	esearch Partic	ipant Perception Survey	- SP ID: 85	
This questionnaire is evaluated at Multiple-choice (select all a O Single-choice (select only o	pplicable opti	·	∑ Sele	follows: cted Undo select cted Undo select
1 Questions				
1.1 Survey Date and Time				
Voice*). a. The survey that follow The purpose of the research is to a follows is part of our quality assu completing the survey. The survey to complete the survey. For you complete the survey in one sittin us understand how to improve the country. 4. We will do our best to To further minimize the risks to doctors, hospitals, or any diagnos opportunities for improvement. We our publications. 6. There is no can change your mind. Your answers.	understand restrance programy asks about yer answers to g. 3. There he research poprotect your confidentialities. 5. Survey /e will NOT recompensation yers will not be	search participants' expering conducted by [INSTITU] ou and your most recent be saved, you must click are no direct benefits to articipation experience at information, but there is y, we do NOT ask for an responses are analyzed a eveal any individual surve for completing the survey e recorded until you click	ences and enhance JTION] University research experien "Done" at the expose you. However, the this research cestalways a small ring details about you responses to stay. 7. Your particies "Done" at the exponses to exponse	e them. b. The survey that y. 2. Participation involves ce. It will take 5-7 minutes and of the survey. Plan to he survey results may help nter and others across the sk of loss of confidentiality your prior research studies tify areas of excellence and aff or research teams nor in pation is voluntary and yound of the survey.
Please answer the questions below in more than one study, answer for			olled in within th	e past year. If you enrolled
When the survey questions refer to study, not this online survey study	=	we are asking about you	r experiences enro	lled in that clinical research
1.2 Would you recommend joinin O Definitely no O Probably no O Probably yes O Definitely yes	g a research s	tudy to your family and f	riends?	
1.3 Below is a list of possible re important were these reasons	for you?	ning a research study. V Somewhat important	-	
To find out more about my disease	0	0	0	0
Because no other medical options were available	0	0	0	0
To gain access to new treatment/therapy	0	0	0	0
To obtain free healthcare	\circ			\circ



To help others

0



	Passarah Partisi	nant Parcentian Survey	CD ID. 05	
	Research Partici	pant Perception Survey	- 3P ID: 65	
Because of the	Very important	Somewhat important	Not very important	Not important at all
Research/Health Center's reputation	0	0	0	0
Because I am concerned about the topic of study	0	0	0	0
To obtain education and learning	0	0	0	0
Because of a positive experience in another study	0	0	0	0
Because of family influence/involvement	0	0	0	0
To earn money/payment	0	0	0	0
Because my caregiver encouraged me	0	0	0	0
Other reasons	0	0	0	0
1.5 Did the study involve taking procedure, or a change inYesNoNot sure			ew medical device, un	dergoing a new medica
1.6 How much did the study o	demand of you? (Pick the answer that mo	ost closely describes vo	our experience)
O Simple (for example: a few O Moderate (for example: m O Intense (for example: long complex)	v visits or simple a	tests or surveys) short inpatient stay; on	y a few procedures, n	ot risky or intense)
1.7 Before you joined the stud	y, how did the stu	udy team discuss the de	tails of the study with	you?
O Mostly through the email O Mostly while physically in O A mix of conversations tak O No discussions with the st O I do not remember	the same place w king place both pl	ith a member of the stu nysically in the same pla	=	/video/computer)
1.8 Did the Informed consent	form prepare you	for what to expect duri	ng the study?	
O No O Yes, somewhat O Yes, mostly				



O Yes, completely



Research Participant Perception Survey - SP | ID: 85

 1.9 Did the information and discussions you had before participating in the research study prepare you for your experience in the study? O No O Yes, somewhat O Yes, mostly O Yes, completely
 1.10 Did the research team members listen carefully to you? O Never O Sometimes O Usually O Always O No Research Team Member Involved
 1.11 Did the research team members treat you with courtesy and respect? O Never O Sometimes O Usually O Always O No Research Team Member Involved
 1.12 During your discussion about the study, did you feel pressure from the research staff to join the study? O Never O Sometimes O Usually O Always
 1.13 Did the research staff do everything possible to provide assistance with any language difference you might have? O Never O Sometimes O Usually O Always O No language difference
1.14 When you were not at the research site did you know how to reach the research team if you had a question? O Never O Sometimes O Usually O Always
 1.15 When you were not at the research site and you needed to reach a member of the research team, were you able to reach him/her as soon as you wanted? O Never O Sometimes O Usually O Always O Did not need to reach the research team





	Research Partici	pant Perception Survey	- SP ID: 85	
1.16 Did you feel you were a	valued partner in t	the research process?		
NeverSometimesUsuallyAlways				
1.17 If you considered leaving	the study, did you	ı feel pressure from the	Research Team to sta	v?
 Never Sometimes Usually Always Did not consider leaving to 				, ·
1.18 Did the research staff re	spect your cultura	l background (e.g. langı	uage, religion, ethnic g	group)?
NeverSometimesUsuallyAlwaysNo cultural issues				
1.19 Did you have enough ph	ysical privacy whil	e you were in the study?	?	
NeverSometimesUsuallyAlways				
1.20 Below is a list of possib considering leaving the s		ving a research study. F	How important were t	hese reasons for you i
Pain or discomfort related	Very important	Somewhat important	Not very important	Not important at all
to participation	0	0	0	0
Worried about risks of treatment	0	0	0	0
Side effects that occurred during the study	0	0	0	0
Invasion of privacy	0	0	0	0
Too much time spent waiting around	0	0	0	0
Time commitment required	0	0	0	0
Family/work issues unrelated to the study	0	0	0	0
Interactions with research team	0	0	0	0
Not getting test results	0	0	0	0





	Research Partici	pant Perception Survey	- SP ID: 85	
	Very important	Somewhat important	Not very important	Not important at all
Undue pressure to stay in study	0	0	0	0
Problems with study payments	0	0	0	0
Unexpected tests and procedures that occurred during the study	0	0	0	0
Transportation/parking	0	0	0	0
Other reasons	0	0	0	0
1.21 Below is a list of possible staying in the research st		ng in a research study.	How important were t	hese reasons for you in
	=	Somewhat important	Not very important	Not important at all
To find out more about my disease	0	0	0	0
Because no other medical options were available	0	0	0	0
To gain access to new treatment/therapy	0	0	0	0
To obtain free healthcare	0	0	0	0
To help others	0	0	0	0
Because of the Research/Health Center's reputation	0	0	0	0
Because I am concerned about the topic of study	0	0	0	0
To obtain education and learning	0	0	0	0
Because of a positive experience in another study	0	0	0	0
Because of family influence/involvement	0	0	0	0
To earn money/payment	0	0	0	0
Because my caregiver encouraged me	0	0	0	0
Because of my relationship with the research team	0	0	0	0
Feeling valued as a research participant	0	0	0	0





	Research Partici	pant Perception Survey	- SP ID: 85	
	Very important	Somewhat important	Not very important	Not important at all
Improved health or quality of life	0	0	0	0
Other reasons	0	0	0	0
1.22 Which of the following th	ings would be im	portant for you in a fut	ure study?	
 □ Access to computer, interred □ Access to comfortable bed □ Payment/More Payment □ Support groups □ Volunteer appreciation □ Flexible Schedule □ Accessible parking and stu □ Planned discharge and pro □ Summary of overall researe □ Results of personal lab tes □ Other (please specify) 	dy location per goodbye to re ch results shared	esearch team with me		
1.23 Please specify other impo	ortant things:			
1.24 Please use the scale belo experience, and 10 is the O 0 worst O 1 O 2 O 3 O 4 O 5 O 6 O 7 O 8 O 9 O 10 best	best possible exp	erience.		O is the worst possible
1.25 What is the highest grade O 8th grade or less O Some high school, did not O High school graduate or G O Some college or 2-year deg O 4-year college graduate O More than 4-year college or	graduate ED gree	ol that you have comple	ted?	
1.26 What is your age? ○ 18-34 ○ 35-44 ○ 45-54 ○ 55-64 ○ 65-74 ○ 75 and over				





Research Participant Perception Survey - SP ID: 85	
1.27 What is your race? (Please choose one or more) American Indian or Alaska Native	
☐ Asian	
Black or African American	
□ Native Hawaiian or other Pacific Islander□ White	
1.28 Are you of Spanish or Hispanic or Latino/a/x origin or descent?	
○ No - not Spanish/Hispanic/Latino/a/x ○ Yes - Puerto Rican	
O Yes - Mexican/Mexican American/Chicano	
○ Yes - Cuban○ Yes - other Spanish/Hispanic/Latino/a/x	
1.29 What is your sex? O Female	
O Male	
Olntersex	
1.30 How would you describe your gender identity?	
O Female (including transgender women)	
O Male (including transgender men)	
Non-binary/gender-fluid/agenderPrefer not to say	
1.31 Is there anything else you would like to share about your experience in the study you most recently joined?	7
1.31 Is there anything else you would like to share about your experience in the study you most recently joined.	:

Thank you for your interest and the investment of your time. Your responses will help us to improve the research experience for participants.

Empowering the Participant Voice is supported in part by a grant from the National Center for Accelerating Translational Science U01TR003026 to The Rockefeller University, and Clinical Translational Science Awards UL1TR002553 (Duke University), UL1TR003098 (Johns Hopkins University), UL1TR002001 (University of Rochester), UL1TR001866 (Rockefeller University), UL1TR002243 (Vanderbilt), and UL1TR001420 (Wake Forest University Health Sciences).



