

# RIH Key Informant Survey Instrument/Data Matrix

Concept	Item	Survey Question	Response	Var label	Reference
<b>CONSENT</b>					
I		This study has been explained to me. I have had a chance to ask questions. I volunteer to take part in this research. If I have questions later about the research, I can ask one of the researchers listed above. If I have questions about my rights as a subject, I can call the University of Washington Human Subjects Division at (206) 543-0098. I will receive a copy of this informational statement.	0. I do not accept 1. I accept. I want to participate. 2. I do not accept, because <u>my research does not include a community engagement component.</u>	ACCEPT	
II		You have indicated that you <b>DO NOT</b> want to participate in the Research for Improved Health: A National Study of Community-Academic Partnerships survey. If this is correct, please select the button below, and hit NEXT.	1. I DO NOT want to participate. (By clicking here you will be permanently removed from the participant list.) <i>Show if: (ACCEPT = 0:[I do not accept. (If you wish to return and participate later, simply close this window).]) or (ACCEPT = 2:[I do not accept, because my research does not include a community engagement component.]])</i>	DECLINE	
<b>A. PROJECT FEATURES</b>					
		<b>STEM:</b> For this research study it is important for us to learn about certain features of your project. We are referring specifically to a project that received federal funding in 2009: [insert project name].			
1		Does [insert project name] involve community individuals and/or agencies as <u>partners</u> ?	1. Yes 0. No	PROJEC1	
2		Do you consider [insert project name] to be community based participatory research, or something similar?	1. Yes 0. No <i>Show if: (PROJEC1=0:[NO])</i>	PROJEC2	
3		How would you like to classify the type of your project?	open-ended <i>Show if: (PROJEC2=0:[NO])</i>	PROJEC3	
4		What are the funding dates?	<i>Show if: (ACTIVITY = U48) or (ACTIVITY = U26)</i>	NARCH1	
	1	Start Date (mm/dd/yyyy)	enter date	FUND_START	
	2	End Date (mm/dd/yyyy)	enter date	FUND-END	
5		What is/was the total funding amount?	enter \$ _____ <i>Show if: (ACTIVITY = U48 PRC) or (ACTIVITY = U26 NARCH)</i>	NARCH2	
6		What is/was the federal funding institute(s) or center(s) for [insert project name]?	enter name _____ <i>Show if: (ACTIVITY = U48 PRC) or (ACTIVITY = U26 NARCH)</i>	NARCH3	
		<b>STEM:</b> We are interested in the length of your work with individuals and agencies prior to and after the current funding period.			
7		To your best estimate, how many <i>years</i> and <i>months</i> has this currently funded project, [insert project name], <b>been in existence</b> ?	_____ Years AND _____ Months	PROJEC4Y & PROJEC4M	cp New Measure
8		To your best estimate, how many <i>years</i> and <i>months</i> have <b>you</b> been involved in this particular project?	_____ Years AND _____ Months	PROJEC5Y & PROJEC5M	
9		To your best estimate, how many <i>years</i> and <i>months</i> has this particular <b>partnership</b> been in existence? Please include total time, even when the partnership was not funded.	_____ Years AND _____ Months	PROJEC6Y & PROJEC6M	cp New Measure

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10		Now we are asking you about the type of study you are conducting.			
	1	Is this a <b>descriptive, intervention, or policy</b> study? <b>Descriptive study:</b> needs assessment, community profile, epidemiological study, etc. <b>Intervention study:</b> specific programs to reduce or address health disparities. <b>Policy study:</b> policy analysis, partnered effort to change policies, or a systematic studying of the nature, causes, and effects of alternative public policies.	1. Descriptive 2. Intervention 3. Policy 4. Other, <i>please describe</i>	PROJEC7	
	2t	You marked "other" in the previous question. What other type of policy was this study?	open-ended	PROJEC7.TEXT	
11		Does your research project involve the <b>collection and use of human specimens</b> (hair, skin, cells, blood, etc.)?	1. Yes. 0. No	PROJEC8	BD, new question
12		Based on your experiences in [insert project name], please tell us how confident you are that your project will <b>achieve its goals</b> .	1. Not confident at all 2. Not very confident 3. Neutral 4. Slightly confident 5. Very confident	PROJEC9	
<b>B. RESOURCE AND POWER SHARING</b>					
		<b>STEM:</b> Now to continue the survey, this next section pertains to <b>resource sharing and training</b> .			
13		Which partner hires <b>personnel</b> on the project? By <b>community partners</b> we mean agencies, organizations, tribal community, health departments, or other entities representing communities. By <b>academic partners</b> we mean university or research institutions.	0. Community partner(s) 1. Academic partner(s) 2. Both 3. Don't know	SHARE1	
14		Who decides how the <b>financial resources</b> are shared?	0. Community partner(s) 1. Academic partner(s) 2. Both 3. Don't know	SHARE2	Rand, Khodyakov
15		Who decides how the <b>in-kind resources</b> are shared?	0. Community partner(s) 1. Academic partner(s) 2. Both 3. Don't know	SHARE3	
16		Thinking of the overall budget, how are the <b>project's financial resources divided</b> among community partners and academic partners?		SHARE4	rand?
	1	Academic partner(s)	_____%	SHARE4A	
	2	Community partner(s)	_____%	SHARE4B	
<b>C. RESEARCH INTEGRITY</b>					
17		Have <b>community partners</b> received human subjects training?	1. None of them 2. Some of them 3. Most of them 4. All of them 5. Don't know	INTERG1	Cp created
18		Have partners who either collect, help interpret, or review data signed <b>confidentiality agreements</b> ?	1. None of them 2. Some of them 3. Most of them 4. All of them 5. Don't know	INTERG2	
19		Are there guidelines in place as to what would happen if a partner <b>breaches confidentiality</b> ?	0. No 1. Yes 2. Don't know 3. Does not apply	INTERG3	

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20		Who made the final decision to approve participation in this research project on behalf of the community? <i>Please choose all that apply.</i>		INTERG4	BD and Puneet, new item
	1	Agency leader, representative, board, or staff		INTERG4.AGENCY	
	2	Tribal/local government or health board/public health office	1. Yes 0. No	INTERG4.GOVERN	
	3	Individual community member(s)	1. Yes 0. No	INTERG4.INDIVID	
	4	Project advisory board	1. Yes 0. No	INTERG4.ADVIS	
	5	Other	1. Yes 0. No	INTERG4.OTHER	
	6	No community decision; individual research participants give/gave consent	1. Yes 0. No	INTERG4.NO_DEC	
21		On the last page, you indicated that an 'other' entity made the final decision to approve participation in this research project on behalf of the community. Please describe this entity.	open-ended <i>Show if: INTERG4 is-any-of [Other]</i>	INTERG5	
<b>D. FORMAL AGREEMENTS</b>					
		<b>STEM:</b> This next section seeks information about <b>formal agreements</b> between the academic and community partners.			
22		Please indicate whether or not your partnership has <b>written formal agreements</b> such as a Memorandum of Agreement/Understanding (MOU) or Tribal or Agency Resolution.	1. Yes 0. No	AGREE1	Gottlieb,1993
23		Did research approval for [insert project name] involve a verbal agreement between partners?	0. No 1. Yes 3. Don't know	AGREE2	
24		In a few sentences, can you describe the nature of the verbal agreement?	open-ended <i>Show if: (AGREE2=1[YES])</i>	AGREE3	
25		Thinking about your MOU or other formal agreement(s), does it include any provisions or language about:	<i>Show if: (AGREE1 = 1:[Yes])</i>		
	1	Distributions of funds	0. No	AGREE4A	Gottlieb,1993
	2	A written mission statement	1. Yes	AGREE4B	Gottlieb,1993
	3	Written objectives	2. Don't know	AGREE4C	Gottlieb,1993
	4	Clear expectation for partner's role	3. Does not apply	AGREE4D	New
	5	Clear decision-making process (e.g., consensus vs. voting)		AGREE4E	New
	6	Conflict resolution		AGREE4F	
26		Thinking about your MOU or other formal agreement(s), does it include any provisions or language about:			
	1	Publication or authorship?	1. Yes 0. No	AGREE5	cp adapted from ORI web site
	2	Intellectual Property Agreements?		AGREE8	
	3	Data use/sharing?		AGREE10	
27		Does the publication or authorship agreement include:	<i>Show if: (AGREE5=1:[YES])</i>	AGREE6	Puneet
	1	Where the results will be presented and/or published	0. No	AGREE6A	
	2	How authorship is determined	1. Yes	AGREE6B	
	3	Who will have the final authority to approve presentations or publications	2. Don't know	AGREE6C	

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28		You have indicated the MOU or formal agreement includes a publication or authorship agreement. Who has the final authority to approve presentations or publications?	Open-ended <i>Show if: (AGREE 6C=1[YES])</i>	AGREE7	
29		Does the Intellectual Property Agreement include provisions or language about <b>knowledge that is protected from outside use</b> (e.g. traditional knowledge, medicines, stories)?	0. No 1. Yes 3. Don't know 4. Does not apply	AGREE9	cp adapted from ORI web site
30		In the data use/sharing agreement <b>who owns the data?</b> Please choose all that apply.	<i>Show if: (AGREE10 = 1:[Yes])</i>	AGREE10A	cp adapted from ORI web site
	1	The researcher	1. Yes 0. No	AGREE10A.RESEARCHER	
	2	The researcher's institution	1. Yes 0. No	AGREE10A.RES_INST	
	3	The community	1. Yes 0. No	AGREE10A.COMMUNI	
	4	Tribal government	1. Yes 0. No	AGREE10A.TRIB_GOV	
	5	Jointly owned by both community/tribe and university/research institution	1. Yes 0. No	AGREE10A.JOINTLY	
	6	Funder	1. Yes 0. No	AGREE10A.FUNDER	
	7	Data owned by no one	1. Yes 0. No	AGREE10A.NO_OWNER	
	8	Other governing body, <i>please describe</i>	1. Yes 0. No	AGREE10A.OTHER.	
8t	<i>Please describe</i>	open-ended	AGREE10A.OTHER.TEXT		
31		In the data use/sharing agreement, <b>do students have access to the data?</b>	0. No 1. Yes 2. Don't know 3 Does not apply	AGREE10B	
32		In the data use/sharing agreement, <b>is there information about the process for secondary data analysis?</b>	0. No 1. Yes 2. Don't know 3 Does not apply	AGREE10C	
33	1	Are there any <b>limitations</b> to the use of the data?	1. Yes 0. No	AGREE12	
	2t	Please briefly describe the limitations to the use of the data.	open-ended <i>Show if: (AGREE12=1:[YES])</i>	AGREE12A	
<b>E. CONCRETE OUTCOMES</b>					
34		Are there any papers in <b>press or published</b> about this project?	0. No 1. Yes 2. Don't know 3. Does not apply	OUTCOM1	
35		Has this project led to any <b>additional research or funding?</b>	0. No 1. Yes 2. Don't know 3. Does not apply	OUTCOM2	
36		Has [insert project name] developed any of its own evaluation instruments (formative, process, or outcome) or measures?	0. No 1. Yes 2. Don't know 3. Does not apply	OUTCOM3	BD, new item

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37		As a result of your study working with your community, have any IRB policies, procedures, or practices been <b>developed or revised</b> ? <i>Please choose all that apply.</i>		OUTCOM4	cp new measure
	1	Developed	1. Yes 0. No	OUTCOM4.DEVEL	
	2	Revised	1. Yes 0. No	OUTCOM4.REVISE	
	3	Neither	1. Yes 0. No	OUTCOM4.NEITHER	
<b>F. PARTNERSHIP ROLES</b>					
		<b>STEM:</b> Now we would like to ask a few questions about <u>partnership roles</u> .			
38		Thinking about the <u>extent to which the community partners have been, currently are, or will be involved</u> in the research, please choose one response for each research activity below.			
	1	Developing community-based theories of the problem or intervention	1. Community partners were/are <b>ACTIVELY ENGAGED</b> in this activity	PARTR1A	Rand, Khodyakov
	2	Grant proposal writing		PARTR1B	
	3	Background research	2. Community partners <b>CONSULTED</b> on this activity	PARTR1C	
	4	Choosing research methods		PARTR1D	
	5	Developing sampling procedures	3. Community partners <b>DID NOT/DO NOT</b> participate in this activity	PARTR1E	
	6	Recruiting study participants		PARTR1F	
	7	Implementing the intervention	4. Not at this stage of research	PARTR1G	
	8	Designing interview and/or survey questions		PARTR1H	
	9	Collecting primary data	5. Does not apply	PARTR1I	
	10	Analyzing collected data		PARTR1J	
	11	Interpreting study findings		PARTR1K	
	12	Writing reports and journal articles	PARTR1L		
	13	Giving presentations at meetings and conferences	PARTR1M		
<b>G. RELATIONAL DYNAMICS</b>					
39		Has this project had any <u>formal trainings or substantial discussions</u> about:		DYNAM1	
	1	Racism, sexism, and/or other forms of oppression	1. Not at all 2. To a small extent 3. To a moderate extent 4. To a great extent 5. To a very great extent	DYNAM1A	BD, new item
	2	Cultural sensitivity		DYNAM1B	
	3	Cultural humility		DYNAM1C	
	4	Community Based Participatory Research (CBPR)		DYNAM1D	
	5	Self & collective reflection		DYNAM1E	
	6	Privilege and power		DYNAM1F	
	7	Dialogue, listening, and mutual learning		DYNAM1G	
	8	Conflict resolution		DYNAM1H	
<b>H. DEMOGRAPHICS</b>					
		<b>STEM:</b> In this next section we will collect <u>demographic information</u> about members of the academic and community partnership.			
40	1	What is your role in the project?	1. Principal Investigator - Academic 2. Key personnel - Academic 3. Staff - Academic 4. Other 5. Principal Investigator-Community 6. Key personnel - Community 7. Staff - Community	ROLE1	NW, new item
	2t	You marked 'other' as your project role. What is your role project?	open-ended <i>Show if: (ROLE1=4:{OTHER})</i>	ROLE1_OT	

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41	1	What is your racial/ethnic origin?	1. American Indian 2. Alaska Native 3. Hispanic 4. Asian 5. Pacific Islander 6. White 7. Black 8. Mixed race 9. Some other race (if other race, please print the name of the race)	PIRACE1	BD,new item
	2t	(if other race, please print the name of the race)	open-ended _____	PIRACE1.TEXT	
42	1	How would you describe your gender?	0. Female 1. Male 2. Transgender 3. Other (if other gender, please specify)	GENDER	
	2t	If other gender, please specify	_____	GENDER.TEXT	
43	1	What is the racial/ethnic origin of the Principal Investigator of [insert project name]?	1. American Indian 2. Alaska Native 3. Hispanic 4. Asian 5. Pacific Islander 6. White 7. Black 8. Mixed race 9. Some other race  <i>Show if: (ROLE=2:[Key personnel - Academic]) or (ROLE1=3:[Staff - Academic]) or (ROLE1=4:[Other]) or (ROLE1=6:[Key Personnel - Community]) or (ROLE1=7:[Staff - Community])</i>	PIRACE2	BD,new item
	2t	(if other race, please print the name of the race)	open-ended _____	PIRACE2.TEXT	
44	1	How would you describe the gender of the Principal Investigator?	0. Female 1. Male 2. Transgender 3. Other (if other gender, please specify)	GENDERPI	
	2t	(if other gender, please specify)	open-ended _____	GENDERPI.TEXT	
45		How many <b>community agencies</b> are currently involved in [insert project name]?	_____ Agencies	PARTNE1	
46		How many people are <b>members of the community team</b> (include team members from all relevant agencies and independent community members)?	_____ Individuals	PARTNE2	
47		How many people are <b>members of the academic team</b> ?	_____ Individuals	PARTNE3	Rand, Khodyakov
48		<b>Gender</b>			
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> , approximately how many are: <i>Please indicate the number of individuals. Any space left blank will be considered a zero.</i>		DEMACA1	
	1	Female	_____ Individuals	DEMACA1A	
	2	Male	_____ Individuals	DEMACA1B	
	3	Transgender	_____ Individuals	DEMACA1C	

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Concept	Item	Survey Question	Response	Var label	Reference
49		<b>Race/ethnicity</b>			
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> , approximately how many are: <i>Please indicate the number of individuals.</i>		DEMACA2	
	1	American Indian or Alaska Native	_____ Individuals	DEMACA2A	
	2	Black or African American	_____ Individuals	DEMACA2B	
	3	Native Hawaiian or Other Pacific Islander	_____ Individuals	DEMACA2C	
	4	Asian	_____ Individuals	DEMACA2D	
	5	White or Caucasian	_____ Individuals	DEMACA2E	
	6	Hispanic and Latino	_____ Individuals	DEMACA2F	
	7	Mixed race	_____ Individuals	DEMACA2G	
50		<b>Location</b>			
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> approximately how many: <i>Please indicate the number of individuals.</i>		DEMACA3	
	1	Reside in a rural area	_____ Individuals	DEMACA3A	
	2	Reside in urban area	_____ Individuals	DEMACA3B	
51		<b>Disabilities</b>			
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMACA4	
		People with disabilities	_____ Individuals	DEMACA4A	
52		<b>Sexual Orientation</b>			
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMACA5	
		Lesbian, gay, bisexual, transgender, queer, two-spirit, or intersex	_____ Individuals	DEMACA5A	
53		<b>International Status</b>			
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMACA6	
		Refugee or foreign-born	_____ Individuals	DEMACA6A	
54		<b>Age</b>			
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMACA7	
		Youth and young adults	_____ Individuals	DEMACA7A	
55		<b>Gender</b>			
		To your best estimate, of the (insert number of community team members) <b>community team members</b> approximately how many are: <i>Please indicate the number of individuals. Any space left blank will be considered a zero.</i>		DEMCOM1	
	1	Female	_____ Individuals	DEMCOM1A	
	2	Male	_____ Individuals	DEMCOM1B	
	3	Transgender	_____ Individuals	DEMCOM1C	

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56		<b>Race/ethnicity</b>				
		To your best estimate, of the (insert number of community team members) <b>community team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMCOM2		
	1	American Indian or Alaska Native	_____ Individuals	DEMCOM2A		
	2	Black or African American	_____ Individuals	DEMCOM2B		
	3	Native Hawaiian or other Pacific Islander	_____ Individuals	DEMCOM2C		
	4	Asian	_____ Individuals	DEMCOM2D		
	5	White or Caucasian	_____ Individuals	DEMCOM2E		
	6	Hispanic or Latino	_____ Individuals	DEMCOM2F		
	7	Mixed race	_____ Individuals	DEMCOM2G		
57		<b>Location</b>				
		To your best estimate, of the (insert number of community team members) <b>community team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMCOM3		
	1	Reside in a rural area	_____ Individuals	DEMCOM3A		
	2	Reside in urban area	_____ Individuals	DEMCOM3B		
		<b>Disabilities</b>				
	To your best estimate, of the (insert number of community team members) <b>community team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMCOM4			
	People with disabilities	_____ Individuals	DEMCOM4A			
58		<b>Sexual Orientation</b>				
		To your best estimate, of the (insert number of community team members) <b>community team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMCOM5		
	Lesbian, gay, bisexual, transgender, queer, two-spirit, or intersex	_____ Individuals	DEMCOM5A			
69		<b>International Status</b>				
		To your best estimate, of the (insert number of community team members) <b>community team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMCOM6		
	Refugee or foreign-born	_____ Individuals	DEMCOM6A			
60		<b>Age</b>				
		To your best estimate, of the (insert number of academic team members) <b>academic team members</b> approximately how many are: <i>Please indicate the number of individuals.</i>		DEMCOM7		
	Youth and young adults	_____ Individuals	DEMCOM7A			
<b>I. PARTNER CONTACTS</b>						
		<p><b>STEM:</b> The second part of this survey will include academic and community partners. Please give us the names, phone numbers, and email addresses <b>of at least two and up to three</b> active and/or engaged <b>community team partner</b> and <b>one other academic team partner or lead agency key personnel</b>. Two community partners and one academic partner will receive the survey, the third community partner will serve as an alternate. For purposes of this survey, please only include partners who <b>can read in English</b> and <b>have access to email</b>.</p> <p>The information you provide is for research purpose only and <b>will not be shared or disclosed</b> to ANY other entities outside the research team and funding agency. Your community and academic partners will each receive \$20 for completing the second part of this survey.</p>				
		<p>If your partners' contact information is not readily available, you can simply close this survey window and retrieve the information. When you are ready to return to the survey, log in using the survey link and PIN sent to you.</p> <p><b>To copy and paste contact information directly into the survey:</b>  <b>Mac users:</b> COMMAND + C (copy) and COMMAND + V (paste)  <b>PC users:</b> CTRL + C (copy) and CTRL + V (paste)</p>				



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61		<b>Contact information for one Academic Partner</b>		APAR	
		Unique CUSTOMID system-generated		APARID	
		First name of your Academic partner in [insert partnership name]	open-ended	APARA	
		Last name of your academic partner in [insert partnership name]	open-ended	APARB	
		Agency name of Academic partner in [insert partnership name]	open-ended	APARC	
		Email of your Academic partner in [insert partnership name]	open-ended	APARD	
		Second Email (if available) of your Academic partner in [insert partnership name]	open-ended	APARE	
		Phone of your Academic partner in [insert partnership name]	open-ended	APARF	
		Mailing street address of your Academic partner in [insert partnership name]	open-ended	APARG	
		City of your Academic partner in [insert partnership name]	open-ended	APARH	
		State of your Academic partner in [insert partnership name]	open-ended	APARI	
	Zip of your Academic partner in [insert partnership name]	open-ended	APARJ		
62		<b>Contact information for Community Partner 1</b>			
		Unique CUSTOMID system-generated		CARP1ID	
		First name of your Community partner 1 in [insert partnership name]	open-ended	CPART1A	
		Last name of your community partner 1 [insert partnership name]	open-ended	CPART1B	
		Agency Name of Community Partner 1 in [insert partnership name]	open-ended	CPART1C	
		Email of your Community partner 1 in [insert partnership name]	open-ended	CPART1D	
		Second email (if available) of your Community partner 1 in [insert partnership name]	open-ended	CPART1E	
		Phone of your Community partner 1 in [insert partnership name]	open-ended	CPART1F	
		Mailing street address of your Community partner 1 in [insert partnership name]	open-ended	CPART1G	
		City of your Community partner 1 in [insert partnership name]	open-ended	CPART1H	
		State of your Community partner 1 in [insert partnership name]	open-ended	CPART1I	
	Zip of your Community partner 1 in [insert partnership name]	open-ended	CPART1J		
63		<b>Contact information for Community Partner 2</b>			
		Unique CUSTOMID system-generated		CARP2ID	
		First name of your Community partner 2 in [insert partnership name]	open-ended	CPART2A	
		Last name of your community partner 2 [insert partnership name]	open-ended	CPART2B	
		Agency Name of Community Partner 2 in [insert partnership name]	open-ended	CPART2C	
		Email of your Community partner 2 in [insert partnership name]	open-ended	CPART2D	
		Second Email (if available) of your Community partner 2 in [insert partnership name]	open-ended	CPART2E	
		Phone of your Community partner 2 in [insert partnership name]	open-ended	CPART2F	
		Mailing street address of your Community partner 2 in [insert partnership name]	open-ended	CPART2G	
		City of your Community partner 2 in [insert partnership name]	open-ended	CPART2H	
		State of your Community partner 2 in [insert partnership name]	open-ended	CPART2I	
	Zip of your Community partner 2 in [insert partnership name]	open-ended	CPART2J		
64		Just in case one of the two community partners you have recommended does not respond to the second survey, we would like contact information for a third <b>alternate</b> community partner. Does you have a third community partner in [insert name of project]?	0. No, I <b>DO NOT</b> have a third community partner 1. <b>Yes, I have</b> contact information for a third community partner	CPART3Y_N	
65		<b>Contact information for Community Partner 3</b>	<i>Show if: (CPART3Y_N=1:[Yes, I have contact information for a third community partner])</i>		
		Unique CUSTOMID system-generated		CARP3ID	
		First name of your Community partner 3 in [insert partnership name]	open-ended	CPART3A	
		Last name of your community partner 3 [insert partnership name]	open-ended	CPART3B	
		Agency Name of Community Partner 3 in [insert partnership name]	open-ended	CPART3C	
		Email of your Community partner 3 in [insert partnership name]	open-ended	CPART3D	
		Second Email (if available) of your Community partner 3 in [insert partnership name]	open-ended	CPART3E	
		Phone of your Community partner 3 in [insert partnership name]	open-ended	CPART3F	
		Mailing street address of your Community partner 3 in [insert partnership name]	open-ended	CPART3G	
		City of your Community partner 3 in [insert partnership name]	open-ended	CPART3H	
		State of your Community partner 3 in [insert partnership name]	open-ended	CPART3I	
	Zip of your Community partner 3 in [insert partnership name]	open-ended	CPART3J		

# RIH Key Informant Survey Instrument/Data Matrix

Concept	Item	Survey Question	Response	Var label	Reference
66		<p>There are other Principal Investigators or key personnel who also could not provide contact information for their academic research partners. We would like to know more: can you tell us why you are unable to provide this information?</p> <p><i>Show if: ((APARA was-not-answered) and (APARB was-not-answered) and (APARC was-not-answered) and (APARD was-not-answered) and (APARE was-not-answered) and (APARF was-not-answered) and (APARG was-not-answered) and (APARH was-not-answered) and (APARI was-not-answered) and (APARJ was-not-answered)) and (((CPAR1A was-answered) or (CPAR1B was-answered) or (CPAR1C was-answered) or (CPAR1D was-answered) or (CPAR1E was-answered) or (CPAR1F was-answered) or (CPAR1H was-answered) or (CPAR1I was-answered) or (CPAR1J was-answered)) and ((CPAR2A was-answered) or (CPAR2B was-answered) or (CPAR2C was-answered) or (CPAR2D was-answered) or (CPAR2E was-answered) or (CPAR2F was-answered) or (CPAR2G was-answered) or (CPAR2H was-answered) or (CPAR2I was-answered) or (CPAR2J was-answered))) or ((CPAR1A was-answered) or (CPAR1B was-answered) or (CPAR1C was-answered) or (CPAR1D was-answered) or (CPAR1E was-answered) or (CPAR1F was-answered) or (CPAR1H was-answered) or (CPAR1I was-answered) or (CPAR1J was-answered)) or ((CPAR2A was-answered) or (CPAR2B was-answered) or (CPAR2C was-answered) or (CPAR2D was-answered) or (CPAR2E was-answered) or (CPAR2F was-answered) or (CPAR2G was-answered) or (CPAR2H was-answered) or (CPAR2I was-answered) or (CPAR2J was-answered)))</i></p>	<p>open-ended (See show if condition in the left column.)</p>	<p>NO_PARTNERA (Same sequence for: NO_PARTNERB, PARTNERC, the var name paths just need to be adjusted accordingly.)</p>	
67		<p>As we mentioned earlier, this is a two-part survey. You have the option of continuing on with the second part of the survey now (survey part 2 will take 30 minutes to complete), or of being reminded to complete the second part in a few days. You will receive an additional \$20 for completing the second part of the survey.</p>	<p>1. Continue with part two now 2. Receive a reminder in a few days about completing part two</p>	PARTTWO	
		<p><b>Thank you for participating in the Research for Improved Health: A National Study of Community-Academic Partnerships survey.</b></p>			