Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0627). Do not return the completed form to this address.

Introduction Page:





LRP Participant Survey

You have been selected to complete a survey conducted on behalf of the <u>National Institutes of Health (NIH)</u> as part of an evaluation of the Extramural Loan Repayment Program (LRP). <u>Abt Associates</u>, an independent policy research firm, has been awarded a contract to administer the survey.

Thank you in advance for taking the time to participate in this important study!

As you move through the following pages, please keep in mind the following:

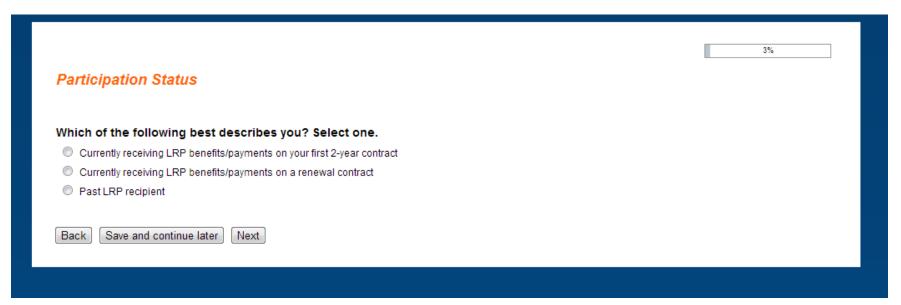
- If the text on the screen is too large, press CTRL until it meets your viewing preference. Likewise, if the text is too small, press CTRL +.
- This survey will take approximately 20 minutes to complete. The navigation bar at the top of the screen will give you an indication of how much of the survey
 you have left.
- Use the survey's navigation buttons (BACK and NEXT) to move through the questionnaire. Using your browser's navigation buttons may prevent data from being saved properly.
- · You may exit the survey at any time by pressing the "Save and continue later" button or simply by closing your browser window.
- You may return to the survey at any time by clicking the link you received in the invitation e-mail. The link will take you to the question where you left off. However, once
 you have clicked "Submit" button, you will not be able to return to the survey without contacting Abt Associates.
- · Once you have completed the survey, you will be given the option to print your responses.

Please click "Next" to continue with the survey.

If you experience any technical difficulty, or have any questions about how to answer the questions, please contact us at LRP Survey@abtassoc.com.

Next

Question 1:



Question 2:

Decision to Apply	
Through which of the following sources did you learn about the LRP? Please select all that apply	ı.
Academic journal or publication	
Your institution's website, flyer, newspaper, or other media	
Academic advisor, professor, or mentor	
Colleague	
Another LRP applicant or participant	
An LRP Ambassador	
A talk or professional gathering	
The LRP website at my funding NIH Institute	
LRP printed materials from my funding NIH Institute	
The LRP website at the NIH Division of Loan Repayment	
LRP printed materials from the NIH Division of Loan Repayment	
Other NIH website	
✓ Other	
□ Do not know	
Please describe "other" source:	
Back Save and continue later Next	

Note: Text box only appears if "Other" is selected.

Question 3:

		Select or	ne option for each ro	ow		Uncertain/
	Not at all Important	Somewhat Important	Moderately Important	Very Important	Extremely Important	No opinion/ Do not recall/ NA
Encouragement from mentor/supervisor	0	0	0	0	0	
Colleague had good experience with the LRP	0	0	0	0	0	
nteractions with LRP staff	0	0	0	0	0	
nformation on the LRP website	0	0	0	0	0	
Contact with an LRP Ambassador	0	0	0	0	0	
Other	0	•	0	0	0	

Note: Text box only appears if "Other" is selected as at least "Somewhat important."

Question 4:

Understanding eligibility requirements Understanding program benefits (i.e., level or amount of loan repayment) Understanding the research commitment requirement	Somewhat easy	Moderately easy	Very easy	Extremely easy	No opinion/ Do not recall/ NA
Understanding program benefits (i.e., level or amount of loan repayment)		0	0	0	
epayment)	0				
Understanding the research commitment requirement		0	0	0	
	0	0	0	©	
Determining to which LRP to apply	0	0	0	©	
Creating and using a password for the online application	0	0	0	0	
Creating your research activities document	0	0	0	0	
Obtaining letters of recommendation	0	0	0	0	
axing, mailing, uploading application documents	0	0	0	0	
pplication process overall	0	0	0	0	
Other O	•	0	0	0	

Note: Text box only appears if "Other" is selected as at least "Somewhat easy."

Question 5:

Please indicate the number of times you sought help from	Enter Number	Did not seek this type of help	Uncertain/ No opinion/ Do not recall
he NIH LRP website			
he NIH LRP phone support			
he NIH LRP email support			
The LRP Program Officer at the relevant NIH Institute or Center			
ease note that if you select one of the last two columns, the "Enter be of help" or "Uncertain/No opinion/Do not recall." ack Save and continue later Next	Number" cell will become disabled. To	re-enable it, please uncheck the b	ox under "Did not seek this

Question 6:

	Not at all	Select one option for each row II Somewhat Moderately Very Extremely			Uncertain/ No opinion/	Did not	
	helpful	helpful	helpful	helpful	helpful	Do not recall	use it
LRP website	0	0	0	0	0		
LRP phone support	0	0	0	0	0		
LRP email support	0	0	0	0	©		
LRP Program Officer at the relevant NIH Institute or Center	0	0	0	0	0		
lease note that if you select one opinion/Do not recall" or "Did not u		nns, the other options	will become disable	d. To re-enable	them, please unche	ck the box under "Uncer	tain/No

Note: Services are not displayed in this matrix if corresponding service in question 5 is not greater than zero.

Question 7:

		Select	one option for each row			Uncertain/	
	Not at all helpful	Somewhat helpful	Moderately helpful	Very helpful	Extremely helpful	No opinion/ Do not recall	Did not use it
Award information	0	0	0	0	0		
Ongoing Ioan balance information	0	0	0	0	0		
Past and current loan payment information	0	0	0	0	0		
Upcoming or planned loan payment information	0	0	0	0	0		
Service verification	0	0	0	0	0		
Forms download service	0	0	0	©	0		

This question only appears for current participants (i.e., question 1 = "Currently receiving LRP benefits/payments on your 1st 2-year contract" or "Currently receiving LRP benefits/payments on a renewal contract").

Question 8:

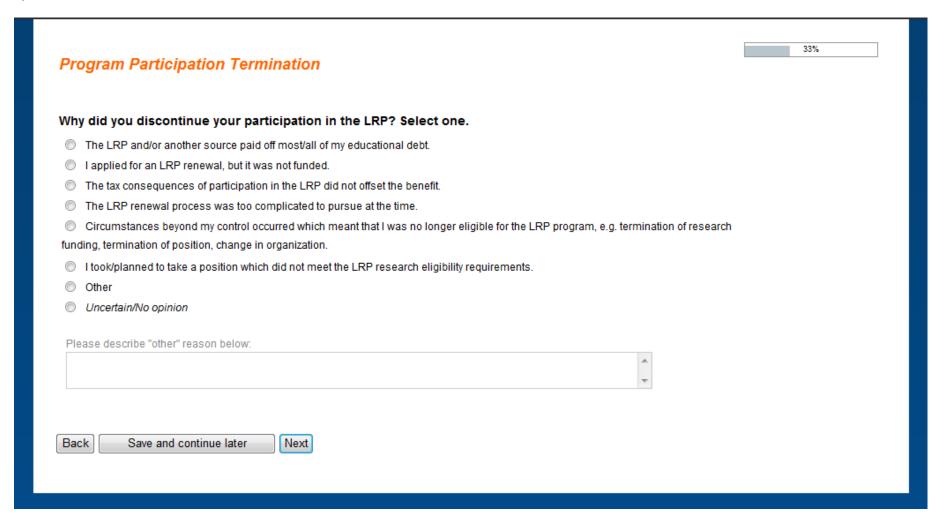
	26%
n your opinion, what month would work best for you as the LRP application deadline?	
All months are pretty much the same to me	
O January	
© February	
March	
O April	
O June	
O July	
O August	
O September	
October	
O November	
O December	
O Uncertain	
Why would this month work best for you?	
Back Save and continue later Next	

Note: Text box only appears if respondent selects a month (January - December) for this question.

Question 9:

					30%
at suggestions do you	have for improving the LF	RP application process	that have not already be	en covered?	
ck Save and continue la	ter Next				
Cave and continue ia	IVEX				

Question 10:



This question only appears for past participants (i.e., question 1 = "Past LRP recipient").

Question 11:

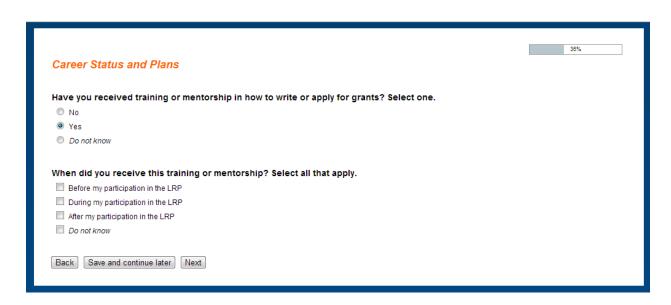
Career Status and Plans	36%
Have you received training or mentorship in how to write or apply for grants? Select one.	
© Yes	
Do not know	
Back Save and continue later Next	

Text for the follow-up question is dependent on response to the above yes/no question.

If the respondent answers "No" or "Do not know" to question 11, the following is displayed:

Career Status and Plans	38%	
Have you received training or mentorship in how to write or apply for grants? Select one.		
No No		
O Yes		
O Do not know		
Are you planning to obtain this type of training or mentorship in the future? Select one. O Yes, it is definitely planned for the future		
◎ Maybe		
◎ No		
O Do not know		
Back Save and continue later Next		

If the respondent answers "Yes" to question 11, the following is displayed:

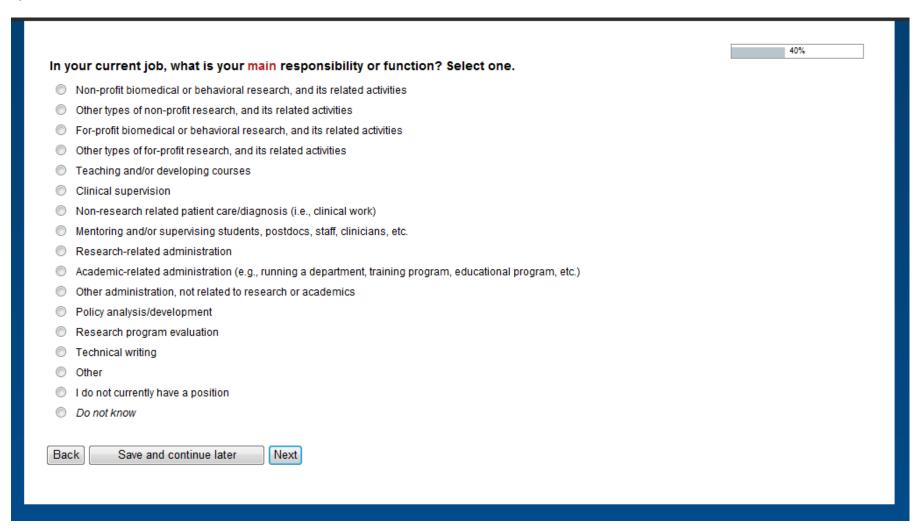


Question 12A:

	40%
In which of the following activities are you currently engaged? Select all that apply.	
Biomedical or behavioral research projects	
Fundraising to support your own research	
Fundraising to support other researchers	
Publishing peer-reviewed papers	
Publishing non-peer-reviewed material (e.g., book chapters, editorials, policy, etc.)	
Presenting at meetings and conferences	
Teaching and/or developing courses	
Mentoring and/or supervising students, postdocs, staff	
Research-related administration (e.g., IRB submissions, budget paperwork, equipment purchasing, hiring lab staff, etc.)	
Departmental responsibilities, such as faculty recruitment and committee responsibilities	
☐ Patient care	
Mentoring and/or supervising non-research clinicians	
Policy analysis/development	
Research program evaluation	
□ Other	
□ Do not know	
Back Save and continue later Next	

This question only appears for current participants (i.e., question 1 = "Currently receiving LRP benefits/payments on your 1st 2-year contract" or "Currently receiving LRP benefits/payments on a renewal contract").

Question 12B:



This question only appears for past participants (i.e., question 1 = "Past LRP recipient").

Question 13:

hich of the following best describes your	r primary position? Select one.	
Principal investigator/faculty		
Part-time faculty		
Department or office head/chief/chair/director		
Dean, vice president, provost, president, chancelle	or, or executive officer	
Other academic or research administrator (e.g., g	raduate program director, research administration staff)	
Administrator, non-research related		
Program/policy evaluator		
Staff scientist/research scientist, public sector		
Staff scientist/research scientist, private sector		
Postdoctoral fellow/associate		
Staff clinician/attending/health care provider		
Research assistant or technician		
Clinical assistant or technician		
Other		
I currently do not have a position		
Do not know		
ease describe your position:		
, ,		
Back Save and continue later Next		

Note: Text box only appears if "Other" is selected.

Question 14:

		48%	
Wh	ich of the following best describes your current, primary organization? Select one.		
	University or college		
	University affiliated hospital or institute		
	Federal government biomedical or behavioral research laboratory		
	Federal government health or public health organization, not in a laboratory		
	Federal government, excluding government research laboratories and public health organizations		
	Community health or mental health center		
	State or local government		
	Hospital, without an academic research program		
	Clinic or private practice		
	Non-profit private foundation/non-governmental organization/philanthropic organization		
	Biotech or pharmaceutical company		
	Other for-profit company		
	Self-employed		
0	Other		
	Not currently employed		
	Do not know		
Ple	ase describe your organization:		
	<u> </u>		
Ва	Save and continue later Next		

Note: Text box only appears if "Self-employed" or "Other" is selected.

Question 15A:

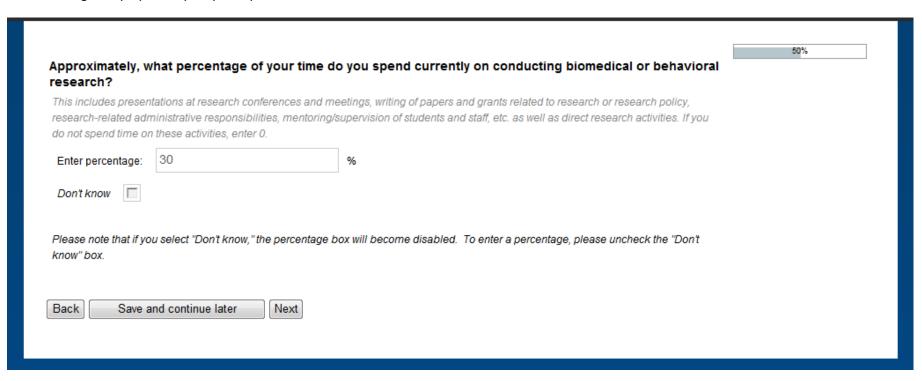
The wording for question 15 is slightly different for current vs. past participants. The following is displayed for current participants:

·	· · · · · · · · · · · · · · · · · · ·	gs, writing of papers and grants related to research or research policy, research-related administrative as well as direct research activities.
Enter percentage:	30	%
Do not know		

Note: The message in red only appears if the respondent entered a number that is less than 50%.

Question 15B:

The following is displayed for past participants:



Question 16:

	53%
Which of the following funding sources currently support your research? Select all that apply.	
Home institution funding – regular operating budget of your department/unit	
Home institution funding – competitive internal research grant	
NIH research grant (R series)	
■ NIH fellowship (F series)	
■ NIH career development grant (K series)	
Other NIH grant or cooperative agreement	
Research contract	
Federal agency funding or cooperative agreement, other than NIH	
State agency funding	
Other non-profit funding	
☐ Industry or for-profit funding	
✓ Other	
I do not currently receive any funding sources for my research	
Do not know	
Please describe the "other" funding source:	
_	
Back Save and continue later Next	

Note: Text box only appears if "Other" is selected.

Question 17:

60%
Which of the following funding sources were awarded to you as the Principal Investigator or Co-Principal Investigator?
Select all that apply.
Home institution funding – regular operating budget of your department/unit
Home institution funding – competitive internal research grant
☐ NIH research grant (R series)
NIH fellowship (F series)
☐ NIH career development grant (K series)
Other NIH grant or cooperative agreement
Research contract
Federal agency funding or cooperative agreement, other than NIH
State agency funding
☐ Other non-profit funding
☐ Industry or for-profit funding
☐ Other
None of the above funding sources were awarded to me as Principal Investigator or Co-Principal Investigator.
□ Do not know
Back Save and continue later Next
Dack Save and continue later INEXT

Only the options selected under question 16 are displayed under question 17.

Question 18:

	Number of Positions	Did not support this type of position	Do not know
Paid full-time equivalent positions:			
Unpaid student research assistants/interns/etc.			

This question only appears if at least one source was selected under question 17.

Question 19:

Peer-reviewed	article
Non peer-review	ved article
Policy analysis	papers, editorial comments, reports, etc.
Other	
I have not writte	n, submitted, had accepted, and/or published any publications over the past 2 years
Do not know	
Please list up to 2 "d	ther" publication types below.
Please list up to 2 "c	ther" publication types below.
Please list up to 2 "c	ther" publication types below.

Note: Text boxes only appear if "Other" is selected.

Question 19 (follow-up):

ears, either as first			,		,	ted, had accepted	,	·	
f you did not write a p please press the "bac				•	-			oted and/or published	,
			and page and		1	p. ee.ao queeno	••		
	Number Unknown	Written	Submitted for Publication	Accepted for Publication	Published				
Primary Author		0	0	0	0				
Co-Author		0	0	0	0				
Total		0	0	0	0				

Note: This question is asked for each publication type selected under question 19. The zeros are pre-filled.

Question 20:

	73%
ow likely are you to continue in a biomedical or behavioral research career in the next five years? Select one	. .
Not at all likely	
Somewhat likely	
Moderately likely	
Very likely	
Extremely likely	
O Uncertain	
Prefer not to say	
/hy are you considering leaving biomedical or behavioral research?	
<i>A</i>	

Note: This text box only appears if respondent selects "Not at all likely" or "Somewhat likely." If the respondent selects "uncertain," a question pops up that asks "Why are you uncertain about continuing your biomedical or behavioral research career"?

Question 21:

There are many challenges to establishing and sustaining a research career. Please rate the following factors in terms of how much they have impacted on your career decisions.

		Select	one option for	each row		Uncertain/	
	No effect	Some effect	Moderate effect	Big effect	Very big effect	No opinion/ Do not recall	Not applicable
Challenges in balancing work and family responsibilities	0	0	0	0	0		
Need to accommodate your spouse's or partner's career	0	0	0	0	0		
Inadequate pay	0	0	0	0	0		
Difficult job market/challenges in finding suitable position	0	0	0	0	0		
Difficulties in obtaining funding to support your research	0	0	0	0	0		
Health problems affecting you or your family member(s)	0	0	0	0	0		
Insufficient mentoring	0	0	0	0	0		
Challenges balancing research and teaching responsibilities	0	0	0	0	0		
Difficulties forming collaborative relationships with more senior or established faculty/researchers	0	0	0	0	0		
Difficulty meeting promotion/tenure deadlines or requirements due to pregnancy or birth of a child	0	0	0	0	0		
Challenges balancing research and clinical duties	0	0	0	0	0		
Difficulties recruiting talented students/postdocs to your research group	0	0	0	0	0		
Loss of interest in or motivation for a research career	0	0	0	0	0		
Self-doubts about your ability to succeed in a research career	0	0	0	0	0		
Other	0	•	0	0	0		

Please describe "o	other" factor(s) refere	nced above.		

Please note that you may only select one response in each row. If you select a box in one of the last two columns, the scale options will be disabled. To re-enable these options, please uncheck the box under "Uncertain" or "Not applicable."

Note: Text box only appears if "Other" = "Some effect" or higher.

Question 22:

If the text on the screen is too large, press CTRL - until it meets your viewing preference. Likewise, if the text is too small, press CTRL +.
Please indicate the greatest challenge that you faced while establishing and/or sustaining your research career. Select one.
Challenges in balancing work and family responsibilities
Need to accommodate your spouse's or partner's career
Inadequate pay
Difficult job market/challenges in finding suitable position
Difficulties in obtaining funding to support your research
Health problems affecting you or your family member(s)
□ Insufficient mentoring
Challenges balancing research and teaching responsibilities
Difficulties forming collaborative relationships with more senior or established faculty/researchers
Difficulty meeting promotion/tenure deadlines or requirements due to pregnancy or birth of a child
Challenges balancing research and clinical duties
Difficulties recruiting talented students/postdocs to your research group
Loss of interest in or motivation for a research career
Self-doubts about your ability to succeed in a research career
Other
Do not know Back Save and continue later Next

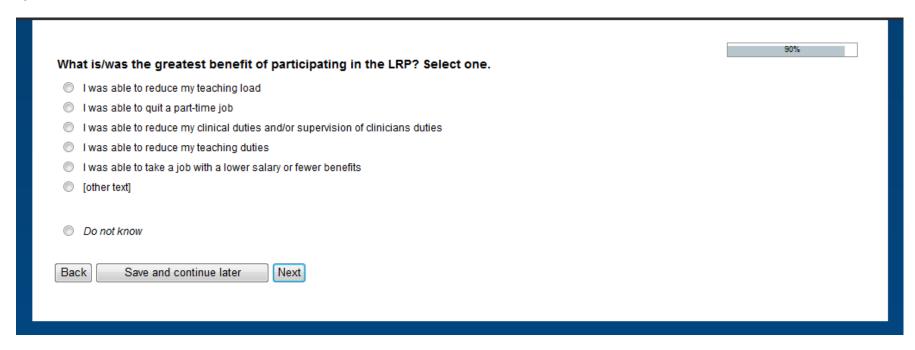
Only challenges selected under question 21 ("Some effect" or higher) are displayed under question 22.

Question 24:

Too early to tell	
	t on my career and/or career choices
I was able to red	uce my teaching load
✓ I was able to qui	a part-time job
I was able to red	uce my clinical duties and/or supervision of clinicians duties
I was able to red	uce my teaching duties
I was able to tak	e a job with a lower salary or fewer benefits
Other, please sp	ecify:
☐ Do not know	

This question only appears for past participants (i.e., question 1 = "Past LRP recipient").

Question 24A:



This question only appears for past participants (i.e., question 1 = "Past LRP recipient"). The only response choices that are displayed are those selected under question 24.

Question 25:

Pay Equity		93%	
According to numerous reports, significant pay differences still exist among different groups of people. We are interested in finding out if our LRP participants are seeing the same thing. As of today, what is your base annual salary, not including bonuses and overtime? If you are not salaried, please estimate your annual earned income.			
		Prefer not to say	
Please enter approximate full amount:	\$		
Please remember that all survey responses will be kept confidential. We will share aggregate data with NIH, but none of these data will contain information that can lead to your identification. Your frank and open responses will help NIH improve the program, and therefore, we encourage you to be candid about your experiences.			
Also note that if you select "Prefer not to say," the text bo	x will become disabled. If you would like to add a dollar amount, p	please uncheck the box under "Prefer not to say."	
Back Save and continue later Next			

Question 26:

Concluding Question	90%
NIH is committed to the mission and goals of the LRP, and we want to hear from our LRP recipients about the profurther comments or suggestions about the LRP, please write them in the space below.	ogram. If you have any
Back Save and continue later Submit	

Final Screen:

