Attachment 1: Participant Survey

This attachment includes screenshots for each part of the participant survey. The same survey will be used in the evaluation of STEP-UP and DSRTP. However, the name of the program in each question will reflect the program in which the respondent participated.



OMB#0925-0648 Expiration date: 5/2021

The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) Office of Minority Health Research Coordination (OMHRC) is conducting a comprehensive evaluation of STEP-UP program outcomes. The purpose of this evaluation is to assess STEP-UP outcomes over time to highlight program achievements, identify any program challenges, and make recommendations to improve the program in the future. As a former STEP-UP participant, we are asking you to support our assessment efforts by completing a survey regarding your experiences during and since your participation in the STEP-UP program.

Your participation in this survey is completely voluntary and your survey responses will be kept secure to the extent permitted by law. Names and other identifiers will not appear in any report of the survey.

Burden Disclosure: 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# 0925-0648. Do not return the completed form to this address.

Thank you for your willingness to participate in our efforts to help improve the STEP-UP program for future participants and we look forward to receiving your feedback.

By clicking on the "I consent" box below, you are indicating that you consent to participate in this survey.

I consent
I do not consent

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Did you participate in the STEP-UP program as a high school student or an undergraduate student? If you participated for multiple years, please select all that apply.

High school - junior

High school - senior

Undergraduate - first year

Undergraduate - second year

Undergraduate - third year

Undergraduate - fourth year

In what year(s) did you participate as a STEP-UP participant? If you participated for multiple years, please select all that apply.

1997	2008
1998	2009
1999	2010
2000	2011
2001	2012
2002	2013
2003	2014
2004	2015
2005	2016
2006	2017
2007	

Which coordinating center were you assigned to for your STEP-UP research experience?

American Physiological Association	University of California, Los Angeles		
Charles R. Drew University of Medicine and Science	University of Hawaii		
Children's Hospital Los Angeles	University of Maryland, Baltimore County		
Howard University	University of Nevada, Las Vegas		
Stanford University	University of Texas / Penn State University		
University of California, San Francisco	Do not remember		
University of Alabama at Birmingham			

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Ripple Effect Please select your sex. Male Female Prefer not to answer Please select all that describe your race. African American / Black Native Hawaiian / Pacific Islander American Indian / Alaska native White Please select your ethnicity. Have you been diagnosed with a disability that substantially limits one or more major life activities? Prefer not to answer Ripple Effect

Did the STEP-UP program adequately accommodate your disability?

Yes No Prefer not to answer





The next few questions will ask about your family and community:

Which best describes the area that you grew up in? (Select all that apply)

Urban

Rural

Suburban

Please answer the following questions about your parent or guardian's education.

What is the highest level of formal education obtained by your parents / guardians?

Parent or guardian

Parent or guardian

Parent or guardian

Parent or guardian

Powerall, how much did your family support your decision to participate in the STEP-UP program?

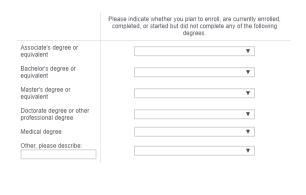
Strongly did not support

Strongly did not support

Please describe the role your family and community members played in your decision to participate in the STEP-UP program.



We would like information about the degrees that you have pursued or plan to pursue, after participating in the STEP-UP program.





Please select the Associate's degree(s) that you plan to enroll in, are currently enrolled in, or completed.

Associate of Science (A.S.)

Associate of Arts (A.A.)

Undecided



What is or was the area of study for the Associate's degree(s) that you plan to enroll in, are currently enrolled in, or completed? Please select all that apply.

Biochemistry	Physics		
Bioinformatics	Physiology		
Biology	Pre-med		
Biomedical science	Pre-vet		
Chemistry	Psychology		
Computer / Information Technology Science	Anthropology		
Earth / Planetary science	Archaeology		
Education	Business		
Engineering	Economics		
Forensic Science	Foreign language		
Genetics	Government / political science		
Health care profession (e.g. Nursing)	History		
Math	Philosophy		
Microbiology	Sociology		
Molecular biology	Other, please describe:		
Neurobiology / neuroscience	Undecided		

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Please select the Bachelor's degree(s) that you plan to enroll in, are currently enrolled in, or completed.

Bachelor of Arts (B.A.)

Bachelor of Science (B.S.)

Bachelor of Science in Nursing (B.S.N)

Other, please describe:

Undecided







What is or was the area of study for the Bachelor's degree(s) that you plan to enroll in, are currently enrolled in, or completed? Please select all that apply.

Biochemistry	Physics		
Bioinformatics	Physiology		
Biology	Pre-med		
Biomedical science	Pre-vet		
Chemistry	Psychology		
Computer / Information Technology Science	Anthropology		
Earth / Planetary science	Archaeology		
Education	Business		
Engineering	Economics		
Forensic Science	Foreign language		
Genetics	Government / political science		
Health care profession (e.g. Nursing)	History		
Math	Philosophy		
Microbiology	Sociology		
Molecular biology	Other, please describe:		
Neurobiology / neuroscience	Undecided		

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Please select the Master's degree(s) that you plan to enroll in, are currently enrolled in, or completed.

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Master of Arts (M.A.)
Master of Public Health (M.P.H)
Master of Science (M.S.)
Master of Science in Nursing (M.S.N)
Master of Fine Arts (M.F.A)
Master of Business Administration (M.B.A.)
Other, please describe:
Undecided



What is or was the area of study for the Master's degree(s) that you plan to enroll in, are currently enrolled in, or completed? Please select all that apply.

Biochemistry	Neurobiology / neuroscience		
Bioinformatics	Physics		
Biology	Physiology		
Biomedical science	Psychology		
Chemistry	Anthropology		
Computer / Information Technology Science	Archaeology		
Earth / Planetary science	Business		
Education	Economics		
Engineering	Foreign language Government / political science		
Forensic Science			
Genetics	History		
Health care profession (e.g. Nursing)	Philosophy		
Math	Sociology		
Microbiology	Other, please describe:		
Molecular biology	Undecided		

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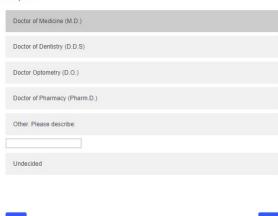


Please select the Doctorate or professional degree(s) that you plan to enroll in, are currently enrolled in, or completed.

Doctor of Philosophy (Ph.D.), please describe:	
Doctor of Science (D.Sc.), please describe:	
Doctor of Education (E.D.)	
Doctor of Veterinary Medicine (D.V.M.)	
Juris Doctor (J.D.)	
Other, please describe:	
Undecided	
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Please select the medical degree(s) that you plan to enroll in, are currently enrolled in, or completed.





What is your current employment status? (Please select all that apply) Employed full-time Employed part-time Student, full-time Student, part-time Unemployed, seeking employment Unemployed, not seeking employment Stay-at-home parent, caretaker, or homemaker Prefer not to answer







Please select all of the activities that you perform as part of your current job.

Laboratory research

Clinical research

Social science research

Public health research

Regulatory affairs

Medicine / health care

Science or health policy

Professor / faculty (college)

Teaching (elementary, middle, or high school)

Scientific writing

Grant administration or management

Other science-related activity, please describe:



After participating in STEP-UP, have you ever conducted any research in the following activities?

Undergraduate studies
Graduate studies
Post-doctoral position
Internship
Fellowship
Traineeship
Previous Job
Current job
Other, please describe:
None
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Was the research conducted after participating in STEP-UP biomedical research?

Yes

No

Other than your STEP-UP experience, please select all of the roles you have ever had on an NIH grant.

Principle investigator

Co-investigator

Senior / key personnel

Junior researcher

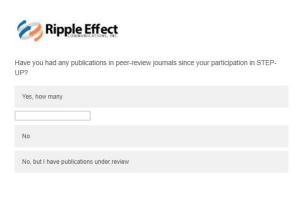
Post-doctoral researcher

Student researcher

Trainee

Lab worker

Other, please describe:





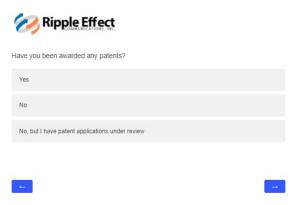
Were you first author on any of your publications in peer-reviewed journals?

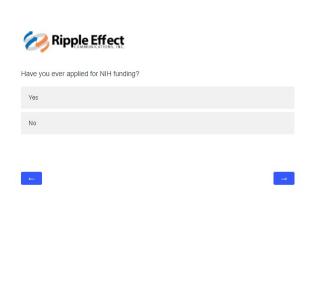
Yes, how many

No

Excluding the STEP-UP Research Symposium, how many oral presentations have you given at professional or scientific conferences after your participation in STEP-UP?

Excluding the STEP-UP Research Symposium, how many posters have your presented at professional or scientific conferences since your participation in STEP-UP?









For up to 5 NIH grant that you applied for or received, please indicate the grant activity code, the NIH Institute or Center, and the outcome of the application.

	Grant activity code	NIH Institute or Center	Outcome
Grant 1	▼	Y	▼
Grant 2	▼	V	▼
Grant 2	▼	¥	▼
Grant 3	▼	¥	▼
Grant 4	▼	¥	▼
Grant 5	▼	¥	▼

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Which other federal agencies have you received research from? (Please select all that apply)

None, I have not received research funding from any other federal agencies
Department of Defense (DOD)
Environmental Protection Agency (EPA)
Food and Drug Administration (FDA)
Centers for Disease Control (CDC)
National Aeronautics and Space Administration (NASA)
National Science Foundation (NSF)
Department of Agriculture (USDA)
Other federal agency, please describe:
State government agencies
Local government agency
Industry (for profit business)
Non-profit organization
Other, please describe:



Excluding the STEP-UP Symposium, did your STEP-UP experience directly result in any of the following? Please select all that apply.

Publication in a peer-reviewed journal
Oral presentation at a scientific or professional conference (not including the STEP-UP Summer Research Symposium)
Poster presentation at a scientific or professional conference (not including the STEP-UP Summer Research Symposium)
Patents
Basis for undergraduate thesis
Basis for graduate thesis or dissertation
Internship
Fellowship
Post-doctoral position
Job
Other, please describe:
None of the above
What role did the STEP-UP program play in your decision to enter into your chosen field of study, degree program, or career?



Please rate how valuable each of the following STEP-UP program components were to you personally.

	Not valuable at all	Somewhat valuable	Very valuable	Not applicable
Hands-on research experience	0	0	0	0
Attending the STEP- UP Summer Research Symposium	0	0	0	0
Presenting findings at the annual research symposium	0	0	0	0
Mentoring	0	0	0	0
Other professional development (e.g. webinars)	0	0	0	0
Research stipend	0	0	0	0

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As part of the STEP-UP experience, participants are assigned a research mentor who supports their research experience. However, you may have also developed a mentoring relationship with others during your STEP-UP experience. The next few questions will ask about your experience with mentors during your STEP-UP experience.

Other than your assigned research mentor, did any of the following serve as a mentor during your STEP-UP experience? (Select all that apply)

Coordinating center program director
Other coordinating center personnel
NIDDK staff / personnel
Other STEP-UP participants
Undergraduate student researchers
Graduate student researchers
Staff in the lab in which I worked
Other, please describe:
None



Did any of the following continue to serve as a mentor to you **after** completing the STEP-UP experience? (Select all that apply)





How much support did you receive from your assigned STEP-UP **research mentor** in each of the following areas?

	No support	Some support	A lot of support	Not applicable
Help with applications to college	0	0	0	0
Help with applications to graduate school	0	0	0	0
Help with other academic decisions or problems	0	0	0	0
Help with job interviews	0	0	0	0
Help with applications for fellowships, scholarships, or grants	0	0	0	0
Help exploring career opportunities	0	0	0	0
Help with networking (making professional connections)	0	0	0	0
Other, please describe:	0	0	0	0

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How much support did you receive from your **coordinating center** in each of the following areas?

	No support	Some support	A lot of support	Not applicable
Help with applications to college	0	0	0	0
Help with applications to graduate school	0	0	0	0
Help with other academic decisions or problems	0	0	0	0
Help with job interviews	0	0	0	0
Help with applications for fellowships, scholarships, or grants	0	0	0	0
Help exploring career opportunities	0	0	0	0
Help with networking (making professional connections)	0	0	0	0
Other, please describe:	0	0	0	0







How satisfied were you with the support you received from each of the following during your STEP-UP experience?

	Not at all satisfied	Somewhat satisfied	Very satisfied	Not applicable
Assigned research mentor	0	0	0	0
Coordinating center program director	0	0	0	0
Other coordinating center personnel	0	0	0	0
NIDDK staff	0	0	0	0







Please rate how each of the following challenges impacted your education and career opportunities in biomedical research.

	Not a challenge	Slight challenge	Significant challenge	Not applicable
Lack of rigorous coursework in high school	0	0	0	0
Lack of rigorous coursework in college	0	0	0	0
Lack of knowledge about educational opportunities	0	0	0	0
Lack of knowledge about career opportunities and paths	0	0	0	0
Lack of role models	0	0	0	0
Lack of mentors	0	0	0	0
Lack of family support	0	0	0	0
Lack of community support	0	0	0	0
Lack of financial resources to pursue advanced education	0	0	0	0
Other, please describe:	0	0	0	0

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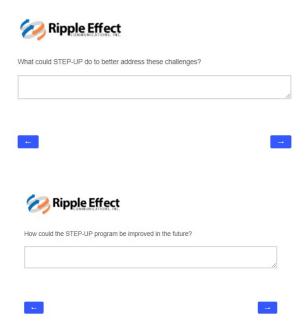
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Please, rate how helpful the STEP-UP program was in overcoming the following challenges:

	Not at all helpful	Somewhat helpful	Moderately helpful	Very helpful
Lack of rigorous coursework in high school	0	0	0	0
Lack of rigorous coursework in college	0	0	0	0
Lack of knowledge about career opportunities and paths	0	0	0	0
Lack of mentors	0	0	0	0
Lack of family support	0	0	0	0
Lack of community support	0	0	0	0
Lack of financial resources to pursue advanced education	0	0	0	0











We are raffling off eight \$25 Amazon gift cards to those who have completed this survey. If you would like to enter the raffle, please email NIDDKSteptp@niddk.nih.gov with the subject "NIDDK survey raffle." You do not need to provide any identifying information. The winners will receive an email with an online gift card within 30 days after the survey closes.

