Interview Protocols and Survey Instruments

Created by the Center for Public Interest Communications

Introduction

At the core of public interest communications is an understanding of the science behind communication and the value of transparency and replicability in research. The Center for Public Interest Communications is sharing the materials we used to set up this study in an effort to live up to these values. The following document includes all of the interview protocols and survey instruments we used for this work.

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Interview Questionnaire for Practitioners

The following section includes the questions we asked practitioners who worked at foundations or worked with foundations to help develop their storytelling skills. The analysis of this method can be [found here.](#)

Interview Protocol

Hello, and thank you for taking the time for this conversation. My name is _____, and our conversation today will inform work by the University of Florida's Center for Public Interest Communications and the Council on Foundations to provide insights into storytelling and narratives in the foundation and non-profit sectors. This interview is for research purposes. We will not publicly release any information from the interview without your consent and if we want to quote you publicly we will reach out with the quote and ask you if you are ok with it being publicly shared.

Let's take a moment to review the informed consent form we sent you ahead of this interview. Did you get a chance to review it and do you have any questions? [NOTE to the interviewer: if they have questions you can pull up the informed consent document on the screen if they would like to review or talk about it].

Would you like to proceed with the interview? [NOTE to the interviewer: If yes, continue with the interview, if not, terminate the interview and thank them for their time].

Our conversation will last about 45 minutes, and we'll have questions about your views on storytelling and narratives in the foundation and non-profit sectors.

Our conversation will not be shared publicly, however, we are subject to the open records laws of the state of Florida.

May I record this interview? [Note to the interviewer, If yes, hit record] Thank you.

You may turn your video off if you prefer.

<mark>HIT RECORD if they say yes</mark>

[THEME 1 - YOUR RELATIONSHIP WITH THE SECTOR]

1. **Can you begin by telling me your name and what you do in your job?**
    Interviewer make note of occupation they give for specific probes later.

2. **Can you briefly share what inspired you to get into this field?**

3. **Can you tell me about the mission of your employer and how your work fits into that mission?**

4. **Can you explain your role in terms of how your role connects to the communications functions of your organization? For instance, maybe you are in a comms department or have another role but interact with the communications department or communications person of your organization–or do you have another type of role?**

[THEME 2: USING STORY and NARRATIVES IN YOUR WORK]

The following questions are about the role stories play in your work.

5. **Do you tell stories as part of your work? If so, how often do you use them and how much time would you say you spend working on them?**

6. **How do the stories you tell connect to your communications objectives?**

7. **How do the stories you tell in your communications affect how your organization is perceived?**

    PROBE: **Why do you think this is the case?**

8. **Who or what are your stories about?**

9. **What kinds of people appear as characters in your stories?**

10. **When you feature someone as a focal point of your story how do you include their voice in that story?**

11. **In our review of the stories the field tells, we uncovered several deep narratives**

    NOTE to interviewer: Put the narratives up on the shared Zoom screen.

    Going one by one – **Is the following narrative familiar to you? Can you think of a story you or someone else in your organization told that fit this narrative?**

Distrust of Wealth – Narratives that center on philanthropy's wealth in relation to the people they serve, concern about where that wealth comes from, and skepticism about the intentions of philanthropy.

Unease with Private Funds Solving Public Problems – Narratives that question or overstate philanthropy's role in political spaces either by stating that it threatens democracy or by claiming it "fills a gap" (which has positive and negative implications).

Single Hero Saves the Day – Narratives that put the focus on an individual's story rather than the systemic problem. These narratives either make philanthropy the savior or rely on "bootstrap individualism" of a directly impacted person.

PROBE: **Which of these narratives would you say is the most prevalent?**

PROBE: **Have you tried a different displacement narrative?**

12. **Going one-by-one on displacement narratives—we would like to ask the same question. Thinking of the sector, does the following narrative ring true to you? Can you think of a story you or someone else in your organization told that fit this narrative?**

NOTE to interviewer: Put the narratives up on the shared Zoom screen.
   - Telling Transparent Stories (Stories that are specific about what you prioritize, what your funding does, and who does the day to day work)

   - Telling Clear Stories (Stories that clearly describe philanthropy's role within the community)

   - Telling System Stories (Stories that emphasize communities taking action to address a systemic issue)

   - Eliminating abstract language and choosing metaphors that accurately reflect your work

PROBE: **Have you tried a different displacement narrative?**

13. **What are some examples of particularly strong stories you have seen told by someone in the sector?**

> PROBE if they say yes: **Why do you think this was a strong story? What aspects or attributes made it particularly strong?**

14. I'd like to know a bit more detail about the stories you tell about how your organization does its work. **Can you think of an example of a story you've told or produced that would help someone understand how the organization gets ideas, sets funding priorities or makes decisions?**

> PROBE: **Whose voices do those stories include?**

> PROBE: **If you don't mind, would you send me the links to these stories after our talk?**

15. **Is there anything else you think we should know that we did not ask you about for this project?**

Interview Questionnaire for Scholars

The following section includes the questions we asked practitioners who worked at foundations or worked with foundations to help develop their storytelling skills. While there are questions for narrative scholars, we did not interview any narrative scholars. Instead we interviewed one philanthropy scholar and ten storytelling practitioners. The analysis of this method can be [found here.](#)

Interview Protocol

Hello, and thank you for taking the time for this conversation. My name is _____, and our conversation today will inform work by the University of Florida's Center for Public Interest Communications and the Council on Foundations to provide insights into storytelling and narratives in the foundation and non-profit sectors. This interview is for research purposes. We will not publicly release any information from the interview without your consent and if we want to quote you publicly we will reach out with the quote and ask you if you are ok with it being publicly shared.

Let's take a moment to review the informed consent form we sent you ahead of this interview. Did you get a chance to review it and do you have any questions? [NOTE to the interviewer: if they have questions you can pull up the informed consent document on the screen if they would like to review or talk about it].

Would you like to proceed with the interview? [NOTE to the interviewer: If yes, continue with the interview, if not, terminate the interview and thank them for their time].

Our conversation will last about 45 minutes, and we'll have questions about your views on storytelling and narratives in the foundation and non-profit sectors.

Our conversation will not be shared publicly, however, we are subject to the open records laws of the state of Florida.

May I record this interview? [Note to the interviewer, If yes, hit record] Thank you.

You may turn your video off if you prefer.

HIT RECORD if they say yes

[THEME 1 - YOUR ACADEMIC EXPERTISE AND RELATIONSHIP WITH THE SECTOR]

1. **Can you begin by telling me your name, what academic discipline you consider yourself part of and what you study?**

Interviewer make note of academic field of study they give for specific probes later (scholar of philanthropy; scholar of narratives).

2. **Can you tell me a bit more about your research, both current and past, in the area of ["philanthropy" for philanthropy scholar and "narrative" for narrative scholar]?**

3. [For Narrative Scholar] **We're especially interested in your work around counter-narratives. Do counter-narratives share any characteristics? If so, what are they?**

4. [For Narrative Scholar] **Can you think of an example of when a counter-narrative has displaced a harmful pervasive narrative in popular culture or within a specific community?**

5. [For Narrative Scholar] **What are some of the factors that make counternarratives believable?**

6. [For Philanthropy Scholar] **We're especially interested in your recent research findings in the philanthropy sector. What about these insights stood out to you?**

   [For Philanthropy Scholar] **What stories about philanthropy have you seen in your work?**

7. [Ask both] **In what ways do you think the stories organizations tell affect the organization's reputation?**

8. [Ask both] **We recently conducted a scan of the stories and surveys conducted by or written about philanthropy. In that review, we uncovered several deep narratives that may be associated with negative perceptions of how the field does its work. We'd like to review each of these with you to gain your thoughts about them.**

   NOTE to interviewer: Put the narratives up on a shared screen.

   Going through them one by one– **Is the following narrative familiar to you and does it ring true from what you have heard in or about the philanthropy sector?**

Distrust of Wealth – Narratives that center on philanthropy's wealth in relation to the people they serve, concern about where that wealth comes from, and skepticism about the intentions of philanthropy.

Unease with Private Funds Solving Public Problems – Narratives that question or overstate philanthropy's role in political spaces either by stating that it threatens democracy or by claiming it "fills a gap" (which has positive and negative implications).

Single Hero Saves the Day – Narratives that put the focus on an individual's story rather than the systemic problem. These narratives either make philanthropy the savior or rely on "bootstrap individualism" of a directly impacted person.

PROBE: **Which of these narratives would you say is the most prevalent?**

9. **Going one-by-one on displacement narratives–we want to ask the same question. Thinking of the sector, does this narrative ring true to you?**

   NOTE to interviewer: Put the narratives up on the shared Zoom screen.
   - Telling Transparent Stories (Stories that are specific about what organizations prioritize, what their funding does, and who does the day to day work)
   - Telling Clear Stories (Stories that clearly describe philanthropy's role within the community)
   - Telling System Stories (Stories that emphasize communities taking action to address a systemic issue)
   - Eliminating abstract language and choosing metaphors in stories that accurately reflect an organization's work

10. **What are some examples of particularly strong stories you have seen told by someone in the sector?**

    PROBE if yes: **Why do you think this was a strong story? What aspects or attributes made it particularly strong?**

    PROBE: **If you don't mind, would you send me any links to these stories after our talk?**

11. **Is there anything else you think we should know that we did not ask you about for this project?**

Sector Survey Materials

The following section includes the materials we used to complete our sector survey, including the recruitment emails, the informed consent, and the survey questions. The analysis of this method can be [found here.](#)

Participant Recruitment Email

Approved IRB language for sending out the sector survey

Subject Line: Brief 5-minute survey on stories and narratives in the foundation and non-profit sector

Dear xxxx,

We hope this email finds you well.

We are writing to you to encourage you to take a brief 5-minute survey on stories and narratives in the foundation and non-profit sector. The survey is being conducted by the Council on Foundations and the Center for Public Interest Communications at the University of Florida and hopes to capture what those in the sector think about using story and narratives in their communications.

By contributing your time, you will be helping us to get a fuller picture of how those in the sector are using story and narratives. This study will inform our practical recommendations for practitioners in the sector to better utilize story and narratives in their work.

By contributing your views, you will have the opportunity to sign up to receive additional information about this project and to receive our final report when it is completed.

Our research study has been approved by the IRB board for ethical research at the University of Florida and has a project number of 202300645.

Please DO NOT take the survey if you are under 18 years-old or do not live in the United States.

We hope to hear your valuable contribution! Here is the link to the survey: [Link]

This research is being conducted by the Center for Public Interest Communications at the University of Florida and by the Council on Foundations.

PS—If you know of others in the sector that you think should be asked to take the survey by us, please send their email and name to the Principal Investigator on the survey: [email].

Informed Consent

RESEARCH PARTICIPANT INFORMED CONSENT FORM

Please read this statement carefully before you decide to participate in this research study. **Your participation is voluntary,** and you can decline to participate, or withdraw consent at any time, with no consequences. Please **DO NOT take the survey** if you are **under 18 years old** or **DO NOT live in the United States.**

Study Title: Story and narratives in the foundation and non-profit sector

Person(s) conducting the research:

Principal Investigator, Jack J. Barry, PhD., Postdoctoral Research Associate, Center for Public Interest Communications, University of Florida, jack.barry@ufl.edu, 1-617-413-6061. Co-Principal Investigator, Matt Sheehan, Managing Director, Center for Public Interest Communications, University of Florida, msheehan@jou.ufl.edu, 1-352-354-3629.

Purpose of the research study:

To evaluate the stories and narratives being used in the foundation and non-profit sectors and to use the findings to inform communication and storytelling recommendations.

What you will be asked to do in the survey:

You will be asked to participate in a 5-minute survey. You can complete it anonymously if you prefer. You will be asked to provide your views on stories being used by your organization, and how decisions are made regarding the use of stories in your work. At the end of the survey, you will be asked if you would like to participate in a follow-up voluntary interview

Time required:

5 minutes

Risks and benefits:

There are no more than minimal risks to your participation. Only the researchers at University of Florida and the Council on Foundations associated with the project will have access to participants' contact information on servers (if you decide to provide it). The only identifying information which will be kept on file are participant names and emails, which will be discarded when the project is completed in 3 years.

There are no direct benefits for your participation, but communication recommendations for the sector in the form of a report will be given and the opportunity to participate in future surveys and interviews for this research will be available to those that provide their email.

Confidentiality:

You will be asked if you are willing to have your responses to be potentially quoted and identified. If we find a response that we would like to quote we will reach out to you via email and only quote you if you are ok with the quote. Otherwise the survey will be anonymous, with no connection to your name or workplace. There is a minimal risk that the security of any online data may be compromised, but our survey host Qualtrics uses strong encryption and other data security methods to protect your information.

Compensation:

There is no compensation for your participation.

Source(s) of funding for the research:

The Council on Foundations

May the researchers benefit from the research?

Members of the research team will use the insights generated from the survey to inform their recommendations for communications and storytelling for the sector. Insights will support the researchers in amplifying their work.

Withdrawal from the study:

You are free to withdraw your consent and to stop participating in this survey at any time without consequence. You can decline to answer any question you don't wish to answer. If you withdraw, your information will be discarded.

The researchers maintain the right to withdraw you from the study if it is determined that you are not paying close enough attention to answering the questions.

If you wish to discuss the information above or any discomforts you may experience, please ask questions now or contact one of the research team members listed at the top of this form.

If you have any questions regarding your rights as a research subject, please contact the Institutional Review Board (IRB02) office (University of Florida; PO Box 100173; Gainesville, FL 32610; (352) 392-0433 or irb2@ufl.edu.)

Agreement to participate:

Do you voluntarily consent to participate in this brief survey? If so, click on "yes, I will complete this brief survey" or "No, I do not want to complete this survey" to decline to participate.

Survey Questions

1. **Are you 18 years old or older?** [Remove all that choose "No"]
   ○ Yes
   ○ No

2. **Do you live and work in the United States for a U.S. based organization?** [Remove if they choose "No"]
   ○ Yes
   ○ No

3. **What type of organization do you work for?**
   ○ Private Foundation (These foundations make grants based on charitable endowments.)
   ○ Community Foundation (These are nonprofit, tax-exempt, publicly-supported grantmaking organizations. They are public charities that develop broad support from many unrelated donors with a wide range of charitable interests in a specific community.)
   ○ Family Foundation (A family foundation as one whose funds are derived from members of a single family)
   ○ Corporate Foundation (This refers to the investments and activities that a company voluntarily undertakes to manage and account for its impact on society responsibly.)
   ○ Communication Agency
   ○ Freelance or consultant
   ○ Other (please specify)_____

4. **What is the size of the communications team at your organization?** (Please choose all those that apply.)
   ● Our organization employs a communications agency, outside consultants or freelancers.
   ● 0 (there are no dedicated employees devoted to communications and we DO NOT have others contracted to help)
   ● 1-2 employees
   ● 3-5 employees
   ● 6-10 employees
   ● Over 10 employees

5. **Is your organization located in a rural area as defined by the USDA? Definition: "rural areas consist of open countryside with population densities less than 500 people per square mile and places with fewer than 2,500 people."** ([Link](#) to USDA's website)
   - Yes
   - No
   - Don't know

6. **Primarily, what type of area are the projects you fund or work on?**
   - Urban
   - Suburban
   - Rural

Purpose of Communication

7. **Which of the following are goals for your organization's communications efforts?**
   (Please choose all that apply.)
   - Build our organization's profile and brand in the field
   - Build our organization's reputation
   - Help people understand what we do
   - Help potential grantees understand our funding priorities
   - Differentiate ourselves from other organizations
   - Raise awareness about priority issues
   - Place stories in our prioritized media outlets
   - Enact change in the priority issues we address
   - Build support for solutions
   - Help decision-makers in our priority issues understand the lived experience of people affected
   - Put our strategic messaging out in the world
   - Lift up the work of our grantees or partners
   - Support fundraising efforts for our organization
   - Other:_____

8. **Which of the following metrics does your organization track?** (Please choose all that apply.)
   - Mentions in traditional media outlets
   - Engagement on social media platforms
   - TV appearances by senior leaders
   - Public speeches given by senior leaders
   - Website traffic or downloads
   - The number of stories created by your organization shared on your organization's platforms

- ○ Other:_____

Current Practice

[Statement shown above on screen Qs 6-7] Stories are the tools we use not only to convey information but also create empathy. They have a beginning, middle and end, and they describe a problem and the overcoming of it. Your grantees or partners might use stories, or you might use stories about how your staff or about how your organization functions.

9. **How frequently do you incorporate stories into your work?**
   - ○ We do not include stories
   - ○ Only in our annual report
   - ○ Occasionally - about once a month
   - ○ Weekly
   - ○ Almost everything we put out in our communications has a story as a component

10. **Which of the following describe the purpose of the stories you tell?** (Please choose all that apply.)
    - ○ To demonstrate the importance of our priority issues
    - ○ To help us fundraise
    - ○ To highlight the needs of our organization
    - ○ To demonstrate our organization's value
    - ○ To build our organization's reputation
    - ○ To show that anyone can make it if they work hard enough
    - ○ To showcase wins (of both foundation or grantee partners)
    - ○ To show that anyone can make it if given some help from our organization
    - ○ To show systems at work and how those systems were put in place
    - ○ To share the voices of people who are most affected by the problem
    - ○ To highlight collective action in response to a problem
    - ○ To display solutions to problems that have worked elsewhere
    - ○ To build transparency about the decisions we make
    - ○ We do not use stories
    - ○ Other (please specify)_____

Story Focus and Who Do They Center

11. **Who are your stories about?** (Please choose all that apply)
    - ○ Your executive leadership
    - ○ Funders
    - ○ Founder
    - ○ People working in your organization

- ○ Your team members
- ○ Program teams
- ○ Grantees/Partners
- ○ Community leaders
- ○ Directly affected people
- ○ Experts in the field
- ○ None; we are not using stories
- ○ Other_____

Process

12. **Who usually makes decisions about which details are included in the stories that are told by your organization?** (Please choose only those that apply.)
    - ○ Organizational leadership
    - ○ Communications team
    - ○ Grantees
    - ○ Story-owner
    - ○ Directly affected people
    - ○ Consultants or producers
    - ○ None; we are not telling stories

13. **Who usually makes decisions about whose voices are present in the stories told by your organization?** (Please choose only those that apply.)
    - ○ Organizational leadership
    - ○ Communications team
    - ○ External grantees
    - ○ Story-owner
    - ○ Directly affected people
    - ○ Consultants or producers
    - ○ None; we are not telling stories

14. **What do you need most to expand your storytelling capacity?**
    - ○ Tools for getting internal buy-in
    - ○ Tools for getting external buy-in from funders
    - ○ Tools for storytelling
    - ○ Storytelling strategy guides
    - ○ Staff or partners with stronger storytelling skills
    - ○ None; we are not telling stories
    - ○ Other (please specify)_____

Intention

15. Do you feel supported in including storytelling in your work?
- ○ Yes
- ○ Somewhat
- ○ No
  *If they choose no or somewhat, add PROBE 15B, **Why do you feel that way about support?_____**

16. Are you interested in including more stories in your work?

- ● Yes
- ● No
  *If they choose "Yes," add PROBE Q16B, **Please specify how you would like to include story in your work?**

Q17. **Open-Ended Question**

What stories have you had success with? If you'd like to share one or more in greater depth than this survey allows, please send an email with the story to [team].

Q18. Optional: **Can you let us know of anyone in the sector or who has worked in the sector who you think would be interested in taking this survey and being connected to the project?** If so, please email recommendations to [team].

Q19. **If you'd like to give us permission to quote and identify your responses in our reports, please enter your name, email and where you work below.**

We will not share your name or email with any third parties. If you do not want to, you can choose "I do not wish to provide any of these right now."
- ● Name _____
- ● Email _____
- ● Where you work _____
- ● I do not wish to provide any of these right now

Interview Questionnaire for Policy Staff

The following section includes the materials we used for interviews with congressional staffers, including the recruitment email and the interview questions. The analysis of this method can be [found here.](#)

Email Request for Policymakers

Subject Line: Research Request: Conversation about Foundations and Philanthropy

Body:

Hello, XXXX,

The Center for Public Interest Communications at the University of Florida and the Council on Foundations are working together on a research project to better understand narratives about the philanthropic sector. Our research team at the Center are writing at the suggestion of Nicole Bronzan and other leaders in the philanthropic sector who thought you might be able to offer us valuable insights on foundations, philanthropy, and where and how you engage with them in your work. Would you be interested in taking part in an interview or focus group about your perspectives on foundations and philanthropy?

In this conversation, we'll discuss the current state of foundations, what narratives you hear about philanthropy, and what you would like to know more about the philanthropic sector.

If you're willing to participate, the conversation will be 20-30 minutes long and conducted over Zoom. If you are OK with it, we will record it for our notetaking so that we can accurately capture conversation threads; we will not use direct quotes unless we get permission from you, and all recordings will be deleted within 3 years of the research end date.

We're eager to learn from you, and hope you can make time for this conversation. Our research has been approved by the Institutional Review Board at the University of Florida and the number is IRB Protocol#: 202300645. If you would like more information or have questions about this research, please contact the Principal Investigator, Ann Searight Christiano, Director for the Center for Public Interest Communications at the University of Florida. Her email is [email].

Unfortunately, to avoid conflicts of interest, we cannot pay you for your time.

[add specific notes different timing for scheduling purpose]

We hope to hear from you soon.

Sincerely,

XXXX

Interview or Focus Group Protocol for Policymakers/Staff

Hello, and thank you for taking the time for this conversation. My name is _____, and our conversation today will inform work by the University of Florida's Center for Public Interest Communications and the Council on Foundations. We are hoping to learn more about your perception of foundations and philanthropy as a whole. This focus group is for research purposes. We will not publicly release any information from the interview without your consent, and if we'd like to quote you publicly we will reach out to request permission.

Let's take a moment to review the informed consent form we sent you all ahead of this conversation. Did you get a chance to review it, and do you have any questions? [NOTE to the interviewer: if they have questions you can pull up the informed consent document on the screen if they would like to review or talk about it].

Would you like to proceed? [NOTE to the interviewer: If yes, continue with the interview, if not, terminate the interview and thank them for their time].

Our conversation will last about 50 minutes, and we'll have questions about your views on philanthropy, how you hear information related to the sector, and how it relates to your own work.

Our conversation will not be shared publicly, however, we are subject to the open records laws of the state of Florida.

May I record? [Note to the interviewer, If yes, hit record] Thank you.

You may turn your video off if you prefer.

[SECTION 1 - INTRODUCTIONS]

1. **Can you briefly introduce yourself and what you do?**

[SECTION 2 - CONNECTIONS TO PHILANTHROPY]

2. **What do you think of when you hear the word "foundations" or "institutional giving"?**

   PROBE: **How would you describe a typical foundation? Why did you pick those examples?**

3. **What are some of the ways you encounter foundations in your work?**
   PROBE: **Can you share a story about one of those experiences?**

4. **In your perspective, what role do foundations play in society?**

   PROBE: **How important are foundations in American society, and why?**

5. **What do you see as the differences between what the government funds and what foundations fund?**

   PROBE: **Do you think this current division is proper? Or do you think this division should shift?**

6. **What do you see as the differences between what private companies support and what foundations fund?**

7. **What do you hear most often about foundations?**

   PROBE: **What types of stories have you heard about foundations?**

8. **What types of stories or facts do you currently share about foundations or the philanthropic sector? Or do you NOT share anything about foundations or the sector?**

   PROBE **if they DO NOT share: If you DO NOT share stories or facts about foundations and the philanthropic sector why is that the case?**

   PROBE: **If you do share stories or facts about foundations, what do you find to be the largest barriers you face when talking about foundations with your constituents or other policymakers?**

[SECTION 3 - NETWORKING]

9. **Not counting foundations themselves, can you put in the chat 5 organizations or sources that you trust the most for their information about foundations and the philanthropic sector?**

   PROBE: **Why do you consider these organizations trustworthy on the topic of philanthropy?**

10. **Again, not counting foundations themselves, can you put in the chat 5 organizations or sources where you get most of your information about foundations?**

11. **Are there any organizations or sources covering the philanthropy sector that you specifically DO NOT trust or are wary of the information they provide?**

    PROBE if they mention some they DO NOT trust: **Why do you NOT trust these organizations or are wary of the information they provide?**

[SECTION 4 - WRAP UP]

12. **What kinds of information do you wish you knew more about regarding how foundations work?**

13. **Does the kind of information you need differ for talking with other policymakers about future legislation or to constituents about philanthropy?**

    PROBE: **First I'm going to ask you about other policymakers. When it comes to talking with other policymakers about legislation, what kind of information do you need?**

    PROBE: **When it comes to talking with constituents about philanthropy, what kind of information do you need?**

14. **Is there anything else you think we should know for this project that we did not ask you about?**

National Survey

The following section includes the survey questionnaire used for the national survey, including the full stories we tested. The analysis of this method can be [found here.](#)

Survey Questions

PARTICIPANT CONSENT

1. **A. Please select your age?**
   a. Under 18 [TERMINATE]
   b. 18-24
   c. 25-34
   d. 35-44
   e. 45-54
   f. 55-64
   g. 65+

1. **B. What state do you live in?**
   a. Live outside of the U.S. [TERMINATE]

1. **C. Please record your gender.**
   a. Male
   b. Female
   c. Other
   d. Choose not to answer

INTRO/WELCOME PAGE

The following survey is about foundations and philanthropy. Before you begin, here is a definition of philanthropy:

> Foundations provide grants to help solve social, environmental and other kinds of challenges that affect people's health and well-being

SUBJECTIVE AND OBJECTIVE KNOWLEDGE OF THE NON-PROFIT SECTOR (3 ITEMS)

2. **A. Generally speaking, how would you rate your level of knowledge about charitable giving and philanthropy?**
   a. Novice

b. Knowledgeable
   c. Expert

2. **B. Do you think that the percentage of Americans who give to charitable organizations increased, decreased, or stayed the same over the past 20 years?**
   a. Increased
   b. Decreased
   c. Stayed the same

2. **C. In the past 6 months have you received any services provided by a non-profit organization (e.g., getting food from a food pantry, attending a performing arts event, etc.)?**
   a. Yes
   b. No

3. **Do you work in the non-profit or foundation sectors?**
   a. Yes
   b. No

[ASK IF Q3=YES]
3. **A. What type of organization do you work for?**
   a. Private Foundation (These foundations make grants based on charitable endowments.)
   b. Community Foundation (These are nonprofit, tax-exempt, publicly-supported grantmaking organizations. They are public charities that develop broad support from many unrelated donors with a wide range of charitable interests in a specific community.)
   c. Family Foundation (A family foundation is a private foundation whose funds are derived from members of a single family)
      Corporate Foundation (This refers to the investments and activities that a company voluntarily undertakes to manage and account for its impact on society responsibly.)
   d. Communication Agency
   e. Freelance or consultant
   f. Other

4. **Cultural worldview (16 ITEMS)**

   On a scale of 1 to 9, please rate how much the following statements apply to you. Where 1 is "Never or Definitely No" and 9 is "Always or Definitely Yes"
   [SCALE 1 = Never or Definitely, 2, 3, 4, 5, 6, 7, 8, 9 = Always or Definitely Yes]

1. I'd rather depend on myself than others.
2. I rely on myself most of the time; I rarely rely on others.
3. I often do "my own thing."
4. My personal identity, independent of others, is very important to me.

5. It is important that I do my job better than others.
6. Winning is everything.
7. Competition is the law of nature.
8. When another person does better than I do, I get tense and aroused.

9. If a coworker gets a prize, I would feel proud.
10. The well-being of my coworkers is important to me.
11. To me, pleasure is spending time with others.
12. I feel good when I cooperate with others.

13. Parents and children must stay together as much as possible.
14. It is my duty to take care of my family, even when I have to sacrifice what I want.
15. Family members should stick together, no matter what sacrifices are required.
16. It is important to me that I respect the decisions made by my groups.

MORAL FOUNDATIONS QUESTIONNAIRE (12 ITEMS)

5. **Do you agree or disagree with the following statements?**
   [SCALE Strongly disagree, Moderately disagree, Slightly disagree, Slightly agree, Moderately agree, Strongly agree]

Care
- Compassion for those who are suffering is the most crucial virtue.
- One of the worst things a person could do is hurt a defenseless animal.

Fairness
- When the government makes laws, the number one principle should be ensuring that everyone is treated fairly.
- Justice is the most important requirement for a society.

Ingroup
- People should be loyal to their family members, even when they have done something wrong.
- I am proud of my country's history.

Authority
- Respect for authority is something all children need to learn.
- Men and women each have different roles to play in society.

Purity
- People should not do things that are disgusting, even if no one is harmed.
- I would call some acts wrong on the grounds that they are unnatural.

Liberty
- Society works best when it lets individuals take responsibility for their own lives without telling them what to do.
- The government should stop telling people how to live their lives.

SYSTEMS THINKING (3 ITEMS)

6. **Do you agree or disagree with the following statements?**
   [SCALE: STRONGLY DISAGREE, MODERATELY DISAGREE, SLIGHTLY DISAGREE, SLIGHTLY AGREE, MODERATELY AGREE, STRONGLY AGREE]

   - I like to know how events or information fit into the big picture.
   - Social problems, environmental problems and economic problems are all separate issues.
   - It is possible for a community to organize into a new form that was not planned or designed by an authority or government.

STORY CONDITION (RANDOM ASSIGNMENT) [1]

- CONTROL CONDITION: JUST INFO ON 911 AND EMS
- EXPERIMENTAL CONDITIONS: STORIES MANIPULATING VARIABLES OF INTEREST. EACH GROUP OF THE 10 STORIES AND 1 CONTROL SEES ONE STORY. DIVIDE STORIES AS EVENLY AS POSSIBLE IN NUMBERS BETWEEN THE 11 GROUPS AND MAKE GROUPS AS EVEN AS POSSIBLE IN TERMS OF REPRESENTATION VARIABLES MENTIONED IN THE QUOTE WE RECEIVED, EDUCATION, AGE, ETC.

Story 1 (How Decisions Are Made): How decisions are made within foundations

If you needed emergency medical care, what would you dial?

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Disorganized emergency medical services (EMS) was a large national problem — no one could provide care at the scene, ambulances were converted station wagons or hearses, and doctors

had no idea what condition their new patient was in when they came through the hospital doors. Lives were lost because of delayed care

EMS was among the first concerns of the American Health Care Foundation after its founding in 1972.

"The Foundation's president, Robert Miller, believed that there was something wrong in America if people who could benefit from quality care died because they couldn't get to the hospital in time," said Rick Wilson, an original senior staff member at the Foundation.

In January 1973, the Foundation enlisted the participation of the National Academy of Sciences to set up a grant program for EMS.

"Before we began the program, we gathered national experts to talk about emergency medical service," said Mya Turner – an EMS expert and a Foundation advisory committee member. "We asked them how a major philanthropy could make a difference. We sat around Rick Wilson's dining room table and started creating the first national program in Foundation history."

In April 1973, the Foundation announced the $15 million EMS grants program. The Foundation actively recruited grantees and intentionally sought out coalitions of EMS experts with ideas on how to break the logjam keeping their communities from having efficient emergency services

Just over a year later in May 1974, the Foundation announced the 44 grant recipients from 32 states and Puerto Rico. The American Health Care Foundation's grant decision making focused on getting leaders the resources they needed to make effective EMS possible. This initial funding let communities prove their effectiveness to the government, showing that these EMS programs could be replicated for every American.

One of those original grantees was the Louisiana Hospital Association, which used its $319,000 grant to connect EMS, fire, police and seven other agencies to a shared hotline. The program's success brought in support from the Department of Health and Human Services and AT&T, which further connected harder to reach communities in the bayou and offshore to emergency care.

"It was a model of the public and private sectors working hand-in-hand," Turner recalls.

In 1976, just 17 percent of the population of the United States had 911 service. In 2000, that number had jumped to 85 percent of the country.

Taking advantage of the changing social climate, the Foundation seized on the issue of emergency services and, through its grants, guidelines, and technical assistance, helped give direction to this new field.

"We continue to see the fruits of the program every day, and people still remember where it came from," said Evelyn Brooks, president of the Louisiana Hospital Association. "The program was sorely needed at the time, and it pushed everyone to upgrade the level of care."

Story 2 (People Closest to the Situation): How people closest to the situation interact with foundation staff

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EMS was among the first concerns of the American Health Care Foundation after its founding in 1972.

In January 1973, The Foundation enlisted the participation of the National Academy of Sciences to set up a grant program for EMS. Based on these early conversations, the original program team decided to prioritize working with the people closest to the problem, having them decide what was needed to make change happen.

"From the outset, we had worked with our advisory committee to identify who the appropriate lead agencies might be for this program," said Mya Turner – an EMS expert and a Foundation advisory committee member. "In some cases the lead agencies would be the police department, because they had the dispatch capability. In other cases, it might be the county administrative officer, a large hospital, or the health department."

In April 1973, the Foundation announced the $15 million EMS grants program. Just over a year later, it announced 44 grant recipients from 32 states and Puerto Rico. "Fire departments were applying for grants from the American Health Care Foundation. That was unheard of," said Rick Wilson, an original senior staff member at the Foundation.

The Foundation team worked directly with the site leaders in the community to help them prove the viability of regional EMS programs to policymakers. One of those original grantees was the

Louisiana Hospital Association, which used its $319,000 grant to connect EMS, fire, police and seven other agencies to a shared hotline.

"We used that seed money to begin developing the most sophisticated emergency communications system in the world," Louisiana Ambulances' Daniel Anderson said. "Half the money went to fund radios at the hospitals. With the rest of the money, we put radios in the ambulances and developed a dispatch system."

The American Health Care Foundation's strategy focused on working directly with the people closest to the problem, getting them the resources they needed to make effective EMS possible. This initial funding let communities prove their effectiveness to the government, showing that these EMS programs could be replicated for every American.

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Story 3 (Where Money Goes): Where the dollars actually go

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In January 1973, the Foundation enlisted the participation of the National Academy of Sciences to set up a $15 million grant program for EMS. The program team moved quickly and, in May 1974, announced 44 grant recipients from 32 states and Puerto Rico.

The program's funding was separated into two major areas of work: direct funds to grantees to do the work and sharing information about how to improve EMS.

The Foundation acted as a funnel for EMS information, bringing knowledge of hardware and procedures to grant recipients. It sponsored workshops, offered low-cost technical assistance on communications issues, and provided guidance on dealing with the Federal Communications Commission. This allowed the grantees to build on their existing expertise and improve the programs in their community.

For direct funds, the Foundation team worked closely with the grantees to learn what they needed, and then provide money directly to those needs. One of those original grantees was the Louisiana Hospital Association, which used its $319,000 grant to connect EMS, fire, police and seven other agencies to a shared hotline.

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The American Health Care Foundation's strategy focused on working directly with the people closest to the problem, getting them the funding they needed to make effective EMS possible. This initial funding let communities prove their effectiveness to the government, showing that communities were essential partners, but needed direct funding to make it happen.

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Taking advantage of the changing social climate, the Foundation seized on the issue of emergency services and, through its grants, guidelines, and technical assistance, helped give direction to this new field.

"We continue to see the fruits of the program every day, and people still remember where it came from," said Evelyn Brooks, president of the Louisiana Hospital Association. "The program was sorely needed at the time, and it pushed everyone to upgrade the level of care."

Story 4 (Nimble Foundation): Foundations are nimble

If you needed emergency medical care, what would you dial?

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Disorganized emergency medical services (EMS) was a large national problem — no one could provide care at the scene, ambulances were converted station wagons or hearses, and doctors had no idea what condition their new patient was in when they came through the hospital doors. Lives were lost because of delayed care.

At the time, there were communities across the country from Los Angeles and Seattle to Connecticut and Miami coming up with innovative ideas to provide better emergency care, including teaching firefighters CPR or putting radio technology in hospitals and ambulances to make communication easier. However, they needed some additional support to help them adjust quickly and gain government and public support of the new ideas.

When the American Health Care Foundation started in 1972, EMS was one of its top priorities. It moved nimbly to start a national program focused on getting EMS experts to resources they needed.

In January 1973, the Foundation enlisted the participation of the National Academy of Sciences to set up a $15 million grant program for EMS. In May 1974, it announced 44 grant recipients from 32 states and Puerto Rico.

One fortuitous aspect of the foundation's program in this transformation was timing. In addition to the success of a handful of programs across the country, pop culture began to see a shift in support for EMS. The TV program *Emergency!*, which went on the air in January of 1972, made heroes of a team of Los Angeles County Fire Department paramedics. It brought a glamorized version of EMS to prime time.

"*Emergency!* was the prairie fire," recalls Ava Scott, a member of the foundation Advisory Committee. "That show lit the spark of public awareness. Before that, it was doctors talking to doctors."

Emergency's ratings put a positive spin on EMS, and facilitated the social change needed to get EMS adopted across the country. The program, which came along at the height of that popularity, made it possible for communities to start acting on this growing public familiarity with EMS.

At about the same time that the Foundation was reviewing applications, Congress was beginning to grapple with the EMS problem as well. After a couple of false starts and a presidential veto by Richard Nixon, Congress passed the Emergency Medical Services Systems Act of 1973, opening federal funding for EMS. The Foundation saw the moving pieces come together and moved fast to support this life-saving work.

There were clearly other forces at work that were beginning—but just beginning—to push the country toward a more sophisticated approach to EMS. The Foundation's EMS program is an example of how philanthropy can move nimbly to turn idea sparks like improved EMS into widespread successes. Just four years after *Emergency!* went on air, the U.S. went from a dozen paramedic units to enough to support 50% of Americans.

Taking advantage of the changing social climate, the Foundation seized on the issue of emergency services and, through its grants, guidelines, and technical assistance, helped give direction to this new field.

Story 5 (Stay With Issues): Foundations can stay with issues over time

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This was a huge issue that needed a long-lasting commitment to get to a solution – which is why EMS was among the first concerns of the American Health Care Foundation after its founding in 1972.

"The Foundation's president, Robert Miller, believed that there was something wrong in America if people who could benefit from quality care died because they couldn't get to the hospital in time," said Rick Wilson, an original senior staff member at the Foundation.

In January 1973, the Foundation enlisted the participation of the National Academy of Sciences to set up a $15 million grant program for EMS. The program team moved quickly and, in May 1974, announced 44 grant recipients from 32 states and Puerto Rico.

One of those grant recipients was the Gainesville-Haymarket Rescue Squad (GHRS) in Virginia who used the funding to train EMTs. With the grant money, GHRS became the first rescue squad in Virginia to require all of its members to be EMT's.

"One of the pieces of equipment we used was a 'Biophone', which sent electrocardiograms to the hospital over the radio. The doctors received the information and told us what drug intervention was needed. We became essentially an extension of the cardiac care unit at the hospital," said David Jones, the president of GHRS.

This shift in care was one of the essential steps needed to improve emergency care in this community spanning 740 square miles. GHRS remains an all-volunteer force that maintains professional standards. This initial funding allowed GHRS to expand the advanced training of their volunteers, ensuring the community gets the best care.

"The American Health Care Foundation grant money stayed with us for a long time—we still operate in much the same way today," Jones said.

The American Health Care Foundation's EMS program is an example of how philanthropy can stay with a problem long-term to find innovative solutions. This was one of the Foundation's starting issues, and it is one that it is still supporting today. Even though it no longer funds EMS directly, the Foundation's support of public health and direct services shows the lasting influence of that very first program.

The story from Virginia was just one example out of 44 from across the country of the lasting growth of EMS. Taking advantage of the changing social climate, the Foundation seized on the issue of emergency services and, through its grants, guidelines, and technical assistance, helped give direction to this new field.

Story 6 (People Come Together): Foundations are one of many partners who must come together to effect profound systems change

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Disorganized emergency medical services (EMS) was a large national problem — no one could provide care at the scene, ambulances were converted station wagons or hearses, and doctors had no idea what condition their new patient was in when they came through the hospital doors. Lives were lost because of delayed care.

An issue this big requires collaboration from different sectors committed to a shared goal. The effort to improve U.S. EMS brought together community experts from a variety of cities, government leaders, corporations, and the coordinating expertise of the American Health Care Foundation (AHCF). With a boost of public support from the popularity of the show *Emergency!,* this coalition was able to expand access to emergency services rapidly over the course of three decades.

At the end of the '60's, doctors and researchers across the country were beginning to look for new ways to improve EMS in their cities. For example, Ava Scott – a doctor from Chicago – looked to mobile army surgical hospitals, or MASH, for examples of how to run a regionalized trauma program in Illinois, while Christopher Davis – a doctor from Miami – began instructing firefighters in CPR in 1966. Other pioneering programs in Connecticut, Seattle and Los Angeles were isolated examples of where EMS was working.

The federal government was also taking action in this area at the same time. In 1967, the President's Commission on Law Enforcement and Administration of Justice had recommended the institution of a single nationwide telephone number – 911 – for reporting emergencies.

This is where the American Health Care Foundation came in. EMS was among the very first concerns of the Foundation, which became a major national philanthropy in 1972. In 1973, The Foundation's president Robert Miller enlisted the participation of the National Academy of Sciences and national experts – including Scott and Davis – to create a national EMS grant program.

The key to the Foundation's grant decision making was emphasizing collaboration. "We essentially required them to form alliances to be eligible for a grant," said Rick Wilson, an original senior staff member at the foundation. "We made them aware that if they could put the structure together there was a high probability that we would fund them."

The collaboration paid off. In 1976, just 17 percent of the population of the United States had 911 service; by 1979, more than a quarter of the population was served by 911. In 2000, that number had jumped to 85 percent of the country.

The American Health Care Foundation was an important partner to the leaders seeking to develop an EMS system that got people the care they needed urgently and effectively. The coalitions identified the community needs, the Foundation provided the initial funding, and then the federal government supported the expansion.

Taking advantage of the changing social climate and intentional collaboration, the Foundation seized on the issue of emergency services and, through its grants, guidelines, and technical assistance, helped give direction to this new field.

As Ava Scott noted, "It was a model of the public and private sectors working hand-in-hand."

Story 7 (Listens to People): Foundation staff listen to the people who are closest to the problem and work with them to effect solutions

If you needed emergency medical care, what would you dial?

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Fortunately, there were experts across the country working to make EMS more efficient so that fewer people died preventable trauma-related deaths. At the end of the '60's, leaders from Los Angeles to Connecticut were putting the pieces together to create the groundwork of our modern emergency system.

Dr. Ava Scott was one of the leaders seeking new solutions.

"When I started as a junior surgical resident at Cook County Hospital in Chicago, there was no standardized way of evaluating incoming trauma patients," recalls Ava Scott, a member of the Foundation's Advisory Committee. "The care you got depended on who got to you first, which meant sometimes the problem and treatment didn't match."

Recognizing the rapid medical response of Army doctors in World War II, Korea and Vietnam, Scott and her colleagues restructured the treatment of accident victims following the model of

the mobile army surgical hospital, or M*A*S*H. When that approach succeeded, Scott was asked to design and run a regionalized trauma program for the state of Illinois.

The American Health Care Foundation recognized the importance of programs like this as potential public health practices. By listening to these leaders, the Foundation looked to amplify their evidence-based solutions.

With the federal government investing in a standard emergency line (911) and the success of the popular show *Emergency!*, the Foundation saw an opportunity to partner with EMS experts to improve emergency care.

"The American Health Care Foundation was unique at the time," Scott recalls. "The charge given to us by the Foundation was, if we had $15 million to spend on EMS, how would we spend it, and what good should we do? They told us 'We'd like you to look for the key log in the EMS logjam... Use the $15 million to break that key log and get things moving."

The Foundation chose 44 grant recipients from 32 states and Puerto Rico for the program. Grants were announced in May 1974 and averaged $350,000 to $400,000.

The American Health Care Foundation sought to be a partner to EMS leaders across the country, prioritizing listening to their expertise and giving them what they needed to get the ball rolling. And the federal government and phone companies took notice, building on the success with their own grants and support to expand these programs when the foundation grants ended. In 1976, just 17 percent of the population of the United States had 911 service. In 2000, that number had jumped to 85 percent of the country.

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Story 8 (Change the World): Through their generosity and brilliance, foundations change the world

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provide care at the scene, ambulances were converted station wagons or hearses, and doctors had no idea what condition their new patient was in when they came through the hospital doors. Lives were lost because of delayed care.

The American Health Care Foundation saw an opportunity to change people's lives by creating an early version of the Emergency Medical System in the 1970s. Because of the foundation's foresight and commitment to improving health, it was quickly able to provide funding that created the infrastructure that became today's 911 system.

Because of the expertise and wisdom of the foundation's leadership, it was easily able to determine what kinds of funding could help an emergency medical system get up and running quickly. Communities around the country were quick to accept the funding and recognized that without the foundation's leadership, creating such a system could have taken decades longer.

In 1976, just 17 percent of the population of the United States had 911 service; by 1979, more than a quarter of the population was served by 911. In 2000, that number had jumped to 85 percent of the country.

"We continue to see the fruits of the program every day, and people still remember where it came from," said the foundation's president at the time, Robert Miller. "The program was sorely needed at the time, and it pushed everyone to upgrade the level of care."

Story 9 (Rich Individuals): Rich individuals who invest in social causes can change the world

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Philanthropist Michael Stone saw firsthand how delayed EMS was impacting our country. When he founded the American Health Care Foundation in 1972, he committed $15 million to programs across the country that would make EMS more efficient.

"Michael Stone believed that there was something wrong in America if people who could benefit from quality care died because they couldn't get to the hospital in time," said Rick Wilson, an original senior staff member at the Foundation.

Stone's foundation brought together leaders at the National Academy of Sciences and major hospitals from across the U.S. to identify the programs that were having the largest impact. Based on their advice, Stone's initial funding helped communities secure essential technology – like radios and improved ambulances – as well as training for first responders to provide immediate care and relay vital information to hospitals before the patient arrived.

By investing in emergency medical services, Michael Stone helped save hundreds of thousands of lives. In 1976, just 17 percent of the population of the United States had 911 service; by 1979, more than a quarter of the population was served by 911. In 2000, that number had jumped to 85 percent of the country.

"We continue to see the fruits of the program every day, and people still remember where it came from," said the Foundation's president at the time, Robert Miller. "The program was sorely needed at the time, and it pushed everyone to upgrade the level of care. This is the lasting legacy of Michael Stone's lifesaving work."

Story 10 (People Who Benefit): People who benefit from life-changing grants or funding have stories to tell about how a donor changed their lives

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The American Health Care Foundation rose to meet this challenge and strive for a world where no one dies from delayed emergency care. The Foundation began its EMS program in May 1974 with grants totaling $15 million, emphasizing communities suffering from inadequate emergency care.

This made a huge difference for the EMS programs seeking to make their communities safer. The Louisiana Hospital Association, for example, used its $319,000 grant to connect EMS, fire, police and seven other agencies to a shared hotline.

"When we began in 1971, we couldn't talk to one another," said Daniel Anderson, president of Louisiana Ambulances. "All of the local emergency response agencies operated on different frequencies, and cement trucks and beer trucks had better radios than ambulances."

Throughout Louisiana – and across the country – first responders and hospitals had no way to communicate fast enough to ensure adequate care. The Foundation saw this as the clearest way to save lives.

"We used that seed money to begin developing the most sophisticated emergency communications system in the world," Louisiana Ambulances' Daniel Anderson said. "Half the money went to fund radios at the hospitals. With the rest of the money, we put radios in the ambulances and developed a dispatch system."

"The money we received from the American Health Care Foundation transformed our community from Shreveport to the bayou," said Evelyn Brooks, president of the Louisiana Hospital Association. "With the Foundation's support, more Louisianans live longer, healthier lives.

"We continue to see the fruits of the program every day, and people still remember where it came from," said the Foundation's president at the time, Robert Miller. "The program was sorely needed at the time, and it pushed everyone to upgrade the level of care."

Control: Information on 911

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In 1967, the President's Commission on Law Enforcement and Administration of Justice had recommended the institution of a single nationwide telephone number for reporting

emergencies. In November of that year, the Federal Communications Commission began working with AT&T to put the recommendation into effect. The number sequence 911 was chosen because it was short and easily remembered, and because it carried no leftover baggage — 911 had never been used as an area code, nor did the public associate it with any other important function.

At the same time, communities across the country began adding improved technology and EMS practices into place. In 1972, President Richard Nixon addressed the need for effective EMS in the State of the Union address, and a new TV show *Emergency!* – which documented the work of 12 paramedic units across the country – was growing in popularity.

911 service expanded rapidly in the '70s. In 1976, just 17 percent of the population of the United States had 911 service; by 1979, more than a quarter of the population was served by 911. In 2000, that number had jumped to 85 percent of the country.

DEPENDENT VARIABLES

7. **Based on the story you just read, please answer the following questions about the foundations/organizations involved:**
   1= STRONGLY DISAGREE, 2= DISAGREE, 3= SLIGHTLY DISAGREE, 4 = NEUTRAL, 5= SLIGHTLY AGREE, 6= AGREE, 7 = STRONGLY AGREE.

   1. The foundations/organizations treat people like me fairly and justly.
   2. Whenever these foundations/organizations make an important decision, I know it will be concerned about people like me.
   3. These foundations/organizations can be relied on to keep their promises.
   4. I believe that these foundations/organizations take the opinions of people like me into account when making decisions.
   5. I feel very confident about these foundations/organizations' skills.
   6. These foundations/organizations have the ability to accomplish what they say they will do.
   7. These foundations/organizations have the ability to attract, develop, and keep talented people
   8. These foundations/organizations use visible and invisible assets effectively
   9. These foundations/organizations are financially sound enough to help others
   10. These foundations are innovative in its culture

8. **Below are some statements about philanthropy in general, please indicate how much you agree with each statement.**
   ANSWERS: NOT AT ALL, ONLY A LITTLE, A MODERATE AMOUNT, A LARGE AMOUNT.

1. I have concerns about philanthropy's wealth in relation to the people they serve.
2. I have concerns about where the wealth that goes into foundations comes from.
3. I am skeptical about the intentions of philanthropy.
4. I feel unease with private funds being used to solve public problems.
5. How much does society as a whole benefit when foundations give money to solve problems?
6. How transparent (i.e., operating in such a way that it is easy for others to see what actions are performed) are foundations?
7. To what extent do you think the U.S. government should regulate the philanthropic sector?
8. To what extent do you think the philanthropic sector needs more governmental oversight?
9. I feel like I understand what foundations do and how they operate.

9. **On the whole, how positive or negative do you feel about foundations?**
   a. Very negative
   b. Negative
   c. Slightly negative
   d. Neutral
   e. Slightly positive
   f. Positive
   g. Very positive

10. **Which of the following activities do you consider to be forms of philanthropy? (please select all that apply):**
    a. Giving time (i.e., giving your energy and physical presence through volunteering)
    b. Giving treasure (i.e., making financial contributions)
    c. Giving talent (i.e., lending your skills, talents, or expertise)
    d. Giving ties (i.e., making connections across your personal and/or professional networks)
    e. Giving testimony (i.e., advocacy; honoring lived experiences and bearing witness to stories)

11. **How much does society as a whole benefit when Americans donate money to philanthropy?**
    a. A large amount
    b. A moderate amount
    c. Only a little
    d. Not at all

12. **How transparent (i.e., operating in such a way that it is easy for others to see what actions are performed) are the following charitable entities with their giving practices?**

ANSWERS: COMPLETELY TRANSPARENT, VERY TRANSPARENT, SOMEWHAT TRANSPARENT, NOT VERY TRANSPARENT, NOT AT ALL TRANSPARENT, DON'T KNOW/NOT FAMILIAR WITH

1. Religious charitable organizations
2. Community foundations
3. Crowdfunding campaigns (e.g., GoFundMe)
4. Secular charitable organizations (excluding religious congregations)
5. Impact investing
6. Donor-advised funds
7. Private foundations
8. Giving by corporations
9. High-net-worth individual donors

13. **Thinking about the nonprofit and philanthropic sector overall, do you believe things are headed in the right direction, or are they off on the wrong track?**
    a. Right direction
    b. Wrong track
    c. Don't know

14. **How much do you think the following information will improve your trust in charitable foundations?**
    1= not at all, 2 = slightly, 3 = moderately, 4 = A lot

    1. Knowing how they make decisions
    2. Knowing how people interact with the foundations.
    3. Knowing where the money is spent
    4. Knowing how flexible they are
    5. Knowing that they can keep up with current issues
    6. Knowing that it's a collaborative effort from many partner organizations
    7. Knowing that foundation staff listens to people who are closest to the problem to come up with solutions
    8. Knowing that foundations change the world through their generosity and brilliance
    9. Knowing that it's rich individuals that make the changes
    10. Hearing from people who benefit from the foundations' grants and work

TRUST IN INSTITUTIONS

15. **How much do you trust the following entities to generally do what is right?**
    ANSWERS: DON'T KNOW, NOT AT ALL, NOT VERY MUCH, ONLY SOMEWHAT, VERY MUCH, COMPLETELY

1. Nonprofit organizations (include brief definition from above)
2. Foundations (include brief definition from above)
3. Religious institutions
4. Individuals
5. Colleges/universities
6. Small- to mid-sized businesses
7. State or local government
8. The Supreme Court/Federal judiciary
9. The President/Federal executive branch
10. Congress/Federal legislative branch
11. Large corporations
12. National media

16. **How much do you trust the following charitable entities to generally do what is right?**
ANSWERS: DON'T KNOW, NOT AT ALL, NOT VERY MUCH, ONLY SOMEWHAT, VERY MUCH, COMPLETELY

1. Religious charitable organizations
2. Community foundations
3. Secular charitable organizations (excluding religious congregations)
4. Private foundations
5. Crowdfunding campaigns (e.g., GoFundMe)
6. Donor-advised funds
7. High-net-worth individual donors
8. Impact investing
9. Giving by corporations

METAPHORS

[Reintroduce the foundation definition]
Foundations provide grants to help solve social, environmental and other kinds of challenges that affect people's health and well-being

17. **Based on your own knowledge and experience of foundations, please rate the following list of statements based on how well they describe how foundations work:**
1= not at all, 2 = not very much, 3 = only somewhat, 4 = very much, 5 = completely

1. Foundations equip nonprofits with the tools they need to fight the good fight.
2. Foundations help nonprofits tackle complex social problems with impactful solutions.
3. Foundations put experts in the driver's seat so that nonprofits can drive change.

4. Foundations help get money flowing to the people closest to the issues so they can produce lasting change.
5. Foundations help nonprofits build up big ideas to develop stronger communities.
6. Foundations make sure that underrepresented voices have a seat at the table.
7. Foundations are like a guide for nonprofits to help them fund their projects.

18. Based on your own knowledge and experience, please choose the statement that best describes how foundations work:

1. Foundations direct money to the people on the frontlines of change.
2. Foundations provide nonprofits the money they need to get the ball rolling.
3. Nonprofits have the roadmap, foundations make sure the car is full of gas.
4. Foundations seed the field of ideas with funding for the people closest to the issues.
5. Foundations provide nonprofits with the tools they need to make their ideas more concrete.
6. Foundations open doors for people with lived experience to make sure all the best ideas are brought in.
7. Nonprofits are helped by foundations who offer them a guide for funding their projects.
8. Foundations look for silver bullets that can offer solutions to complex social problems.
9. Foundations provide nonprofits with the tools they need to overcome the hurdles keeping them from going the distance.
10. Foundations can help test drive new ideas so that nonprofits can model what the future can look like.
11. Foundations cultivate fresh ideas for how to make our communities stronger.
12. Foundations provide the scaffolding for nonprofits to build out their big ideas.
13. In communities of change, foundations are the neighbors you can go to for a cup of sugar.
14. Nonprofits are helped by foundations who offer them mentorship for funding their projects.

DEMOGRAPHICS

D1. What is the highest level of education that you have completed?
1. Some high school
2. High school graduate or GED
3. Some college
4. Associate's degree
5. College degree
6. Graduate degree

D2. What is your Race/Ethnicity?

1. African American/Black
2. Caucasian/White
3. Hispanic/Latino/Latina
4. American Indian/Alaska Native/First Nations
5. Asian
6. Native Hawaiian/Pacific Islander
7. Other

D3. Describe your employment status. If you have more than one job, choose the one you spend the most hours in.

1. Employed in a PRIVATE FOR-PROFIT company or business.
2. Employed in a PRIVATE NOT-FOR-PROFIT organization.
3. A local GOVERNMENT employee (city, county, etc.).
4. A state GOVERNMENT employee.
5. A federal GOVERNMENT employee.
6. MILITARY
7. SELF-EMPLOYED.
8. Working WITHOUT PAY in a family business or farm.
9. UNEMPLOYED.

D4. What is your household's total pre-tax income for 2022?

1. Less than $25K
2. $25K-$49.9K
3. $50K – $74.9K
4. $75K - $99.9K
5. $100KI - $149.9K
6. $150K+

D5. Which party would you say you are registered to vote in?

1. Republican
2. Democratic
3. Libertarian
4. Conservative
5. Freedom
6. Reform
7. Independent
8. Other
9. Choose not to answer

THANK YOU AND DEBRIEFING

Thank you for taking the time to complete this survey.