SUPPORTING STATEMENT – PART B

B.  COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS

1.  Description of the Activity

This submission corresponds to the grant PT190082 funded by the Congressionally Directed Medical Research Program (CDMRP) and aligns with the Secretary of Defense’s call for novel programs to prevent sexual assault within the military. Reducing sexual assault among service members is a significant national priority. There are few rigorous evaluations of sexual assault prevention programs for service members. The aim of this study is to assist in the adaptation of an existing web-based sexual assault prevention program for college men and women, for use among the Navy population. To achieve this aim, data will be collected in several ways (i.e., normative survey, focus groups, and interviews) and participants will participate in only one type of data collection. First, responses to a normative survey (N=500) will provide information about the behavior and attitudes of Sailors regarding alcohol use and sexual assault. Next, focus groups (N = 60) and interviews (N = 27) will be conducted to obtain feedback about the content of the intervention and ways to adapt it for Sailors. There is no standardized set of questions for the focus groups or interviews. Interviewees and focus group respondents will be selected based on their drinking habits, which will be determined by a brief pre-interview/focus group survey. After interview/focus group completion, a post-interview/focus group survey will be given to obtain demographic and alcohol use information to be used as descriptive information, as well as data from standardized measures that assess respondents’ opinions of the existing intervention. All surveys will be completed via a HIPAA- compliant software. Data from these surveys will be incorporated into the intervention content and help generate an adapted prototype of the sexual assault prevention program (+Change) for Sailors.

In the long-term, this research benefits the readiness of the force by producing an easily disseminated high-quality sexual assault prevention program that can be implemented in multiple military settings and sustain evaluation in a larger clinical trial. This research can also have a secondary impact on reducing hazardous alcohol use among service members and can prevent the occurrence of alcohol use problems and associated negative health sequelae in service members. These long-term objectives are consistent with both DoD (including section 540D of the 2020 National Defense Authorization Act) and the national public health priorities.

The universe of potential participants for these surveys includes all active duty Sailors between the ages of 18 and 24. Normative survey data will be collected from a random sample of 500 Sailors. The random sample of Sailors (Sailors’ email addresses) will be given to us by the Defense Manpower Data Center (DMDC). Participants will be enlisted, active-duty male and female Sailors between the ages of 18-24. The age range is dictated by the prior research documenting rates of sexual assault perpetration and victimization are highest among individuals between the ages of 18-24 and research documenting that most assaults are perpetrated by a same age peer. The sample size was based on current standards of practice, and our prior development of normative feedback interventions for other populations. A sample of 500 is sufficient for presenting normative data in an intervention. Emails will be sent in groups of 1000 until the maximum number of 500 participants with complete normative survey data are reached.

A random selection of these DMDC-provided email addresses, as well as email addresses from interested Sailors responding to recruitment flyers, will be used to obtain participants for the individual interviews (N = 27), and small focus groups (5-7 participants per group), for a total of 60 focus group participants. Before and after each interview, participants will complete the pre- and post-interview surveys. Before and after each focus group, participants will complete the pre- and post- focus group surveys. The sample size for the interviews and focus groups are based on prior research indicating that 9-10 interviews are needed to reach saturation of qualitative themes. Our prior treatment development research has also found that such a sample size is sufficient for treatment development.

Power analysis is not required for this project since the primary purpose is to collect normative data to incorporate into the +Change program and to produce a final prototype of the program.

2.  Procedures for the Collection of Information

a.  Statistical methodologies for stratification and sample selection: There is no stratification. The sample size was based on current standards of practice, and our prior development of normative feedback interventions for other populations. Study subsamples will include 500 normative survey participants, 27 interview participants, and 60 focus group participants and are sufficient for informing the intervention. Emails will be sent in groups of 1000 until the maximum number of participants with complete data are reached.

b.  Estimation procedures: Survey, interview, or focus group results will not be adjusted or weighted. The aim of this study is to assist in the adaptation of an existing web-based sexual assault prevention program for college men and women for use among the Navy population. Normative data from the survey, and qualitative data from interviews and focus groups will be incorporated into the intervention content and will help generate an adapted prototype of the sexual assault prevention program (+Change).

c.  Degree of accuracy needed for the Purpose discussed in the justification: The intention of the survey, interviews, and focus groups is to obtain normative and qualitative data about alcohol use and perceptions of sexual assault behaviors among Sailors ages 18-24. However, we recognize that representativeness cannot be ensured in a voluntary survey and that conclusions based on small samples of participants are less reliable than those based on larger samples.

d.  Unusual problems requiring specialized sampling procedures: N/A

e.  Use of periodic or cyclical data collections to reduce respondent burden: NA

3.  Maximization of Response Rates, Non-response, and Reliability

The normative survey will be completed during off-duty hours, and participants will receive a $30 gift card code for their survey completion. Interviews, focus groups, and associated surveys (pre- post-interview/focus group surveys) will also be completed during off-duty hours, and participants will receive a $40 gift card code for their participation. Emails will be sent in groups of 1000 until the maximum number of participants with complete data are reached. No additional methods will be used to maximize response rates. To increase the accuracy and reliability of responses, study participants will be provided information about the study, including the risks and benefits of participation, confidentiality, and the voluntary nature of study participation. Participants are instructed to complete the surveys in as accurate and thorough manner as possible (although they may skip any question they do not wish to answer and may discontinue survey participation at any time). The fact that the surveillance is anonymous and voluntary is likely to increase the candidness of responses, although this cannot be assured.

4.  Tests of Procedures

The surveys were piloted internally among NHRC staff, as well as among one active duty Sailor. Additionally, we consulted with Drs. Beverly Fortson and Andra Tharp of the DoD Sexual Assault Prevention and Response Office (SAPRO) to ensure that the survey items were consistent with the standards in the field and within the DoD, as well as appropriate to meet the project aims aligned with sponsor priorities. Responses to many of the questions included in the surveys were already collected as part of a similar study among Soldiers at Ft. Bragg, which was shown to be successful.

5.  Statistical Consultation and Information Analysis

a. Provide names and telephone number of individual(s) consulted on statistical aspects of the design.

These surveys are intended to primarily be descriptive and normative and fall within the statistical expertise of the project PIs and Co-PIs listed below.

b. Provide name and organization of person(s) who will collect and analyze the collected information.

All people collecting and analyzing data are government employees or contractors working on behalf of the Naval Health Research Center, or Co-PI’s, or survey staff from one of the collaborating institutions, including Georgia State University, Rhode Island Hospital, and Arizona State University.

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