+Change Sailors Post-Interview/Focus Group Survey

Start of Block: Privacy Act Statement

OMB CONTROL NUMBER: 0703-0080 OMB EXPIRATION DATE: 08/31/2022

AGENCY DISCLOSURE NOTICE

The public reporting burden for this collection of information, 0703-0080, is estimated to average 105 minutes per response (5, 90, and 10 minutes for pre-survey, interview/focus group, and post-survey, respectively), including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

Privacy Act Statement This statement serves to inform you of the purpose for collecting personal information required by this system and how it will be used.

AUTHORITY: 10 U.S.C. Chapter 55, Medical and Dental Care; 32 CFR 199.17, TRICARE program; and E.O. 9397 (SSN), as amended.

PURPOSE: To collect information from Navy service members in order to create a sexual assault prevention and alcohol reduction intervention specific to Sailors ages 18-24

ROUTINE USES: Use and disclosure of your records outside of DoD may also occur in accordance with the DoD Blanket Route Uses published at

http://dpclo.defense.gov/privacy/SORNs/blanket_routine_uses.html and as permitted by the Privacy Act of 1974, as amended (5 U.S.C. 552a(b)). Any protected health information (PHI) in your records may be used and disclosed generally as permitted by the HIPAA Privacy Rule (45 CFR Parts 160 and 164), as implemented within DoD. Permitted uses and disclosures of PHI include, but are not limited to, treatment, payment, and healthcare operations.

DISCLOSURE: Voluntary; however, failure to provide information may result in the denial of OMB Control Number 0703-0080 **End of Block: Privacy Act Statement**

Start of Block: demographics

What is your age in years? Age (1)

▼ 18 (1) ... Prefer not to answer (9)

What is your rank?

(1)

▼ E1 (1) ... O10 (25)

 $X \rightarrow X \rightarrow$

Please describe your current marital status:

 \bigcirc Not dating or in a relationship (1)

 \bigcirc Dating but not exclusively (2)

O Dating exclusively for less than 6 months (3)

 \bigcirc Dating exclusively for more than 6 months (4)

O Engaged (5)

Separated/Divorced (6)

O Married (7)

Other (8)_____

O Prefer not to answer (999)

$X \rightarrow X \rightarrow$
What sex were you assigned at birth, on your original birth certificate?
○ Male (0)
O Female (1)
O Prefer not to answer (999)
X → X →
How would you describe your current gender?
O Male (0)
Female (1)
O Prefer not to answer (999)
$X \rightarrow X \rightarrow$
Do you consider yourself to be Hispanic or Latino (Please check only one)
○ Yes (1)
O No (2)
X+ X+

What is your race? (Please check one or more)

	American Indian or Alaska Native (1)
	Asian (2)
	Black or African American (3)
	Native Hawaiian or Other Pacific Islander (4)
	White (5)
$\chi \rightarrow \chi \rightarrow$	
Do you consid	der yourself to be:

 \bigcirc Heterosexual or straight (1)

 \bigcirc Gay or Lesbian (2)

O Bisexual (3	3)
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• Something else, please specify (4)

 \bigcirc Prefer not to answer (999)

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Thinking about your entire life, how many sex partners have you had? (Please do not include any PII in your response. Thank you!)



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2 N Y	

Who have you EVER had sex with?

Men only (1)
Women only (2)
Both men and women (3)
I have not had sex (4)
Prefer not to answer (999)

Are you currently involved in any programs to address concerns relating to alcohol use? (i.e., AA, treatment, other support groups)?

Yes (1)
No (0)
Prefer not to answer (999)

Are you currently involved in any efforts to support sexual harassment and assault awareness and prevention above and beyond required trainings (i.e., Command resiliency teams, community groups)?

Yes (1)No (0)

O Prefer not to answer (999)

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End of Block: demographics

Start of Block: audit-c

 $X \rightarrow X \rightarrow$

How often did you have a drink containing alcohol in the past year?

O Never (0)	
O Monthly or less (1)	
\bigcirc 2 to 4 times a month (2)	
\bigcirc 2 to 3 times a week (3)	
\bigcirc 4 or more times a week (4)	

How many drinks containing alcohol did you have on a typical day when you were drinking in the past year?

\bigcirc None, I do not drink (0)	
\bigcirc 1 or 2 drinks (0)	
\bigcirc 3 or 4 drinks (1)	
\bigcirc 5 or 6 drinks (2)	
7 or 9 drinks (3)	
\bigcirc 10 or more drinks (4)	
$X \rightarrow X \rightarrow$	

How often did you have six or more drinks on one occasion in the past year?

 \bigcirc Never (0)

 \bigcirc Less than monthly (1)

 \bigcirc Monthly (2)

 \bigcirc Weekly (3)

 \bigcirc Daily or almost daily (4)

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End of Block: audit-c

Start of Block: demographics continued

 $X \rightarrow$

How much do you identify with:

	0 (Not at all) (0)	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (Completely) (6)
The typical female Sailor (1)	0	0	0	0	0	0	\bigcirc
The typical male Sailor (2)	0	\bigcirc	0	0	\bigcirc	0	\bigcirc

 $X \dashv$

Is there another sub-population or group of Sailors that you identify with more?

○ Yes (1)

O No (0)

O Prefer not to answer (999)

Display This Question:

If Is there another sub-population or group of Sailors that you identify with more? = Yes

Which sub-population or group do you identify with more? (Please do not include any PII in your response. Thank you!)

What feedback do you have for making the intervention more helpful or applicable for Sailors like you? (Please do not include any PII in your response. Thank you!)

Generally speaking, what other feedback do you have that might be important for us to know? (Please do not include any PII in your response. Thank you!)

How comfortable were you viewing this intervention?

 \bigcirc Very uncomfortable (1)

O Moderately uncomfortable (2)

○ Slightly uncomfortable (3)

• Neither comfortable nor uncomfortable (4)

○ Slightly comfortable (5)

O Moderately comfortable (6)

 \bigcirc Very comfortable (7)

How distressing did you find the intervention content?

Extremely distressing (1)

 \bigcirc Quite a bit distressing (2)

O Moderately distressing (3)

 \bigcirc A little bit distressing (4)

 \bigcirc Not at all distressing (5)

How helpful did you find the intervention content?

O Very unhelpful (1)

- O Moderately unhelpful (2)
- O Slightly unhelpful (3)
- O Neutral (4)
- O Slightly helpful (5)
- O Moderately helpful (6)
- Very helpful (7)

How comfortable do you think other Sailors would be viewing this intervention?

 \bigcirc Very uncomfortable (1)

- O Moderately uncomfortable (2)
- Slightly uncomfortable (3)
- \bigcirc Neither comfortable nor uncomfortable (4)
- Slightly comfortable (5)
- O Moderately comfortable (6)
- \bigcirc Very comfortable (7)

How distressing do you think the intervention content would be for Sailors?

	O Extremely distressing (1)
	○ Quite a bit distressing (2)
	O Moderately distressing (3)
	\bigcirc A little bit distressing (4)
	\bigcirc Not at all distressing (5)
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How helpful do you think the intervention content would be for Sailors?

O Very unhelpful (1)

O Moderately unhelpful (2)

Slightly unhelpful (3)

O Neutral (4)

\bigcirc	Slightly	helpful	(5)
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O Moderately helpful (6)

 \bigcirc Very helpful (7)

What do you think was missing from the intervention content that Sailors in the military should know about? (Please do not include any PII in your response. Thank you!)

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End of Block: demographics continued

Start of Block: IMI value/usefulness subscale & questions about interest and importance

30010.	1 (Not true at all) (1)	2 (2)	3 (3)	4 (Somewhat true) (4)	5 (5)	6 (6)	7 (Very true) (7)
I believe this activity could be of some value to me. (1)	0	0	0	0	0	0	0
I think that doing this activity is useful. (2)	0	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I think this is important to do. (3)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
I would be willing to do this again because it has some value to me. (4)	0	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
l think this activity could help me. (5)	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	0	\bigcirc
I believe doing this activity could be beneficial to me. (6)	\bigcirc	\bigcirc	0	0	\bigcirc	\bigcirc	\bigcirc
I think this is an	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

For each of the following statements, please indicate how true it is for you, using the following scale:

important activity. (7)

For each of the following statements, please indicate how true it is for you, using the following scale:

	1 (Not true at all) (1)	2 (2)	3 (3)	4 (Somewhat true) (4)	5 (5)	6 (6)	7 (Very true) (7)
I am interested in doing this intervention. (1)	0	0	\bigcirc	0	0	0	0
I think other Sailors would be interested in doing this intervention. (2)	0	0	0	0	\bigcirc	0	\bigcirc
I think this intervention is important. (3)	0	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
I think other Sailors would think this intervention is important. (4)	0	\bigcirc	0	\bigcirc	\bigcirc	0	0

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End of Block: IMI value/usefulness subscale & questions about interest and importance