Participant Survey

The following information is being collected for our funders, the New York State Council on Developmental Disabilities (CDD) and will be used to develop future programming for people with developmental disabilities and their families across New York State. Demographic data is being collected to find out how the council can better help people living in underserved communities in New York. You do not have to complete the survey if you do not want to because it is voluntary. No one will know the name of the person that provided the answers. All answers should be provided by the person taking the survey.

Thank you for your participation.

Please tell us a little more about yourself below.

1. Are you a: (Check one)

☐ Person with a developmental disability (DD)

☐ Family member or caregiver of a person DD

☐ Other

2. Which of the following best describes your Race/Ethnicity? (Check one)

☐ White / Caucasian

☐ Black / African American

☐ American Indian / Alaska Native

☐ Hispanic / Latino

☐ Asian / South Asian

☐ Native Hawaiian / Pacific Islander

☐ Two or more Races

☐ Race Unknown

☐ Prefer not to Answer

3. What is your current gender?

☐ Man
☐ Woman
☐ Non-binary
☐ Gender X
☐ Two-Spirit*
☐ I use a different term: _____
☐ Prefer not to answer.

* Only provide two-spirit as answer choice if participants select their race as American Indian/Alaskan Native (AIAN) and skip logic can be used on an electronic survey. Do not provide two-spirit as an answer choice on paper surveys.

4. Do you consider yourself to be transgender?
☐ Yes
☐ No
☐ Prefer not to answer.

5. Sexual Orientation: Which of the following best represents how you think of yourself? [Select ONE]:

☐ Lesbian or gay
☐ Straight, that is, not gay or lesbian
☐ Bisexual
☐ Two-Spirit*
☐ I use a different term: _____
☐ Don't know.
☐ Prefer not to answer.

*Only provide two-spirit as answer choice if participants select their race/ethnicity as American Indian/Alaskan Native (AIAN) and skip logic can be used on an electronic survey. Do not provide two-spirit as an answer choice on paper surveys.

6. Which of the following best describes the area you live in?

☐ Urban / Suburban
☐ Rural

Please share your thoughts on participating in **[name of event]** in the below questions.

7. Were you satisfied with the **[name of event]**?

☐ Yes

☐ No

8. Do you feel that you have increased your advocacy because of your participation in **[name of event]**?

☐ Yes

☐ No

9. Are you currently participating in any advocacy activities because you participated in [**name of event]**

☐ Yes

☐ No

10. Are you better able to say what you need or what is important to you after participating in **[name of event]**?

☐ Yes

☐ No

11. Are you currently serving in any leadership positions? (ex. Coalitions, policy boards, advisory boards)

☐ Yes

☐ No

12. Do you have any thoughts or stories you would like to share about your participation in [**name of event**]?

13. Please share any suggestions on improvements for future **[name of event]** you might have below: