

2021 Department of Defense Civilian Employee Workplace and Gender Relations Survey

This survey involves complex skips that limit the number of questions respondents will be asked based on their answers to previous questions (skip logic is shown in bracketed gray text for all applicable questions). Because of these skips, we anticipate that the majority of respondents will NOT see all of the follow up questions that are included in several sections of the survey (e.g., questions regarding continuation of unwanted behavior would only be shown to those who experienced the behavior). Most respondents should only see 30-50% of the items in this survey instrument and the survey should take most respondents 20-30 minutes to complete.

Reviewer Notes:

1. "X Date" refers to 12 months before the respondent accesses the survey. This is dynamic text that is tailored to each respondent. "Open Date" refers to the date the survey opens for fielding.
2. When you see words within in brackets in question text (e.g., [man][woman]), please interpret this as showing text that matches the corresponding gender referent(s) to the respondent. This is dynamic text tailored to each respondent based on sex.
3. All [Ask if] text refers to the survey skip logic. Any question that has this text will only be shown to those who meet the criteria within the [Ask if] text based on their responses. Any question that does not have [Ask if] text is seen by all respondents. Orange boxes explain complicated skip logic throughout.
4. "Flag" variables refer to variables created based on the respondents' answers to previous questions in order to denote whether or not they meet criteria for experiencing a potential sexual harassment or gender discrimination (MEO_FLAG) or Sexual Assault (SAFLAG) consistent with the criteria employed by the previous WGRC survey instrument as well as on the 2014 Rand Military Workplace Study (2014 RMWS) and Military Workplace and Gender Relations Surveys since 2015. Orange boxes denote where the metrics begin and end in the survey.
5. Completely new content is highlighted in yellow and revised content is highlighted in green. Content was added or revised in conjunction with policy offices and seeks to clarify issues raised during presentation of the 2018 WGRC results. Notable edits include:
 - Added questions to sexual quid pro quo to determine if the behavior was done by leaders per OGC review of WGRA.
 - Removed "spreading lies about you" from work-related sexual assault metric per OGC review of WGRA.
 - Removed or streamlined 45 survey questions from 2018 WGRC to improve accuracy, limit to only data we use for trends, and make way for additional content.
 - Refined complaints section to elicit actionable data regarding who received the complaint, type of complaint made, satisfaction with complaint outcome for various reporting options, and resolution.
 - Added additional sexual assault context questions outside the one situation so we could limit the one situation questions to ONLY those who experienced work-related sexual assault per what we are allowed to report.
 - Added Resilience, Inclusive Leadership, Unit Cohesion, Social Norms, and Bystander Intervention items to more fully examine climate as well as outcomes with civilian employees. These will be used in models to better understand risk and inform recommendations to ODEI and the Prevention Collaboration Forum.
 - Added DoD leadership training section to understand preparedness of civilian leaders to receive complaints in accordance with DoDI 1020.04.
 - Added COVID-19 pandemic items as a contextual or risk factor for sexual harassment and assault, in addition to helping us understand potential trend differences.
 - Added experimental block of questions to assess potential sex discrimination in line with the metric for racial/ethnic discrimination.
 - Added additional demographic information (e.g., race & gender of supervisor, paygrade of supervisor, respondent's status as a supervisor, and gender identity [subject to approval]) to further evaluate risk factors.
 - Added question about how respondents were notified of the survey to evaluate recruitment methods and identify avenues to increase response rates.

Draft as of 7/7/2021
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Agency Disclosure Notice (ADN)

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BACKGROUND INFORMATION

Thank you for agreeing to participate in this important study. Please answer each question thoughtfully and truthfully. This will allow us to provide an accurate picture of the different experiences of today's DoD civilian employees. If you prefer not to answer a specific question for any reason, just leave it blank.

Some of the questions in this survey will be personal. For your privacy, you may want to take this survey where other people won't see your screen.

When the questions in this survey say "DoD civilian," please interpret this to mean employment as a civilian employee of any military Service or component within the Department. "DoD civilian" does NOT include military members or contractors working for the Department.

Definitions provided in this survey are limited to this survey.

1. For which DoD component did you work as a DoD civilian employee on [OPEN DATE]?

- Department of the Army
- Department of the Navy (including Marine Corps)
- Department of the Air Force (including Space Force)
- DoD Office, Agency, or Field Activity (for example, the Defense Logistics Agency or the Office of the Secretary of Defense)
- None, you were retired or had left

2. Are you...?

- Male
- Female

TIME REFERENCE

Most of this survey asks about experiences that have happened within the past 12 months. When answering these questions, please do NOT include any events that occurred before [Day_of_Week, X Date].

Please try to think of any important events in your life that occurred near [X Date] such as birthdays, weddings, or family activities. These events can help you remember which things happened before [X Date] and which happened after as you answer the rest of the survey questions.

The following questions will help you think about your life one year ago.

3. Are your job responsibilities, tasks, and/or projects the same as they were on [X Date]?

- Yes
- No
- Do not remember

4. Were you on vacation or leave on [X Date]?

- Yes
- No
- Do not remember

5. Were you married or dating someone on [X Date]?

- Yes
- No
- Do not remember

The first part of this survey asks about experiences that happened while you were working as a DoD civilian

This begins the current SH/GD metrics which are required by DoD to meet the Congressional Requirement

employee. Please only include experiences that are related to your DoD civilian employment.

GENDER-RELATED EXPERIENCES IN THE DOD CIVILIAN WORKPLACE

In this section, you will be asked about several things that someone from work might have done to you that were upsetting or offensive, and that happened AFTER [X Date].

When the questions say "someone from work," please include any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/category, a military Service member, or a contractor working for the DoD. They could be in your organization or in other organizations.

These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

Responding to these questions will not result in a complaint about your experiences to the Department. Reporting resources are provided to you at the end of this survey should you want to file a complaint about any unwanted experiences or seek additional assistance.

Remember, all the information you share will be kept confidential.

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

6. Since [X Date], did someone from work repeatedly tell sexual "jokes" that made you uncomfortable, angry, or upset?

Yes

No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

7. Since [X Date], did someone from work embarrass, anger, or upset you by repeatedly suggesting that you do not act like a [man] [woman] is supposed to? For example, by calling you [a woman, a fag, or gay] [a dyke or butch].

Yes

No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

8. Since [X Date], did someone from work repeatedly make sexual gestures or sexual body movements (for example, thrusting their pelvis or grabbing their crotch) that made you uncomfortable, angry, or upset?

Yes

No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

9. Since [X Date], did someone from work display, show, or send sexually explicit materials like pictures or videos that made you uncomfortable, angry, or upset? Do not include materials you may have received as part of your professional duties (for example, as a criminal investigator).

- Yes
- No

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10. Since [X Date], did someone from work repeatedly tell you about their sexual activities in a way that made you uncomfortable, angry, or upset?

- Yes
- No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

11. Since [X Date], did someone from work repeatedly ask you questions about your sex life or sexual interests that made you uncomfortable, angry, or upset?

- Yes
- No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

12. Since [X Date], did someone from work make repeated sexual comments about your appearance or body that made you uncomfortable, angry, or upset?

- Yes
- No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

13. Since [X Date], did someone from work either take or share sexually suggestive pictures or videos of you when you did not want them to?

- Yes
- No

You indicated that, after [X Date], someone from work took or shared sexually suggestive pictures or videos of you when you did not want them to.

14. [Ask if Q13 = "Yes"] Did this make you uncomfortable, angry, or upset?

- Yes
- No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

15. Since [X Date], did someone from work make repeated attempts to establish an unwanted romantic or sexual relationship with you? These could range from repeatedly asking you out on a date to asking you for sex or a "hookup."

Yes

No

You indicated that, after [X Date], someone from work made repeated attempts to establish an unwanted romantic or sexual relationship with you.

16. [Ask if Q15 = "Yes"] Did these attempts make you uncomfortable, angry, or upset?

Yes

No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

17. Since [X Date], did someone from work intentionally touch you in a sexual way when you did not want them to? This could include touching your genitals, breasts, buttocks, or touching you with their genitals anywhere on your body.

Yes

No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

18. [Ask if Q17 = "No" or Q17 = "Not answered"] Since [X Date], did someone from work repeatedly touch you in any other way that made you uncomfortable, angry, or upset? This could include almost any unnecessary physical contact including hugs, shoulder rubs, or touching your hair, but would not usually include handshakes.

Yes

No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

19. Since [X Date], has someone from work made you feel as if you would get some workplace benefit in exchange for doing something sexual? For example, they might hint that they would give you a good performance appraisal, a better work assignment, or better treatment at work in exchange for doing something sexual. Something sexual could include talking about sex, undressing, sharing sexual pictures, or having some type of sexual contact.

Yes

No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

20. Since [X Date], has someone from work made you feel like you would get punished or treated unfairly in the workplace if you did not do something sexual? For example, they hinted that they would give you a bad performance appraisal, a bad work assignment, or bad treatment at work if you were not willing to do something sexual. This could include being unwilling to talk about sex, undress, share sexual pictures, or have some type of sexual contact.

- Yes
 No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

21. Since [X Date], did you hear someone from work say that [men] [women] are not as good as [women] [men] at your particular job, or that [men] [women] should be prevented from having your job?

- Yes
 No

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations. These things may have occurred outside of work hours or away from your primary duty location. Please include them as long as the person who did them to you was someone from your DoD civilian workplace.

22. Since [X Date], do you think someone from work mistreated, ignored, excluded, or insulted you because you are a [man] [woman]?

- Yes
 No

You indicated that, after [X Date], someone from work made you uncomfortable, angry, or upset by repeatedly telling sexual "jokes".

23. [Ask if Q6 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
 Not applicable, they did not know I or someone else wanted them to stop
 No

24. [Ask if Q6 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended by these jokes if they had heard them? If you are not sure, choose the best answer.

- Yes
 No

You indicated that, after [X Date], someone from work made you embarrassed, angry, or upset by repeatedly suggesting that you do not act like a [man] [woman] is supposed to. For example, by calling you [a woman, a fag, or gay] [a dyke or butch].

25. [Ask if Q7 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
 Not applicable, they did not know I or someone else wanted them to stop
 No

26. [Ask if Q7 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended if someone had said these things to them? If you are not sure, choose the best answer.

- Yes
 No

You indicated that, after [X Date], someone from work made you uncomfortable, angry, or upset by repeatedly making sexual gestures or sexual body movements.

27. [Ask if Q8 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
 Not applicable, they did not know I or someone else wanted them to stop
 No

28. [Ask if Q8 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended by these gestures? If you are not sure, choose the best answer.

- Yes
 No

You indicated that, after [X Date], someone from work made you embarrassed, angry, or upset by displaying, showing, or sending sexually explicit materials like pictures or videos.

29. [Ask if Q9 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
 Not applicable, they did not know I or someone else wanted them to stop
 No

30. [Ask if Q9 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended by seeing these sexually explicit materials? If you are not sure, choose the best answer.

- Yes
 No

You indicated that, after [X Date], someone from work made you uncomfortable, angry, or upset by repeatedly telling you about their sexual activities.

31. [Ask if Q10 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
 Not applicable, they did not know I or someone else wanted them to stop
 No

32. [Ask if Q10 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended by hearing about these sexual activities? If you are not sure, choose the best answer.

- Yes
 No

You indicated that, after [X Date], someone from work made you embarrassed, angry, or upset by asking you questions about your sex life or sexual interests.

33. [Ask if Q11 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
 Not applicable, they did not know I or someone else wanted them to stop
 No

34. [Ask if Q11 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended if they had been asked these questions? If you are not sure, choose the best answer.

- Yes
 No

You indicated that, after [X Date], someone from work made you uncomfortable, angry, or upset by making repeated sexual comments about your appearance or body.

35. [Ask if Q12 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
- Not applicable, they did not know I or someone else wanted them to stop
- No

36. [Ask if Q12 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended if these remarks had been directed to them? If you are not sure, choose the best answer.

- Yes
- No

You indicated that, after [X Date], someone from work made you embarrassed, angry, or upset by taking or sharing sexually suggestive pictures or videos of you when you did not want them to.

37. [Ask if Q13 = "Yes" and Q14 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended if it happened to them? If you are not sure, choose the best answer.

- Yes
- No

You indicated that, after [X Date], someone from work made you uncomfortable, angry, or upset by making repeated attempts to establish an unwanted romantic or sexual relationship with you.

38. [Ask if Q15 = "Yes" and Q16 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
- Not applicable, they did not know I or someone else wanted them to stop
- No

39. [Ask if Q15 = "Yes" and Q16 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended by these unwanted attempts? If you are not sure, choose the best answer.

- Yes
- No

You indicated that, after [X Date], someone from work made you uncomfortable, angry, or upset by touching you unnecessarily.

40. [Ask if (Q17 = "No" or Q17 = "Not answered") and Q18 = "Yes"] Did they continue this unwanted behavior even after they knew that you or someone else wanted them to stop?

- Yes
- Not applicable, they did not know I or someone else wanted them to stop
- No

41. [Ask if (Q17 = "No" or Q17 = "Not answered") and Q18 = "Yes"] Do you think that this was ever severe enough that most DoD civilian employees would have been offended by this unnecessary touching? If you are not sure, choose the best answer.

- Yes
- No

You indicated that, after [X Date], someone from work made you feel as if you would get some workplace benefit in exchange for doing something sexual.

42. [Ask if Q19 = "Yes"] What led you to believe that you would get a workplace benefit if you agreed to do something sexual? Mark "Yes" or "No" for each item.

	Yes	No
a. They told you that they would give you a reward or benefit for doing something sexual.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. They hinted that you would get a reward or benefit for doing something sexual. For example, they reminded you about your performance appraisal about the same time that they expressed sexual interest.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Someone else told you they got benefits from this person by doing sexual things.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

43. [Ask if Q19 = "Yes"] Was at least one person who acted this way part of your leadership?

- Yes
- No

You indicated that, after [X Date], someone from work made you feel as if you would get punished or treated unfairly in the workplace if you did not do something sexual.

44. [Ask if Q20 = "Yes"] What led you to believe that you would get punished or treated unfairly in the workplace if you did not do something sexual? Mark "Yes" or "No" for each item.

	Yes	No
a. They told you that you would be punished or treated unfairly if you did not do something sexual.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. They hinted that you would be punished or treated unfairly if you did not do something sexual. For example, they reminded you about your performance appraisal near the same time that they expressed sexual interest.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Someone else told you they were punished or treated unfairly by this person for not doing something sexual.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

45. [Ask if Q20 = "Yes"] Was at least one person who acted this way part of your leadership?

- Yes
- No

You indicated that, after [X Date], someone from work said that [men] [women] are not as good as [women] [men] at your particular job, or that they should be prevented from having your job.

46. [Ask if Q21 = "Yes"] Do you think their beliefs about [men] [women] ever harmed or limited your career? For example, did they hurt your performance appraisal, affect your chances of promotion, or limit your opportunities for professional development?

- Yes
- No

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

47. [Ask if Q21 = "Yes"] Was at least one person who said this part of your leadership?

- Yes
- No

You indicated that, after [X Date], someone from work mistreated, ignored, excluded, or insulted you because you are a [man] [woman].

48. [Ask if Q22 = "Yes"] Do you think this treatment ever harmed or limited your career? For example, did it hurt your performance appraisal, affect your chances of promotion, or limit your opportunities for professional development?

- Yes
- No

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

49. [Ask if Q22 = "Yes"] Was at least one person who acted this way part of your leadership?

- Yes
- No

MEO_FLAG is created from positive endorsement of at least one of the following questions, including meeting [Ask if] criteria to see these questions: Q17, Q23, Q24, Q25, Q26, Q27, Q28, or Q29, Q30, Q31, Q32, Q33, Q34, Q35, Q36, Q37, Q38, Q39, Q40, Q41, Q42a, Q42b, Q42c, Q44a, Q44b, Q44c, Q46, or Q48. Endorsement of at least one of these items indicates meeting the survey's criteria to be considered sexual harassment or gender discrimination. Only respondents who met survey criteria for sexual harassment or gender discrimination see the "one situation" items (Q50 – Q79).

Based on your answers earlier, it appears that at least one person you worked with in the last 12 months acted in a way that created an upsetting or offensive work environment.

50. [Ask if [MEO_FLAG] = "True" and MATCHING ITEM = "Yes"] The following section includes additional questions about the upsetting situation(s) you experienced, including those situations in which someone from work...

- a. Repeatedly told sexual jokes.
- b. Repeatedly suggested that you do not act like a [man][woman] is supposed to.
- c. Repeatedly made sexual gestures or sexual body movements.
- d. Displayed, showed you, or sent you sexually explicit materials like pictures or videos.
- e. Repeatedly told you about their sexual activities.
- f. Repeatedly asked you questions about your sex life or sexual interests.
- g. Made repeated sexual comments about your appearance or body.
- h. Took or shared sexually suggestive pictures or videos of you when you did not want them to.
- i. Made repeated attempts to establish an unwanted romantic or sexual relationship with you.
- j. Touched you in a sexual way.
- k. Touched you in any other way that made you uncomfortable, angry, or upset.
- l. Made you feel like you would get some workplace benefit in exchange for doing something sexual.
- m. Made you feel like you would get punished or treated unfairly if you refused to do something sexual.
- n. Said that [men][women] are not as good as [women][men] at your job, or that [men][women] should be prevented from having your job.
- o. Mistreated, ignored, or insulted you because you were a [man][woman].

GENDER-RELATED EXPERIENCES IN THE DOD CIVILIAN WORKPLACE WITH BIGGEST EFFECT

The following questions ask about the upsetting situation involving someone from work that had the biggest effect on you. Before you continue, please choose the one upsetting situation involving someone from work since [X Date] that you consider to be the worst or most serious.

51. [Ask if [MEO_FLAG] = "True" and MATCHING ITEM = "Yes"] Which of the following experiences happened during the upsetting situation you chose as the worst or most serious? Mark "Yes" or "No".

	Yes	No
a. Repeatedly told sexual jokes.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Repeatedly suggested that you do not act like a [man][woman] is supposed to.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Repeatedly made sexual gestures or sexual body movements.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Displayed, showed you, or sent you sexually explicit materials like pictures or videos.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Repeatedly told you about their sexual activities.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Repeatedly asked you questions about your sex life or sexual interests.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. Made repeated sexual comments about your appearance or body.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Took or shared sexually suggestive pictures or videos of you when you did not want them to.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. Made repeated attempts to establish an unwanted romantic or sexual relationship with you.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Touched you in a <u>sexual way</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. Touched you in <u>any other way</u> that made you uncomfortable, angry, or upset.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. Made you feel like you would get some workplace benefit in exchange for doing something sexual.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
m. Made you feel like you would get punished or treated unfairly if you refused to do something sexual.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
n. Said that [men][women] are not as good as [women][men] at your job, or that they should be prevented from having your job.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
o. Mistreated, ignored, or insulted you because you were a [man][woman].....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

52. [Ask if [MEO_FLAG] = "True"] **Would you consider this upsetting situation to be... Mark "Yes" or "No" for each item.**

	Yes	No
a. Sexual harassment?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Gender discrimination?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Racial/ethnic harassment?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Harassment based on your sexual orientation?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Harassment based on your gender identity?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

53. [Ask if [MEO_FLAG] = "True"] **How many people were involved in this upsetting situation?**

- One person
- More than one person

54. [Ask if [MEO_FLAG] = "True"] **Was/Were the person(s) involved...**

- All men?
- All women?
- A mix of men and women?

55. [Ask if [MEO_FLAG] = "True"] **Was/ Were any of the person(s) who acted this way... Mark one answer for each item.**

	Yes	No	Do not know	Not applicable
a. DoD civilian employee(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Military member(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. DoD contractor(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Someone else working for the DoD?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Someone else not listed above with whom you come into contact as part of your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

"Team leaders" are those who provide employees with day-to-day guidance in work projects, but do not have supervisory responsibilities or conduct performance appraisals.

"Supervisors" are first-line supervisors typically responsible for employees' performance appraisals and leave approval.

"Managers" are those in management positions who typically supervise/manage one or more supervisors.

"Organization leaders" are the heads of departments/agencies and their immediate leadership team responsible for directing the policies and priorities of the department/agency. This includes any other leader in your organization who is not your direct supervisor or manager (for example, Senior Executive Service [SES] or equivalent, political appointees, military officers, or other supervisors/managers within your organization).

"Someone you manage(d)" is any employee over which you serve(d) as a supervisor, team leader, and/or organization leader.

56. [Ask if [MEO_FLAG] = "True"] **Was/ Were the person(s) who acted this way... Mark one answer for each item.**

	Yes	No	Do not know	Not applicable
a. Your team leader(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Your supervisor(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Your manager(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your organization's leader(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Someone you manage(d)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Another coworker with whom you have no supervisory relationship?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

57. [Ask if [MEO_FLAG] = "True"] **Was/ Were the person(s) who acted this way... Mark one.**

- Within your organization?
- Outside of your organization?
- Both within and outside of your organization?
- Do not know

58. [Ask if [MEO_FLAG] = "True"] **Thinking about this upsetting situation, about how long did it continue?**

- It happened one time
- About one week
- About one month
- A few months
- A year or more

59. [Ask if [MEO_FLAG] = "True"] Please indicate the month and year when this upsetting situation first began.

a. Month

b. Year

60. [Ask if [MEO_FLAG] = "True"] Thinking about this upsetting situation, did it ever occur... Mark "Yes" or "No" for each item. If you have not visited these locations or performed these activities since [X Date], mark "No."

	Yes	No
a. At your primary duty location?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. At a military installation/ship, armory, Guard or Reserve unit site, or another DoD civilian work location?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. While you were performing your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. While you were on official work travel or temporary assignment?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. While you were assigned outside of the continental United States (OCONUS) to perform your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. While you were completing a probationary period for your DoD civilian job?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. While you were in any type of DoD sponsored training?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. When you were at a work-related, DoD, or military function?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. While you were off duty in a situation unrelated to work?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Online on social media or via other electronic communications?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

61. [Ask if [MEO_FLAG] = "True"] Thinking about this upsetting situation... Mark "Yes" or "No" for each item.

	Yes	No
a. Did you request a transfer or other change of assignment?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Did it make you take steps to leave the DoD agency where it occurred?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Did it make you take steps to leave the DoD civilian workforce?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Did it make it hard to do your job or complete your work?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Did it make your workplace less productive or interfere with your organization's mission?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Did you take sick leave or any other type of leave because of it?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Yes	No
g. Did it negatively affect your performance appraisal(s) or promotion opportunities?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Did it cause arguments in the workplace or damage workgroup cohesion?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

62. [Ask if [MEO_FLAG] = "True"] Thinking about this upsetting situation, did you discuss it with... Mark "Yes" or "No" for each item. If you do not have access to the individual(s), mark "No."

	Yes	No
a. The person(s) involved?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Your coworkers?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. A counselor or medical/mental health provider?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. A religious or spiritual leader?	<input type="checkbox"/>	<input type="checkbox"/>
e. Your friends, family, or others outside of your organization?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. An Employee Assistance Program (EAP) counselor?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. An Ombudsman?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Legal counsel (for example, a lawyer)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

For the purposes of this survey, the following definitions apply:

“Complaint/grievance/report” refers to disclosures to specific personnel that trigger investigations into experiences that may constitute prohibited personnel practices, including Equal Employment Opportunity (EEO) violations.

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

“EEO representative” refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

“Human Resources” refers to any employee who works in a Human Resources department within the DoD that can intake and investigate grievances on prohibited personnel practices.

“Union or Bargaining Unit representative” refers to a representative authorized by a duly recognized labor union who works on behalf of a DoD employee that can take complaints/grievances/reports and represent the employee in any ongoing investigations.

“DoD Office of Inspector General” refers to a separate, impartial DoD office that can intake and investigate grievances on behalf of DoD employees.

“Office of Special Counsel” refers to a separate, impartial federal entity that can take and investigate complaints/grievances/reports on behalf of federal employees.

63. [Ask if [MEO_FLAG] = "True"] Did you make a complaint/grievance/report, either orally or in writing, to address this upsetting situation to any of the following individuals or organizations? Mark “Yes” or “No” for each item. If you do not have access to the resource, mark “No.”

	Yes	No
a. Your leadership.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. An EEO representative.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Human Resources.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your union or bargaining unit representative.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. DoD Office of Inspector General.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Office of Special Counsel.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

“Team leaders” are those who provide employees with day-to-day guidance in work projects, but do not have supervisory responsibilities or conduct performance appraisals.

“Supervisors” are first-line supervisors typically responsible for employees' performance appraisals and leave approval.

“Managers” are those in management positions who typically supervise/manage one or more supervisors.

“Organization leaders” are the heads of departments/agencies and their immediate leadership team responsible for directing the policies and priorities of the department/agency. This includes any other leader in your organization who is not your direct supervisor or manager (for example, Senior Executive Service [SES] or equivalent, political appointees, military officers, or other supervisors/managers within your organization).

64. [Ask if [MEO_FLAG] = "True" and Q63 a = "Yes"] Did you report this upsetting situation to any of the following levels of leadership? Mark “Yes” or “No” for each item. If you do not have access to the individual(s), mark “No.”

	Yes	No
a. Your team leader(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Your supervisor(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Your manager(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your organization's leader(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Some other leader(s) not listed above.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

There are two types of complaints that can be filed with EEO Representatives:

- **Informal complaints** or “precomplaints” are initial allegations submitted either verbally or in writing to an EEO representative. The EEO representative takes information about the complaint, advises employees of their rights and responsibilities, and gives the involved parties the opportunity to resolve the complaint through EEO counseling or Alternative Dispute Resolution (ADR).
- **Formal complaints** are allegations submitted in writing to an EEO representative that trigger an investigation into complaints that were not resolved during the informal or “precomplaint” EEO process. At this stage, employees must file a signed statement documenting the complaint and requesting corrective action.

65. [Ask if [MEO_FLAG] = "True" and (Q63 b = "Yes")] Which of the following best describes the current status of your EEO complaint? Mark one.

- Informal complaint
- Formal complaint
- Not sure

Q66 – Q68: Respondents will only get one version of this question based off the combination of reporting to leaders and/or EEO. Only respondents who indicated reporting to leadership (Q63a) but did not indicate filing a complaint with an EEO representative (Q63b) will see Q67.

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

“EEO representative” refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

66. [Ask if [MEO_FLAG] = "True" and Q63 a = "Yes" and Q63 b = "Yes"] What actions were taken in response to your report to leadership AND your complaint filed with an EEO representative about the upsetting situation? For both columns, mark all that apply.

	Action in response to complaint filed with EEO	Action in response to report to leadership
a. The person you told took no action.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. The rules on harassment were explained to everyone in the workplace.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. An investigation, survey, or other assessment of the workplace was conducted.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Someone talked to the person(s) to ask them to change their behavior.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Your work station, schedule, or duties were changed to help you avoid the person(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. The person(s) who did this was/were moved or reassigned so that you did not have as much contact with them.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. There was some official career action taken against the person(s) for their upsetting behavior.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. The person(s) stopped their upsetting behavior.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. You were encouraged to drop the issue.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. You were discouraged from filing/further pursuing an EEO complaint.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. The person(s) who did this took action against you for reporting/filing an EEO complaint. For example, their upsetting behavior became worse or they threatened you.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. Your coworkers treated you worse, avoided you, or blamed you for the problem.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Action in response to complaint filed with EEO

Action in response to report to leadership

m. You were punished for bringing it up. For example, loss of privileges, denied promotion/training, reassigned to a less favorable job.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
n. Not sure.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
o. Some other action.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

67. [Ask if [MEO_FLAG] = "True" and Q63 a = "Yes" and Q63 b <> "Yes"] What actions were taken in response to your report to leadership about the upsetting situation? Mark all that apply.

- The person you told took no action.
- The rules on harassment were explained to everyone in the workplace.
- An investigation, survey, or other assessment of the workplace was conducted.
- Someone talked to the person(s) to ask them to change their behavior.
- Your work station, schedule, or duties were changed to help you avoid the person(s).
- The person(s) who did this was/were moved or reassigned so that you did not have as much contact with them.
- There was some official career action taken against the person(s) for their upsetting behavior.
- The person(s) stopped their upsetting behavior.
- You were encouraged to drop the issue.
- You were discouraged from filing an EEO complaint.
- The person(s) who did this took action against you for reporting to leadership. For example, their upsetting behavior became worse or they threatened you.
- Your coworkers treated you worse, avoided you, or blamed you for the problem.
- You were punished for bringing it up. For example, loss of privileges, denied promotion/training, reassigned to a less favorable job.
- Not sure
- Some other action

Q66 – Q68: Respondents will only get one version of this question based off the combination of reporting to leaders and/or EEO. Only respondents who did not indicate reporting to leadership (Q63a) but indicated filing a complaint with an EEO representative (Q63b) will see Q68.

“EEO representative” refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

68. [Ask if [MEO_FLAG] = "True" and Q63 a <> "Yes" and Q63 b = "Yes"] **What actions were taken in response to your complaint filed with the EEO representative about the upsetting situation? Mark all that apply.**

- The person you told took no action.
- The rules on harassment were explained to everyone in the workplace.
- An investigation, survey, or other assessment of the workplace was conducted.
- Someone talked to the person(s) to ask them to change their behavior.
- Your work station, schedule, or duties were changed to help you avoid the person(s).
- The person(s) who did this was/were moved or reassigned so that you did not have as much contact with them.
- There was some official career action taken against the person(s) for their upsetting behavior.
- The person(s) stopped their upsetting behavior.
- You were encouraged to drop the issue.
- You were discouraged from filing/further pursuing an EEO complaint.
- The person(s) who did this took action against you for filing an EEO complaint. For example, their upsetting behavior became worse or they threatened you.
- Your coworkers treated you worse, avoided you, or blamed you for the problem.
- You were punished for bringing it up. For example, loss of privileges, denied promotion/training, reassigned to a less favorable job.
- Not sure
- Some other action

69. [Ask if [MEO_FLAG] = "True" and (Q66 a1 = "Marked" or Q67 a = "Marked")] **You indicated the leader you told took no action. Which of the following apply to the upsetting situation in which the leader you told took no action? Mark all that apply.**

- I asked the person(s) not to take action.
- I have specific knowledge that the person(s) took no action.
- I did not directly observe any action being taken by the person(s) I told.
- I am unable to determine whether the person(s) took actions due to privacy of personnel actions.
- Something else

70. [Ask if [MEO_FLAG] = "True" and (Q66a2 = "Marked" or Q68 a = "Marked")] **You indicated the EEO representative you told took no action. Which of the following apply to the upsetting situation in which the EEO representative you told took no action? Mark all that apply.**

- I asked the person(s) not to take action.
- I have specific knowledge that the person(s) took no action.
- I did not directly observe any action being taken by the person(s) I told.
- I am unable to determine whether the person(s) took actions due to privacy of personnel actions.
- Something else

[Ask if [MEO_FLAG] = "True" and (Q66 a1 = "Marked" or Q66 a2 = "Marked" or Q67 a = "Marked" or Q68 a = "Marked") and (Q69 e = "Marked" or Q70 e = "Marked")] **Please specify what else led you to indicate the person(s) you told took no action. Please do not enter personally identifiable information (for example, names, addresses).**

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

71. [Ask if [MEO_FLAG] = "True" and Q63 a = "Yes"] How satisfied are you with the following aspects of how the report to leadership was handled? Mark one answer for each item.

	Very dissatisfied				
	Dissatisfied				
	Neither satisfied nor dissatisfied				
	Satisfied				
	Very satisfied				
a. Availability of information about how to file an EEO complaint.....	<input checked="" type="checkbox"/>				
b. Availability of information about the complaint process and timeliness.....	<input checked="" type="checkbox"/>				
c. Availability of information about victim support resources.....	<input checked="" type="checkbox"/>				
d. How you were treated by leadership handling your complaint.....	<input checked="" type="checkbox"/>				
e. The action taken by leadership handling your situation.....	<input checked="" type="checkbox"/>				
f. Degree to which your privacy was/is being protected.....	<input checked="" type="checkbox"/>				
g. Amount of time it took/is taking to resolve your report.....	<input checked="" type="checkbox"/>				
h. How well you have been kept informed by leadership about the progress of your report.....	<input checked="" type="checkbox"/>				
i. The reporting process overall.....	<input checked="" type="checkbox"/>				

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

72. [Ask if [MEO_FLAG] = "True" and Q63 b = "Yes"] How satisfied are you with the following aspects of how the complaint filed with the EEO representative was handled? Mark one answer for each item.

	Very dissatisfied				
	Dissatisfied				
	Neither satisfied nor dissatisfied				
	Satisfied				
	Very satisfied				
a. Availability of information about how to file an EEO complaint.....	<input checked="" type="checkbox"/>				
b. Availability of information about the complaint process and timeliness.....	<input checked="" type="checkbox"/>				
c. Availability of information about victim support resources.....	<input checked="" type="checkbox"/>				
d. How you were treated by the EEO representative handling your complaint.....	<input checked="" type="checkbox"/>				
e. The action taken by the EEO representative handling your complaint.....	<input checked="" type="checkbox"/>				
f. Degree to which your privacy was/is being protected.....	<input checked="" type="checkbox"/>				
g. Amount of time it took/is taking to resolve your complaint.....	<input checked="" type="checkbox"/>				
h. How well you have been kept informed on the progress of your complaint.....	<input checked="" type="checkbox"/>				
i. The complaint process overall.....	<input checked="" type="checkbox"/>				

Q75 – Q77: Respondents will only get one version of this question based off the combination of NOT reporting to leaders and/or EEO. Only respondents who did not indicate reporting to EITHER leadership (Q63a) or an EEO representative (Q63b) will see Q75.

"Complaint/grievance/report" refers to disclosures to specific personnel that trigger investigations into experiences that may constitute prohibited personnel practices, including Equal Employment Opportunity (EEO) violations.

73. [Ask if [MEO_FLAG] = "True" and (Q63 a = "Yes" or Q63 b = "Yes" or Q63 c = "Yes" or Q63 d = "Yes" or Q63 e = "Yes" or Q63 f = "Yes")] How satisfied are you with the outcome of your complaint/grievance/report to the following individuals or organizations? Mark one answer for each item.

	Does not apply; I do not know the outcome	Does not apply; it is still in process	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied
a. [Ask if Q63 a = "Yes"] Your leadership.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. [Ask if Q63 b = "Yes"] An EEO representative.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. [Ask if Q63 c = "Yes"] Human Resources.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. [Ask if Q63 d = "Yes"] Your union or bargaining unit representative.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. [Ask if Q63 e = "Yes"] DoD Office of Inspector General.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. [Ask if Q63 f = "Yes"] Office of Special Counsel.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

74. [Ask if [MEO_FLAG] = "True" and (Q63 b = "Yes")] Was your EEO complaint found to be substantiated? Mark one.

- Yes
- No
- Does not apply; I withdrew my complaint before a determination was made
- Does not apply; the matter was settled without a determination
- Does not apply; I do not know the outcome of my complaint/grievance/report
- Does not apply; it is still in process

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

75. [Ask if [MEO_FLAG] = "True" and Q63 a <> "Yes" and Q63 b <> "Yes" and (Q63 a <> "Not answered" or Q63 b <> "Not answered" or Q63 c <> "Not answered" or Q63 d <> "Not answered" or Q63 e <> "Not answered" or Q63 f <> "Not answered")] What were your reasons for not reporting to leadership AND not filing a complaint with an EEO representative? For both columns, mark all that apply.

	Reason for not filing complaint with EEO	
	Reason for not reporting to leadership	
a. The offensive behavior stopped on its own.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. You asked the person to stop and they did.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. You thought it was not serious enough to report.....	<input type="checkbox"/>	<input type="checkbox"/>
d. You did not want more people to know.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. You did not want people to think less of you.....	<input type="checkbox"/>	<input type="checkbox"/>
f. You did not know with whom to report the behavior or how to file an EEO complaint.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. You wanted to forget about it and move on.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. You did not think anything would be done.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. You did not think you would be believed.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. You did not trust that the process would be fair.....	<input type="checkbox"/>	<input type="checkbox"/>
k. You felt partially to blame, ashamed, or embarrassed.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. You thought other people would blame you.....	<input type="checkbox"/>	<input type="checkbox"/>

Q75 – Q77: Respondents will only get one version of this question based off the combination of NOT reporting to leaders and/or EEO. Only respondents who did not indicate reporting to leadership (Q63a) but indicated filing a complaint with an EEO representative (Q63b) will see Q76.

career.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
q. You did not want to hurt the person's family.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
r. You were worried about negative consequences from the person(s) who acted this way.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
s. You were worried about negative consequences from leadership (for example, being denied a promotion, disciplined, made to perform additional duties, etc.).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
t. You were worried about negative consequences from your coworkers or peers (for example, excluding you from social activities, ignoring you, making disrespectful remarks, etc.).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
u. You took other actions to handle the situation.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
v. Some other reason.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

76. [Ask if [MEO_FLAG] = "True" and Q63 a <> "Yes" and Q63 b = "Yes"] What were your reasons for not reporting to leadership? *Mark all that apply.*

- The offensive behavior stopped on its own
- You asked the person to stop and they did
- You did not feel comfortable reporting to leadership
- You did not want more people to know
- You did not want people to think less of you
- You did not know with whom to discuss the behavior
- You wanted to forget about it and move on
- You did not think anything would be done
- You did not think you would be believed
- You did not trust that the process would be fair
- You felt partially to blame, ashamed, or embarrassed
- You thought other people would blame you
- You thought you might get in trouble for something you did
- You thought you might be labeled as a troublemaker
- You thought it might hurt your performance appraisal or your career
- You did not want to hurt the person's career
- You did not want to hurt the person's family
- You were worried about negative consequences from the person(s) who acted this way
- You were worried about negative consequences from leadership (for example, being denied a promotion, disciplined, made to perform additional duties, etc.)
- You were worried about negative consequences from your coworkers or peers (for example, excluding you from social activities, ignoring you, making disrespectful remarks, etc.)
- You took other actions to handle the situation
- Some other reason

Q75 – Q77: Respondents will only get one version of this question based off the combination of NOT reporting to leaders and/or EEO. Only respondents who reported to leadership (Q63a) but did not indicate filing a complaint with an EEO representative (Q63b) will see Q77.

“EEO representative” refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

77. [Ask if [MEO_FLAG] = "True" and Q63 a = "Yes" and Q63 b <> "Yes"] What were your reasons for not filing a complaint with an EEO representative? Mark all that apply.

- No EEO complaint was needed after your report to leadership
- You thought it was not serious enough to file an EEO complaint
- The offensive behavior stopped on its own
- You asked the person to stop **and they did**
- You did not want more people to know
- You did not want people to think less of you
- You did not know with whom to file an EEO complaint about the behavior
- You wanted to forget about it and move on
- You did not think anything would be done
- You did not think you would be believed
- You did not trust that the process would be fair
- You felt partially to blame, **ashamed, or embarrassed**
- You thought other people would blame you
- You thought you might get in trouble for something you did
- You thought you might be labeled as a troublemaker
- You thought it might hurt your performance appraisal **or your career**
- You did not want to hurt the person's career
- You did not want to hurt the person's family**
- You were worried about negative consequences from the person(s) who acted this way
- You were worried about negative consequences from leadership (for example, being denied a promotion, disciplined, made to perform additional duties, etc.)
- You were worried about negative consequences from your coworkers or peers (for example, excluding

you from social activities, ignoring you, making disrespectful remarks, etc.)

- You took other actions to handle the situation
- Some other reason

78. [Ask if [MEO_FLAG] = "True"] Was this upsetting situation resolved?

- Yes
- No

79. [Ask if [MEO_FLAG] = "True" and (Q63 a <> "Not answered" or Q63 b <> "Not answered" or Q63 c <> "Not answered" or Q63 d <> "Not answered" or Q63 e <> "Not answered" or Q63 f <> "Not answered")] In retrospect, would you make the same decision about reporting if you could do it over?

- Yes
- No

This begins the current SA metrics which are required by DoD to meet the Congressional Requirement

GENDER-RELATED EXPERIENCES

Please read the following special instructions before continuing the survey.

Questions in this next section ask about unwanted experiences of an abusive, humiliating, or sexual nature. These types of unwanted experiences vary in severity. Some of them could be viewed as an assault. Others could be viewed as hazing or some other type of unwanted experience.

They can happen to anyone.

The next questions include graphic words.

This is the standard language used on other surveys of non-government civilians and military personnel. It is important to use the same names of the specific body parts used in other surveys. This is the best way to determine whether or not people have had these types of experiences across various populations.

When answering these questions, please include any experience no matter who did it to you or where it happened. It could be done to you by a male or female; another DoD civilian employee; a contractor or military member; someone you knew or a stranger; at work, on official work travel, or outside of work.

Please include experiences even if you or others had been drinking alcohol, using drugs, or were intoxicated.

Responding to these questions will not result in a formal complaint about your experiences to the Department or a report to law enforcement. Reporting resources are provided to you at the end of this survey should you want to file a complaint about any unwanted experiences or seek additional assistance.

The following questions will ask you about events that happened AFTER [X Date]. You will have an opportunity to describe experiences that happened BEFORE [X Date] later in the survey.

Remember, all the information you share will be kept confidential.

80. Since [X Date], did you have any unwanted experiences in which someone put his penis into your anus, mouth, or vagina?

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

81. [Ask if Q80 = "Yes"] They used, or threatened to use, physical force to make you comply. For example, use, or threats of, physical injury, use of a weapon, or threats of kidnapping.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

82. [Ask if Q80 = "Yes"] They threatened you (or someone else) in some other way. For example, by using their position of authority or by getting you in trouble with authorities.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

83. [Ask if Q80 = "Yes"] They did it while you were passed out, asleep, unconscious, or so drunk, high, or drugged that you could not understand what was happening or could not show them that you were unwilling.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

84. [Ask if Q80 = "Yes"] It happened without your consent. For example, they continued even when you told or showed them that you were unwilling, you were so afraid that you froze, they tricked you into thinking they were someone else such as pretending to be a doctor, or some other means where you did not or could not consent.

Yes

No

85. Since [X Date], did you have any unwanted experiences in which someone put any object or any body part other than a penis into your anus, mouth, or vagina? The body part could include a finger, tongue, or testicles.

Yes

No

86. [Ask if [SA1Flag] = "Not true" and Q85 = "Yes"] Was this unwanted experience (or any experiences like this if you had more than one) abusive or humiliating, or intended to be abusive or humiliating? If you are not sure, choose the best answer.

Yes

No

87. [Ask if [SA1Flag] = "Not true" and Q85 = "Yes"] Do you believe the person did it for a sexual reason? For example, they did it because they were sexually aroused or to get sexually aroused. If you are not sure, choose the best answer.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

88. [Ask if [SA1Flag] = "Not true" and Q85 = "Yes"] They used, or threatened to use, physical force to make you comply. For example, use, or threats of, physical injury, use of a weapon, or threats of kidnapping.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

89. [Ask if [SA1Flag] = "Not true" and Q85 = "Yes"] They threatened you (or someone else) in some other way. For example, by using their position of authority-or by getting you in trouble with authorities.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

90. [Ask if [SA1Flag] = "Not true" and Q85 = "Yes"] They did it while you were passed out, asleep, unconscious, or so drunk, high, or drugged that you could not understand what was happening or could not show them that you were unwilling.

Yes

No

2021 Department of Defense Civilian Employee Workplace and Gender Relations Survey (As of 7/7/2021)

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

91. [Ask if [SA1Flag] = "Not true" and Q85 = "Yes"] It happened without your consent. For example, they continued even when you told or showed them that you were unwilling, you were so afraid that you froze, they tricked you into thinking they were someone else such as pretending to be a doctor, or some other means where you did not or could not consent.

Yes

No

92. Since [X Date], did anyone make you put any part of your body or any object into someone's mouth, vagina, or anus when you did not want to? A part of the body could include your tongue, fingers, penis, or testicles.

Yes

No

93. [Ask if [SA2FlagCum2] = "Not true" and Q92 = "Yes"] Was this unwanted experience (or any experiences like this if you had more than one) abusive or humiliating, or intended to be abusive or humiliating? If you are not sure, choose the best answer.

Yes

No

94. [Ask if [SA2FlagCum2] = "Not true" and Q92 = "Yes"] Do you believe the person did it for a sexual reason? For example, they did it because they were sexually aroused or to get sexually aroused. If you are not sure, choose the best answer.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

95. [Ask if [SA2FlagCum2] = "Not true" and Q92 = "Yes"] They used, or threatened to use, physical force to make you comply. For example, use, or threats of, physical injury, use of a weapon, or threats of kidnapping.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

96. [Ask if [SA2FlagCum2] = "Not true" and Q92 = "Yes"] They threatened you (or someone else) in some other way. For example, by using their position of authority or by getting you in trouble with authorities.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

97. [Ask if [SA2FlagCum2] = "Not true" and Q92 = "Yes"] They did it while you were passed out, asleep, unconscious, or so drunk, high, or drugged that you could not understand what was happening or could not show them that you were unwilling.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

98. [Ask if [SA2FlagCum2] = "Not true" and Q92 = "Yes"] **It happened without your consent.** For example, they continued even when you told or showed them that you were unwilling, you were so afraid that you froze, they tricked you into thinking they were someone else such as pretending to be a doctor, or some other means where you did not or could not consent.

Yes

No

99. Since [X Date], did you have any **unwanted experiences in which someone intentionally touched private areas of your body (either directly or through clothing)?** Private areas include buttocks, inner thigh, breasts, groin, anus, vagina, penis, or testicles.

Yes

No

100. [Ask if [SA3FlagCum2] = "Not true" and Q99 = "Yes"] **Was this unwanted experience (or any experiences like this if you had more than one) abusive or humiliating, or intended to be abusive or humiliating?** If you are not sure, choose the best answer.

Yes

No

101. [Ask if [SA3FlagCum2] = "Not true" and Q99 = "Yes"] **Do you believe the person did it for a sexual reason?** For example, they did it because they were sexually aroused, to get sexually aroused, or to sexually arouse you or another person. If you are not sure, choose the best answer.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

102. [Ask if [SA3FlagCum2] = "Not true" and Q99 = "Yes"] **They used, or threatened to use, physical force to make you comply.** For example, use, or threats of, physical injury, use of a weapon, or threats of kidnapping.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

103. [Ask if [SA3FlagCum2] = "Not true" and Q99 = "Yes"] **They threatened you (or someone else) in some other way.** For example, by using their position of authority or by getting you in trouble with authorities.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

104. [Ask if [SA3FlagCum2] = "Not true" and Q99 = "Yes"] **They did it while you were passed out, asleep, unconscious, or so drunk, high, or drugged that you could not understand what was happening or could not show them that you were unwilling.**

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

105. [Ask if [SA3FlagCum2] = "Not true" and Q99 = "Yes"] It happened without your consent. For example, they continued even when you told or showed them that you were unwilling, you were so afraid that you froze, they tricked you into thinking they were someone else such as pretending to be a doctor, or some other means where you did not or could not consent.

Yes

No

106. Since [X Date], did you have any unwanted experiences in which someone made you touch private areas of their body or someone else's body (either directly or through clothing)?

This could involve the person putting their private areas on you. Private areas include buttocks, inner thigh, breasts, groin, anus, vagina, penis, or testicles.

Yes

No

107. [Ask if [SA4FlagCum2] = "Not true" and Q106 = "Yes"] Was this unwanted experience (or any experiences like this if you had more than one) abusive or humiliating, or intended to be abusive or humiliating? If you are not sure, choose the best answer.

Yes

No

108. [Ask if [SA4FlagCum2] = "Not true" and Q106 = "Yes"] Do you believe the person did it for a sexual reason? For example, they did it because they were sexually aroused, to get sexually aroused, or to sexually arouse you or another person. If you are not sure, choose the best answer.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

109. [Ask if [SA4FlagCum2] = "Not true" and Q106 = "Yes"] They used, or threatened to use, physical force to make you comply. For example, use, or threats of, physical injury, use of a weapon, or threats of kidnapping.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

110. [Ask if [SA4FlagCum2] = "Not true" and Q106 = "Yes"] They threatened you (or someone else) in some other way.

For example, by using their position of authority or by getting you in trouble with authorities.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

111. [Ask if [SA4FlagCum2] = "Not true" and Q106 = "Yes"] They did it while you were passed out, asleep, unconscious, or so drunk, high, or drugged that you could not understand what was happening or could not show them that you were unwilling.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

112. [Ask if [SA4FlagCum2] = "Not true" and Q106 = "Yes"] **It happened without your consent.** For example, they continued even when you told or showed them that you were unwilling, you were so afraid that you froze, they tricked you into thinking they were someone else such as pretending to be a doctor, or some other means where you did not or could not consent.

Yes

No

113. Since [X Date], did you have any unwanted experiences in which someone attempted to put a penis, an object, or any body part into your anus, mouth, or vagina, but no penetration actually occurred?

Yes

No

114. [Ask if [SA3FlagCum2] = "Not true" and Q113 = "Yes"] **Was this unwanted experience (or any experiences like this if you had more than one) abusive or humiliating, or intended to be abusive or humiliating?** If you are not sure, choose the best answer.

Yes

No

115. [Ask if [SA3FlagCum2] = "Not true" and Q113 = "Yes"] **Do you believe the person did it for a sexual reason?** For example, they did it because they were sexually aroused or to get sexually aroused. If you are not sure, choose the best answer.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

116. [Ask if [SA3FlagCum2] = "Not true" and Q113 = "Yes"] **They used, or threatened to use, physical force to make you comply.** For example, use, or threats of, physical injury, use of a weapon, or threats of kidnapping.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

117. [Ask if [SA3FlagCum2] = "Not true" and Q113 = "Yes"] **They threatened you (or someone else) in some other way.**

SAFLAG is created from positive endorsement of at least one item from any of the following sets of questions, including meeting [Ask if] criteria to see these question sets: Q81-Q84, Q88-Q91, Q95-Q98, Q102-Q105, Q109-Q112, or Q116-Q119. Endorsement of at least one item within any question set indicates meeting the survey's criteria to be considered sexual assault based on Q80, Q85, Q92, Q99, Q106, or Q113, respectively. Only respondents who met survey criteria for sexual assault see Q120 – Q126 and Q154 – Q156.

For example, by using their position of authority or by getting you in trouble with authorities.

Yes

No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

118. [Ask if [SA3FlagCum2] = "Not true" and Q113 = "Yes"] They did it while you were passed out, asleep, unconscious, or so drunk, high, or drugged that you could not understand what was happening or could not show them that you were unwilling.

- Yes
 No

The following statements are about things that might have happened to you when you had this experience. In these statements, "they" means the person or people who did this to you.

Please indicate which of the following happened.

119. [Ask if [SA3FlagCum2] = "Not true" and Q113 = "Yes"] It happened without your consent. For example, they continued even when you told or showed them that you were unwilling, you were so afraid that you froze, they tricked you into thinking they were someone else such as pretending to be a doctor, or some other means where you did not or could not consent.

- Yes
 No

Thank you for answering the questions so far. Remember that your answers are confidential.

Based on your answers earlier, you indicated that you had at least one unwanted event since [X Date].

120. [Ask if [SAFLAG] = "True" and MATCHING ITEM = "Yes"] The items that follow will ask for additional information about the unwanted event(s) in which someone...

- Put their penis into your anus, mouth, or vagina.
- Put any object or any body part other than a penis into your anus, mouth, or vagina.
- Made you put any part of your body or any object into someone's mouth, vagina, or anus.
- Intentionally touched private areas of your body.
- Made you touch private areas of their body or someone else's body.
- Attempted to put a penis, an object, or any body part into your anus, mouth, or vagina, but no penetration actually occurred.

121. [Ask if [SAFLAG] = "True"] Thinking about the past 12 months, please give your best estimate of how many separate occasions you had these unwanted experiences.

Occasion(s)

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/ category, a military member, or a contractor. They could be in your organization or in other organizations.

Please select "Yes" even if the event occurred outside of work hours or away from your primary duty location if the person(s) who did this to you was someone you had contact with as part of your DoD civilian job duties.

122. [Ask if [SAFLAG] = "True"] At the time of the event(s), was/were any of the person(s) who did this to you someone from work?

- Yes
 No

123. [Ask if [SAFLAG] = "True" and Q121 > 1 and Q122 = "Yes"] Thinking about the past 12 months, please give your best estimate of how many separate occasions you had these unwanted experiences by someone from work.

Occasion(s)

This ends the current SA metrics which are required by DoD to meet the Congressional Requirement

124. [Ask if [SAFLAG] = "True" and Q122 = "Yes"] At the time of the event(s), was/were the person(s) who did this to you... Mark all that apply.

- Your current or former spouse?
- Someone who you have a child with?
- Your significant other (for example, boyfriend or girlfriend)?
- A person you were casually intimate with but not in an exclusive relationship with?
- A friend or acquaintance?
- A family member or relative?
- A stranger?
- A person in your community?
- A foreign national?
- Someone else?
- Not sure
- Your only connection to the person(s) who did this is your employment with the DoD

125. [Ask if [SAFLAG] = "True" and Q122 = "Yes"] Did any of the unwanted events occur... Mark "Yes" or "No" for each item.

	Yes	No
a. At your primary duty location?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. At a military installation/ship, armory, Guard or Reserve unit site, or another DoD civilian work location?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. While you were performing your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

126. [Ask if [SAFLAG] = "True"] At the time of the event(s), was/were any of the person(s) who did this to you... Mark one answer for each item.

	Yes	No	Do not know	Not applicable
a. DoD civilian employee(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Military member(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Contractor(s) working for the DoD?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Someone else working for the DoD?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Someone else not listed above with whom you come into contact as part of your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SAFLAGW is created from positive endorsement of at least one item from any of the following sets of questions, including meeting [Ask if] criteria to see these question sets: Q81-Q84, Q88-Q91, Q95-Q98, Q102-Q105, Q109-Q112, or Q116-Q119, and positive endorsement of Q122. Endorsement of at least one item within any question set and endorsement of Q122 indicates meeting the survey's criteria to be considered work-related sexual assault based on Q80, Q85, Q92, Q99, Q106, or Q113, respectively. Only respondents who met survey criteria for work-related sexual assault see the "one situation" items (Q127 – Q153).

GENDER-RELATED EXPERIENCES IN THE DOD WORKPLACE WITH BIGGEST EFFECT

You indicated you experienced at least one event involving someone from work in the past 12 months. The following questions ask about the unwanted event involving someone from work that had the biggest effect on you. Before you continue, please choose the one unwanted event involving someone from work since [X Date] that you consider to be the worst or most serious.

127. [Ask if [SAFLAGW] = "True" and Q123 > 1 and [SACOUNT] > 1 and MATCHING ITEM = "Yes"] Which of the following experiences happened during the unwanted event involving someone from work you chose as the worst or most serious? Mark "Yes" or "No" for each item.

	Yes	No
a. Put their penis into your anus, mouth, or vagina.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Put any object or any body part other than a penis into your anus, mouth, or vagina.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Made you put any part of your body or any object into someone's mouth, vagina, or anus.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Intentionally touched private areas of your body.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Made you touch private areas of their body or someone else's body.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	No
	Yes
f. <u>Attempted to put a penis, an object, or any body part into your anus, mouth, or vagina, but no penetration actually occurred</u>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>

“Team leaders” are those who provide employees with day-to-day guidance in work projects, but do not have supervisory responsibilities or conduct performance appraisals.

“Supervisors” are first-line supervisors typically responsible for employees' performance appraisals and leave approval.

“Managers” are those in management positions who typically supervise/manage one or more supervisors.

“Organization leaders” are the heads of departments/agencies and their immediate leadership team responsible for directing the policies and priorities of the department/agency. This includes any other leader in your organization who is not your direct supervisor or manager (for example, Senior Executive Service [SES] or equivalent, political appointees, military officers, or other supervisors/managers within your organization).

“Someone you manage(d)” is any employee over which you serve(d) as a supervisor, team leader, and/or organization leader.

128. [Ask if [SAFLAGW] = "True"] How many people did this to you?

- One person
- More than one person
- Not sure

129. [Ask if [SAFLAGW] = "True"] Was/Were the person(s) who did this to you...

- All men?
- All women?
- A mix of men and women?
- Not sure

130. [Ask if [SAFLAGW] = "True"] At the time of the event, was/were any of the person(s) who did this to you... Mark one answer for each item.

	Not applicable			
	Do not know			
	No			
	Yes			
a. DoD civilian employee(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Military member(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. DoD contractor(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Someone else working for the DoD?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Someone else not listed above with whom you come into contact as part of your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

131. [Ask if [SAFLAGW] = "True"] Was/Were the person(s) who did this to you... Mark one answer for each item.

	Not applicable			
	Do not know			
	No			
	Yes			
a. Your team leader(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Your supervisor(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Your manager(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your organization's leader(s)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Someone you manage(d)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Another coworker with whom you have no supervisory relationships?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

132. [Ask if [SAFLAGW] = "True"] Was/Were the person(s) who did this to you... Mark one.

- Within your organization?
- Outside of your organization?
- Both within and outside of your organization?
- Do not know

133. [Ask if [SAFLAGW] = "True" and (Q123 > 1 or Q124 = "Not answered")]
At the time of the event, was/were the person(s) who did this to you... Mark all that apply.

- Your current or former spouse?
- Someone who you have a child with?
- Your significant other (for example, boyfriend or girlfriend)?
- A person you were casually intimate with but not in an exclusive relationship with?
- A friend or acquaintance?
- A family member or relative?
- A stranger?
- A person in your community?
- A foreign national?
- Someone else?
- Not sure
- Your only connection to the person(s) who did this is your employment with the DoD

134. [Ask if [SAFLAGW] = "True"] **Did the unwanted event occur... Mark "Yes" or "No" for each item. If you have not visited these locations or performed these activities since [X Date], mark "No."**

	Yes	No
a. [Ask if Q123 > 1 or Q125 = "Not answered"] At your primary duty location?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. [Ask if Q123 > 1 or Q125 = "Not answered"] At a military installation/ship, armory, Guard or Reserve unit site, or another DoD civilian work location?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. [Ask if Q123 > 1 or Q125 = "Not answered"] While you were performing your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. While you were on official work travel or temporary assignment?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. While you were assigned outside of the continental United States (OCONUS) to perform your DoD civilian job duties?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. While you were completing a probationary period for your DoD civilian job?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. While you were in any type of DoD sponsored training?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. When you were at a work-related, DoD, or military function?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. While you were off duty in a situation unrelated to work?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

135. [Ask if [SAFLAGW] = "True"] **Did the person(s) who did this to you... Mark "Yes" or "No" for each item.**

	Yes	No
a. Sexually harass you <u>before</u> the situation?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Stalk you <u>before</u> the situation?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Sexually harass you <u>after</u> the situation?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Stalk you <u>after</u> the situation?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

136. [Ask if [SAFLAGW] = "True"] **Thinking about this unwanted event... Mark "Yes" or "No" for each item.**

	Yes	No
a. Did it make you take steps to leave the DoD agency where it occurred?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Did it make you take steps to leave the DoD civilian workforce?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Did it make it hard to do your job or complete your work?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Did it make your workplace less productive or interfere with your organization's mission?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Did it cause arguments in the workplace or damage workgroup cohesion?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

137. [Ask if [SAFLAGW] = "True"] **Thinking about this unwanted event, did you discuss it with... Mark "Yes" or "No" for each item. If you do not have access to the resource, mark "No."**

	Yes	No
a. Your coworkers?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. A counselor or medical/mental health provider?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. A religious or spiritual leader?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your friends, family, or others outside of your organization?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. An Employee Assistance Program (EAP) counselor?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. An Ombudsman?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. A DoD Sexual Assault Response Coordinator (SARC) or Victim Advocate (VA)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. A DoD Safe Helpline (1-877-995-5247) representative?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. A DoD Victim/Witness Assistance Program (VWAP) representative?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
j. Any other DoD representative (for example, Family Advocacy Program)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. A non-DoD sexual assault hotline representative?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Yes	No
l. Legal counsel (for example, a lawyer)?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

For the purposes of this survey, the following definitions apply:

“Complaint/grievance/report” refers to disclosures to specific personnel that trigger investigations into experiences that may constitute prohibited personnel practices, including Equal Employment Opportunity (EEO) violations.

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

“EEO representative” refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

“Human Resources” refers to any employee who works in a Human Resources department within the DoD that can intake and investigate grievances on prohibited personnel practices.

“Union or Bargaining Unit representative” refers to a representative authorized by a duly recognized labor union who works on behalf of a DoD employee that can take complaints/grievances/reports and represent the employee in any ongoing investigations.

“DoD Office of Inspector General” refers to a separate, impartial DoD office that can intake and investigate grievances on behalf of DoD employees.

“Office of Special Counsel” refers to a separate, impartial federal entity that can take and investigate complaints/grievances/reports on behalf of federal employees.

138. [Ask if [SAFLAGW] = "True"] Did you make a complaint/grievance/report, either orally or in writing, about the unwanted event to any of the following individuals or organizations? Mark “Yes” or “No” for each item. If you do not have access to the resource, mark “No.”

	Yes	No
a. Your leadership.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. An EEO representative.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Human Resources.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your union or bargaining unit representative.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. DoD Office of Inspector General.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. Office of Special Counsel.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

“Team leaders” are those who provide employees with day-to-day guidance in work projects, but do not have supervisory responsibilities or conduct performance appraisals.

“Supervisors” are first-line supervisors typically responsible for employees' performance appraisals and leave approval.

“Managers” are those in management positions who typically supervise/manage one or more supervisors.

“Organization leaders” are the heads of departments/agencies and their immediate leadership team responsible for directing the policies and priorities of the department/agency. This includes any other leader in your organization who is not your direct supervisor or manager (for example, Senior Executive Service [SES] or equivalent, political appointees, military officers, or other supervisors/managers within your organization).

139. [Ask if [SAFLAGW] = "True" and Q138 a = "Yes"] Did you report this upsetting situation to any of the following levels of leadership? Mark “Yes” or “No” for each item. If you do not have access to the individual(s), mark “No.”

	Yes	No
a. Your team leader(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Your supervisor(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Your manager(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. Your organization's leader(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Some other leader(s) not listed above.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

There are two types of complaints that can be filed with EEO Representatives:

- Informal complaints** or “precomplaints” are initial allegations submitted either verbally or in writing to an EEO representative. The EEO representative takes information about the complaint, advises employees of their rights and responsibilities, and gives the involved parties the opportunity to resolve the complaint through EEO counseling or Alternative Dispute Resolution (ADR).
- Formal complaints** are allegations submitted in writing to an EEO representative that trigger an investigation into complaints that were not resolved during the informal or “precomplaint” EEO process. At this stage, employees must file a signed statement documenting the complaint and requesting corrective action.

140. [Ask if [SAFLAGW] = "True" and (Q138 b = "Yes")] Which of the following best describes the current status of your EEO complaint? Mark one.

- Informal complaint
- Formal complaint
- Not sure

Q141 – Q143: Respondents will only get one version of this question based off the combination of reporting to leaders and/or EEO. Only respondents who indicated reporting to leadership (Q138a) but did not indicate filing a complaint with an EEO representative (Q138b) will see Q142.

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

141. [Ask if [SAFLAGW] = "True" and Q138 a = "Yes" and Q138 b = "Yes"] What actions were taken in response to your report to leadership AND your complaint filed with an EEO representative about the unwanted event? For both columns, mark all that apply.

	Action in response to complaint filed with EEO	
	Action in response to report to leadership	
a. The person you told took no action.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. The person you told referred you to law enforcement.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. The rules on assault were explained to everyone in the workplace.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
d. An investigation, survey, or other assessment of the workplace was conducted.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
e. Your work station, schedule, or duties were changed to help you avoid the person(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
f. The person(s) who did this was/were moved or reassigned so that you did not have as much contact with them.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
g. There was some official career action taken against the person(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
h. Legal action (for example, a protective order, criminal charges, or civil suit) was taken against the person(s).....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
i. You were encouraged to drop the issue.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

	Action in response to complaint filed with EEO	
	Action in response to report to leadership	
j. You were discouraged from filing/further pursuing an EEO complaint or contacting law enforcement.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
k. The person(s) who did this took action against you for reporting/filing an EEO complaint. For example, their behavior became worse or they threatened you.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
l. Your coworkers treated you worse, avoided you, or blamed you for the event.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
m. You were punished for bringing it up. For example, loss of privileges, denied promotion/training, reassigned to a less favorable job.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
n. Not sure.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
o. Some other action.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Q141 – Q143: Respondents will only get one version of this question based off the combination of reporting to leaders and/or EEO. Only respondents who did not indicate reporting to leadership (Q138a) but indicated filing a complaint with an EEO representative (Q138b) will see Q143.

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

142. [Ask if [SAFLAGW] = "True" and Q138 a = "Yes" and Q138 b <> "Yes"]
What actions were taken in response to your report to leadership about the unwanted event? Mark all that apply.

- The person you told took no action.
- The person you told referred you to law enforcement.
- The rules on assault were explained to everyone in the workplace.
- An investigation, survey, or other assessment of the workplace was conducted.
- Your work station, schedule, or duties were changed to help you avoid the person(s).
- The person(s) who did this was/were moved or reassigned so that you did not have as much contact with them.
- There was some official career action taken against the person(s).
- Legal action (for example, a protective order, criminal charges, or civil suit) was taken against the person(s).
- You were encouraged to drop the issue.
- You were discouraged from filing an EEO complaint or contacting law enforcement.
- The person(s) who did this took action against you for reporting to leadership. For example, their behavior became worse or they threatened you.
- Your coworkers treated you worse, avoided you, or blamed you for the event.
- You were punished for bringing it up. For example, loss of privileges, denied promotion/training, reassigned to a less favorable job.
- Not sure
- Some other action

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

143. [Ask if [SAFLAGW] = "True" and Q138 b = "Yes" and Q138 a <> "Yes"]
What actions were taken in response to your complaint filed with the EEO representative about the unwanted event? Mark all that apply.

- The person you told took no action.
- The person you told referred you to law enforcement.
- The rules on assault were explained to everyone in the workplace.
- An investigation, survey, or other assessment of the workplace was conducted.
- Your work station, schedule, or duties were changed to help you avoid the person(s).
- The person(s) who did this was/were moved or reassigned so that you did not have as much contact with them.
- There was some official career action taken against the person(s).
- Legal action (for example, a protective order, criminal charges, or civil suit) was taken against the person(s).
- You were encouraged to drop the issue.
- You were discouraged from filing/further pursuing an EEO complaint or contacting law enforcement.
- The person(s) who did this took action against you for filing an EEO complaint. For example, their behavior became worse or they threatened you.
- Your coworkers treated you worse, avoided you, or blamed you for the event.
- You were punished for bringing it up. For example, loss of privileges, denied promotion/training, reassigned to a less favorable job.
- Not sure
- Some other action

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

144. [Ask if [SAFLAGW] = "True" and Q138 a = "Yes"] **How satisfied are you with the following aspects of how the report to leadership was handled? Mark one answer for each item.**

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
a. Availability of information about how to file an EEO complaint.....	<input checked="" type="checkbox"/>				
b. Availability of information about the complaint process and timeliness.....	<input checked="" type="checkbox"/>				
c. Availability of information about victim support resources.....	<input checked="" type="checkbox"/>				
d. How you were treated by leadership handling your report.....	<input checked="" type="checkbox"/>				
e. The action taken by leadership handling your situation.....	<input checked="" type="checkbox"/>				
f. Degree to which your privacy was/is being protected.....	<input checked="" type="checkbox"/>				
g. Amount of time it took/is taking to resolve your report.....	<input checked="" type="checkbox"/>				
h. How well you have been kept informed by leadership about the progress of your report.....	<input checked="" type="checkbox"/>				
i. The reporting process overall.....	<input checked="" type="checkbox"/>				

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

145. [Ask if [SAFLAGW] = "True" and Q138 b = "Yes"] **How satisfied are you with the following aspects of how the complaint filed with the EEO representative was handled? Mark one answer for each item.**

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
a. Availability of information about how to file an EEO complaint.....	<input checked="" type="checkbox"/>				
b. Availability of information about the complaint process and timeliness.....	<input checked="" type="checkbox"/>				
c. Availability of information about victim support resources.....	<input checked="" type="checkbox"/>				
d. How you were treated by the EEO representative handling your complaint.....	<input checked="" type="checkbox"/>				
e. The action taken by the EEO representative handling your complaint.....	<input checked="" type="checkbox"/>				
f. Degree to which your privacy was/is being protected.....	<input checked="" type="checkbox"/>				
g. Amount of time it took/is taking to resolve your complaint.....	<input checked="" type="checkbox"/>				
h. How well you have been kept informed on the progress of your complaint.....	<input checked="" type="checkbox"/>				
i. The complaint process overall.....	<input checked="" type="checkbox"/>				

Q148 – Q150: Respondents will only get one version of this question based off the combination of NOT reporting to leaders and/or EEO. Only respondents who did not indicate reporting to BOTH leadership (Q138a) or an EEO representative (Q138b) will see Q148.

"Complaint/grievance/report" refers to disclosures to specific personnel that trigger investigations into experiences that may constitute prohibited personnel practices, including Equal Employment Opportunity (EEO) violations.

146. [Ask if [SAFLAGW] = "True" and (Q138 a = "Yes" or Q138 b = "Yes" or Q138 c = "Yes" or Q138 d = "Yes" or Q138 e = "Yes" or Q138 f = "Yes")] **How satisfied are you with the outcome of your complaint/grievance/report to the following individuals or organizations? Mark one answer for each item.**

	Does not apply; I do not know the outcome	Does not apply; it is still in process	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very Satisfied
a. [Ask if Q138 a = "Yes"] Your leadership.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. [Ask if Q138 b = "Yes"] An EEO representative.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. [Ask if Q138 c = "Yes"] Human Resources.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. [Ask if Q138 d = "Yes"] Your union or bargaining unit representative.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. [Ask if Q138 e = "Yes"] DoD Office of Inspector General.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. [Ask if Q138 f = "Yes"] Office of Special Counsel.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

147. [Ask if [SAFLAGW] = "True" and (Q138 b = "Yes")] **Was your EEO complaint found to be substantiated? Mark one.**

- Yes
- No
- Does not apply; I withdrew my complaint before a determination was made
- Does not apply; the matter was settled without a determination
- Does not apply; I do not know the outcome of my complaint/grievance/report

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.
 "EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

148. [Ask if [SAFLAGW] = "True" and Q138 a <> "Yes" and Q138 b <> "Yes" and (Q138 a <> "Not answered" or Q138 b <> "Not answered" or Q138 c <> "Not answered" or Q138 d <> "Not answered" or Q138 e <> "Not answered" or Q138 f <> "Not answered")] **What were your reasons for not reporting to leadership AND not filing a complaint with an EEO representative? For both columns, mark all that apply.**

	Reason for not filing complaint with EEO	
	Reason for not reporting to leadership	
a. You did not know you could report/file an EEO complaint about this event with leadership/EEO.....	<input type="checkbox"/>	<input type="checkbox"/>
b. You did not know with whom to report the event or how to file an EEO complaint.....	<input type="checkbox"/>	<input type="checkbox"/>
c. You thought it was not serious enough to report.....	<input type="checkbox"/>	<input type="checkbox"/>
d. You did not think your report to leadership/ EEO representative would be kept private.....	<input type="checkbox"/>	<input type="checkbox"/>
e. You did not want more people to know.....	<input type="checkbox"/>	<input type="checkbox"/>
f. You did not want people to think less of you.....	<input type="checkbox"/>	<input type="checkbox"/>
g. You wanted to forget about it and move on.....	<input type="checkbox"/>	<input type="checkbox"/>
h. You did not think anything would be done.....	<input type="checkbox"/>	<input type="checkbox"/>
i. You did not think you would be believed.....	<input type="checkbox"/>	<input type="checkbox"/>
j. You did not trust that the process would be fair.....	<input type="checkbox"/>	<input type="checkbox"/>
k. You felt partially to blame, ashamed, or embarrassed.....	<input type="checkbox"/>	<input type="checkbox"/>

Q148 – Q150: Respondents will only get one version of this question based off the combination of NOT reporting to leaders and/or EEO. Only respondents who did not indicate reporting to leadership (Q138a) but indicated filing a complaint with an EEO representative (Q138b) will see Q149.

EEO

- | | | | |
|----|--|--------------------------|--------------------------|
| | | <input type="checkbox"/> | <input type="checkbox"/> |
| o. | You thought it might hurt your performance appraisal or your career | <input type="checkbox"/> | <input type="checkbox"/> |
| p. | You did not want to hurt the person's career..... | <input type="checkbox"/> | <input type="checkbox"/> |
| q. | You did not want to hurt the person's family | <input type="checkbox"/> | <input type="checkbox"/> |
| r. | You were worried about negative consequences from the person(s) who did it..... | <input type="checkbox"/> | <input type="checkbox"/> |
| s. | You were worried about negative consequences from leadership (for example, being denied a promotion, disciplined, made to perform additional duties, etc.)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| t. | You were worried about negative consequences from your coworkers or peers (for example, excluding you from social activities, ignoring you, making disrespectful remarks, etc.)..... | <input type="checkbox"/> | <input type="checkbox"/> |
| u. | You took other actions to handle the situation..... | <input type="checkbox"/> | <input type="checkbox"/> |
| v. | Some other reason..... | <input type="checkbox"/> | <input type="checkbox"/> |

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

149. [Ask if [SAFLAGW] = "True" and Q138 a <> "Yes" and Q138 b = "Yes"]

What were your reasons for not reporting to leadership? Mark all that apply.

- You did not know you could report the event to leadership
- You did not know with whom to report the event
- You did not feel comfortable discussing the event with leadership
- You did not think your discussion with leadership would be kept private
- You did not want more people to know
- You did not want people to think less of you
- You wanted to forget about it and move on
- You did not think anything would be done
- You did not think you would be believed
- You did not trust that the process would be fair
- You felt partially to blame, **ashamed, or embarrassed**
- You thought other people would blame you
- You thought you might get in trouble for something you did
- You thought you might be labeled as a troublemaker
- You thought it might hurt your performance appraisal **or your career**
- You did not want to hurt the person's career
- You did not want to hurt the person's family**
- You were worried about negative consequences from the person(s) who did it
- You were worried about negative consequences from leadership (for example, being denied a promotion, disciplined, made to perform additional duties, etc.)
- You were worried about negative consequences from your coworkers or peers (for example, excluding you from social activities, ignoring you, making disrespectful remarks, etc.)
- You took other actions to handle the situation
- Some other reason

Q148 – Q150: Respondents will only get one version of this question based off the combination of NOT reporting to leaders and/or EEO. Only respondents who indicated reporting to leadership (Q138a) but did not indicate filing a complaint with an EEO representative (Q138b) will see Q150.

“EEO representative” refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

150. [Ask if [SAFLAGW] = "True" and Q138 b <> "Yes" and Q138 a = "Yes"]
What were your reasons for not filing a complaint with an EEO representative?
Mark all that apply.

- You did not know you could file a complaint about the event with EEO
- You did not know with whom to report the event or how to file an EEO complaint
- You thought it was not serious enough to file a complaint with EEO
- You did not think your complaint would be kept private
- You did not want more people to know
- You did not want people to think less of you
- You wanted to forget about it and move on
- You did not think anything would be done
- You did not think you would be believed
- You did not trust that the process would be fair
- You felt partially to blame, **ashamed, or embarrassed**
- You thought other people would blame you
- You thought you might get in trouble for something you did
- You thought you might be labeled as a troublemaker
- You thought it might hurt your performance appraisal **or your career**
- You did not want to hurt the person's career
- You did not want to hurt the person's family**
- You were worried about negative consequences from the person(s) who did it
- You were worried about negative consequences from leadership (for example, being denied a promotion, disciplined, made to perform additional duties, etc.)
- You were worried about negative consequences

from your coworkers or peers (for example, excluding you from social activities, ignoring you, making disrespectful remarks, etc.)

- You took other actions to handle the situation
- Some other reason

151. [Ask if [SAFLAGW] = "True"]
Thinking about this unwanted event, did you file a police report with... Mark "Yes" or "No" for each item.

	Yes	No
a. Your local <u>civilian law enforcement agency</u> ?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. Your local <u>military law enforcement or criminal investigative organization</u> ?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

152. [Ask if [SAFLAGW] = "True" and ((Q151 a = "No" and Q151 b <> "Yes") or (Q151 a <> "Yes" and Q151 b = "No"))]
What were your reasons for not filing a police report about the unwanted event with a law enforcement agency? Mark all that apply.

- You thought it was not serious enough to report
- You did not want more people to know
- You did not want people to think less of you
- You wanted to forget about it and move on
- You did not know how to report the event
- You did not think your report would be kept private
- You did not think anything would be done
- You did not think you would be believed
- You did not trust that the process would be fair
- You felt partially to blame, **ashamed, or embarrassed**
- You thought other people would blame you
- You thought you might get in trouble for something you did
- You thought you might be labeled as a troublemaker
- You thought it might hurt your career
- You did not want to hurt the person's career
- You did not want to hurt the person's family**
- You were worried about negative consequences from the person(s) who did it
- You took other actions to handle the situation
- Some other reason

153. [Ask if [SAFLAGW] = "True" and ((Q138 a <> "Not answered" or Q138 b <> "Not answered" or Q138 c <> "Not answered" or Q138 d <> "Not answered" or Q138 e <> "Not answered" or Q138 f <> "Not answered")) or (Q152 a <> "Not answered" or Q152 b <> "Not answered"))] **In retrospect, would you make the same decision about reporting if you could do it over?**

- Yes
- No

GENDER-RELATED EXPERIENCES

Earlier in the survey you indicated that you experienced an unwanted event. It can be difficult to remember the exact date when events occurred. In this study, it is important to know which events happened in the last 12 months, and which events happened earlier.

154. [Ask if [SAFLAG] = "True"] **Thinking about when the event occurred, how certain are you that it occurred in the last 12 months?** If the event occurred over a long time, think about whether it ever happened after [X Date].

- Definitely occurred AFTER [X Date]
- Not sure if it occurred BEFORE or AFTER [X Date]
- Definitely occurred BEFORE [X Date]

155. [Ask if [SAFLAG] = "True" and MATCHING ITEM = "Yes"] **Earlier in the survey you indicated that you experienced at least one unwanted event in which someone...**

- a. Put their penis into your anus, mouth, or vagina.
- b. Put any object or any body part other than a penis into your anus, mouth, or vagina.
- c. Made you put any part of your body or any object into someone's mouth, vagina, or anus.
- d. Intentionally touched private areas of your body.
- e. Intentionally touched ANY area of your body.
- f. Made you touch private areas of their body or someone else's body.
- g. Made you touch ANY area of their body or someone else's body.
- h. Attempted to put a penis, an object, or any body part into your anus, mouth, or vagina, but no penetration actually occurred.

156. [Ask if [SAFLAG] = "True"] **What was the date of your MOST RECENT unwanted event like this?**

a. Month

b. Year

PRIOR EXPERIENCES

The questions so far have been about things that occurred in the past year. For the next question, please think about events that happened more than one year ago, BEFORE [X Date]. These are all experiences that you did not tell us about earlier in the survey.

These questions assess unwanted gender-related behaviors that you may have experienced as a DoD civilian employee in your DoD civilian workplace.

157. Before [X Date], have you ever experienced the following unwanted gender-related behaviors in the DoD civilian workplace? **Mark one answer for each item.**

	Not sure	No	Yes
a. Sexual harassment.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Gender discrimination.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Sexual assault.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

YOUR DOD CIVILIAN WORKPLACE

158. Suppose that you have to decide whether to continue to work for your organization. If you had to make this decision, how likely is it you would choose to stay?

- Very likely
- Likely
- Neither likely nor unlikely
- Unlikely
- Very unlikely

"Work unit" is a DoD civilian employee's immediate work unit headed by the employee's direct supervisor.

159. What is the gender mix in your current work unit? Mark one.

- Mostly men
- A relatively even mix of men and women
- Mostly women

Race/Ethnicity refers to such terms for people as American Indian/Alaska Native, Asian, Black/African American, Hispanic, Native Hawaiian/Pacific Islander, and White. A person can belong to one or more racial/ethnic groups.

160. Is your immediate supervisor... Mark one answer for each item.

	Not sure	No	Yes
a. The same gender as you?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
b. The same race/ethnicity as you?.....	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

161. How safe or unsafe do you feel from each of the following? Mark one answer for each item. If you do not perform official work travel or temporary assignment, please mark "Does not apply."

	60 Does not apply	1 Very unsafe	2 Unsafe	3 Neither safe nor unsafe	4 Safe	5 Very safe
a. Being <u>sexually harassed</u> at your primary duty station		<input checked="" type="checkbox"/>				
b. Being <u>sexually assaulted</u> at your primary duty location.....		<input checked="" type="checkbox"/>				
c. Being <u>sexually harassed</u> while on official work travel or temporary assignments		<input checked="" type="checkbox"/>				
d. Being <u>sexually assaulted</u> while on official work travel or temporary assignments		<input checked="" type="checkbox"/>				

162. How likely would you be to... Mark one answer for each item.

	Very unlikely	Unlikely	Neither likely nor unlikely	Likely	Very likely
a. Encourage someone who has experienced <u>sexual harassment</u> to tell a supervisor?.....	<input checked="" type="checkbox"/>				
b. Encourage someone who has experienced <u>sexual assault</u> to seek counseling?.....	<input checked="" type="checkbox"/>				
c. Encourage someone who has experienced <u>sexual assault</u> to report it?.....	<input checked="" type="checkbox"/>				
d. Tell a supervisor about <u>sexual harassment</u> if it happened to you?.....	<input checked="" type="checkbox"/>				
e. Report a <u>sexual assault</u> if it happened to you?.....	<input checked="" type="checkbox"/>				

"Work unit" is a DoD civilian employee's immediate work unit headed by the employee's direct supervisor.

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

163. Please indicate how well your work unit leadership... Mark one answer for each item.

	Very poorly	Poorly	Neither well nor poorly	Well	Very well
a. Makes it clear that sexual harassment, gender discrimination, and sexual assault have no place in the DoD.....	<input checked="" type="checkbox"/>				
b. Promotes an organizational climate based on mutual respect and trust.....	<input checked="" type="checkbox"/>				
c. Leads by example by refraining from sexist comments and behaviors.....	<input checked="" type="checkbox"/>				

	Very poorly	Poorly	Neither well nor poorly	Well	Very well
d. Catches and immediately corrects incidents of sexual harassment. For example, inappropriate jokes, comments, and behaviors.....	<input checked="" type="checkbox"/>				
e. Creates an environment where victims would feel comfortable reporting sexual harassment, gender discrimination, or sexual assault.....	<input checked="" type="checkbox"/>				
f. Publicizes sexual harassment, gender discrimination, and sexual assault resources (for example, EEO representative contact information, awareness posters, sexual assault hotline number).....	<input checked="" type="checkbox"/>				

164. How much do you agree or disagree with the following statements about your work unit? Mark one answer for each statement.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Members in your work unit really care about each other.....	<input checked="" type="checkbox"/>				
b. Members in your work unit work well together as a team.....	<input checked="" type="checkbox"/>				
c. Members in your work unit pull together to get the job done.....	<input checked="" type="checkbox"/>				
d. Members in your work unit trust each other.....	<input checked="" type="checkbox"/>				
e. Rude behavior is not accepted by your coworkers.....	<input checked="" type="checkbox"/>				
f. Angry outbursts are not tolerated by anyone in your unit.....	<input checked="" type="checkbox"/>				
g. Respectful treatment is the norm in your unit.....	<input checked="" type="checkbox"/>				
h. Your coworkers make sure everyone in your unit is treated with respect.....	<input checked="" type="checkbox"/>				

165. During the past 12 months, how often have you experienced any of the following behaviors where your coworkers... Mark one answer for each item.

	Very often	Often	Sometimes	Once or twice	Never
a. Did not provide information or assistance when you needed it?.....	<input checked="" type="checkbox"/>				
b. Were excessively harsh in their criticism of your work performance?.....	<input checked="" type="checkbox"/>				
c. Took credit for work or ideas that were yours?.....	<input checked="" type="checkbox"/>				
d. Gossiped/talked about you?.....	<input checked="" type="checkbox"/>				
e. Used insults, sarcasm, or gestures to humiliate you?.....	<input checked="" type="checkbox"/>				
f. Yelled when they were angry with you?.....	<input checked="" type="checkbox"/>				

“Work unit” is a DoD civilian employee's immediate work unit headed by the employee's direct supervisor.

166. How much do you agree or disagree with the following statements about the work you do in your work unit? Mark one answer for each item.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Your work makes good use of your skills.....	<input checked="" type="checkbox"/>				
b. You like the kind of work you do.....	<input checked="" type="checkbox"/>				
c. You are satisfied with your job as a whole.....	<input checked="" type="checkbox"/>				

167. How much do you agree or disagree that the action describes your immediate supervisor? Mark one answer for each statement.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Fosters your trust.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Ensures that all assigned personnel are treated fairly.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Evaluates your work performance fairly.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Enforces standards equally across all unit members.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Avoids showing favoritism when assigning tasks.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Addresses all unit members in the same way to avoid perceptions of preferential treatment.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Ensures unit members are disciplined in the same manner.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

"Work unit" is a DoD civilian employee's immediate work unit headed by the employee's direct supervisor.

168. How much do you agree or disagree with the following statements about diversity in your work unit? Mark one answer for each item.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Members are treated as valued members of the team without losing their unique identities.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I feel excluded by my work unit because I am different.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Within my work unit, I am encouraged to offer ideas on how to improve operations.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Members in my work unit are empowered to make work-related decisions on their own.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
e. Outcomes (for example, training opportunities, awards, recognition) are fairly distributed among members of my unit.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The decision-making processes that impact my work unit are fair.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Racial slurs, comments, and/or jokes are used in my work unit.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Sexist slurs, comments, and/or jokes are used in my work unit.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. I believe I can use my leadership to address concerns about discrimination without fear of retaliation or reprisal.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CULTURE

This section of the survey explores your opinions regarding your work unit and its leaders. Consider each statement and select the response option that best describes your opinion about each statement.

"Work unit" is a DoD civilian employee's immediate work unit headed by the employee's direct supervisor.

169. Do you agree or disagree with the following statements regarding your current work unit? Please respond to each item.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. It would be very risky to file a sexual harassment complaint.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. A sexual harassment complaint would not be taken seriously.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. A sexual harassment complaint would be thoroughly investigated.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I would feel comfortable reporting a sexual harassment complaint.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Strongly disagree				
	Disagree				
	Neither agree nor disagree				
	Agree				
	Strongly agree				
e. Sexual harassment is not tolerated.....	<input checked="" type="checkbox"/>				
f. Individuals who sexually harass others get away with it.....	<input checked="" type="checkbox"/>				
g. I would be afraid to make a sexual harassment complaint.....	<input checked="" type="checkbox"/>				
h. Penalties against individuals who sexually harass others at work are strongly enforced.....	<input checked="" type="checkbox"/>				
i. Actions are being taken to prevent sexual harassment.....	<input checked="" type="checkbox"/>				

170. What percent of DoD civilian employees do you believe agree with the following statements? Mark one answer for each item.

	0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%	No basis to judge
a. Diversity initiatives positively impact the DoD civilian workplace.	<input checked="" type="checkbox"/>											
b. Men and women should be treated equally in the workplace.	<input checked="" type="checkbox"/>											
c. Members should be treated as valued members of the team without losing their unique identities.....	<input checked="" type="checkbox"/>											
d. Women exaggerate problems they have at work.	<input checked="" type="checkbox"/>											
e. Diversity will benefit everyone.	<input checked="" type="checkbox"/>											
f. When women lose to men in fair competition, they typically complain about being discriminated against.	<input checked="" type="checkbox"/>											
g. Women are too easily offended.	<input checked="" type="checkbox"/>											

171. How much do you agree or disagree with the following statements. Mark one answer for each item.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Diversity initiatives positively impact the DoD civilian workplace.	<input checked="" type="checkbox"/>				
b. Men and women should be treated equally in the workplace.	<input checked="" type="checkbox"/>				
c. Members should be treated as valued members of the team without losing their unique identities.....	<input checked="" type="checkbox"/>				
d. Women exaggerate problems they have at work.	<input checked="" type="checkbox"/>				
e. Diversity will benefit everyone.	<input checked="" type="checkbox"/>				
f. When women lose to men in fair competition, they typically complain about being discriminated against.	<input checked="" type="checkbox"/>				
g. Women are too easily offended.	<input checked="" type="checkbox"/>				

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

**172. To what extent are you willing to...
Mark one answer for each item.**

	Very large extent	Large extent	Moderate extent	Small extent	Not at all
a. Point out to someone when you think they "crossed the line" with gender-related comments or jokes?.....	<input checked="" type="checkbox"/>				
b. Encourage others to point out to someone when they think he or she "crossed the line" with gender-related comments or jokes?.....	<input checked="" type="checkbox"/>				
c. Seek help from your leadership in confronting other DoD civilian employees who continue to engage in sexual harassment after having been previously spoken to?.....	<input checked="" type="checkbox"/>				
d. Provide support to a coworker who was being sexually harassed?	<input checked="" type="checkbox"/>				

"Someone from work" includes any person(s) you have contact with as part of your DoD civilian job duties. "Someone from work" could be another DoD civilian employee, a supervisor, someone above or below you in pay grade/category, a military member, or a contractor. They could be in your organization or in other organizations.

173. In the past 12 months, about how many times did you witness someone from work "cross the line" with gender-related comments or jokes?

Times

"Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

"Human Resources" refers to any employee who works in a Human Resources department within the DoD that can intake and investigate grievances on prohibited personnel practices.

"Union or Bargaining Unit representative" refers to a representative authorized by a duly recognized labor union who works on behalf of a DoD employee that can take complaints/grievances/reports and represent the employee in any ongoing investigations.

174. [Ask if Q173 >= 1] How often did you take the following actions when you witnessed someone from work "cross the line" with gender-related comments or jokes? Mark one answer for each item.

	None of the time	Some of the time	About half of the time	Most of the time	Every time
a. I checked on the victim.....	<input checked="" type="checkbox"/>				
b. I said something to the person(s) who made the comments or jokes.....	<input checked="" type="checkbox"/>				
c. I sought help from leadership.....	<input checked="" type="checkbox"/>				
d. I sought help from an EEO representative, Human Resources Representative, Union Representative, or some other official tasked with enforcing EEO policies	<input checked="" type="checkbox"/>				
e. I intervened in some other way.....	<input checked="" type="checkbox"/>				

PERSONNEL POLICY AND PRACTICES

175. How satisfied have you been with the availability of information on... Mark one answer for each item.

	Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
a. How to file a complaint of <u>sexual harassment</u> ?	<input checked="" type="checkbox"/>				
b. How to file a complaint of <u>gender discrimination</u> ?	<input checked="" type="checkbox"/>				
c. How to report a <u>sexual assault</u> ?	<input checked="" type="checkbox"/>				

"EEO representative" refers to employees working for an EEO office on behalf of the DoD tasked with enforcing EEO regulations. These employees provide counseling and investigate EEO complaints.

176. Do you know how to contact the EEO representative for your organization?

- Yes
- No

SEXUAL HARASSMENT/GENDER DISCRIMINATION TRAINING

177. Have you had any DoD sponsored training during the past 12 months on topics related to sexual harassment and/or gender discrimination?

- Yes
- No

178. [Ask if Q177 = "Yes"] My DoD sponsored sexual harassment and/or gender discrimination training... Mark one answer for each item.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Provides a good understanding of what actions are considered sexual harassment and gender discrimination	<input checked="" type="checkbox"/>				
b. Teaches how to intervene when you witness a situation involving a coworker (bystander intervention)	<input checked="" type="checkbox"/>				
c. Explains the role of the DoD in handling sexual harassment and gender discrimination complaints	<input checked="" type="checkbox"/>				
d. Explains the reporting options available to DoD civilian employees if sexual harassment or gender discrimination occurs	<input checked="" type="checkbox"/>				
e. Identifies the points of contact for complaints of sexual harassment or gender discrimination (for example, supervisor, EEO representative)	<input checked="" type="checkbox"/>				
f. Explains how sexual harassment and gender discrimination are a mission readiness problem	<input checked="" type="checkbox"/>				
g. Explains that, in addition to women, men can experience sexual harassment and gender discrimination	<input checked="" type="checkbox"/>				
h. Takes into consideration the unique needs and experiences of DoD civilian employees	<input checked="" type="checkbox"/>				

SEXUAL ASSAULT TRAINING

179. Have you had any DoD sponsored training during the past 12 months on topics related to sexual assault?

- Yes
- No

180. [Ask if Q179 = "Yes"] My DoD sponsored sexual assault training... Mark one answer for each item.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Provides a good understanding of what actions are considered sexual assault.....	<input checked="" type="checkbox"/>				
b. Explains the resources available to victims (for example, Safe Helpline).....	<input checked="" type="checkbox"/>				
c. Explains the reporting options available within the DoD community if a sexual assault occurs.....	<input checked="" type="checkbox"/>				
d. Explains the reporting options available to DoD civilian employees who are sexually assaulted by someone from work.....	<input checked="" type="checkbox"/>				
e. Explains how sexual assault can affect all members of the DoD community, including civilians.....	<input checked="" type="checkbox"/>				
f. Takes into consideration the unique needs and experiences of DoD civilian employees.....	<input checked="" type="checkbox"/>				

DOD LEADERSHIP TRAINING

A "non-supervisor" is an employee with no supervisory responsibilities.

A "team leader" provides employees with day-to-day guidance in work projects, but does not have supervisory responsibilities or conduct performance appraisals.

A "supervisor" serves as a first-line supervisor who is typically responsible for employees' performance appraisals and leave approval.

A "manager" is an employee in a management position who typically supervises/manages one or more supervisors.

An "executive" is a member of the Senior Executive Service (SES) or equivalent.

181. What is your supervisory status?

Mark one.

- Non-supervisor
- Team leader
- Supervisor
- Manager
- Executive

182. [Ask if Q181 = "Supervisor" or Q181 = "Manager" or Q181 = "Executive"] Do you agree or disagree that DoD training you have received as a leader has prepared you for... Mark one answer for each item.

	Does not apply/My training did not cover this	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. Providing support to employees who make complaints.....		<input checked="" type="checkbox"/>				
b. Responding to reports of sexual harassment.....		<input checked="" type="checkbox"/>				
c. Responding to reports of gender discrimination.....		<input checked="" type="checkbox"/>				
d. Responding to reports of sexual assault		<input checked="" type="checkbox"/>				
e. Helping an employee through the EEO complaint process.....		<input checked="" type="checkbox"/>				

Does not apply/My training did not cover this

Strongly disagree

Disagree

Neither agree nor disagree

Agree

Strongly agree

f. Handling retaliation against employees who report unwanted gender-related behaviors in the workplace.....

<input type="checkbox"/>					
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183. [Ask if Q181 = "Supervisor" or Q181 = "Manager" or Q181 = "Executive"]
Have you ever received a report for any of the following experiences from one of your employees? Mark "Yes" or "No" for each item.

	Yes	No
a. Sexual harassment.....	<input type="checkbox"/>	<input type="checkbox"/>
b. Gender discrimination.....	<input type="checkbox"/>	<input type="checkbox"/>
c. Sexual assault within the DoD civilian workplace.....	<input type="checkbox"/>	<input type="checkbox"/>

184. [Ask if (Q181 = "Supervisor" or Q181 = "Manager" or Q181 = "Executive") and Q183 Matching item = "Yes"] Please rate your level of confidence in responding to the report of... Mark "Yes" or "No" for each item.

Not at all confident

Slightly confident

Moderately confident

Very confident

Completely confident

a. Sexual harassment?.....	<input type="checkbox"/>				
b. Gender discrimination?.....	<input type="checkbox"/>				
c. Sexual assault within the DoD civilian workplace.....	<input type="checkbox"/>				

ADDITIONAL WORKPLACE EXPERIENCES

The next questions ask if someone in a leadership position in the DoD treated you unfairly because of your gender and if they would have treated someone of a different gender better. "Leadership" refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

185. Since [X DATE], did someone in a DoD leadership position... Mark "Yes" or "No" for each item.

	Yes	No
a. Give you a lower performance evaluation because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
b. Make it harder for you to get a DoD civilian employee award because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
c. Make it harder for you to get a DoD civilian promotion because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
d. Assign you to an undesirable position or duty station because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
e. Assign you to an undesirable or unimportant job task because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
f. Make it difficult or impossible for you to get a DoD civilian training opportunity because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
g. Deny your leave requests because of your gender?	<input type="checkbox"/>	<input type="checkbox"/>
h. Discipline you unfairly because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
i. Deny your requests to modify your duty hours, schedule, or telework privileges because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
j. Demote or reassign you to a lower position or job assignment because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>
k. You did not get a DoD civilian job assignment that you wanted and for which you were qualified because of your gender.....	<input type="checkbox"/>	<input type="checkbox"/>
l. Take any other adverse personnel action against you because of your gender?.....	<input type="checkbox"/>	<input type="checkbox"/>

[Ask if Q185 l = "True"] Please specify the other adverse personnel actions experienced in the past 12 months. Please do not include any personally identifiable information (for example, names, addresses).

COVID-19

187. As a result of COVID-19, have the following increased or decreased in your DoD civilian workplace?

	Not applicable, I joined during COVID-19			
	Decreased since COVID-19			
	About the same as before COVID-19			
	Increased since COVID-19			
a. In-person interactions with coworkers and leaders.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Telework or remote work arrangements.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Virtual synchronous interactions with coworkers and leaders (for example, phone calls, conference calls, video conferencing).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your work hours.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Number of days physically in the office.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Your use of leave (for example, sick leave, annual leave, administrative leave).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

"Work unit" is a DoD civilian employee's immediate work unit headed by the employee's direct supervisor.

188. In your opinion, have the following become better or worse in your DoD civilian workplace since COVID-19?

	Not applicable, I joined during COVID-19			
	Worse since COVID-19			
	About the same as before COVID-19			
	Better since COVID-19			
a. Your treatment as a [man] [woman].....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your opportunities (for example, assignments, awards, training opportunities, promotions).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your relationship with your coworkers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your relationship with your immediate supervisor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Your ability to complete your work.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The overall gender relations in your unit.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Worse since COVID-19

About the same as before COVID-19

Better since COVID-19

a. Your treatment as a [man][woman].....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your opportunities (for example, assignments, awards, training opportunities, promotions).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your relationship with your coworkers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your relationship with your immediate supervisor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Your ability to complete your work.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The overall gender relations in your unit.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ADDITIONAL BACKGROUND INFORMATION

189. How much do you agree or disagree with the following statements? Mark one answer for each item.

	Strongly disagree				
	Disagree				
	Neither agree nor disagree				
	Agree				
	Strongly agree				
a. I tend to bounce back quickly after hard times.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I have a hard time making it through stressful events.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. It does not take me long to recover from a stressful event.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. It is hard for me to snap back when something bad happens.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I usually come through difficult times with little trouble.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I tend to take a long time to get over set-backs in my life.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

We ask for demographic information to provide DoD leaders information about the attitudes and concerns of all subgroups of personnel so that no groups are overlooked. Your answers to any demographic questions are strictly used for this purpose and will not be used to identify individual respondents.

Remember, all the information you share will be kept confidential.

190. What is your current relationship status?

- Married
- Living with a romantic partner (for example, boyfriend or girlfriend)
- In a committed romantic relationship, but not living together
- Divorced and not currently in a relationship
- Widowed and not currently in a relationship
- Never married and not currently in a relationship
- Other or prefer not to say

191. Are you Spanish/Hispanic/Latino?

- No, not Spanish/Hispanic/Latino
- Yes, Mexican, Mexican-American, Chicano, Puerto Rican, Cuban, or other Spanish/Hispanic/Latino

192. What is your race? Mark one or more races to indicate what you consider yourself to be.

- American Indian or Alaska Native
- Asian (for example, Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese)
- Black or African American
- Native Hawaiian or other Pacific Islander (for example, Samoan, Guamanian, or Chamorro)
- White

193. What is your military service status? Mark one.

- No prior military service
- Currently in National Guard or Reserve
- Retired
- Separated or discharged

194. Do you consider yourself to be...

Mark one.

- Heterosexual or straight?
- Gay or lesbian?
- Bisexual?
- Something else** (for example, questioning, asexual, undecided, self-identified)?
- Prefer not to answer

195. What sex were you assigned at birth, on your original birth certificate? Mark one.

- Female
- Male
- Do not know

196. How do you describe yourself? Mark one.

- Man
- Woman
- Transgender (male to female)
- Transgender (female to male)
- None of the above
- Prefer not to answer

“Leadership” refers to individuals who perform a leadership role within your organization at any level, including team leaders, supervisors, managers, and organization leaders.

197. How did you hear about this survey?

Mark all that apply.

- Postal letter
- E-mail from survey administrator
- E-mail from your leadership
- Verbally from your leadership
- Social media
- News article
- Friend or peer
- Other

[Ask if Q197 h = “Marked”] Please specify the other ways you heard about this survey. Please do not include any personally identifiable information (for example, names, addresses).

TAKING THE SURVEY

198. If you have comments or concerns that you were not able to express in answering this survey, please enter them in the space provided. Please do not enter personally identifiable information (for example, names, addresses). Your feedback is useful and appreciated.

199. [Ask if Q1 = " None, you were retired or had left"] Based on your answer to the previous question, you are ineligible to take this survey. If you feel you have encountered this message in error, click the back arrow button and check your answer. To submit your answer click *Submit*. For further help, please call our Survey Processing Center toll-free at 1-800-881-5307, e-mail dodhra.WGRC-survey@mail.mil, or send a fax to 1-763-268-3002.

