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Title: Study Enrollment Link

S&A FY23 Hoffman Pilot Health Project

Survey Flow

Block: Default Question Block (13 Questions)

Page Break

Start of Block: Default Question Block

Study Information Study Information

You are being asked to potentially participate in a research study. Key study information you should know:

- The purpose of the study is to understand factors that influence pilot (U.S. airline and commercial and active duty military) healthcare seeking behavior with hopes of better enabling the aeromedical system to serve pilots and stakeholders.
- Participation includes a one-time interview over the phone or Microsoft Teams that will take approximately 30 minutes.
- We will NOT ask about your personal health status or reasons for seeking care. This study is only aiming to collect your perceptions and opinions.
- There are no foreseeable physical risks and very minimal privacy/confidentiality risks or discomforts from this study.
- The results from this study will be used to inform U.S. airline and commercial pilots and military aerospace leaders on factors that influence pilot healthcare behavior. The results will also be used to inform future research.
- Taking part in this study is voluntary. You can skip any question and discontinue participation at any time without penalty or loss.
- On the next page, there are a series of screening questions (e.g., age, unique characteristics, preferred contact method/info).

The research team will take the following precautions to maintain the confidentiality of your data: We will not collect any direct identifiers, and the likelihood of re-identifying you based on the information you provide is minimal. Data will be presented and published in aggregate form. Electronic data will be password-protected. The data may be accessed by the Department of Defense for auditing purposes. A final report will be delivered to the DoD with aggregated data that is not identifiable. There will be no identifying information associated with your responses.

If you have further questions regarding the study, contact the Principal Investigator: Rachael N. Martinez, PhD, at rachael.martinez.1@us.af.mil.

If you have questions regarding your rights as a research subject, contact the AFRL IRB: 937-904-8100 or afrl.ir.protocolmanagement@us.af.mil.

Q1_consent By answering yes, you are stating that you have read this consent form and agree to be contacted about potential participation in this study.

- Yes, I would like to be contacted for potential participation. (1)
- No, I would not like to be contacted. (2)
- I am not sure and would like to be contacted with more information. (3)

Skip To: End of Survey If By answering yes, you are stating that you have read this consent form and agree to be contacted... = No, I would not like to be contacted.

Q2_milvsciv Please indicate whether you are currently a United States Air Force (USAF) pilot or a U.S. airline and commercial pilot.

- USAF Aircraft Pilot (fixed wing only) (1)
- U.S. airline and commercial pilot (2)

Skip To: Q4_civcriteria If Please indicate whether you are currently a United States Air Force (USAF) pilot or a civilian ai... = U.S. airline and commercial pilot

Skip To: Q3_milcriteria If Please indicate whether you are currently a United States Air Force (USAF) pilot or a civilian ai... = USAF Aircraft Pilot (fixed wing only)

Page Break

Q3_milcriteria Do you meet the following criteria as a USAF Aircraft Pilot?

- Active Duty USAF Officer
- Completed Formal Training Unit (FTU) or follow-on training for your respective aircraft
- Functioned as a required air crew member as part of your official duties in the last 6 months

Yes (1)

No (2)

Skip To: End of Survey If Do you meet the following criteria as a USAF Aircraft Pilot? -Active Duty USAF Officer -Completed... = No

Skip To: Q5_19thAF If Do you meet the following criteria as a USAF Aircraft Pilot? -Active Duty USAF Officer -Completed... = Yes

Q4_civcriteria Do you meet all of the following criteria as a U.S. airline and commercial pilot?

- Hold a current Airline Transport Pilot Certificate from the Federal Aviation Administration
- Currently employed by a commercial airline (regional or mainline) based in the United States
- Functioned as a required air crew member for the purposes of compensation in the last 6 months

Yes (1)

No (2)

Skip To: End of Survey If Do you meet all of the following criteria as a U.S. airline and commercial pilot? -Hold a current A... = No

Skip To: Q8_age If Do you meet all of the following criteria as a U.S. airline and commercial pilot? -Hold a current A... = Yes

Q5_19thAF Are you currently assigned to a unit within the 19th Air Force?

Yes (1)

No (2)

Skip To: Q6_spvsrpermission If Are you currently assigned to a unit within the 19th Air Force? = No

Skip To: Q8_age If Are you currently assigned to a unit within the 19th Air Force? = Yes

Q6_spvsrpermission Do you have your supervisor's permission to participate in this study (as necessary)?

Yes (1)

No (2)

Display This Question:

If Do you have your supervisor's permission to participate in this study (as necessary)? = No

Q7_seek_approval Please seek approval from your supervisor and return to this survey link to re-start the study screening questions.

Skip To: End of Survey If Please seek approval from your supervisor and return to this survey link to re-start the study sc... Is Displayed

Page Break

Q8_age Please select your age category.

18-30 years (1)

31-50 years (2)

51-65 years (3)

66+ years (4)

Q9_unique Do you feel that you bring a unique perspective to this study due to your background in any one of the following categories? Please select all that apply.

Gender (1)

Geography (3)

Race or Ethnicity (4)

Sexual Orientation (5)

Other (6) _____

Q10_contactmethod How do you prefer to be contacted?

Phone (1)

Email (2)

Either phone or email (3)

Q11_contactinfo Please provide your preferred contact methods (phone number and/or email address).

Q12_name How would you like the researcher to refer to you during the interview process? You can provide a first name or a preferred pseudonym. Please do not provide your first and last name.

Skip To: End of Survey If Condition: How would you like the rese... Is Not Empty. Skip To: End of Survey.

End of Block: Default Question Block
