

Attachments

Attachment number (1)

Women's movement and civil society in Jordan

Dear Madam,

This questionnaire is part of an academic empirical study on women's movement and civil society in Jordan. The study is however, a partial fulfillment of PhD degree in sociology at the Free University of Berlin/ Germany. We would like kindly to ask you to response our questionnaire as accurate, and as subjective as possible, in order to make the results of this study useful at both: scientific and practice levels. Finally, we would like you to know that all the information you will give here would be treated secretly, and for the research purposes only.

Thank you very much for your understanding and your help.

The researcher.

1. *Questionnaire number:*

2. *Contacted person:*

Name :
Position:

Study Questionnaire (1)

Part one: Organization's Resources:

1.1 General information (organizations as a resource):-

1. Name of the organisation:.....

2. Date of establishment:.....

3. Name of the person/ persons who started the organisation:
.....
.....
.....

4. Type of the organization:

- 1. Non-governmental organization.
- 2. Charity.
- 3. Society.
- 4. Studies and/ or research centre.
- 5. Else (please specify):.....

5. Names of establishment association members:

1.

2.
3.
4.

6. What are the organization's main goals?

1.
2.
3.
4.

1.2 organization's size and structure:

7. How does this organizations make decisions? (Please give a full description of the decision-making process).

.....

8. Does this organization have?

Item	Yes() /No(x)	How many?	What are their functions?
a) A staff, please specify: 1. 2. 3.	<input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.
b) A trust board	<input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.
c) Advisors	<input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.
d) Volunteers	<input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.
e) Members	<input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.
f) Else: please specify:	<input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.

10. What role do the people who benefit from you organization's activities have?

.....

1.3 Financial resources:

11. What are your organizations financial resources?

Resources		Amount	Form of the resource. (Gifted, annual fees of the members, governmental, ...etc.)
Internal	external		

(* A copy of your annual budget attached to your response would be very helpful).

12. How does your organization mobilize money?

.....

1.4 Networking as a resource

16. Do you have any internal or external contacts with similar organizations?

Type of the relation: internal/ external	Name of the organization	Type of relationship	Duration of the relationship	The relationship today:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part two: Strategies and politics:

2.1 organization's activities and projects:

13. Which of the following issues is the organization working on, and which field occupies the first place in this organization's priorities:

- 1. womens issues. e priority:.....
- 2. Development issues.
- 3. Literacy issues.
- 4. Child care
- 5.elderly care.
- 6. Else (please specify:.....).

14. Who primarily benefits from your organizations activities:

.....

15. Please fill in the following table:-

Activity's / project's name	Field of the Project	Main goals of the project	Duration	Methods /tools used to apply the project	Results/ and general judgments.				
					Excellent and Very successful (fulfill 100% of our aims)	Very good and successful (fulfill 80%our aims)	Good (fulfill 50% of our aims)	Acceptable, fulfill 30% of our aims	Failed. It didn't fulfill any of our aims
1.....				1..... 2..... 3..... 4..... 5.....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2..... ..				1..... 2..... 3..... 4..... 5.....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part three: Successes and failures

16. What did the organization succeeded to achieve:

1. On the political level:

- Recognition from the state (how and when): ..
.....
.....
.....
.....
- Changes on policies and political decisions (how, when, and which policies or decisions):.....
.....
.....
.....

2. On the socio-cultural level:

- Impact on the media (how, when, and which impact):
.....
.....
.....
- More attraction to more people (when, how many and how):.....
.....
.....
.....
.....

Attachment (2)

Questionnaire (2)

code

(1) **Name:**.....

(2) **Name of the organization:**.....

(3) **Social status:**

1. Single.
2. Married.
3. Widow.
4. Divorced.
5. Separated.
6. Else please specify: (.....).

(4) **What position in this organization do you have?**

Position	Period (From- to)	Duties	
1. Leader/ director <input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2. Member <input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3. Worker <input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4. Else(.....) <input type="checkbox"/>	<input type="checkbox"/>	1. 2. 3.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

4. **Age:**.....

5. **Education:**

1. High school certificate (Tawjihi)
2. College Diploma.
3. First university degree (BA)
4. MA degree
5. PhD degree
6. Else, please specify:.....

6. **Field of studies:**

7. **Social class:**

7-1 To which of the following classes do you consider yourself belong:

1. The upper class.
2. The middle class.
3. ...
4. Else (.....).

7-2 Individual financial incomes: (monthly salary):

7-3 Family financial incomes: (monthly salary):

7-4 In which area of Amman do live?

7-5 Your house is owned by:

1. You.
2. Your family.
3. Others (rented).
4. Else (please specify):.....

7-6 How many members are there in your family:

1. Males: 2. Females:

8. What reasons made you a member in this organization?

1.
2.
3.

9. How often do you attend the organization's meetings:

1. Always.
2. Most of the times.
3. Sometimes.
4. Only for the elections.
5. Only if necessary.
6. Rarely
7. You don't attend at all.

10. Do you participate in the organization's activities?

1. Always.
2. Most of the times.
3. Sometimes.
4. Rarely.
5. Not at all. (Move to Q 12).

11. If you participate in your organization's activities, what role do/did you play in that activity:

.....

12. How do evaluate your organization's activities:

.....
.....

13. How do evaluate the organization in general:

.....
.....
.....

14. What kind of difficulties /obstacles do think your organization face:

1. Political: 1.
2.
3.

2. Economic: 1.
2.
3.

3. cultural/ social: 1.
2.
3.