Supplementary Material UMBiobank Survey

0	1	-3

	Yes	No	Unsure
1. Do you feel like you understand what you just heard?	•	•	O
2. Do you think you would be willing to join the UMBiobank?	•	•	O
3. Would you want University of Maryland deciding how your blood	•	•	O
samples and clinical information are used in research?			

Q4-11 Please show how comfortable you are with the UMBiobank using your samples and different kinds of information:

	Comfortable with the UMBiobank using	Neither comfortable nor uncomfortable with the UMBiobank using	Uncomfortable with the UMBiobank using
4. Your blood samples	O	0	O
5. Your age	O	O	O
6. Your gender	O	O	O
7. Your ethnic group	O	O	O
8. Your previous illnesses and diagnoses	0	O	0
9. Your test results (e.g., any lab results, x-rays)	0	O	0
10. Your previous treatments (e.g., medications)	0	0	0
11. Your genetic information or genetic test results	•	O	O

Q12-16 Please show how your willingness to join the UMBiobank would change if:

	I would be more willing to join the UMBiobank	No change	I would be less willing to join the UMBiobank
12. Members of my community have a role in making decisions about the biobank.	•	0	O
13. There are chances to be updated regularly about the biobank (e.g., press releases, website updates).	•	0	0
14. There are chances to learn more about the biobank (e.g., educational material).	•	0	0
15. Concerns of my community are put first.	O	•	O
16. Members of my community are leading biobank research.	0	O	O

Q17-21 Some people may have concerns about participating in a biobank. Please indicate your level of concern with the following:

	Concerned	Neither concerned nor unconcerned	Not concerned
17. Researchers having my samples	O	O	•
and information.			
18. Keeping my information private.	O	O	O
19. Information stored in the biobank	O	O	•
being used against me.			
20. Feeling like a guinea pig.	O	O	O
21. Information stored in the biobank	O	O	•
being used to discriminate against			
people by race or ethnicity.			

Q22-29 Please show if you agree or disagree with the following statements:

	Agree	Neither agree nor disagree	Disagree
22. It is important that my blood sample be used	O	O	O
in research that could improve my own health.			
23. It is important that my blood sample be used	O	O	O
in research that will not affect my own health,			
but could improve the health of people I love.			
24. It is important that my blood sample be used	O	O	O
in research that will not affect my own health, or			
the health of people I love, but could improve			
the health of others of the same race or ethnicity.			
25. It is important that my blood sample be used	•	O	O
in research that will not affect my own health, or			
the health of people I love, but could improve			
the health of others in general.			
26. Medical researchers care only about what is	•	O	O
best for each patient.			
27. Medical researchers tell patients everything	•	O	O
they need to know about being in a research			
study.			
28. Medical researchers treat people like	•	•	O
"guinea pigs."			
29. I completely trust doctors who do medical	O	O	O
research.			

Please answer the following questions about your background: Q30 What is your gender? O Male O Female O Other O Prefer not to say Q31 What is your ethnic background? O Hispanic or Latino O Non-Hispanic O Prefer not to say Q32 What is your race? O Black or African American O White or Caucasian O American Indian or Alaska Native O Hawaiian or Pacific Islander O Asian or Asian American O Prefer not to say Q33 How old are you? O 18-29 years old O 30-44 years old O 45-59 years old O >60 years old Q34 What is your highest level of education? O Less than high school • High school graduate or GED O Some college O Bachelor's degree O Graduate or professional degree Q35 Do you have children (biological and/or adopted/step/foster)? O Yes O No

Q36 Have you ever donated blood?
O Yes
O No
O I tried, but was not accepted
Q37 Have any of your 1st degree relatives (parents, siblings, children) been affected by a major illness?
O Yes
O No
O Unsure

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