither trust nor distrust | D. Distrust | E. Strongly distrust | F. Don't know |
| 1. National government | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The President | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Courts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Independent Electoral Commission (IEC) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. The SABC | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. The police | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Your local government | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

7) Crime

| | |
|--|--------------------------|
| Q83.1 | Ask all, rotate 1-4 |
| How safe or unsafe do you (or would you) feel walking alone in your local neighbourhood after dark? | |
| <i>Select one option</i> | |
| 1. Very safe | <input type="checkbox"/> |
| 2. Fairly safe | <input type="checkbox"/> |
| 3. Fairly unsafe | <input type="checkbox"/> |
| 4. Very unsafe | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|---|--------------------------|
| Q83.2 | Ask all, rotate 1-5 |
| Do you think that <u>crime in your neighbourhood</u> has increased, decreased or remained about the same over the last FIVE years? | |
| <i>Select one option</i> | |
| 1. Increased a lot | <input type="checkbox"/> |
| 2. Increased a little | <input type="checkbox"/> |
| 3. Remained about the same | <input type="checkbox"/> |
| 4. Decreased a little | <input type="checkbox"/> |
| 5. Decreased a lot | <input type="checkbox"/> |
| 6. Don't know | <input type="checkbox"/> |
| 7. Prefer not to say | <input type="checkbox"/> |

| | |
|--|--------------------------|
| Q83.3 | Ask all, rotate 1-2 |
| Have you been the victim of a <u>burglary</u> in the last FIVE years? | |
| <i>Select one option</i> | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |
| 3. Don't know | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

| | |
|--|--------------------------|
| Q83.4 | Ask all, rotate 1-2 |
| Have you been the victim of an <u>assault</u> in the last FIVE years? | |
| <i>Select one option</i> | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |
| 3. Don't know | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

8) Social attitudes and behaviour

| | | | | | |
|---|---|---|--------------------------|--------------------------|-------------------------------|
| Q30 | Ask all, randomise 1-4, rotate A-C | | | | |
| What is your general attitude to each of the following statements regarding consensual sexual relationships? | | | | | |
| <i>Please select one answer per row</i> | | | | | |
| | A. Always wrong | B. Sometimes wrong/Sometimes not wrong | C. Never wrong | D. Don't know | E. Prefer not to say |
| 1. Sexual relations between two adults before marriage | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Sexual relations between a married person and someone other than his or her partner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sexual relations between two adults of the same sex | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Sexual relations between two adults of different races | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|---|----------------------------|--|
| Q31 | Ask all, rotate 1-5 | |
| In general, to what extent do you agree or disagree that all women should have the right of access to an abortion? | | |
| <i>Select one option</i> | | |
| 1. Strongly agree | <input type="checkbox"/> | |
| 2. Tend to agree | <input type="checkbox"/> | |
| 3. Neither agree nor disagree | <input type="checkbox"/> | |
| 4. Tend to disagree | <input type="checkbox"/> | |
| 5. Strongly disagree | <input type="checkbox"/> | |
| 6. Don't know | <input type="checkbox"/> | |
| 7. Prefer not to say | <input type="checkbox"/> | |

| | | | | | | | |
|---|---|----------------------------|--------------------------|----------------------------|--------------------------|--------------------------|----------------------------|
| Q32.1 | Ask all, randomise 1-5, rotate A-E | | | | | | |
| Some people have positive feelings towards others from different groups and backgrounds, some have negative feelings. Please indicate your feelings towards NON-JEWISH people from the following groups in South Africa: | | | | | | | |
| <i>Please select one answer per column</i> | | | | | | | |
| | A. Very positive | B. Somewhat positive | C. Neutral | D. Somewhat negative | E. Very negative | F. Don't know | G. Prefer not to say |
| 1. Black African | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Coloured | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Indian or Asian | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | | |
|----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 4. White | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | | | | | | | |

| | | | | | |
|---|---|--------------------------|--------------------------|--------------------------|--------------------------|
| Q32.2 | Ask all, randomise 1-5, rotate A-C | | | | |
| Now please indicate how frequently you actively socialise with NON-JEWISH South Africans from different groups and backgrounds, for example, by visiting a bar or restaurant together. | | | | | |
| Please EXCLUDE social activities within your workplace, if applicable. | | | | | |
| <i>Please select one answer per column</i> | | | | | |
| | A. Frequently | B. Occasionally | C. Never | D. Don't know | E. Prefer not to say |
| 1. Black African | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Coloured | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Indian or Asian | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. White | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. | | | | | |

9) Experience of discrimination

| | | | | | |
|---|---|--------------------------|--------------------------|--------------------------|--------------------------|
| Q34.1 | Ask all, randomise 1-8, rotate A and B | | | | |
| Have you personally felt discriminated against for any of the following reasons in the last 12 MONTHS? | | | | | |
| [I] | | | | | |
| <i>Please select one answer for each row</i> | | | | | |
| | A. Yes | B. No | C. Not sure | D. Not applicable | E. Prefer not to say |
| 1. Skin colour | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Being Jewish | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Age | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Sex/Gender | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Disability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Sexual orientation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Gender identity (e.g. being transgender or transsexual) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Ethnic origin or immigrant background | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. For another reason | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Info Button [I] at Q34.1 “By discrimination we mean being treated less favourably than others because of, for example, your age, gender, ethnic origin, religion or belief. This refers to something that happened to you personally and NOT something you may have witnessed.”

| | |
|-------------------------------------|---|
| Q34.2 | Ask if Q4.2 EQ 2 OR Q10C EQ 2 (female) Randomise 1-5, rotate A and B |
| A and B can both be selected | |

| Have you personally experienced any gender-based discrimination or harassment, as a woman living in South Africa, in the last 12 MONTHS? [I] | | | | | | |
|---|-------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <i>Please select the appropriate answer(s) for each row</i> | | | | | | |
| | A. Yes, Discriminated against | B. Yes, harassed | C. No, neither | D. Not sure | E. Not applicable | F. Prefer not to say |
| 1. When looking for work or applying to university | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. At your place of work or study (e.g. by people you work for or with) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. In a Jewish communal setting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. In a public setting (e.g. a street or a shop) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Somewhere else | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Info Button [I] at Q34.2 “By discrimination we mean being treated less favourably than others because of, for example, your age, gender, ethnic origin, religion or belief. This refers to something that happened to you personally and NOT something you may have witnessed.”

| | |
|---|--|
| Q34.3 | Ask if Q34.2 EQ A OR B at 1-5 |
| You just mentioned that in the LAST 12 MONTHS you were discriminated against or harassed because you are a woman. What form did this/these incidents take? | |
| <i>Please select the appropriate answer(s)</i> | |
| | Columns as required based on answer(s) at Q34.2 A and B |
| Rows as required based on answer(s) at Q34.2 1-6 | Drop menu (Written, Verbal, Physical, Other, Prefer not to say) |

| Q34.6 | Ask all, randomise 1-4, rotate A-E | | | | | | |
|--|---|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Black Economic Empowerment (BEE) laws were enacted in South Africa to redress some of the injustices of apartheid. To what extent do you agree or disagree that black economic empowerment has: | | | | | | | |
| <i>Please select one answer for each row</i> | | | | | | | |
| | A. Strongly agree | B. Tend to agree | C. Neither agree nor disagree | D. Tend to disagree | E. Strongly disagree | F. Don't know | G. Prefer not to say |
| 1. only benefitted a small minority | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. adversely affected you directly | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 3. successfully reduced economic inequality in South Africa | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. come at the cost of national economic growth | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | |
|---|---|--------------------------|--------------------------|--------------------------|
| Q34.4 | Ask all, randomise 1-3, rotate A and B | | | |
| Certain laws and regulations have been introduced in South Africa to redress historical workplace discrimination and promote equal opportunity through affirmative action. | | | | |
| In the last FIVE years, do you believe you have personally been negatively affected by <u>affirmative action measures</u> taken in the following situations: | | | | |
| <i>Please select one answer for each row</i> | | | | |
| | A. Yes | B. No | C. Not sure | D. Not applicable |
| 1. When seeking an employment opportunity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. When seeking a business contract or order | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. When seeking admission to a school, university or training program (as a student or as a parent for your child) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | | |
|---|---|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Q34.5 | Ask all, randomise 1-5, rotate A-E | | | | | | |
| In general, to what extent do you agree or disagree with the following statements about Muslim people in South Africa? | | | | | | | |
| <i>Select one option per row</i> | | | | | | | |
| | A. Strongly agree | B. Tend to agree | C. Neither agree nor disagree | D. Tend to disagree | E. Strongly disagree | F. Don't know | G. Prefer not to say |
| 1. South African Muslims often overreact to criticism of their religion | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Muslims have too much influence in South Africa | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The vast majority of Muslims in South Africa are opposed to Islamist terrorism | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. South African Muslims make a positive contribution to South African society | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. South African Muslims are unfairly stereotyped by the media | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

10) Racism/antisemitism

| | | | | | |
|--|-------------------------------------|--------------------------|---------------------------|--------------------------|--------------------------|
| Q62 | Ask all, randomise 1-11, rotate A-D | | | | |
| To what extent, if at all, do you think each of following is a problem in South Africa today? | | | | | |
| <i>Please select one option for each row</i> | | | | | |
| | A. A very big problem | B. A fairly big problem | C. Not a very big problem | D. Not a problem at all | E. Don't Know |
| 1. Crime level (e.g. assault, theft) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Unemployment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Racism | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Antisemitism | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Migrants from other countries | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Government corruption | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Anti-Israel sentiment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Intolerance towards Muslims | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Sexism against women | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Legacy of apartheid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Anti-White sentiment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|--|--|--------------------------|
| Q63 | Ask all, randomise A and B, rotate 1-5 | |
| Over the LAST FIVE YEARS, do you think each of the following has increased, stayed the same or decreased in South Africa? | | |
| <i>Please select one option for each column</i> | | |
| | A. Anti-Jewish sentiment | B. Anti-Israel sentiment |
| 1. Increased a lot | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Increased a little | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Stayed the same | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Decreased a little | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Decreased a lot | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Don't Know | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | |
|--|------------------------------------|-------------------------|---------------------------|-------------------------|---------------|
| Q64.1 | Ask all, randomise 1-6, rotate A-D | | | | |
| To what extent, if at all, do you think each of following is a problem in South Africa today? | | | | | |
| <i>Please select one option for each row</i> | | | | | |
| | A. A very big problem | B. A fairly big problem | C. Not a very big problem | D. Not a problem at all | E. Don't Know |

| | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Antisemitic comments/jokes in everyday conversations (e.g. at the workplace, at school, or elsewhere) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Antisemitic graffiti or vandalism of Jewish buildings or institutions or sites | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Expressions of hostility towards Jews in the street or other public places | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Antisemitism in the media | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Antisemitism in political life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Antisemitism on the internet, including social media (e.g. Facebook, YouTube, Twitter, Instagram etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | | |
|--|---|--------------------------------------|---------------------------------------|--------------------------------------|-----------------------------------|------------------------------|
| Q64.2 | Ask all, randomise 1-6, rotate A-E | | | | | |
| Over the LAST FIVE YEARS, do you think each of the following has increased, stayed the same or decreased in South Africa? | | | | | | |
| <i>Please select one answer for each row</i> | | | | | | |
| | A. Increased a lot | B. Increased a little | C. Stayed the same | D. Decreased a little | E. Decreased a lot | F. Don't know |
| 1. Antisemitic comments/jokes in everyday conversations (e.g. at the workplace, at school, or elsewhere) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Antisemitic graffiti or vandalism of Jewish buildings or institutions or sites | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Expressions of hostility towards Jews in the street or other public places | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Antisemitism in the media | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Antisemitism in political life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Antisemitism on the internet, including social media (e.g. Facebook, YouTube, Twitter, Instagram etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|--|--------------------------|
| Q65.1 | Ask all |
| In the last 12 MONTHS in South Africa, have you PERSONALLY WITNESSED any of the following types of antisemitic incidents happening to someone because they were Jewish? | |
| <i>Please select one answer</i> | |
| 1. I have witnessed other Jew(s) being verbally insulted or harassed | <input type="checkbox"/> |
| 2. I have witnessed other Jew(s) being physically attacked | <input type="checkbox"/> |
| 3. I have witnessed other Jew(s) being both verbally insulted or harassed AND physically attacked | <input type="checkbox"/> |
| 4. None of the above. I have NOT witnessed other Jew(s) being verbally insulted or harassed, or physically attacked | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|---|--------------------------|
| Q65.2 | Ask all |
| In the last 12 MONTHS in South Africa, have you PERSONALLY EXPERIENCED any of the following types of antisemitic incidents because you are Jewish? | |
| <i>Please select one option</i> | |
| 1. I have been verbally insulted or harassed | <input type="checkbox"/> |
| 2. I have been physically attacked | <input type="checkbox"/> |
| 3. I have been both verbally insulted or harassed AND physically attacked | <input type="checkbox"/> |
| 4. I have NOT been verbally insulted or harassed, or physically attacked | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|--|---|
| Q67 | Ask if Q65.2 EQ 1-3 (experienced antisemitic attack), Randomise 2-4 |
| Focusing on the most recent occasion this occurred, did you report this antisemitic incident to anyone? | |
| <i>Please select all that apply</i> | |
| 1. No | <input type="checkbox"/> |
| 2. Told family/friends | <input type="checkbox"/> |
| 3. Reported it to a Jewish authority (e.g. SAJBD, CSO) | <input type="checkbox"/> |
| 4. Reported it to the police or similar civil authority (e.g. Human Rights Commission) | <input type="checkbox"/> |
| 5. Other (please specify) | Write in |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|-------|------------------------------------|
| Q68.1 | Ask all, randomise 1-5, rotate A-D |
|-------|------------------------------------|

| Would you consider a non-Jewish person to be antisemitic if he or she says: | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <i>Please select one answer per row</i> | | | | | |
| | A. Yes, definitely | B. Yes, probably | C. No, probably not | D. No, definitely not | E. Don't know |
| 1. Jews have too much power in South Africa (economy, politics, media) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The Holocaust is a myth or has been exaggerated | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Jews are not capable of integrating into South African society | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. They would not marry a Jew | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. A stereotypical joke about Jews (e.g. about attitudes towards money) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Q68.2 | Ask all, randomise 1-6, rotate A-D | | | |
|---|---|--------------------------|--------------------------|--------------------------|
| In the last 12 MONTHS, have you <u>personally heard</u> or seen non-Jewish people in South Africa say: | | | | |
| <i>Please select one answer per row</i> | | | | |
| | A. All the time | B. Frequently | C. Occasionally | D. Never |
| 1. Jews have too much power in South Africa (economy, politics, media) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The Holocaust is a myth or has been exaggerated | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Jews are not capable of integrating into South African society | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. They would not marry a Jew | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. A stereotypical joke about Jews (e.g. about attitudes towards money) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

11) Country of birth and citizenship

| | |
|---|--------------------------|
| Q2.1 | Ask All |
| In which country were you born? | |
| Please relate your answers to <u>present day</u> geographical borders. | |
| <i>Please select one answer</i> | |
| 1. South Africa | <input type="checkbox"/> |
| 2. Germany | <input type="checkbox"/> |
| 3. Greece | <input type="checkbox"/> |

| | |
|-----------------------|--------------------------|
| 4. Israel | <input type="checkbox"/> |
| 5. Lithuania | <input type="checkbox"/> |
| 6. Poland | <input type="checkbox"/> |
| 7. Russian Federation | <input type="checkbox"/> |
| 8. United Kingdom | <input type="checkbox"/> |
| 9. United States | <input type="checkbox"/> |
| 10. Zambia | <input type="checkbox"/> |
| 11. Zimbabwe | <input type="checkbox"/> |
| 12. Other country | Write in |
| 13. Prefer not to say | <input type="checkbox"/> |

| | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Q2.2 | Ask All | | | | | |
| In which country were the following members of your family born? | | | | | | |
| Please relate your answers to present day geographical borders. | | | | | | |
| <i>Please select one answer per column</i> | | | | | | |
| | A. Father | B. Mother | C. Father's father | D. Father's mother | E. Mother's father | F. Mother's mother |
| 1. South Africa | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Germany | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Greece | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Israel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Latvia | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Lithuania | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Poland | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Russian Federation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Ukraine | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. United Kingdom | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. United States | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Zambia | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Zimbabwe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Other country | | | | | | |
| 15. Don't know | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|--|---|
| Q14 | Ask if Q2.1 NE 1 (not born in South Africa) |
| What year did you come to live in South Africa? | |
| <i>Please select the year</i> | |
| numeric input with a validation (2019 - 1900) | |

[citizenship sequence – start]

| | |
|---|--------------------------|
| Q75.1 | Ask all |
| Are you a South African citizen? | |
| <i>Please select one option</i> | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |
| 3. Prefer not to say | <input type="checkbox"/> |

| | |
|--|---------------------------|
| Q75.2 | Ask if Q75 EQ 1 (citizen) |
| Is this by birth or naturalisation? | |
| <i>Please select one option</i> | |
| 1. Birth | <input type="checkbox"/> |
| 2. Naturalisation | <input type="checkbox"/> |
| 3. Other (please specify) | Write in |
| 4. Prefer not to say | <input type="checkbox"/> |

| | |
|--|---|
| Q77.1 | Ask all |
| Are you a citizen of any other country or countries? If so, how many? | |
| <i>Please select one option</i> | |
| 1. No | <input type="checkbox"/> |
| 2. Yes | Drop menu (1 other country, 2 other countries, 3 or more other countries) |
| 3. Don't know | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

| | | |
|--|--|--|
| Q77.2 | Ask if Q77.1 EQ 2 (citizen of another country) | |
| Which other country/ies are you a citizen of? | | |
| <i>Please select the appropriate option</i> | | |
| Show additional columns according to response at Q77.1 2 | | |
| 1. Country name | Drop menu from Q2.2 1-13 excluding South Africa | Drop menu from Q2.2 1-13 excluding South Africa |
| 2. Other country/ies | Write in | <input type="checkbox"/> |
| 3. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

[citizenship sequence – end]

12) Languages

| | | | |
|---|--------------------------|--------------------------|--------------------------|
| Q3.1 | Ask all | | |
| What is your main language or 'mother tongue'? And what is/was the main language or 'mother tongue' of your parents? | | | |
| <i>Please select one answer in each column</i> | | | |
| | A. You | B. Your father | C. Your mother |
| 1. English | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Afrikaans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. African language (e.g. isiZulu, isiXhosa etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. French | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Hebrew | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Yiddish | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Other (please specify) | Write in | Write in | Write in |
| 8. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|--|---|--|
| Q3.2 | Ask all | |
| Respondents should be forced to answer the first column but be able to skip the second column | | |
| What language/s do you most frequently speak with your family at home? | | |
| <i>Please select up to two languages</i> | | |
| | A. Most frequently spoken language | B. Second most frequently spoken language |
| 1. English | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Afrikaans | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. African language (e.g. isiZulu, isiXhosa etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. French | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Hebrew | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Yiddish | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. No second most frequently spoken language | x | <input type="checkbox"/> |
| 8. Other (please specify) | Write in | Write in |
| 9. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

13) Location

[current location sequence - start]

| | |
|-------------------------------------|----------------|
| Q1.1 | Ask All |
| Where do you currently live? | |
| <i>Please select one answer</i> | |
| | |

| | |
|---|--------------------------|
| 1. City of Johannesburg Metropolitan Municipality | <input type="checkbox"/> |
| 2. City of Cape Town Metropolitan Municipality | <input type="checkbox"/> |
| 3. East Rand - Ekurhuleni Metropolitan Municipality | <input type="checkbox"/> |
| 4. Durban/Umhlanga - eThekweni Metropolitan Municipality | <input type="checkbox"/> |
| 5. Pretoria - City of Tshwane Metropolitan Municipality | <input type="checkbox"/> |
| 6. Port Elizabeth - Nelson Mandela Bay Metropolitan Municipality | <input type="checkbox"/> |
| 7. Gauteng Province (other than Johannesburg, Pretoria and East Rand) | <input type="checkbox"/> |
| 8. Western Cape Province (other than Cape Town) | <input type="checkbox"/> |
| 9. Kwa Zulu Natal Province (other than Durban) | <input type="checkbox"/> |
| 10. Eastern Cape Province (other than Port Elizabeth) | <input type="checkbox"/> |
| 11. Orange Free State Province | <input type="checkbox"/> |
| 12. Limpopo Province | <input type="checkbox"/> |
| 13. Northern Cape Province | <input type="checkbox"/> |
| 14. North West Province | <input type="checkbox"/> |
| 15. Mpumalanga Province | <input type="checkbox"/> |

| | |
|--|---|
| Q1.2 | Ask All |
| How long have you lived in this area? | |
| <i>Please select the year</i> | |
| | |
| 1. I have always lived here or within 5km | <input type="checkbox"/> |
| 2. I moved here in the year: | numeric input with a validation (2019 - 1900) |

| | | | | |
|-------------------------------------|----------------|--|--|--|
| Q1.3 | Ask All | | | |
| What is your postcode? | | | | |
| <i>Please type in your response</i> | | | | |
| | | | | |
| | | | | |

[current location sequence - end]

14) Migration

[former location sequence - start]

| | |
|--|--------------------------|
| Q5.1 | Ask all |
| Where did you usually live FIVE years ago? | |
| <i>Select one option</i> | |
| | |
| 1. Same address as I am living in now | <input type="checkbox"/> |
| 2. A different address, but within 5km of my current location | <input type="checkbox"/> |
| 3. A different suburb but in the same city/region | <input type="checkbox"/> |

| | |
|---------------------------------------|---|
| 4. A different region of South Africa | Drop menu (Bloemfontein, Cape Town, Durban/Umhlanga, East London, Johannesburg, Plettenberg Bay, Port Elizabeth, Pretoria, Other place in South Africa) |
| 5. A different country | Drop menu (Australia, Canada, Israel, UK, USA, Zimbabwe, Other country) |

| | | | |
|---|--|--------------------------|--------------------------|
| Q5.2 | Ask if Q5.1 EQ 4 (other SA region), randomise 2-13 | | |
| Force answer for 1st reason but allow skip for 2nd and 3rd reason | | | |
| What prompted you to move to a different part of South Africa? | | | |
| <i>Select up to three main reasons</i> | | | |
| | 1st main reason | 2nd main reason | 3rd main reason |
| 1. The decision was not yours (e.g. parents' decision) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Personal safety concerns/crime | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. High cost of living | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dissatisfaction with local Jewish community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Poor municipal services/infrastructure | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Dissatisfaction with social life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Better lifestyle (cultural life, outdoor life) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. To be with family/partner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. To be with friends | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Education of children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Quality of health services/health reasons | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Change home size (too small/big) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Career move/study related move | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. No other reason | x | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Other reason(s) | Write in | | |
| 16. Don't know | <input type="checkbox"/> | x | x |

| | | | |
|---|--------------------------------------|--|--|
| Q5.3 | Ask if Q5.1 EQ 5 (different country) | | |
| You said you were living in a different country FIVE years ago. Was this because: | | | |
| <i>Select one option</i> | | | |
| | | | |
| 1. You are not from South Africa, but you came to live here <u>permanently</u> within the last five years | <input type="checkbox"/> | | |
| 2. You are not from South Africa, but you came to live here <u>temporarily</u> (e.g. to study) within the last five years | <input type="checkbox"/> | | |
| 3. You emigrated from South Africa more than five years ago but <u>returned</u> to live here within the last five years | <input type="checkbox"/> | | |
| 4. You were living abroad temporarily e.g. for travel, work or study | <input type="checkbox"/> | | |
| 5. Other reason(s) | Write in | | |
| 6. Don't know | <input type="checkbox"/> | | |

| | | | |
|--|--|--------------------------|--------------------------|
| Q5.4 | Ask if Q5.3 EQ 2 (different country), randomise 2-11 | | |
| Force answer for 1st reason but allow skip for 2nd and 3rd reason | | | |
| Why did you leave South Africa with the intention of settling abroad permanently? | | | |
| <i>Select up to three main reasons</i> | | | |
| | 1st main reason | 2nd main reason | 3rd main reason |
| 1. The decision was not yours (e.g. parents' decision) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Personal safety concerns/crime | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. High cost of living in South Africa | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dissatisfaction with local Jewish community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Poor municipal services/infrastructure | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Dissatisfaction with social life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. To be with family/partner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. To be with friends | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Better lifestyle (cultural life, outdoor life) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Education of children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Quality of health services/health reasons | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Concerns about future of South Africa (political stability/government) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Desire to live in Israel/Aliya | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Career move/study related move | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Affirmative action | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Other reason(s) | Write in | | |
| 17. Don't know | <input type="checkbox"/> | X | X |

[former location sequence – end]

[future migration plans sequence1 – start]

| | |
|--|--------------------------|
| Q6.1 | Ask all, rotate 1-4 |
| How likely are you to move from your current location in the next FIVE years, including abroad? | |
| <i>Select one option</i> | |
| 1. Very likely | <input type="checkbox"/> |
| 2. Quite likely | <input type="checkbox"/> |
| 3. Quite unlikely | <input type="checkbox"/> |
| 4. Very unlikely | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|--|--|
| Q6.2 | Ask if Q6.1 EQ 1 OR 2 (very or quite likely) |
| Where would you move to in the next FIVE years? | |
| <i>Select one option</i> | |
| 1. A different address, but within 5km of my current location | <input type="checkbox"/> |

| | |
|--|---|
| 2. A different suburb (i.e. more than 5km away) but in the same city/region | <input type="checkbox"/> |
| 3. Elsewhere in South Africa | Drop menu (Bloemfontein, Cape Town, Durban/Umhlanga, East London, Johannesburg, Plettenberg Bay, Port Elizabeth, Pretoria, Other place in South Africa) |
| 4. A different country | Drop menu (Australia, Canada, Israel, UK, USA, Zimbabwe, Other country, Don't know) |
| 5. Don't know | <input type="checkbox"/> |

| | | | |
|---|--|--------------------------|--------------------------|
| Q6.3 | Ask if Q6.2 EQ 3 (elsewhere in SA), randomise 2-13 | | |
| Force answer for 1st reason but allow skip for 2nd and 3rd reason | | | |
| Why would you consider moving to a different part of South Africa? | | | |
| Select up to three main reasons | | | |
| | 1st main reason | 2nd main reason | 3rd main reason |
| 1. The decision would not be mine (e.g. parents' decision) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Personal safety concerns/crime | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. High cost of living | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dissatisfaction with local Jewish community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Poor municipal services/infrastructure | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Dissatisfaction with social life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. To be with family/partner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. To be with friends | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Better lifestyle (cultural life, outdoor life) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Education of children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Quality of health services/health reasons | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Change home size (too small/big) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Career move/study related move | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. No other reason | x | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Other reason(s) | Write in | | |
| 16. Don't know | <input type="checkbox"/> | x | x |

| | | | |
|---|---|--------------------------|--------------------------|
| Q6.4 | Ask if Q6.2 EQ 4 (another country) Randomise 2-15 | | |
| Force answer for 1st reason but allow skip for 2nd and 3rd reason | | | |
| Why would you consider leaving South Africa? | | | |
| Select up to three main reasons | | | |
| | 1st main reason | 2nd main reason | 3rd main reason |
| 1. The decision would not be mine (e.g. parents' decision) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Personal safety concerns/crime | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. High cost of living here | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Dissatisfaction with local Jewish community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|--|--------------------------|--------------------------|--------------------------|
| 5. Poor municipal services/infrastructure here | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Dissatisfaction with social life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. To be with family/partner | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. To be with friends | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Better lifestyle (cultural life, outdoor life) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Education of children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Quality of health services/health reasons | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Concerns about future of South Africa (political stability/government) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Desire to live in Israel/Aliya | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Career move/study related move | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Affirmative action | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. No other reason | x | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Other reason(s) | Write in | | |
| 18. Don't know | <input type="checkbox"/> | x | x |

[future migration plans sequence - end]

[other family migration sequence - start]

| | |
|--|---|
| Q35.1 | Ask all |
| Option 5 is exclusive | |
| Do any of your immediate family members who USED TO LIVE in South Africa, CURRENTLY live in another country, and if so, how many? | |
| Please indicate up to four relations per category. | |
| <i>Select all that apply</i> | |
| 1. Yes, at least one of my parents | Drop menu (1 parent, Both parents) |
| 2. Yes, at least one of my siblings | Drop menu (1 sibling, 2 siblings, 3 siblings, 4 siblings) |
| 3. Yes, at least one of my children | Drop menu (1 child, 2 children, 3 children, 4 children) |
| 4. Yes, at least one of my grandchildren | Drop menu (1 grandchild, 2 grandchildren, 3 grandchildren, 4 grandchildren) |
| 5. No , all of my immediate family members (parents, siblings, children, grandchildren, if applicable) currently live in South Africa | <input type="checkbox"/> |

| | |
|--|--|
| Q35.2 | Ask if Q35.1 EQ 1-4 (have family abroad) |
| In which country/countries does/do the members of your immediate family who USED TO LIVE in South Africa, CURRENTLY live? | |
| If there are more than four people in any category, please limit your answers to the ELDEST FOUR. | |
| <i>Select all that apply</i> | |
| | |

| | A. Australia | B. Canada | C. Israel | D. UK | E. USA | F. Other country |
|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| If Q35.1 EQ 1 as required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If Q35.1 EQ 2 as required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If Q35.1 EQ 3 as required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If Q35.1 EQ 4 as required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

[other family migration sequence - end]

15) Jewish identity

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|-----------------|---------------------|--|--|--|--|--|--|--|-----------------------|--|-----------------------|------------|--|--|--|--|--|--|--|--|--|--|
| Q26.1 | Ask all, rotate | | | | | | | | | | | | | | | | | | | | | | |
| Coder: use slider | | | | | | | | | | | | | | | | | | | | | | | |
| Please position yourself on a scale ranging from 1 to 10 according to the strength of your Jewish identity, where 1 means very low strength and 10 means very high strength. | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; text-align: center;"> <tr> <td>Very low strength 1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Very high strength 10</td> </tr> <tr> <td colspan="11">Don't know</td> </tr> </table> | | Very low strength 1 | | | | | | | | | | Very high strength 10 | Don't know | | | | | | | | | | |
| Very low strength 1 | | | | | | | | | | Very high strength 10 | | | | | | | | | | | | | |
| Don't know | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------|------------------------|--|--|--|--|--|--|--|-------------------|--|-------------------|------------|--|--|--|--|--|--|--|--|--|--|
| Q26.2 | Ask all, rotate | | | | | | | | | | | | | | | | | | | | | | |
| Coder: use slider | | | | | | | | | | | | | | | | | | | | | | | |
| How religious would you say you are? Please position yourself on a scale ranging from 1 to 10, where 1 means not religious at all and 10 means very religious. | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; text-align: center;"> <tr> <td>Not at all religious 1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Very religious 10</td> </tr> <tr> <td colspan="11">Don't know</td> </tr> </table> | | Not at all religious 1 | | | | | | | | | | Very religious 10 | Don't know | | | | | | | | | | |
| Not at all religious 1 | | | | | | | | | | Very religious 10 | | | | | | | | | | | | | |
| Don't know | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|--|--------------------------|
| Q52 | Ask all, rotate 1-3, randomise A and B | |
| How would you say each of the following has changed for you personally over the last FIVE years? | | |
| Please select one option in each column | | |
| | A. Religious observance | B. Jewish identity |
| 1. Increased | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Stayed about the same | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Decreased | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Don't know | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|--|------------------------------------|
| Q27.1 | Ask all, randomise 1-8, rotate A-D |
| To what extent do you agree or disagree with the following statements: | |
| Please select one answer per row | |
| | |

| | A. Completely agree | Somewhat agree | Somewhat disagree | D. Completely disagree | Don't know |
|--|---------------------------|--------------------------|--------------------------|------------------------------|--------------------------|
| 1. I am proud to be a Jew | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I have a strong sense of belonging to the Jewish people | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I have a special responsibility to take care of Jews in need around the world | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. I feel connected to other Jews even if I do not know them personally | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. I believe in God | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. I believe the Universe was created by God | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. I believe that God intervenes in our lives | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. The Torah was given by God to Moses and the Jewish people | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Q27.2 | Ask all, randomise 1-20 | | | | |
|---|--------------------------------|--------------------------|----------------------------|--------------------------|--|
| How important or unimportant are each of the following to your own sense of Jewish identity? | | | | | |
| <i>Please select one answer per row</i> | | | | | |
| | Very importa nt | Fairly importa nt | Fairly unimport tant | Very unimport tant | Don't know/ Prefer not to say |
| 1. Upholding strong moral and ethical behaviour | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Remembering the Holocaust | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Feeling part of the Jewish people worldwide | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Combatting antisemitism | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Supporting social justice causes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Sharing Jewish festivals with your family | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Donating money to charity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Jewish cultural experiences (Jewish music, literature, art) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Learning about Jewish history | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Volunteering for charitable causes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Supporting Israel (e.g. Israeli charities) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Visiting Israel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Marrying another Jew | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 14. Believing in God | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Observing <i>halacha</i> (Jewish law) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Prayer | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Studying Jewish religious texts | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Belonging to a Jewish community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Advocating for Israel (e.g. online or on campus) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Socialising in predominantly Jewish circles | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|---|--------------------------|
| Q24.1 | Ask all |
| How would you describe the religious/Jewish identification of the home in which you grew up? | |
| <i>Please select one answer</i> | |
| 1. Strictly Orthodox/Haredi/Chasidic | <input type="checkbox"/> |
| 2. Orthodox | <input type="checkbox"/> |
| 3. Traditional | <input type="checkbox"/> |
| 4. Progressive/Reform | <input type="checkbox"/> |
| 5. Secular/Cultural | <input type="checkbox"/> |
| 6. Mixed religion (Jewish and another religion) | <input type="checkbox"/> |
| 7. Not Jewish | <input type="checkbox"/> |
| 8. Other (please specify) | Write in |

| | |
|--|--------------------------|
| Q24.2 | Ask all |
| And how would you describe your <u>current</u> religious/Jewish identification? | |
| <i>Please select one answer</i> | |
| 1. Strictly Orthodox/Haredi/Chasidic | <input type="checkbox"/> |
| 2. Orthodox | <input type="checkbox"/> |
| 3. Traditional | <input type="checkbox"/> |
| 4. Progressive/Reform | <input type="checkbox"/> |
| 5. Secular/Cultural | <input type="checkbox"/> |
| 6. Mixed religion (Jewish and another religion) | <input type="checkbox"/> |
| 7. Other (please specify) | Write in |

[Jewish practice sequence - start]

Show text to all:

“For each of the following seven questions, please provide two answers – one for your current practice and one for your experience when growing up.”

| | | | |
|---|---------|--------------------------|----------------------------------|
| Q33.1 | Ask all | | |
| How often, if at all, do/did you have a <u>Friday night (Shabbat) meal</u> with your family/friends? | | | |
| <i>Please select one answer per column</i> | | | |
| | | A. Currently | B. During your upbringing |
| 1. Always | | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Usually | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sometimes | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Never | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Prefer not to say | | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|--|---------|--------------------------|----------------------------------|
| Q33.2 | Ask all | | |
| How often, if at all, are/were candles lit at home on Friday night (Shabbat)? | | | |
| <i>Please select one answer per column</i> | | | |
| | | A. Currently | B. During your upbringing |
| 1. Always | | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Usually | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sometimes | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Never | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Prefer not to say | | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|--|---------|--------------------------|----------------------------------|
| Q33.3 | Ask all | | |
| How often, if at all, do/did you refrain from using electric light switches on the Sabbath (Shabbat)? | | | |
| <i>Please select one answer per column</i> | | | |
| | | A. Currently | B. During your upbringing |
| 1. Always | | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Usually | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sometimes | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Never | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Prefer not to say | | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | |
|---|---------|--------------------------|----------------------------------|
| Q33.4 | Ask all | | |
| How often, if at all, do/did you attend a seder meal at Passover (Pesach)? | | | |
| <i>Please select one answer per column</i> | | | |
| | | A. Currently | B. During your upbringing |
| 1. Always | | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|----------------------|--------------------------|--------------------------|
| 2. Usually | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sometimes | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Never | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|---|--------------------------|----------------------------------|
| Q33.5 | Ask all | |
| How often, if at all, do/did you fast on Yom Kippur? | | |
| <i>Please select one answer per column</i> | | |
| | A. Currently | B. During your upbringing |
| 1. Always | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Usually | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sometimes | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Never | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Not applicable (I do not fast due to health reasons) | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|---|--------------------------|----------------------------------|
| Q37.1 | Ask all | |
| What kind of meat, if any, is/used to be bought for your home? | | |
| <i>Please select one answer per column</i> | | |
| | A. Currently | B. During your upbringing |
| 1. Not applicable (vegetarian or vegan) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Only kosher meat | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Ordinary (non-kosher) meat, but not pork products | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Ordinary (non-kosher) meat including pork products | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|---|--------------------------|----------------------------------|
| Q37.2 | Ask all | |
| Do/did you eat non-kosher meat outside your own home? (e.g. in restaurants or private homes) | | |
| <i>Please select one answer per column</i> | | |
| | A. Currently | B. During your upbringing |
| 1. Not applicable (vegetarian or vegan) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Only kosher meat | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Ordinary (non-kosher) meat, but not pork products | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Ordinary (non-kosher) meat including pork products | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|----------------------|--------------------------|--------------------------|
| 5. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |
|----------------------|--------------------------|--------------------------|

[Jewish practise sequence - end]

| | | |
|---|----------------|--------------------------|
| Q18.1 | Ask all | |
| Allow multiple responses to 2-5 | | |
| Are you currently a member of a synagogue? | | |
| <i>Please select all that apply</i> | | |
| | | |
| 1. No | | <input type="checkbox"/> |
| 2. Yes, paid membership of one synagogue | | <input type="checkbox"/> |
| 3. Yes, paid membership of <u>more than one</u> synagogue | | <input type="checkbox"/> |
| 4. Yes, other form of membership of one synagogue (e.g. temporary or honorary membership, no paid membership) | | <input type="checkbox"/> |
| 5. Yes, other form of membership of <u>more than one</u> synagogue (e.g. temporary or honorary memberships, no paid membership) | | <input type="checkbox"/> |
| 6. Don't know | | <input type="checkbox"/> |
| 7. Prefer not to say | | <input type="checkbox"/> |

| | | |
|--|--|--------------------------|
| Q18.2 | Ask if Q18.1 EQ 2,3,4,5 (synagogue member), randomise 1-6 | |
| | | |
| What type of synagogue is this/are these? | | |
| <i>Please select all that apply</i> | | |
| | | |
| 1. Orthodox Shul | | <input type="checkbox"/> |
| 2. Progressive/Reform | | <input type="checkbox"/> |
| 3. Sephardi | | <input type="checkbox"/> |
| 4. Chabad-Lubavitch | | <input type="checkbox"/> |
| 5. Haredi | | <input type="checkbox"/> |
| 6. Other (please specify) | | Write in |

| | | |
|--|--------------------------|--------------------------|
| Q7 | Ask all | |
| | | |
| How well can you read and speak Hebrew? | | |
| <i>Please select one answer per column</i> | | |
| | | |
| | A. Read Hebrew | B. Speak Hebrew |
| 1. Very well | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Quite well | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Not well | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Not at all | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|--------------|----------------|
| Q28.1 | Ask all |
|--------------|----------------|

| | |
|---|--------------------------|
| Did you attend any type of synagogue or organised Jewish religious service on the following occasions in the last 12 months? | |
| <i>Select all that apply</i> | |
| 1. Pesach (Passover) | <input type="checkbox"/> |
| 2. Purim | <input type="checkbox"/> |
| 3. Rosh Hashanah (Jewish New Year) | <input type="checkbox"/> |
| 4. Shemini Atzeret | <input type="checkbox"/> |
| 5. Simchat Torah | <input type="checkbox"/> |
| 6. Succot (Tabernacles) | <input type="checkbox"/> |
| 7. Yom Kippur (Day of Atonement) | <input type="checkbox"/> |
| 8. None of these | <input type="checkbox"/> |
| 9. Don't know | <input type="checkbox"/> |

| | |
|---|----------------------------|
| Q28.2 | Ask all, rotate 1-7 |
| And how frequently did you attend any type of synagogue or organised Jewish religious service in the last 12 months? | |
| <i>Please select one answer</i> | |
| 1. Did not attend at all | <input type="checkbox"/> |
| 2. 1-3 times | <input type="checkbox"/> |
| 3. Every few months | <input type="checkbox"/> |
| 4. About once a month | <input type="checkbox"/> |
| 5. A few times a month | <input type="checkbox"/> |
| 6. About once a week | <input type="checkbox"/> |
| 7. Daily or almost daily | <input type="checkbox"/> |
| 8. Prefer not to say | <input type="checkbox"/> |

| | |
|---|----------------------------|
| Q38 | Ask all, rotate 1-5 |
| How many of your close friends are Jewish? | |
| <i>Please select one answer per column</i> | |
| 1. None | <input type="checkbox"/> |
| 2. Less than half | <input type="checkbox"/> |
| 3. About half | <input type="checkbox"/> |
| 4. More than half | <input type="checkbox"/> |
| 5. All | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|---|----------------|
| Q54 | Ask all |
| Have you had a son, and if so, was he circumcised? | |

| | |
|---|--------------------------|
| If you have more than one son, please answer for your youngest son. | |
| <i>Please select one option</i> | |
| | |
| 1. I have not had a son | <input type="checkbox"/> |
| 2. Yes, he was circumcised under Jewish religious auspices (i.e. by a <i>mohel</i>) | <input type="checkbox"/> |
| 3. Yes, he was circumcised, but not under Jewish religious auspices (e.g. by a medical practitioner in a hospital) | <input type="checkbox"/> |
| 4. Yes, he was not circumcised | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> |

| | |
|--|--------------------------------|
| Q61 | Ask all, rotate 1 and 2 |
| | |
| Which of the following categories BEST describes you? | |
| <i>Please select one option</i> | |
| | |
| 1. Ashkenazi | <input type="checkbox"/> |
| 2. Sephardi | <input type="checkbox"/> |
| 3. Mixed (Ashkenazi and Sephardi) | <input type="checkbox"/> |
| 4. Other | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |

| | | |
|--|--------------------------|--------------------------|
| Q66 | Ask all | |
| | | |
| Which of the following applies to your parents? [I] | | |
| <i>Please select one answer in each column</i> | | |
| | | |
| | A. Your mother | B. Your father |
| 1. Jewish by birth | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Jewish by conversion | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Not Jewish | <input type="checkbox"/> | <input type="checkbox"/> |

Info Button [I] at Q66 “Please relate your answer to your biological parents, if possible.”

| | |
|---|---|
| Q16 | Ask if Q4.3 EQ 2 OR Q10D You EQ 2 (individual or householder Jewish by conversion) |
| | |
| You previously mentioned you converted to Judaism. Was this: | |
| <i>Please select one answer</i> | |
| | |
| 1. An Orthodox conversion in South Africa | <input type="checkbox"/> |
| 2. An Orthodox conversion <u>outside</u> South Africa | <input type="checkbox"/> |
| 3. A Progressive conversion in South Africa | <input type="checkbox"/> |
| 4. A progressive conversion <u>outside</u> South Africa | <input type="checkbox"/> |

| | |
|--|--------------------------|
| 5. Another type of conversion to Judaism | Write in |
| 6. Prefer not to say | <input type="checkbox"/> |

16) Jewish community

| | |
|---|--------------------------|
| Q48.1 | Ask all, rotate 1-4 |
| How accepted do you feel by the Jewish community? Do you feel you are... | |
| <i>Please select one answer</i> | |
| 1. Very well accepted | <input type="checkbox"/> |
| 2. Somewhat accepted | <input type="checkbox"/> |
| 3. Not very well accepted | <input type="checkbox"/> |
| 4. Not accepted at all | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|--|---|
| Q48.2 | Ask if Q48.1 EQ 3 or 4 (Not very well accepted or Not accepted at all), randomise 1-8 |
| You said you do not feel fully accepted by the Jewish community. Is this because of your: | |
| <i>Please select all that apply</i> | |
| 1. Gender | <input type="checkbox"/> |
| 2. Sexual identity/orientation | <input type="checkbox"/> |
| 3. Marital status (e.g. divorced, single) | <input type="checkbox"/> |
| 4. Religious denomination | <input type="checkbox"/> |
| 5. Views on Israel/Zionism | <input type="checkbox"/> |
| 6. Being part of an interfaith couple | <input type="checkbox"/> |
| 7. Being an immigrant | <input type="checkbox"/> |
| 8. Being non-white | <input type="checkbox"/> |
| 9. Other reason (please specify) | Write in |
| 10. Don't know | <input type="checkbox"/> |
| 11. Prefer not to say | <input type="checkbox"/> |

| | |
|---|--------------------------|
| Q47 | Ask all, rotate 1-4 |
| Some people are concerned about Jews marrying non-Jews, while others are not. To what extent are you concerned or not concerned about intermarriage in South Africa? | |
| <i>Please select one answer</i> | |
| 1. Not at all concerned | <input type="checkbox"/> |
| 2. Not concerned | <input type="checkbox"/> |
| 3. Somewhat concerned | <input type="checkbox"/> |
| 4. Very concerned | <input type="checkbox"/> |
| 5. Not sure | <input type="checkbox"/> |

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| 6. Prefer not to say | <input type="checkbox"/> |
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| Q85 | Ask all, randomise 1-4 | |
| In the last 12 MONTHS, have you attended any Jewish communal events? | | |
| Please EXCLUDE synagogue services and Jewish lifecycle events (such as bar mitzvahs and weddings). | | |
| <i>Please provide one answer per row</i> | | |
| | A. Yes | B. No |
| 1. Social (e.g. singles, events for families, communal dinner) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Fundraising (e.g. for a Jewish charity) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Educational (e.g. lecture on a Jewish topic) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Entertainment/cultural (e.g. Jewish related comedy or film) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Other Jewish events (not synagogue services/lifecycle events) | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|--|--------------------------------|-----------------|
| Q89 | Ask all, randomise 1-10 | |
| Over the last 12 months, which of the following Jewish community activities/events have you attended, if any? | | |
| <i>Please select all that apply</i> | | |
| 1. Holocaust Remembrance Day (<i>Yom Hashoah</i>) or related commemoration/event | <input type="checkbox"/> | |
| 2. Israel Remembrance Day (<i>Yom Hazikaron</i>)/Israel Independence Day (<i>Yom Ha'atzmaut</i>) event | <input type="checkbox"/> | |
| 3. Jewish or Israeli films or festivals | <input type="checkbox"/> | |
| 4. Adult Jewish education course(s) (excluding <i>Shiurim</i>) | <input type="checkbox"/> | |
| 5. <i>Shiur(im)</i> (Torah study session(s)) | <input type="checkbox"/> | |
| 6. Limmud | <input type="checkbox"/> | |
| 7. Museum/gallery exhibition on a Jewish theme | <input type="checkbox"/> | |
| 8. Shabbos Project | <input type="checkbox"/> | |
| 9. Sinai Indaba | <input type="checkbox"/> | |
| 10. Jewish Literary Festival | <input type="checkbox"/> | |
| 11. Other (please specify) | | Write in |
| 12. None of these | <input type="checkbox"/> | |
| 13. Don't know | <input type="checkbox"/> | |
| 14. Prefer not to say | <input type="checkbox"/> | |

| | | |
|--|---|--|
| Q39.1 | Ask all, randomise 1-3, rotate A-D | |
| How familiar are you with the role and purpose of the following national Jewish communal organisations? | | |
| <i>Select one option per row</i> | | |

| | A. Very familiar | B. Somewhat familiar | C. Not very familiar | D. Not at all familiar | E. Don't know |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. The South African Jewish Board of Deputies (SAJBD) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The South African Zionist Federation (SAZF) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The Office of the Chief Rabbi (OCR) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Q39.2 | | Ask all, randomise 1-3, rotate A-D | | | | |
|--|--------------------------|------------------------------------|--------------------------|--------------------------|--------------------------|--|
| Some national Jewish organisations occasionally speak to the wider South African public on behalf of all Jews in South Africa. To what extent do you feel that your <u>views as a Jew living in South Africa</u> align with the following Jewish communal bodies? | | | | | | |
| <i>Select one option per row</i> | | | | | | |
| | A. Very well aligned | B. Somewhat aligned | C. Not very well aligned | D. Not at all aligned | E. Don't know | |
| 1. The South African Jewish Board of Deputies (SAJBD) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. The South African Zionist Federation (SAZF) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. The Office of the Chief Rabbi (OCR) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| Q50 | | Ask all, randomise 1-16, rotate A-C | | | |
|---|--------------------------|-------------------------------------|--------------------------|--------------------------|--|
| How frequently have you consumed any of the following Jewish media/content in the <u>last 12 months</u>? | | | | | |
| <i>Select one option per row</i> | | | | | |
| | A. Frequently | B. Occasionally | C. Never | D. Don't know | |
| 1. Arutz Sheva/Israel National News | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Cape Jewish Chronicle | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. Chai FM | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Haaretz | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Hashalom (KZN) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Jerusalem Post | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Jewish Affairs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Jewish Heritage | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Jewish Life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Jewish Times/Times of Israel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. Jewish Tradition | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. Pretoria Jewish Chronicle | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 13. South African Jewish Report | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Ynet/Yediot Aharonot | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Jewish themed book | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Jewish themed podcast | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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|--|---|-------------------------------------|--|------------------------------------|-------------------------------------|------------------------------|
| Q80 | Ask all, randomise 1-4, rotate A-E | | | | | |
| To what extent do you agree or disagree with the following statements: | | | | | | |
| <i>Please select one option from each row</i> | | | | | | |
| | A. Strongly agree | B. Tend to agree | C. Neither agree nor disagree | D. Tend to disagree | E. Strongly disagree | F. Don't know |
| 1. The organized Jewish community (e.g. charities, synagogues, representative bodies) goes to great lengths to help the underprivileged majority in South Africa | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. The Jewish community has failed to make a satisfactory restitution with regards to South Africa's apartheid legacy | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The Jewish establishment was too accepting of apartheid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. It is important that Jewish South Africans remember the apartheid past | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

17) Charitable giving and volunteering

| | | |
|--|--|--|
| Q96.1 | Ask All, rotate 2-4, rotate A and B | |
| In the last 12 months, how often, if at all, have you done unpaid voluntary work for: | | |
| <i>Please select one option in each column</i> | | |
| | A. Jewish organisations | B. Non-Jewish organisations |
| 1. I have not volunteered in the last 12 months | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. At least once a week | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Less than once a week but at least once a month | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Less often than once a month | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

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| Q96.2 | Ask all |
| Allow multi-selection at 1 and 2 | |
| Are you currently a board or committee member of any Jewish communal group, organisation or institution? | |
| <i>Please the appropriate option(s)</i> | |
| 1. Yes, a board member | <input type="checkbox"/> |
| 2. Yes, a committee member | <input type="checkbox"/> |
| 3. No | <input type="checkbox"/> |
| 4. Don't know | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> |

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| Q98 | Ask All – Randomise 1-5 | |
| Do not force a response to B | | |
| To which of the following causes, if any, do you give the highest and second highest priority? | | |
| <i>Please select one option in each column</i> | | |
| | A. Highest priority | B. Second highest priority |
| 1. Jewish charities in South Africa | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. General charities in South Africa | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Aid for the poor in other countries (i.e. outside South Africa) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Israel charities | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Jewish charities outside Israel and South Africa | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Other charities outside South Africa | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Don't know | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. None of these | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Prefer not to say | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
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| Q100.1 | Ask all, randomise 2-13 |
| Have you personally given money to any JEWISH organisations representing the following charitable CAUSES in the last 12 months? | |
| <i>Please select all that apply</i> | |
| 1. No, I have not given money to any Jewish organisations | <input type="checkbox"/> |
| 2. Jewish day school (<i>excluding</i> school fees) | <input type="checkbox"/> |
| 3. Local synagogue (<i>excluding</i> membership fees) | <input type="checkbox"/> |
| 4. Jewish welfare | <input type="checkbox"/> |
| 5. Jewish students | <input type="checkbox"/> |
| 6. Jewish/Israeli medical needs | <input type="checkbox"/> |
| 7. Jewish adult education | <input type="checkbox"/> |

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| 8. Jewish youth movement/group | <input type="checkbox"/> |
| 9. Holocaust memorial or Holocaust education | <input type="checkbox"/> |
| 10. Jewish supported social justice | <input type="checkbox"/> |
| 11. Jewish communal security | <input type="checkbox"/> |
| 12. Israel related | <input type="checkbox"/> |
| 13. Other Jewish charitable CAUSE(S) (please only mention causes, NOT individual charities) | Write in |
| 14. Don't know | <input type="checkbox"/> |
| 15. Prefer not to say | <input type="checkbox"/> |

| | |
|--|--------------------------------------|
| Q100.2 | Ask if 100.1 NE 1 No, Randomise 1-14 |
| To which Jewish charities/organisations in South Africa have you personally given money in the <u>last 12 months</u>? | |
| Please EXCLUDE Jewish school fees and synagogue membership fees. | |
| <i>Please select all that apply</i> | |
| 1. Chabad/Lubavitch Foundation Southern Africa | <input type="checkbox"/> |
| 2. Chevra Kadisha (The Chev) | <input type="checkbox"/> |
| 3. Community Security Organisation (CSO) | <input type="checkbox"/> |
| 4. Hatzola | <input type="checkbox"/> |
| 5. Herzlia Foundation Trust | <input type="checkbox"/> |
| 6. Israel United Appeal (IUA)/United Communal Fund (UCF) | <input type="checkbox"/> |
| 7. King David Schools Foundation | <input type="checkbox"/> |
| 8. South African Jewish Board of Deputies (SAJBD) | <input type="checkbox"/> |
| 9. South African Zionist Federation (SAZF) | <input type="checkbox"/> |
| 10. United Jewish Campaign (UJC) | <input type="checkbox"/> |
| 11. Sinai Indaba | <input type="checkbox"/> |
| 12. Limmud | <input type="checkbox"/> |
| 13. Union of Orthodox Synagogues (UOS) or an affiliate synagogue | <input type="checkbox"/> |
| 14. Shabbos Project | <input type="checkbox"/> |
| 15. Other charity(ies) (please specify) | Write in |
| 16. None of these | <input type="checkbox"/> |
| 17. Don't know | <input type="checkbox"/> |
| 18. Prefer not to say | <input type="checkbox"/> |

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|---|--------------------------|
| Q100.3 | Ask all, randomise 2-11 |
| Have you personally given money to any NON-JEWISH organisations representing the following charitable CAUSES in the <u>last 12 months</u>? | |
| <i>Please select all that apply</i> | |
| 1. No, I have not given money to any non-Jewish causes | <input type="checkbox"/> |
| 2. Arts | <input type="checkbox"/> |

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| 3. Homeless | <input type="checkbox"/> |
| 4. International aid | <input type="checkbox"/> |
| 5. Children | <input type="checkbox"/> |
| 6. Elderly | <input type="checkbox"/> |
| 7. Sports | <input type="checkbox"/> |
| 8. Health | <input type="checkbox"/> |
| 9. Animal welfare | <input type="checkbox"/> |
| 10. Environment | <input type="checkbox"/> |
| 11. Educational (e.g. schools, universities, museums etc.) | <input type="checkbox"/> |
| 12. Poverty relief | <input type="checkbox"/> |
| 13. Other non-Jewish charitable CAUSE(S) (please only mention causes, NOT individual charities) | Write in |
| 14. None of these | <input type="checkbox"/> |
| 15. Don't know | <input type="checkbox"/> |
| 16. Prefer not to say | <input type="checkbox"/> |

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| Q36 | Ask all, randomise 1 and 2 |
| Which approach to Jewish communal fundraising do you believe is preferable for the community: fundraising through one central organisation acting on behalf of all charities and schools (though not synagogues), OR, each Jewish organisation fundraising on its own? | |
| <i>Please select one answer</i> | |
| | |
| 1. One central fundraising organisation | <input type="checkbox"/> |
| 2. Each organisation fundraising on its own | <input type="checkbox"/> |
| 3. Both approaches to fundraising are equally preferable | <input type="checkbox"/> |
| 4. Don't know | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> |

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| Q95.1 | Ask All |
| How much in total have you PERSONALLY given to JEWISH and/or NON-JEWISH charities in the <u>last 12 months</u>? If you are unsure, please estimate. | |
| Please EXCLUDE synagogue membership and Jewish school fees. | |
| <i>Please select one option</i> | |
| | |
| 1. Nothing | <input type="checkbox"/> |
| 2. 1R to R100 | <input type="checkbox"/> |
| 3. R101-R250 | <input type="checkbox"/> |
| 4. R251-R500 | <input type="checkbox"/> |
| 5. R501-R2,000 | <input type="checkbox"/> |
| 6. R2,001-R5,000 | <input type="checkbox"/> |
| 7. R5,001-R10,000 | <input type="checkbox"/> |
| 7. R10,001-R25,000 | <input type="checkbox"/> |

| | |
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| 8. R25,001-R50,000 | <input type="checkbox"/> |
| 9. R50,001-R100,000 | <input type="checkbox"/> |
| 10. R100,001-R200,000 | <input type="checkbox"/> |
| 11. More than R200,000 | <input type="checkbox"/> |
| 10. Prefer not to say | <input type="checkbox"/> |

| | |
|---|---|
| Q95.2 | Ask if FLAG2_HRP-SOLE or FLAG3_HRP-MULTI (householder) |
| How much in total has your HOUSEHOLD given to JEWISH and/or NON-JEWISH charities in the <u>last 12 months</u>? If you are unsure, please estimate. | |
| Please EXCLUDE synagogue membership and Jewish school fees. | |
| <i>Please select one option</i> | |
| 1. Nothing | <input type="checkbox"/> |
| 2. 1R to R100 | <input type="checkbox"/> |
| 3. R101-R250 | <input type="checkbox"/> |
| 4. R251-R500 | <input type="checkbox"/> |
| 5. R501-R2,000 | <input type="checkbox"/> |
| 6. R2,001-R5,000 | <input type="checkbox"/> |
| 7. R5,001-R10,000 | <input type="checkbox"/> |
| 7. R10,001-R25,000 | <input type="checkbox"/> |
| 8. R25,001-R50,000 | <input type="checkbox"/> |
| 9. R50,001-R100,000 | <input type="checkbox"/> |
| 10. R100,001-R200,000 | <input type="checkbox"/> |
| 11. More than R200,000 | <input type="checkbox"/> |
| 10. Prefer not to say | <input type="checkbox"/> |

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| Q74 | Ask all, rotate 1-5 |
| Approximately what proportion of your PERSONAL charitable donations over the <u>last 12 months</u> went to JEWISH charities? If you are unsure, please estimate. | |
| <i>Please select one option</i> | |
| 1. None | <input type="checkbox"/> |
| 2. Less than half | <input type="checkbox"/> |
| 3. About half | <input type="checkbox"/> |
| 4. More than half | <input type="checkbox"/> |
| 5. All | <input type="checkbox"/> |
| 6. Don't know | <input type="checkbox"/> |
| 7. Not applicable | <input type="checkbox"/> |
| 8. Prefer not to say | <input type="checkbox"/> |

18) Jewish education and schooling

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| Q11.1 | Ask all, randomise 1-12 |
| Which, if any, of the following formed part of your Jewish education and development? | |
| <i>Please select all that apply</i> | |
| 1. Bar/Bat Mitzvah ceremony | <input type="checkbox"/> |
| 2. Part-time Jewish classes (e.g. synagogue Cheder or Sunday School) | <input type="checkbox"/> |
| 3. Jewish youth movement meetings | <input type="checkbox"/> |
| 4. Membership of, or participation in, a Jewish sports group | <input type="checkbox"/> |
| 5. Jewish youth movement camp | <input type="checkbox"/> |
| 6. An organised youth/young adult Israel experience program | <input type="checkbox"/> |
| 7. An organised year-long youth program in Israel post school | <input type="checkbox"/> |
| 8. Study at a yeshiva or seminary in Israel | <input type="checkbox"/> |
| 9. Involvement with SAUJS (South Africa Union of Jewish Students), Young Adult Division (YAD) or similar | <input type="checkbox"/> |
| 10. University course or courses in Jewish/Hebrew Studies | <input type="checkbox"/> |
| 11. Formal Jewish lessons from a parent or relative | <input type="checkbox"/> |
| 12. Holocaust-focused educational trip to Poland | <input type="checkbox"/> |
| 13. None of these | <input type="checkbox"/> |

| | |
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| Q11.2 | Ask all, randomise 2-12 |
| Allow one answer per row | |
| Which, if any, of the following Jewish youth groups were you involved in (at any level) growing up and for how long? | |
| <i>Please select one option for all rows that apply</i> | |
| 1. No Jewish youth groups | <input type="checkbox"/> |
| | A. Less than 3 years B. 3 or more years |
| 2. Betar | <input type="checkbox"/> |
| 3. B'nei Akiva | <input type="checkbox"/> |
| 4. Bnei Zion | <input type="checkbox"/> |
| 5. Camp Keshet (formerly Bikkur Cholim Camp) | <input type="checkbox"/> |
| 6. Chabad (Gan Israel/Gan Issy) | <input type="checkbox"/> |
| 7. Habonim Dror | <input type="checkbox"/> |
| 8. Hashomer Hatzair | <input type="checkbox"/> |
| 9. Maccabi or other Jewish sports group | <input type="checkbox"/> |
| 10. Netzer/Maganim | <input type="checkbox"/> |
| 11. Yesh Camp (formerly Pirchei)/Bnos Camp | <input type="checkbox"/> |
| 12. Synagogue youth movement | <input type="checkbox"/> |
| 13. Other South African Jewish youth group | Write in |
| 14. Overseas Jewish youth group | <input type="checkbox"/> |

| | |
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| Q15.1 | Ask all |
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| 1 is exclusive, 2 and 3 can both be selected | |
| Are you the parent of a child who <u>currently attends a school in South Africa</u>, including at pre-primary stage? If so, does this include Jewish schooling and/or non-Jewish schooling? | |
| <i>Please select all that apply</i> | |
| | |
| 1. No, I have no school-aged children in South Africa | <input type="checkbox"/> |
| 2. Yes, one or more of my children currently attends a Jewish school in South Africa | <input type="checkbox"/> |
| 3. Yes, one or more of my children currently attends a non-Jewish school in South Africa | <input type="checkbox"/> |

| | |
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| Q15.2 | Ask if Q15.1 EQ 2 (Yes, a child in a Jewish school) |
| | |
| How many of your children <u>currently attend</u> a JEWISH school in South Africa, including at pre-primary stage? | |
| <i>Please select one option</i> | |
| | |
| 1. 1 child | <input type="checkbox"/> |
| 2. 2 children | <input type="checkbox"/> |
| 3. 3 children | <input type="checkbox"/> |
| 4. 4 or more children | <input type="checkbox"/> |

| | |
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| Q15.3 | Ask if Q15.1 EQ 2 (yes a child in a Jewish school) |
| | |
| Thinking about your child/ren who currently attends a <u>Jewish school</u>, what stage is he or she at? | |
| If you have more than one child attending a Jewish school, please answer for the ELDEST child. | |
| <i>Please select one option</i> | |
| | |
| 1. Pre-Primary | <input type="checkbox"/> |
| 2. Primary | <input type="checkbox"/> |
| 3. High | <input type="checkbox"/> |

| | | |
|---|---|-----------------------------|
| Q15.4 | Ask if Q15.1 EQ 3 (a child in a non-Jewish school), rotate A and B | |
| | | |
| Thinking about your child/ren who currently attends a <u>non-Jewish school</u>, what stage is he or she at and is this a public or a private school? | | |
| If you have more than one child attending a non-Jewish school, please answer for the ELDEST child. | | |
| <i>Please select one option</i> | | |
| | | |
| | A. Private | B. Public/Government |
| 1. Pre-Primary | <input type="checkbox"/> | x |
| 2. Primary | <input type="checkbox"/> | <input type="checkbox"/> |

| | | |
|---------|--------------------------|--------------------------|
| 3. High | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | |
|---|---|----------|
| Q19.1 | Ask if Q15.4 EQ B2 or B3 (has a child in a public school), randomise 1-8 | |
| Why did you choose to send this child to a non-Jewish public school? | | |
| <i>Please select all that apply</i> | | |
| | | |
| 1. Convenience - close to home | <input type="checkbox"/> | |
| 2. Cannot afford fees for a private school | <input type="checkbox"/> | |
| 3. Do not believe in private education | <input type="checkbox"/> | |
| 4. Obtain a diverse cultural experience | <input type="checkbox"/> | |
| 5. High academic standards | <input type="checkbox"/> | |
| 6. Other Jewish children attend | <input type="checkbox"/> | |
| 7. Availability of special needs/learning support programmes | <input type="checkbox"/> | |
| 8. Quality of facilities (e.g. music, sport) | <input type="checkbox"/> | |
| 9. Other (please specify) | | Write in |
| 10. Don't know | <input type="checkbox"/> | |
| 11. Prefer not to say | <input type="checkbox"/> | |

| | | |
|---|---|----------|
| Q19.5 | Ask if Q15.4 EQ B2 or B3 (has a child in a public school), randomise 1-7 | |
| Is there a reason you did <u>not</u> send this child to a Jewish school? | | |
| <i>Please select all that apply</i> | | |
| | | |
| 1. No Jewish school close to home | <input type="checkbox"/> | |
| 2. Cost/unwilling/unable to obtain fee subsidies | <input type="checkbox"/> | |
| 3. Lack of cultural diversity | <input type="checkbox"/> | |
| 4. Child previously attended a Jewish school | <input type="checkbox"/> | |
| 5. Plan to send child to a Jewish school in the future | <input type="checkbox"/> | |
| 6. Deterred by Jewish schools' religious ethos | <input type="checkbox"/> | |
| 7. Too much time spent on Judaism/Jewish education in Jewish schools | <input type="checkbox"/> | |
| 8. Other reason (please specify) | | Write in |
| 9. Don't know | <input type="checkbox"/> | |
| 10. Prefer not to say | <input type="checkbox"/> | |

| | | |
|--|--|--|
| Q19.2 | Ask if Q15.4 EQ A1 or A2 or A3 (child in a non-Jewish private school), randomise 1-12 | |
| Why did you choose to send this child to a non-Jewish private school rather than a Jewish school? | | |
| <i>Please select all that apply</i> | | |
| | | |
| 1. No Jewish schools available/close to home | <input type="checkbox"/> | |
| 2. Convenience – close to home | <input type="checkbox"/> | |
| 3. Obtain a diverse cultural experience | <input type="checkbox"/> | |

| | |
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| 4. Higher academic standards | <input type="checkbox"/> |
| 5. Too much time spent on Judaism/Jewish education in Jewish schools | <input type="checkbox"/> |
| 6. Quality of facilities (e.g. music, sport) | <input type="checkbox"/> |
| 7. Other Jewish children attend | <input type="checkbox"/> |
| 8. Jewish studies programme offered | <input type="checkbox"/> |
| 9. Availability of special needs/learning support programmes | <input type="checkbox"/> |
| 10. Child previously attended a Jewish school | <input type="checkbox"/> |
| 11. Plan to send child to a Jewish school in the future | <input type="checkbox"/> |
| 12. Deterred by Jewish schools' religious ethos | <input type="checkbox"/> |
| 13. Other (please specify) | Write in |
| 14. Don't know | <input type="checkbox"/> |
| 15. Prefer not to say | <input type="checkbox"/> |

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| Q19.3 | Ask if Q15.1 EQ 2 (1 or more children in a Jewish school), randomise 1-8 |
| Why did you choose to send this child to a Jewish school rather than a non-Jewish private school? | |
| <i>Please select all that apply</i> | |
| 1. Provide a sense of belonging to the Jewish community | <input type="checkbox"/> |
| 2. Strengthen Jewish identity | <input type="checkbox"/> |
| 3. Develop Jewish friendships and social networks | <input type="checkbox"/> |
| 4. Reduce the likelihood of intermarriage | <input type="checkbox"/> |
| 5. Learn about Judaism/Jewish studies | <input type="checkbox"/> |
| 6. Availability of subsidies/remission for private school | <input type="checkbox"/> |
| 7. Higher academic standards | <input type="checkbox"/> |
| 8. Availability of special needs/learning support programmes | <input type="checkbox"/> |
| 9. Other (please specify) | Write in |
| 10. Don't know | <input type="checkbox"/> |
| 11. Prefer not to say | <input type="checkbox"/> |

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| Q19.4 | Ask if Q15.1 EQ 2 (1 or more children in a Jewish school), randomise 1-13 |
| Option 1 is exclusive | |
| Why did you choose to send this child to <u>this</u> Jewish school rather than a different Jewish school? | |
| <i>Please select all that apply</i> | |
| 1. No alternative Jewish schools available | <input type="checkbox"/> |
| 2. More affordable than alternative Jewish school(s) (lower fees/bigger subsidies) | <input type="checkbox"/> |
| 3. Higher quality of Jewish studies/Jewish education | <input type="checkbox"/> |
| 4. Higher quality of Hebrew instruction | <input type="checkbox"/> |
| 5. Religious diversity of the student body | <input type="checkbox"/> |
| 6. Religious ethos of the school | <input type="checkbox"/> |
| 7. Learning ethos of the school | <input type="checkbox"/> |
| 8. Better social fit (e.g. friends send their children here) | <input type="checkbox"/> |

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| 9. Higher quality of academic education | <input type="checkbox"/> |
| 10. Convenience - closest to home | <input type="checkbox"/> |
| 11. Provides more supportive/nurturing environment | <input type="checkbox"/> |
| 12. Better facilities (e.g. music, sport) | <input type="checkbox"/> |
| 13. Availability of special needs/learning support programmes | <input type="checkbox"/> |
| 14. Other (please specify) | Write in |
| 15. Don't know | <input type="checkbox"/> |
| 16. Prefer not to say | <input type="checkbox"/> |

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| Q20.1 | Ask if Q15.1 EQ 2 (child in Jewish school), rotate 1-4 |
| Would you say the cost of sending your child/children to a Jewish School... | |
| <i>Please select one option</i> | |
| 1. is well within your household's financial capacity | <input type="checkbox"/> |
| 2. entails some financial sacrifices for your household | <input type="checkbox"/> |
| 3. entails significant financial sacrifices for your household | <input type="checkbox"/> |
| 4. entails major financial sacrifices for your household | <input type="checkbox"/> |
| 5. Prefer not to say | <input type="checkbox"/> |

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| Q20.2 | Ask Q15.1 EQ 2 or 3 (currently has a school aged child), rotate 1-3 |
| It has been suggested that the cost of Jewish schooling in South Africa has caused some families to limit the number of children they would otherwise like to have had. Does this include you? | |
| <i>Please select one option</i> | |
| 1. Yes, definitely | <input type="checkbox"/> |
| 2. Yes, to some extent | <input type="checkbox"/> |
| 3. No | <input type="checkbox"/> |
| 4. Not Applicable (e.g. I do not believe Jewish children should attend Jewish schools, or there are no Jewish schools near me) | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

19) Israel

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| Q57.1 | Ask All |
| How many different times in your life have you visited Israel, if at all? | |
| If you were <u>born in Israel</u>, please relate your answer to the number of times you have returned to visit. | |
| <i>Please select one answer</i> | |
| 1. Never | <input type="checkbox"/> |
| 2. Drop menu (Once, 2 times ... 10 or more times) | <input type="checkbox"/> |

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| 3. Prefer not to say | <input type="checkbox"/> |
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| Q57.2 | Ask if Q57 EQ 2 (have visited Israel) |
| What was the longest time you spent in Israel at any one visit? | |
| <i>Please select one answer</i> | |
| 1. Less than 2 weeks | <input type="checkbox"/> |
| 2. Between 2 weeks and 1 month | <input type="checkbox"/> |
| 3. Between 1 month and 4 months | <input type="checkbox"/> |
| 4. Between 4 months and 12 months | <input type="checkbox"/> |
| 5. Between 1 year and 3 years | <input type="checkbox"/> |
| 6. 3 years or more | <input type="checkbox"/> |

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| Q59 | Ask if Q57 NE 1 (have visited Israel) |
| When were you last in Israel? | |
| <i>Please select the most recent year</i> | |
| numeric input with a validation (2019 - 1900) | |

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|---|--------------------------|
| Q56 | Ask All |
| To what extent do you keep up with current events which involve Israel? Would you say... | |
| <i>Please select one answer</i> | |
| 1. A lot | <input type="checkbox"/> |
| 2. Quite a lot | <input type="checkbox"/> |
| 3. A little | <input type="checkbox"/> |
| 4. Not at all | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

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| Q58 | Ask All |
| Whether or not you have visited Israel, what type of attachment (or otherwise) do you feel towards Israel? | |
| <i>Please select one answer</i> | |
| 1. Strong attachment | <input type="checkbox"/> |
| 2. Moderate attachment | <input type="checkbox"/> |
| 3. Weak attachment | <input type="checkbox"/> |
| 4. No attachment at all | <input type="checkbox"/> |

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| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

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| Q55 | Ask All |
| How likely is it that you will choose to live permanently in Israel at some point in the future? | |
| <i>Please select one answer</i> | |
| 1. Very likely | <input type="checkbox"/> |
| 2. Fairly likely | <input type="checkbox"/> |
| 3. Not very likely | <input type="checkbox"/> |
| 4. Not at all likely | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

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| Q53 | Ask All |
| Although there are different opinions about what the term Zionism means, in general, do you consider yourself to be a Zionist? | |
| <i>Please select one answer</i> | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |
| 3. Don't know | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

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|--|---|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Q72.1 | Ask all, randomise 1-7, rotate A-E | | | | | | |
| To what extent do you agree or disagree with the following statements about Israel: | | | | | | | |
| <i>Please select one answer per row</i> | | | | | | | |
| | A. Strongly agree | B. Tend to agree | C. Neither agree nor disagree | D. Tend to disagree | E. Strongly disagree | F. Don't know | G. Prefer not to say |
| 1. Democracy in Israel is alive and well | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. There is too much corruption in Israel's political system | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Orthodox Judaism has too much influence in Israeli society | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| 4. Israeli control of the West Bank (Judea/Samaria) is vital for Israel's security | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Israel should give up territory in exchange for guarantees of peace with the Palestinians | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. The Palestinian Authority is a trusted partner for furthering peace with Israel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. The government of Israel should negotiate with Hamas in its efforts to achieve peace | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| Q72.2 | Ask all, randomise 1-3, rotate A-E | | | | | | |
| And to what extent do you agree or disagree with the following statements: | | | | | | | |
| <i>Please select one answer per row</i> | | | | | | | |
| | A. Strongly agree | B. Tend to agree | C. Neither agree nor disagree | D. Tend to disagree | E. Strong ly disagr ee | F. Don't know | G. Prefer not to say |
| 1. I am opposed to the idea of a state specifically for Jews | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I support the elected government of the state of Israel, right or wrong | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Israel is the ancestral homeland of the Jewish people | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| Q73 | Ask All, randomise 1-3, rotate A-C | | | |
| Jewish people hold a variety of attitudes towards Israel. To what extent do you feel it is acceptable or unacceptable for JEWISH people in South Africa to: | | | | |
| <i>Please select one answer in each column</i> | | | | |
| | A. Never acceptable | B. Sometimes acceptable | C. Always acceptable | D. Don't know |
| 1. Publicly support a boycott of Israel or Israelis (e.g. goods, products, university lecturers) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Criticise Israel in the broader South African media | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| 3. Criticise Israel in the Jewish public sphere (e.g. at Jewish communal events, in the Jewish media) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| Q68.3 | Ask all, randomise 1-4, rotate A-D | | | |
| In the last 12 MONTHS, have you heard or seen, in person or in the media, non-Jewish people in South Africa suggest that: | | | | |
| <i>Please select one answer per row</i> | | | | |
| | A. All the time | B. Frequently | C. Occasionally | D. Never |
| 1. Israel or Israelis should be boycotted (e.g. goods, products, university lecturers) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Israel is an apartheid state | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Israelis behave “like Nazis” towards the Palestinians | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. The world would be a better place without Israel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| Q68.4 | Ask all, randomise 1-5, rotate A-D | | | | |
| Would you consider a non-Jewish person to be antisemitic if he or she says that: | | | | | |
| <i>Please select one answer per row</i> | | | | | |
| | A. Yes, definitely | B. Yes, probably | C. No, probably not | D. No, definitely not | E. Don't know |
| 1. Israel or Israelis should be boycotted (e.g. goods, products, university lecturers) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Israel is an apartheid state | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Israelis behave “like Nazis” towards the Palestinians | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. The world would be a better place without Israel | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

20) Health and welfare

| | |
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| Q81 | Ask all |
| How is your health in general? | |
| <i>Please select one option</i> | |
| 1. Very good | <input type="checkbox"/> |

| | |
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| 2. Good | <input type="checkbox"/> |
| 3. Fair | <input type="checkbox"/> |
| 4. Bad | <input type="checkbox"/> |
| 5. Very bad | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

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| Q82 | Ask all |
| How often, if at all, have you exercised over the last 12 months? | |
| <i>Please select one option</i> | |
| 1. Every day | <input type="checkbox"/> |
| 2. Several times a week | <input type="checkbox"/> |
| 3. 2-4 times a month | <input type="checkbox"/> |
| 4. Every few months | <input type="checkbox"/> |
| 5. Never | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

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| Q84.1 | Ask all |
| 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? Please include problems related to old age. | |
| <i>Please select one option</i> | |
| 1. Yes, limited a lot | <input type="checkbox"/> |
| 2. Yes, limited a little | <input type="checkbox"/> |
| 3. No | <input type="checkbox"/> |
| 4. Prefer not to say | <input type="checkbox"/> |

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| Q84.2 | Ask all |
| Please indicate which statements best describe your own state of health today. | |
| <i>Please select one option for each of sections a) to e) below:</i> | |
| A) Mobility | |
| 1. I have no problems walking about | <input type="checkbox"/> |
| 2. I have some problems walking about | <input type="checkbox"/> |
| 3. I am confined to bed | <input type="checkbox"/> |
| B) Self-care | |
| 1. I have no problems with self-care (e.g. washing and dressing) | <input type="checkbox"/> |
| 2. I have some problems washing/dressing myself | <input type="checkbox"/> |
| 3. I am unable to wash or dress myself | <input type="checkbox"/> |
| C) Usual Activities (e.g. work, study, housework, family or leisure activities) | |

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| 1. I have no problems with performing my usual activities | <input type="checkbox"/> |
| 2. I have some problems with performing my usual activities | <input type="checkbox"/> |
| 3. I am unable to perform my usual activities | <input type="checkbox"/> |
| D) Pain / Discomfort | |
| 1. I have no pain or discomfort | <input type="checkbox"/> |
| 2. I have moderate pain or discomfort | <input type="checkbox"/> |
| 3. I have extreme pain or discomfort | <input type="checkbox"/> |
| E) Anxiety / Depression | |
| 1. I am not anxious or depressed | <input type="checkbox"/> |
| 2. I am moderately anxious or depressed | <input type="checkbox"/> |
| 3. I am extremely anxious or depressed | <input type="checkbox"/> |

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| Q86 | Ask all |
| Do you look after, or give any regular help or support to, a close relative (parent, child, spouse, or sibling), either inside or outside your home, who is suffering from long-term ill-health or a long-term disability? | |
| Please do not count anything you do as part of your paid employment. | |
| <i>Please select all that apply</i> | |
| 1. No | <input type="checkbox"/> |
| 2. Yes, an elderly family member with physical ill-health/disability | <input type="checkbox"/> |
| 3. Yes, an elderly family member with mental ill-health/disability | <input type="checkbox"/> |
| 4. Yes, a child under 18 in my family with physical ill-health/disability | <input type="checkbox"/> |
| 5. Yes, a child under 18 in my family with mental ill-health/disability | <input type="checkbox"/> |
| 6. Yes, another close family member with physical ill-health/disability | <input type="checkbox"/> |
| 7. Yes, another close family member with mental ill-health/disability | <input type="checkbox"/> |
| 8. Prefer not to say | <input type="checkbox"/> |

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| Q87 | Ask all |
| If you needed to be looked after in a care home or supported living environment, which type of facility, if any, would you prefer? | |
| <i>Please select one answer</i> | |
| 1. A facility with a Jewish ethos and kosher food | <input type="checkbox"/> |
| 2. A facility with a Jewish ethos and but not necessarily with kosher food | <input type="checkbox"/> |
| 3. A facility with other Jewish people but not necessarily with kosher food or a Jewish ethos | <input type="checkbox"/> |
| 4. A facility that is not specifically Jewish in any way | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

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| Q13 | Ask all |
| Do you personally have a medical aid plan? | |
| <i>Select one option</i> | |
| | |
| 1. No | <input type="checkbox"/> |
| 2. Yes - a basic hospital plan | <input type="checkbox"/> |
| 3. Yes - a basic hospital plan and some additional cover | <input type="checkbox"/> |
| 4. Yes - a comprehensive plan | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

21) Economics

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| Q92 | Ask if Q2 EQ 1, 2, 4 (do not live in a communal establishment) |
| Is your home... | |
| <i>Please select one option</i> | |
| | |
| 1. Owned outright | <input type="checkbox"/> |
| 2. Owned with a mortgage | <input type="checkbox"/> |
| 3. Rented | <input type="checkbox"/> |
| 4. Occupied rent free | <input type="checkbox"/> |
| 5. Something else (please specify) | Write in |
| 6. Prefer not to say | <input type="checkbox"/> |

| | |
|---|--------------------------|
| Q94 | Ask all |
| Which of these best describes your present situation? | |
| <i>Please select one option</i> | |
| | |
| 1. Employed full-time | <input type="checkbox"/> |
| 2. Employed part-time | <input type="checkbox"/> |
| 3. Employed on casual hours | <input type="checkbox"/> |
| 4. Self-employed full-time | <input type="checkbox"/> |
| 5. Self-employed part-time | <input type="checkbox"/> |
| 6. Unemployed and looking for work | <input type="checkbox"/> |
| 7. Looking after the home full-time | <input type="checkbox"/> |
| 8. Student – employed | <input type="checkbox"/> |
| 9. Student – not employed | <input type="checkbox"/> |
| 10. Retired | <input type="checkbox"/> |
| 11. Unable to work because of a disability/long term ill-health | <input type="checkbox"/> |
| 12. Something else (please specify) | Write in |
| 13. Prefer not to say | <input type="checkbox"/> |

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| Q90 | Ask all |
| What is the highest level of education you have completed? | |
| <i>Please select one option</i> | |
| 1. None | <input type="checkbox"/> |
| 2. Schooling up to Grade 6 | <input type="checkbox"/> |
| 3. Schooling up to Grade 12 | <input type="checkbox"/> |
| 4. Certificate/Diploma with less than Grade 12 | <input type="checkbox"/> |
| 5. Certificate/Diploma with Grade 12 | <input type="checkbox"/> |
| 6. Higher Diploma | <input type="checkbox"/> |
| 7. Bachelors Degree | <input type="checkbox"/> |
| 8. Bachelors Degree and post graduate diploma | <input type="checkbox"/> |
| 9. Honours Degree | <input type="checkbox"/> |
| 10. Masters Degree | <input type="checkbox"/> |
| 11. Doctoral Degree (PhD) | <input type="checkbox"/> |
| 12. Something else (please specify) | Write in |
| 13. Prefer not to say | <input type="checkbox"/> |

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| Q76.1 | Ask all, rotate 1-6 |
| Would you say that you are... | |
| <i>Select one option</i> | |
| 1. Wealthy | <input type="checkbox"/> |
| 2. Very comfortable | <input type="checkbox"/> |
| 3. Reasonably comfortable | <input type="checkbox"/> |
| 4. Just getting along | <input type="checkbox"/> |
| 5. Poor | <input type="checkbox"/> |
| 6. Very poor | <input type="checkbox"/> |
| 7. Prefer not to say | <input type="checkbox"/> |

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| Q76.2 | Ask all, rotate 1-5 |
| How do you feel your household's total annual income compares with other households in the South African Jewish community? | |
| <i>Select one option</i> | |
| 1. Much above average income | <input type="checkbox"/> |
| 2. Above average income | <input type="checkbox"/> |
| 3. Average income | <input type="checkbox"/> |
| 4. Below average income | <input type="checkbox"/> |
| 5. Much below average income | <input type="checkbox"/> |
| 6. Don't know | <input type="checkbox"/> |
| 7. Prefer not to say | <input type="checkbox"/> |

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| Q51.1 | Ask all |
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| Which of the following best represents your current <u>PERSONAL</u> annual gross income, from all sources, BEFORE taxes and other deductions? | |
| <i>Please select one option</i> | |
| 1. No income | <input type="checkbox"/> |
| 2. R1 to R25,000 | <input type="checkbox"/> |
| 3. R25,001 to R75,000 | <input type="checkbox"/> |
| 4. R75,001 to R150,000 | <input type="checkbox"/> |
| 5. R150,001 to R300,000 | <input type="checkbox"/> |
| 6. R300,001 to R500,000 | <input type="checkbox"/> |
| 7. R500,001 to R1,000,000 | <input type="checkbox"/> |
| 8. R1,000,001 to R2,000,000 | <input type="checkbox"/> |
| 9. R2,000,001 to R5,000,000 | <input type="checkbox"/> |
| 10. R5,000,000 or more | <input type="checkbox"/> |
| 11. Don't know | <input type="checkbox"/> |
| 12. Prefer not to say | <input type="checkbox"/> |

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| Q51.2 | Ask if FLAG2_HRP-SOLE or FLAG3_HRP-MULTI (Flags 2 or 3) (householder not living alone) |
| Which of the following best represents the annual gross income of your ENTIRE HOUSEHOLD, from all sources, BEFORE tax and other deductions? | |
| <i>Please select one option</i> | |
| 1. No income | <input type="checkbox"/> |
| 2. R1 to R25,000 | <input type="checkbox"/> |
| 3. R25,001 to R75,000 | <input type="checkbox"/> |
| 4. R75,001 to R150,000 | <input type="checkbox"/> |
| 5. R150,001 to R300,000 | <input type="checkbox"/> |
| 6. R300,001 to R500,000 | <input type="checkbox"/> |
| 7. R500,001 to R1,000,000 | <input type="checkbox"/> |
| 8. R1,000,001 to R2,000,000 | <input type="checkbox"/> |
| 9. R2,000,001 to R5,000,000 | <input type="checkbox"/> |
| 10. R5,000,000 or more | <input type="checkbox"/> |
| 11. Don't know | <input type="checkbox"/> |
| 12. Prefer not to say | <input type="checkbox"/> |

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|---|----------------|
| Q60.1 | Ask All |
| Do you currently employ any <u>domestic</u> help/staff at home? This includes maids, nannies, gardeners, security staff, carers etc. | |
| <i>Please select one option</i> | |
| | |

| | |
|----------------------|--------------------------|
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |
| 3. Prefer not to say | <input type="checkbox"/> |

| | |
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| Q60.2 | If Q60.1 EQ 1 Yes |
| Option 4 is exclusive | |
| How many <u>domestic</u> helpers/staff did you employ at home last week? | |
| <i>Please select one option on each row</i> | |
| 1. Full time | Drop menu: (0,1,2,3 or more) |
| 2. Part time | Drop menu: (0,1,2,3 or more) |
| 3. Casual/occasional | Drop menu: (0,1,2,3 or more) |
| 4. Prefer not to say | <input type="checkbox"/> |

| | | | | |
|--|---|--------------------------|--------------------------|--------------------------|
| Q99.1 | Ask all, randomise 1-3, rotate A and B | | | |
| In the last 12 months did you personally ever... | | | | |
| <i>Please select one option in each row</i> | | | | |
| | A. Yes | B. No | C. Don't Know | D. Prefer not to say |
| 1. reduce the size of your meals because there wasn't enough money to buy food? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. need prescription medicine but didn't get it because you couldn't afford to buy it? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. seek financial assistance from the Jewish community? Please EXCLUDE fee subsidies for Jewish schools, synagogues and Israel trips. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | |
|---|---|--------------------------|--------------------------|--------------------------|
| Q99.2 | Ask all, randomise 1-3, rotate A and B | | | |
| In the last 12 months did anyone in your <u>HOUSEHOLD</u>, including yourself, ever... | | | | |
| <i>Please select one option in each row</i> | | | | |
| | A. Yes | B. No | C. Don't Know | D. Prefer not to say |
| 1. reduce the size of their meals because there wasn't enough money to buy food? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. need prescription medicine but didn't get it because they couldn't afford to buy it? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| 3. seek financial assistance from the Jewish community? Please EXCLUDE fee subsidies for Jewish schools, synagogues and Israel trips. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|--------------------------|--------------------------|


22) Financing retirement

| | |
|--|--------------------------|
| Q88.1 | Ask all |
| What financial provisions, if any, have you made for your retirement? | |
| <i>Please select all that apply</i> | |
| 1. None | <input type="checkbox"/> |
| 2. Pension or provident fund(s) (linked to my employment contract) | <input type="checkbox"/> |
| 3. Private savings fund (e.g. private retirement annuity (RA) not linked to my employment contract) | <input type="checkbox"/> |
| 4. Investments (e.g. in property, shares etc.) | <input type="checkbox"/> |
| 5. Other | <input type="checkbox"/> |
| 6. Don't know | <input type="checkbox"/> |

| | |
|---|--|
| Q88.2 | Ask if aged 50 or above at Q10B 'You' and Q4.1, rotate 1-4 [NOT ASKED] |
| Do you have sufficient financial provisions to cover the cost of your care needs into old age? | |
| <i>Please select one answer</i> | |
| 1. Yes, definitely | <input type="checkbox"/> |
| 2. Yes, probably | <input type="checkbox"/> |
| 3. No, probably not | <input type="checkbox"/> |
| 4. No, definitely not | <input type="checkbox"/> |
| 5. Don't know | <input type="checkbox"/> |
| 6. Prefer not to say | <input type="checkbox"/> |

23) Referral and prize draw

| | |
|--|--------------------------|
| Q119 | Ask all |
| <p>You have now reached the end of the survey and submitted your answers. Thank you for your contribution to JCSSA 2019.</p> <p>We want as many Jewish people as possible to have their say in this study, in order to cover the <u>widest range of views and experiences</u>. Would you be interested in helping us BROADEN THE SURVEY'S REACH by inviting other Jewish people currently living in South Africa, by email, to complete the survey?</p> | |
| <i>Select one option</i> | |
| 1. Yes | <input type="checkbox"/> |
| 2. No | <input type="checkbox"/> |

| | |
|---|-----------------------------|
| Q120 | Ask if Q119 = 1 (Yes refer) |
| Referral instructions | |
| <p>Thank you for agreeing to invite others to take part in JCSSA 2019.</p> <p>To invite other people who are Jewish, aged 18 or over and who currently live in South Africa, simply copy and paste the text below, including the web link, into a blank email and send it to your invitees:</p> | |
|  | |
| <i>Copy and paste text below</i> | |
| <p>.....</p> <p>Hi,</p> <p>I have just completed the Jewish Community Survey of South Africa - JCSSA 2019[embed link to http://jcssa2019.co.za] and would like to invite you to take part. This is a once-in-a-decade opportunity and is open to all Jewish adults currently living in South Africa.</p> <p>Simply click on the following link where you can submit your email address and receive a unique invitation to complete the survey and the chance to win one of three Takealot.com vouchers worth R2000 each.</p> <p>Link to Referral Landing Page</p> <p>If clicking this link does not work, please copy and paste it into your web browser. For further information about JCSSA 2019, please visit the JCSSA website. [embed link to http://jcssa2019.co.za]</p> <p>.....</p> | |

Show text to all:

Please click NEXT for details of how to enter the prize draw.

| | |
|------|---------|
| Q121 | Ask all |
| | |

Would you like to enter a prize draw for the chance to win one of three Takealot.com vouchers worth R2000 each?

Select one option

1. Yes

2. No

Q122

Ask if Q121 = 1 (Yes enter)

To take part in the prize draw, please enter your contact details below.

Note this information is for the prize draw only and will not be linked to any of the answers you have provided in the survey. Good luck!

First name:

Surname name:

Email address: **validation of email address**

Phone number: **validation of numeric**

Province:

Show text to all:

Thank you once again for taking part in JCSSA 2019.

****END OF SURVEY****