



**We invite you to participate in a survey titled "RESET large-scale Gender Equality study". RESET - "Redesigning Equality and Scientific Excellence Together" is a European Commission funded project aiming to put gender equality and diversity at the heart of scientific and academic policy-making.**

**The purpose of this study is to evaluate and analyse gender related inequalities with an application of interdisciplinary approach.**

**This survey is anonymous. It will be filled online and it takes approximately xx minutes. You are able to interrupt it and resume at any moment.**

**Before making your decision to participate in this project, we ask you to read survey data policy. You are free to accept or refuse to participate in this survey. You can withdraw your consent at any time without incurring any liability or prejudice as a result.**



## **Section A: CONSENT FORM FOR THE COLLECTION OF PERSONAL DATA and PARTICIPATION IN THE RESET LARGE-SCALE SURVEY**

I was offered the opportunity to participate in a survey about Gender Equality in Higher Education Institutions organized in the context of the European project RESET - Redesigning Equality and Scientific Excellence Together. At University of partner name this project is under the responsibility of Mrs./Mr. XXX

In order to make my decision, I consulted an information sheet providing details on the objectives and modalities of this participation. I understood this information and I had the time and opportunity to ask any questions I wanted.

If any questions or problems arise at any time during my participation, I may contact the team responsible for the research whose contact details are provided in the information letter. I am informed that this survey aims to enable production of statistical data, and helps to evaluate the state of arts in terms of gender inequalities, as well as to improve actions correcting gender inequalities by the means of a Gender Equality Plan.

The data collected present a personal data processing, which is a subject of as such to the European provisions contained in the General Data Protection Regulation of April 27, 2016 (GDPR) and to national legislation on personal data protection.

The questionnaire's analysis will be conducted in accordance with the *French / Polish / Portuguese / Greek* and European legislation in force, it follows the GDPR and it has received a favorable opinion from the Ethics Committee of the *University of Bordeaux / Porto / Lodz / Thessaloniki*.

The University of XXX situated in XXX is the Data Processing Controller, in accordance with the principles of personal data protection established by the GDPR of the European Union, (EU 2016/679).

The purposes of the processing are recalled in the information sheet document.

I am informed that due to the complete anonymization of my data, my right to withdraw the consent to participate in this research at any time for any reason may be limited.

My consent in no way exonerates the responsibility of those responsible for this research.

By clicking on the button at the bottom of this form, I declare that I have read the detailed information sheet, have been informed of the objectives of the RESET survey, the terms of my participation, freely consent to participate and accept the processing of my personal data under the conditions and for the purposes listed above. This consent is valid for as long as the project lasts and will be archived for 5 year after the end of the project (for scientific/reporting purposes).

**A1. I accept that the data collected via this survey may be subject to computer processing by the local research team of the University XXX and the University of AUTH after the secure transfer within the EU and that confidentiality of these data is ensured. I am informed that a summary of the data retrieved through this questionnaire may be used in scientific and academic texts and communications and that my identity is not revealed.**

Yes

No





Hourly paid contract

Zero hours contract

Contract for service

Third party funded fellowship

Other. Please specify

Other. Please specify

**B6. Your employment contract with the University is:**

Exclusive

Non-exclusive

**B7. What is your main scientific field of work? (If you work in more than one field, please select the one that takes most of your working hours)**

Education

Arts and Humanities

Social Sciences, Journalism and Information

Business, Administration and Law

Natural Sciences, Mathematics and Statistics

Information and Communication Technologies

Engineering, Manufacturing and Construction

Agriculture, Forestry, Fisheries and Veterinary

Health and Welfare

Services

**B8. What percentage of your working time do you currently spend in each of the following areas? (Your answer should total 100%)**

*If any of these activities are not applicable to you, please select "0".*

Teaching

Research (including postgraduate supervision)

Academic administration

Knowledge transfer (e.g. Consultancy)



Decision-making boards (e.g. [examples to be described by institutions])

Other

## Section C: 1. Current employment

**C1. Below, you can find statements that academics often use to describe their experiences at their workplace. Please tell us to what extent do you agree or disagree with each statement.**

	Strongly disagree	Disagree	Neither disagree or agree	Agree	Strongly agree	Not applicable
I constantly feel under scrutiny by my colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel able to express my opinions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that my contribution to the unit/faculty is valued	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel my preferences are not heard in relation to my research interests and career choices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My colleagues always seek my opinions on research ideas and problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that I do not 'fit in' easily at my unit/faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I work harder than my colleagues do, in order to be perceived as a legitimate scholar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I seldom have the opportunity to participate in important committees/meetings/projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have received encouragement from other colleagues to apply for a promotion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am reluctant to bring up issues that concern me for fear that it will affect my career/promotion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are many unwritten rules concerning how one is expected to interact with colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My work environment is a considerable source of personal tension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Section D: 2. Career history and aspirations

**D1. Below you will find common ways of accessing academic positions. Please, select the ones that best describe how you got your current job. (please select all that apply)**

A call was advertised, and I have applied

One of my professors/my supervisors offered me the position

I have friends/acquaintances in the academia who have recommended me for the position

I heard about the opportunity from my social network and applied





**D4. Now, considering negative impacts, please rate how each of the following items applies to your experience.**

	Never	Rarely	Sometimes	Frequently	Very frequently	Not applicable
Instability of work contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Difficult relationships with colleagues and/or hierarchical superiors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of resources (financial, material, etc.) to do research/develop my work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exclusion from or difficulty in accessing informal networks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Too much centrality given to metrics and bibliometric indicators in performance evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overload of bureaucratic/administrative work and/or poor secretarial support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overload of teaching work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Limited opportunities for career progression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of support for professional/career development by the University (training, mentoring/career guidance, mobility grants, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Difficulties conciliating professional and family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of family support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not being available to work overtime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal choices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**D5. Do you currently hold, or have you ever held a senior management position in this University?**

Yes

No

**D6. How did you get that position?**

I was encouraged to apply for the position

I have decided myself to run

I was nominated/elected for the position

Other. Please specify

Other. Please specify



**D7. Why have you never held such position?**

I have no interest in the position

I wanted but someone else was nominated/elected

I am still not senior enough for such positions

I feel that it isn't attainable

I feel I lack the necessary skills for that position

I have never thought about it

Other. Please specify

Other. Please specify

**D8. Do you expect to achieve a senior management position in the future?**

Yes

No

**D9. Why do you feel you will not achieve a senior management position in the future?**

I have no interest in such a position

I feel that it is not attainable

I feel I lack the necessary skills for that position

I Never thought about it

I prefer not to answer

Other. Please specify

Other. Please specify









## Section F: 4. Work-life balance

### F1. Thinking about the balance between your professional and personal/family life, please tell us how often do you...Before 2020

	Never	Rarely	Sometimes	Frequently	Very frequently
...keep worrying about work problems when you are not working?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...feel too tired after work to enjoy the things you would like to do at home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find that your job prevents you from using the time you want to your partner or family ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find that your partner or family gets fed up with the pressure of your job?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find that your family responsibilities prevent you from giving the time you should to your job?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find it difficult to concentrate on work because of your family responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...work on Saturdays or Sundays?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### F2. Thinking about the balance between your professional and personal/family life, please tell us how often do you...Nowadays

	Never	Rarely	Sometimes	Frequently	Very frequently
...keep worrying about work problems when you are not working?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...feel too tired after work to enjoy the things you would like to do at home?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find that your job prevents you from using the time you want to your partner or family ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find that your partner or family gets fed up with the pressure of your job?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find that your family responsibilities prevent you from giving the time you should to your job?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...find it difficult to concentrate on work because of your family responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...work on Saturdays or Sundays?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### F3.

	Extremely dissatisfied	Dissatisfied	Neither dissatisfied nor satisfied	Satisfied	Extremely satisfied
How satisfied are you with the current balance between your professional and personal life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### F4.

	Decreased a lot	Decreased	No change	Increased	Increased a lot
Compared to the period before the pandemic.Do you feel this balance has...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**F5. Considering a standard working day for you, how many hours per day do you currently spend on each of the following activities?**

*If any of these activities are not applicable to you, please select "0".*

Work/Study	<input type="text"/>
Household chores: Cooking, doing laundry, cleaning the house, shopping for home, etc.	<input type="text"/>
Childcare: hygiene, feeding, transport, studying, playing, etc.	<input type="text"/>
Caring for dependent adults	<input type="text"/>
Sports or physical activity	<input type="text"/>
Leisure and personal care	<input type="text"/>
Sleeping	<input type="text"/>

**F6. Think now how a ordinary working day was like in your life before the Covid-19 pandemic. How many hours per day did you spend on each of the following activities?**

*If any of these activities are not applicable to you, please select "0".*

Work/Study	<input type="text"/>
Household chores: Cooking, doing laundry, cleaning the house, shopping for home, etc.	<input type="text"/>
Childcare: hygiene, feeding, transport, studying, playing, etc.	<input type="text"/>
Caring for dependent adults	<input type="text"/>
Sports or physical activity	<input type="text"/>
Leisure and personal care	<input type="text"/>
Sleeping	<input type="text"/>

**F7. How often did or do you work from home?**

	Never	Rarely	Sometimes	Frequently	Very frequently
Before the COVID-19 pandemic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nowadays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**F8. Select the best description of your working conditions at home:**

I have the necessary equipments (e.g. laptop) provided by my institution.	<input type="checkbox"/>
I have my own workspace (e.g. dedicated room to work at home)	<input type="checkbox"/>
I have a shared workspace (e.g. dedicated room to work from home shared with another family member).	<input type="checkbox"/>
I work in a common area of the house (e.g. living room)	<input type="checkbox"/>



Other. Please specify

Other. Please specify

## Section G: 4. Work-life balance

**G1. Do you have children? (Please include both biological and non-biological children)**

Yes

No

I prefer not to answer

**G2.**

No impact    Negative impact    Positive impact    Both, positive and negative

To what extent do you consider that becoming a mother/father has impacted your scientific career?

.....  .....  .....

**G3. In what domains did you perceive this negative impact?**

Reduced opportunities to career progression

Reduced invitations/nominations for management positions

Reduced opportunity to participate in scientific research teams

Reduced contacts and networks participation

Reduced scientific production (e.g. articles, communications...)

Resume to previous teaching courses

Decreased availability to participate in competitive projects

Other. Please specify

Other. Please specify



**G4. Have you taken any family related leave while working at this University?**

Yes

No

**G5. Please select all that apply and indicate how many leaves you have taken:**

Maternity Leave

Paternity Leave

Adoption Leave

Parental Leave

Leave for other caring responsibilities

**G6.**

No resistance      Some resistance      Great resistance

To what extent have you experienced any resistance from your institution when taking those leaves?  .....  .....

**G7. What support(s), if any, did you receive from the University during and after your family related leave(s)?**

I had no support from my University during or/and after my leave

I was given clear information about my rights and responsibilities during or prior to the leave

I was offered opportunities during my leave to keep in touch with job updates

I was given the chance of pursuing research, publication and/or funding applications during the leave

I was offered the option of flexible working options after my leave

I was given reduced teaching or service responsibilities (to allow me to focus on research, publications and/or funding applications) after my leave

Other. Please specify

Other. Please specify

**G8.**

No difficulties      Some difficulties      A lot of difficulties

To what extent did you experience any difficulties in returning to work after those leaves?  .....  .....



**G9. Are you aware of the existence of the following rights/services/measures available at the University? Despite its existence, please rate the relevance of such measures in terms of enhancing of work-life balance at your university.**Existence

	I know it does not exist	I do not know if it exists	I know it exists	I prefer not to answer
Parenting support measures 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting support measures 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting support measures 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care measures 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care measures 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care measures 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work measures 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work measures 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work measures 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**G10. Are you aware of the existence of the following rights/services/measures available at the University? Despite its existence, please rate the relevance of such measures in terms of enhancing of work-life balance at your university.**Relevance

	Not relevant at all	Rather not relevant	Rather relevant	Very relevant
Parenting support measures 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting support measures 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting support measures 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care measures 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care measures 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care measures 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work measures 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work measures 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible work measures 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Section H: 5. Gender dimension in academia

## H1. To what extent do you integrate each of the following dimensions in your teaching practices?

	Never	Rarely	Sometimes	Frequently	Very frequently
Encouraging students to work in mixed gender groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparing students to become gender-sensitive professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Including gender-sensitive resources (bibliography and others) in the syllabus of the courses for which you are responsible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Including in the syllabus at least one class dedicated to the gender dimension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making students aware of the gender stereotypes associated with the field of knowledge of the course unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making students aware of the gender inequalities they will face one day as professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using gender-sensitive language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inviting a gender diverse set of academics to deliver lectures at your classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## H2. To what extent do you integrate each of the following dimensions in your research?

	Never	Rarely	Sometimes	Frequently	Very frequently
Ensuring gender balance in the project team and in decision-making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Formulating research question(s) considering gender diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Checking whether your research problem has different impacts depending on gender	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Looking for studies with a gender perspective when preparing the literature review for the research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being cautious against projecting stereotypical gender roles throughout the research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using gender sensitive language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disaggregating data by sex and/or gender	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reporting data in a gender-sensitive manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensuring that the benefits of the research are gender-inclusive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





**H3. Institutions can adopt and/or develop additional measures to promote diversity and gender equality. Are you aware of the existence of the following rights/services/measures available at the University? Despite its existence, please rate the relevance of such measures at your university.****Existence**

	I know it does not exist	I do not know if it exists	I know it exists	I prefer not to answer
Formal structures supporting Gender Equality (e.g. Gender Equality Office)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of Gender-Sensitive Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Policies tackling harrasment issues (e.g. reporting system)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equal access to training on the digitalization processes (programming, social networks, basic skills...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiatives that support cultures of equality and diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**H4. Institutions can adopt and/or develop additional measures to promote diversity and gender equality. Are you aware of the existence of the following rights/services/measures available at the University? Despite its existence, please rate the relevance of such measures at your university.****Relevance**

	Not relevant at all	Rather not relevant	Rather relevant	Very relevant
Formal structures supporting Gender Equality (e.g. Gender Equality Office)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of Gender-Sensitive Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Policies tackling harrasment issues (e.g. reporting system)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equal access to training on the digitalization processes (programming, social networks, basic skills...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiatives that support cultures of equality and diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**H5. If you are aware of other needed/relevant measures, please describe.**

*Participants are asked not to reveal their identity or elements that would allow them to be identified through the description of situations they have experienced. The University will not use or retain any response or details that are considered directly or indirectly identifying. Any portion of the recorded form that is found to provide such information will be immediately and irrevocably deleted.*

## Section I: 6. Inequalities and discrimination

**I1. At this University, have you ever felt disadvantaged because of your:**

	Yes	No	Not applicable
Sex/gender	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



	Yes	No	Not applicable
Sexual orientation identity/expression or sexual characteristics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nationality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skin colour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**I2. You mentioned "Other". Please specify.**

**I3. You indicated that you felt disadvantaged. How did it materialize?**

- In written documents/messages/emails
- In official institutional communication/contents
- In visual elements/signs within the physical environment
- In oral language while interacting with others
- By the way you were treated by your superiors
- By the way you were treated by your colleagues
- Other. Please specify

Other. Please specify

**I4. At this University, have you ever been in a situation where you witnessed someone being discriminated because of their:**

	Yes	No	Not applicable
Sex/gender	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual orientation identity/expression or sexual characteristics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



	Yes	No	Not applicable
Age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nationality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethnicity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skin colour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**15. You mentioned "Other". Please specify.**

**16. At your current working place, have you ever experienced or observed any of the following?**

	Experienced	Observed	Both	Neither
Offensive jokes or comments of sexual nature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explicit, unwanted and repetitive proposals of sexual nature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offensive sexual phone calls, letters, sms, e-mails or images	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intrusive and offensive questions about private life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unwanted physical contact (touching, grabbing, groping, kissing or attempted kissing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobbing (workplace bullying)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual assault or attempted sexual assault	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requests for sexual favors associated with promises of getting good grades, relief from academic demands, or special support in academic tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stalking (being followed persistently)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**17. How did you react?**

I did nothing

I contacted one of universities help services (e.g. counselling, social services, gender equality office)



I had an informall conversation with a colleague

I had an informall conversation with my friends and/or family

I spoke to my superior

I did not know how to react

Other. Please specify

Other. Please specify

**18. You said you have experienced/observed other ways of harassment or discrimination. Can you describe it?**

*Participants are asked not to reveal their identity or elements that would allow them to be identified through the description of situations they have experienced. The University will not use or retain any response or details that are considered directly or indirectly identifying. Any portion of the recorded form that is found to provide such information will be immediately and irrevocably deleted.*

**Section J: 7. Training**

[Institution] will implement a Gender Equality Plan that may include training actions.

Gender equality training has been considered to cover a wide range of different educational tools and processes: face-to-face training events and courses of study; staff induction; online modules; guidance materials and related resources; consultancy arrangements; and networks for sharing expertise (EIGE, 2013).

**J1. Have you ever attended a Gender Equality or Diversity training?**

Yes, I have participated in one (or more) promoted by my University

Yes, I have participated in one (or more) not related to my University

No, although I am aware that my University promotes them

No, and I am not aware about their existence at the University

**J2. Please specify what training did you take.**

*Participants are asked not to reveal their identity or elements that would allow them to be identified through the description of situations they have experienced. The University will not use or retain any response or details that are considered directly or indirectly identifying. Any portion of the recorded form that is found to provide such information will be immediately and irrevocably deleted.*



**J3.**

To what extent do you think that Gender Equality, and Diversity training is relevant?

Not relevant at all      Rather not relevant      Rather relevant      Very relevant

.....  .....  .....

**J4. And which form of training would you prefer?**

- Short intensive training (4 to 8 hours)
- Medium duration training (16 to 30 hours)
- Long training (30 to 40 hours)

**J5. Who should be the primary targets these training actions?**

- PhD Students
- Teachers and Researchers
- Staff
- Middle management
- Top management
- Other. Please specify

Other. Please specify

**J6. Which modalities of training do you prefer?**

- On site
- E-learning synchronous
- E-learning asynchronous
- Blended learning

**J7. Which formats/training strategies would you prefer?**

- Lecture (with Q&A)
- Tutorial
- Case study
- Showcase of best practices
- Meeting with the expert
- Project
- Workshop



Other



Other

Empty text input box for 'Other' response.

### Section K: 8. Demographic Information

**K1. What is your year of birth?**

Year of birth input field with 10 vertical dashed lines for digit entry.

**K2. Please state your gender identity:**

- Man
- Woman
- Transgender
- Cisgender
- Genderqueer or gender fluid
- Non-binary
- Questioning or unsure
- Prefer not to disclose
- If you prefer, self-identify yourself

If you prefer, self-identify yourself

Empty text input box for self-identifying gender.

**K3. What is your nationality?**

- National (by birth)
- National (by acquisition)
- Foreigners (foreign nationals)
- Immigrant (foreign-born)



**K4. What is your region of birth?**

- Europe - EU Member
- Europe - Non EU Member
- Northern Africa
- Sub-Saharan Africa
- Latin America/Caribbean
- Northern America
- Central Asia
- Eastern/South Eastern/Southern Asia
- Western Asia
- Australia/New Zealand

**K5. Do you have any kind of disability (e.g. Sensorial; Motor; Intellectual; Developmental)?**

- Yes
- No

**K6. Please state your marital status:**

- Single
- I have a partner
- Civil Union
- Married
- Remarried
- Divorced or separated
- Widow
- Other. Please specify

Other. Please specify

**K7. You indicated that you have a relationship. During working days, do you live in the same household as your partner?**

- Yes
- No



**K8. You told us that you have children. How old are they?Child 1**

*For children under 1 year, please mention only how many months.*

years

months

**K9. You told us that you have children. How old are they?Child 2**

*For children under 1 year, please mention only how many months.*

years

months

**K10. You told us that you have children. How old are they?Child 3**

*For children under 1 year, please mention only how many months.*

years

months

**K11. You told us that you have children. How old are they?Child 4**

*For children under 1 year, please mention only how many months.*

years

months

**K12. You told us that you have children. How old are they?Child 5**

*For children under 1 year, please mention only how many months.*

years

months

**K13. Do your daily activities include taking care of other people?**

Yes, of children

Yes, of adult persons requiring assistance with activities of daily living due to old age/long-standing illness/disability

No, I do not provide care to other people

Other

Other





## Section L: Final Comment

- L1. We have reached the end of our questionnaire. On behalf of the whole team we would like to thank you for your participation and contribution to our study. If you wish to add any additional information, you can do so in the space below. Please press the Submit button.**

*Participants are asked not to reveal their identity or elements that would allow them to be identified through the description of situations they have experienced. The University will not use or retain any response or details that are considered directly or indirectly identifying. Any portion of the recorded form that is found to provide such information will be immediately and irrevocably deleted.*

- L2. Thank you for your time. If you wish to leave a comment, you can do so in the space below and then press the Submit button. Otherwise you can simply close this window on your computer.**

*Participants are asked not to reveal their identity or elements that would allow them to be identified through the description of situations they have experienced. The University will not use or retain any response or details that are considered directly or indirectly identifying. Any portion of the recorded form that is found to provide such information will be immediately and irrevocably deleted.*



**Thank you for your participation.**

**If you have questions about this study or would like to have further information on the use of your data, you can contact:**

**The responsible person of this study at your institution name at phone number The coordinator of the study for your country name, from name, at phone number The Data Protection Officer: dpo@univ.com (position, address) The Data Controller: University of... Scientific Coordinator of the Project: Asst. Prof. Marion Paoletti, Collège DSPEG, Faculté droit/science Po, av. Léon Duguit 33608 Pessac CEDEX**

**In case you have any ethical concerns, you can contact the Ethics Committee (name of the committee) at phone number or email. You have the right to lodge a complaint with the French/other national data protection Authority, called "National Commission for Information Technology and Civil Liberties - CNIL".**