

Thank you for your interest in taking part in this survey. Within the Collaboration for Evidence-based Healthcare and Public Health in Africa (CEBHA+), researchers and stakeholders collaborate on research projects to inform decision-making in healthcare and public health policy-and-practice. The purpose of this survey is to learn more about your experiences as a CEBHA+ partner in order to improve this engagement further - for both the researchers involved and the stakeholders from the policy-and-practice community.

This survey consists of 32 questions and statements about your engagement with CEBHA+. For each item, please respond by checking the option that best fits your experience and opinion. Please complete all questions. If a question does not apply, you can indicate this by checking the option "not applicable".

A "resume later" option is available if you want to pause the survey and save your answers.

We realise that the current situation may have a significant impact on both the content of your daily work, and current ways of working. Therefore, please refer to your experiences <u>before</u> the SARS-CoV-2 pandemic, when answering the questions.

If you have any questions, please contact the lead researcher: Kerstin Sell, MD MSc Pettenkofer School of Public Health LMU Munich email: ksell@ibe.med.uni-muenchen.de

Section A: Consent

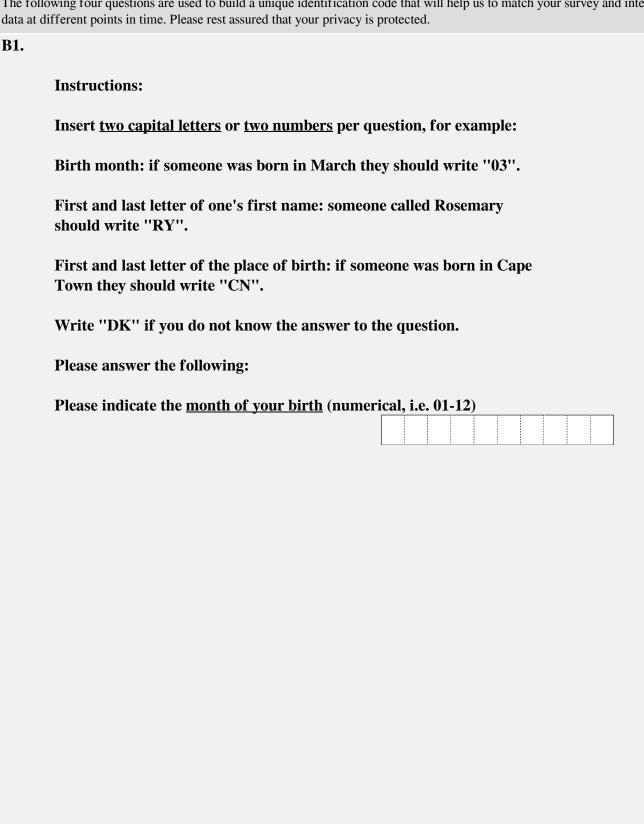
A1. Your participation in this research is entirely voluntary. We will ask you to create an individual ID code to be used in this survey as well as in a subsequent survey in approximately 2.5 years. Apart from the individual ID code, your opinion and some demographic information, we will not ask you to provide any personal data such as your name or date of birth. Your information will be collected and analyzed in a pseudononymous form so it will not be possible for anyone to retrace what you have stated. This also applies to any reports or scientific publications resulting from this research. We will securely store collected data on an institutional storage provided by the LMU Munich in compliance with EU data protection regulations. We respect your trust and protect your privacy and will never share data with third parties.

I have read the above information and I consent voluntarily to be a participant in this survey. I agree with the collection and use of personal data and findings in accordance with the participant information.	
I do not want to participate in the study.	



Section B: Unique identification code

The following four questions are used to build a unique identification code that will help us to match your survey and interview



B2.	
	Instructions:
	Insert two capital letters or two numbers per question, for example:
	Birth month: if someone was born in March they should write "03".
	First and last letter of one's first name: someone called Rosemary should write "RY".
	First and last letter of the place of birth: if someone was born in Cape Town they should write "CN".
	Write "DK" if you do not know the answer to the question.
	Please answer the following:
	Please state the <u>first</u> and <u>last</u> letter of your own <u>first name</u> (<u>not</u> your initials)

В3.	
	Instructions:
	Insert two capital letters or two numbers per question, for example:
	Birth month: if someone was born in March they should write "03".
	First and last letter of one's first name: someone called Rosemary should write "RY".
	First and last letter of the place of birth: if someone was born in Cape Town they should write "CN".
	Write "DK" if you do not know the answer to the question.
	Please answer the following:
	Please state the <u>first</u> and <u>last</u> letter of your place of birth (city or
	village)



			
B4.			
	Instructions:		
	Insert two capital letters or two numbers per question, for example:		
	Birth month: if someone was born in March they should write "03".		
	First and last letter of one's first name: someone called Rosemary should write "RY".		
	First and last letter of the place of birth: if someone was born in Cape Town they should write "CN".		
	Write "DK" if you do not know the answer to the question.		
	Please answer the following:		
	Please state the <u>first</u> and <u>last</u> letter of your mother's name		
Sect	tion C: Demographic survey		
C1.	Which country do you represent in the CEBHA+ partnership?		
	Ethiopia	<u></u>	
	Uganda	<u></u>	
	Rwanda		
	Malawi South Africa		
	South Africa Other or multiple countries (please specify):		
	Other or multiple countries (please specify):		



C2.	What is your age?	
.	18 - 24 years	
	25 - 34 years	
	35 - 44 years	
	45 - 54 years	
	55 - 64 years	
	65 years and over	
C3.	What is your gender?	
	Female	
	Male	
	I prefer not to say	
	Other gender:	
	Other gender:	
C4.	What is the <u>highest degree</u> or level of schooling you have completed?	
C4.	What is the <u>highest degree</u> or level of schooling you have completed? Some high school, no degree	
C4.		
C4.	Some high school, no degree	
C4.	Some high school, no degree High school degree or equivalent	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training Associate degree (e.g. AA, AS)	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training Associate degree (e.g. AA, AS) Bachelor's degree (e.g. BA, BSc, BSN)	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training Associate degree (e.g. AA, AS) Bachelor's degree (e.g. BA, BSc, BSN) Master's degree (e.g. MA, MSc, MSN)	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training Associate degree (e.g. AA, AS) Bachelor's degree (e.g. BA, BSc, BSN) Master's degree (e.g. MA, MSc, MSN) Professional degree (e.g. MD, DDS, DVM)	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training Associate degree (e.g. AA, AS) Bachelor's degree (e.g. BA, BSc, BSN) Master's degree (e.g. MA, MSc, MSN) Professional degree (e.g. MD, DDS, DVM) Doctorate degree (e.g. PhD, EdD)	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training Associate degree (e.g. AA, AS) Bachelor's degree (e.g. BA, BSc, BSN) Master's degree (e.g. MA, MSc, MSN) Professional degree (e.g. MD, DDS, DVM) Doctorate degree (e.g. PhD, EdD) Other (please specify)	
C4.	Some high school, no degree High school degree or equivalent Some college credit, no degree Trade/technical/vocational training Associate degree (e.g. AA, AS) Bachelor's degree (e.g. BA, BSc, BSN) Master's degree (e.g. MA, MSc, MSN) Professional degree (e.g. MD, DDS, DVM) Doctorate degree (e.g. PhD, EdD) Other (please specify)	



C5.	In which field did you receive this degree? (e.g. medicine, public health, political science, psychology, economics etc.)		
C6.	Which is the <u>main organisation</u> you represent in this partnership?		
	Academic university		
	Government department, agency or ministry		
	Regional or local health authority or equivalent		
	Research institute (not within a university)		
	Other (please specify)		
	Other (please specify)		
C7.	How long have you been employed in the <u>same department</u> within this		
	organisation? (e.g. NCD department)		
	one year or less		
	2 or 3 years		
	4 or 5 years		
	6 - 10 years		
	11 - 15 years more than 15 years		
C8.	How many years of professional experience do you have in your		
	current field/discipline?		
	5 years or less		
	6 - 10 years		
	11 - 15 years		
	more than 15 years		



C9.	C9. How long have you been actively engaged with CEBHA+?		
		0 - 6 months	
		6 - 12 months	
		13 - 24 months	
		more than 24 months	
C10.	To your knowledge, have any research output the entire CEBHA+ research consortium (for newsletters, scientific publications, reports, is language summaries, conference presentation	example electronic esue briefs, plain-	
		Yes Not yet	
Secti	on D: Frequency of Engagement		
The follo	wing questions cover the frequency of your engagement witty.	th CEBHA+ partners from the policy-and-practice	
Please ref	fer to your experiences from before the SARS-CoV-2 pand	emic, when answering the questions in this survey.	
D1.	Frequency of collaborative engagement		
		Never times times for I don't know	
	ten have you met CEBHA+ partners from the policy-and- tice community in person (e.g. at conferences, workshops, local meetings etc.)?		
D2.	In which of the following ways have you been partners from the policy-and-practice commu and how often were you involved? How often have you		
	now often have you	1 - 5 6 - 10 more than I don't	
com	municated with CEBHA+ decision-makers on the phone? (including skype, zoom calls and GoToMeetings)	Never times times 10 times know	
reac	thed out to CEBHA+ decision-makers via email to discuss the ongoing research project?		
beer	a contacted by CEBHA+ decision-makers for some expert advice or referral to other experts?		
i	nteracted with CEBHA+ decision-makers on social media (twitter, facebook, instagram etc)?		
in	teracted with CEBHA+ decision-makers using messenger services (whatsapp, threema, signal etc.)?		



circulated (electronic) newsletters or other updates (via mail, print material etc.)?	6 - 10 more than I don't times 10 times know
Section E: Individual characteristics	
E1. This section covers <u>your general perceptions</u> regarding the research evidence in the policy-and-practice community.	use of
Please refer to your experiences from before the SARS-CoV pandemic.	V- 2
Do you agree or disagree with the following statements?	
	I don't know/not
	I agree I disagree applicable
Policy- and decision-makers show little regard for the value of evidence.	
Policy- and decision-makers have the expertise for acquiring, assessing quality and local applicability of research evidence, and applying it in health policy-making.	
Policy- and decision-makers do not use scientific evidence in the policymaking process even when it is provided to them.	
Policy- and decision-makers clearly articulate priorities for health systems and policy research.	
Policy formulation is usually based on internal discussions in the Ministry of Health, donor preferences, and impromptu processes rather than evidence-based processes.	
There is insufficient information about how health policies are being developed.	
E2. The following questions cover your personal views regarding engagement within the CEBHA+ project. On an <u>individual level</u> , do you agree or disagree with the following teachers?	
statements.	I don't
	know/not I agree I disagree applicable
I have enough time to engage in the CEBHA+ research partnership.	
Based on my skills and knowledge, I feel confident in engaging in research partnerships like CEBHA+.	
I am committed to the collaborative engagement with decision-makers from the policy-and-practice community within CEBHA+.	
Engaging in mutually beneficial research partnerships to support decision-making makes sense to me.	
In research partnerships prior to CEBHA+ I have had predominantly good experiences.	



Secti	ion F: Context: barriers & facilitators		
collabora	llowing section, we would like to hear about potential barriers and facilitators you have faced with ative engagement within CEBHA+ (that is the <u>partnership component</u> beyond your research work, ration and planning etc).	_	
Please re	Please refer to your experiences from before the SARS-CoV-2 pandemic.		
F1.	Within your organisation, have you encountered any <u>facilitators</u> with respect to your engagement with CEBHA+ partners from the policy-and-practice community (i.e. factors that made it easier to engage with them)?		
	If so, please indicate the three most relevant facilitators.		
	please check the three most releve sufficient financial resources	ant factors	
	adequate training/education		
	organisational/administrative or supervisor support		
	sufficient physical space (e.g. meeting rooms etc)		
	enough time to engage		
	incentives for engagement		
	a clear vision		
	motivation for the engagement		
	continuous staff involvement		
	other (please specify):		
	other (please specify):	•	
F2.	<u>Within your organisation</u> , have you encountered any <u>barriers</u> with respect to your engagement with CEBHA+ partners from the policy-and-practice community (i.e. factors that made it more difficult to engage with them)?		
	If so, please indicate the three most relevant barriers.		
	please check the three most releva-	ant factors	
	lack of training/education		
	lack of training/education		



	lack of organisational/administrative or su	upervisor support	
	lack	of physical space	
		lack of time	
	1	ack of incentives	
	lack	of a clear vision	
	Iz	ack of motivation	
	lack o	of staff continuity	
	other	(please specify):	
	other (please specify):		
F3.	Among the research and practice partners in the <u>CEBHA+</u> 1		I don't
		Yes No	know
role	es and responsibilities are communicated explicitly and clearly among partners.		
	expectations regarding the research partnership are explicit and clear to all partners.		
	project goals and deliverables are explicit and clear to all partners.		
F4.	The research findings from CEBHA+ were presented to stakeholders		
		Yes No	I don't know
	in a format suitable for policy-and/or-practice partners.		
	in a language suitable for policy-and/or-practice partners.		
	in a timely manner.		



Section G: Capacity building			
G1.	Please refer to your experiences from before pandemic, when answering the questions.	the SARS-CoV-2	
	Being part of this research partnership Please check	the answer option that fits your experience and opinion best.	
		not at all not really undecided somewhat much	
	improved my access to up-to-date information relevant to my research.		
	$ improved \ my \ access \ to \ contacts \ who \ I \ reach \ out \ to \ obtain \\ information \ that \ is \ relevant \ to \ my \ work.$		
	increased my personal knowledge or understanding about the health issues addressed in CEBHA+.		
	changed my beliefs/understanding with respect to an intervention, a topic, or a group of people.		
	confirmed my views about the importance of the health issues addressed.		
i	increased my confidence in my professional practice or day-to- day activities.		
G2 .	Being part of this partnership in CEBHA+		
	Please check	the answer option that fits your experience and opinion best.	
		not at all not really undecided somewhat much	
	helped increase my skills in developing research questions.		
	increased my receptiveness to new ideas or evidence.		
	improved my ability to know how to find or access relevant research information.		
	enhanced my personal ability or confidence to conduct a research activity.		
	provided me with an opportunity for professional or personal evelopment (e.g. building research skills or enhancing statistics skills etc).		
	led me to pursue different activities to develop my research skills (e.g. attending a course).		
G3.	As a result of my partnership with CEBHA+ taking part in similar engagement activities i		
	(e.g. partner with stakeholders to interpret re in new research partnerships)	esearch findings, engage	
		I agree	
		I disagree	
		I don't know/not applicable	



Section H: Relationship building					
H1. This section covers the relationship between researchers and their partners from the policy-and-practice community.					
	Please refer to your experiences from before the SARS-CoV-2 pandemic.				
	Within CEBHA+	Please check all that apply			
	a common language is used by all parties (i.e. terminology, common	n definitions etc).			
	partners make their needs and co	nstraints explicit.			
	communic	ation is frequent.			
	I am able to express	my views freely.			
	I feel that my	views are heard.			
	the respective organisational realities of research partners are	being discussed.			
	the collaborating partners	s trust each other.			
Sect	ion I: Collaborative research				
I1.	The following questions cover the <u>degree of collaboration</u> be researchers and partners from the policy-and-practice comme				
	Please refer to your experiences from before the SARS-CoV pandemic.	7-2			
	Within the CEBHA+ research partnership, partners from reand practice in your country jointly If the research project did not reach the respective states.				
		Not Yes No applicable			
	identified the research questions.	applicable			
	designed the research protocols.				
	conducted data collection.				
	analysed data.				
ev	valuated the relevance of research (e.g. of the current project, of new findings etc).				
	discussed the findings and implications.				



12.	Within the CEBHA+ partnership, do you agree or disagree following statements?	with the
		I don't know/not I agree I disagree applicable
	The individuals involved represent a broad range of perspectives.	
CEI	BHA+ partners in the policy-and-practice community value my contributions.	
	All partners, i.e. CEBHA+ researchers and actively involved stakeholders, are owledged in CEBHA+ project documents (e.g. reports, posters, publications).	
	ollaboration between stakeholders and researchers in CEBHA+ added value to the ongoing research.	
Sect	ion J: Intermediate outcomes	
J1.	This section covers outcomes of the CEBHA+ partnership.	
	Do you agree or disagree with the following statements?	
	Please refer to your experiences from before the SARS-CoV pandemic.	'-2
	The research evidence produced in CEBHA+	
		I don't know/not I agree I disagree applicable
	is relevant to the health issues addressed by the partnership.	
	is directly applicable.	
	is trustworthy.	
Sect	ion K: Uptake	
K1.	The last question is on the broader impact of your engagement CEBHA+.	ent in
	Please refer to your experiences from before the SARS-CoV pandemic.	7-2
	From my experience, compared to research projects <u>without</u> and-practice partnership, the research evidence produced in CEBHA+ is	2 4
		I don't know/not I agree I disagree applicable
	more likely to be used in healthcare/public health decision-making.	
	more likely to have a lasting impact on public health.	



K2.	Do you have any other thoughts or comments with respect to your engagement in CEBHA+ that you would like to share?
	How has your engagement with CEBHA+ stakeholders changed during the SARS-CoV-2 pandemic? Have you had to pause the engagement or have you been working with some stakeholders on pandemic-related work?
	Thank you for your participation!
	If you have any questions, please contact the lead researcher:
	Kerstin Sell, MD MSc Pettenkofer School of Public Health LMU Munich
	email: ksell@ibe.med.uni-muenchen.de