

Privacy Act Statement

**You have rights under the Privacy Act.
The following statement describes how that ACT applies to this study:**

The Privacy Act System of Records Notice (SORN) for this study is N6500-1. The SORN was published on the Defense Privacy and Civil Liberties Division (DPCLD) website on November 14, 2014, and can be found here:
<https://dpclد.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570396/n06500-1/>

Authority: Authority to request this information is granted under: 10 USC 136, Under Secretary of Defense for Personnel and Readiness, 10 USC 1782, Surveys of Military Families, 10 USC 2358, Research and Development Projects, Under Secretary of Defense Memorandum #: 99-028, 30 SEP 99 "Establishment of DoD Centers for Deployment Health" and Executive Order 9396, Numbering System for Federal Accounts Relating to Individual Persons.

Purpose: This questionnaire was designed to assess a variety of factors that have motivated and/or discouraged Millennium Cohort participants to stay connected with the study. It will also help capture information that will allow the study staff improve and create new strategies to keep the cohort interested in the study.

Routine Uses: The information provided in this questionnaire will be maintained in data files at the Deployment Health Research Department at the Naval Health Research Center and used only for program improvement. Use of these data may be granted to other federal and non-federal medical research agencies as approved by the Naval Health Research Center's Institutional Review Board. In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3).

NOTE: All disclosures to the DVA and HHS must have prior approval of the Naval Health Research Center Institutional Review Board and a Memorandum of Understanding must be entered into to ensure the right and obligations of the signatories are clear. Access to data 1) is provided on need-to-know basis only; 2) must adhere to the rule of minimization in that only information necessary to accomplish the purpose for which the disclosure is being made is releasable; and 3) must follow strict guidelines established in the data sharing agreement. To the Social Security Administration (SSA) for considering individual claims for benefits for which that SSA is responsible. The DoD 'Blanket Routine Uses' that appear at the beginning of the Navy's compilation of systems of records notices apply to this system.

NOTE: This system of records contains individually identifiable health information. The DoD Health Information Privacy Regulation (DoD 6025.18-R) issued pursuant to the Health Insurance Portability and Accountability Act of 1996, applies to most such health information. DoD 6025.18-R may place additional procedural requirements on the uses and disclosures of such information beyond those found in the Privacy Act of 1974 or mentioned in this system of records notice.

Voluntary Disclosure: Completion of the questionnaire is voluntary. Failure to respond to any of the questions will NOT result in any disadvantages or penalties except possible lack of representation of your views in the final results and outcomes.

Agency Disclosure Notice

The public reporting burden for this collection of information, OMB Control Number 0703-0064, is estimated to average 8 minutes per response, 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.

Millennium Cohort Study Participant Feedback Survey

Thank you for your participation in the Millennium Cohort Study. We would greatly appreciate your feedback. Please take a few minutes to tell us about your experience and how we can make this a successful study for service members, Veterans, and their families.

1. Do you **remember completing a questionnaire on military health** (called the "Millennium Cohort Study") a few years ago? The survey asked many questions about any health issues you experienced in the military and was completed by mail or web.
 - (1) Yes
 - (2) No -> **skip to item 3**

2. If yes, what was your **general impression** of that survey?
 - (1) Favorable
 - (2) Unfavorable (if unfavorable, please tell us why: [open text]) (**Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org*)
 - (3) Don't remember

3. Starting several months ago, we attempted to send emails to you about the new follow-up survey for this study. Do you remember **receiving any email requests** for completing this year's survey?
 - (1) Yes, I remember receiving 1 or 2 emails
 - (2) Yes, I remember receiving 3 or more emails
 - (3) No, I do not remember receiving emails → **If no**, would you like to provide your email (yes/no) (**if yes**-> [insert email])
 - a. (If yes (1 or 2 above) Which one of these categories best describes your reaction to these emails:
 - (1) Read each of them carefully
 - (2) Read through one or more, but not carefully
 - (3) Ignored all of them

4. (Panel 1-4) We also sent a *postal letter with a questionnaire* (Panel 5: *postcard*) to you. Do you recall **receiving mail from the study team**?
 - (1) Yes, remember receiving letter and questionnaire (postal mail) in the mail
 - (2) No, do not remember receiving letter and questionnaire (postal mail) in the mail

5. Some people seemed unsure who the Millennium Cohort Study emails and letters are coming from. **We are wondering who you thought the emails and letter were coming from** (check best answer).
 - (1) The Department of Defense
 - (2) A specific branch of the military
 - (3) A nongovernmental organization
 - (4) The VA
 - (5) Spammer/junk mailer
 - (6) Not sure
 - (7) Other: [open text] (**Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org*)

6. Would you have been more or less likely to respond if you knew if this study was affiliated with the **Department of Veterans Affairs (VA)**?
- (1) More likely to respond
 - (2) Less likely to respond
 - (3) It would have made no difference
7. We are interested in knowing the **possible reasons that people may not have responded** to the request to complete [the most recent/ any of the previous] survey(s). Please indicate if the reasons listed below was or was not a reason why you did not respond to the survey. *[Response options, (1) Yes, a reason; (2) Not a reason]*
- a. I thought the survey would be too long
 - b. I did not think my responses would be very useful
 - c. I was concerned about the privacy/confidentiality of my answers being adequately protected
 - d. I did not think the study was useful
 - e. I am no longer in the military
 - f. I was concerned about the legitimacy of the study and did not think it was really being done by the DoD
 - g. I did not realize it was a follow-up of the same study I had responded to [previously]
 - h. Please describe any other reasons that you may have decided not to respond:
[open text] *(*Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org)*
8. Did the messages you received seem like they were requests to respond to a survey that was **considered important to helping future members of the military** or did it seem like **just another survey**?
- (1) Important to helping future members of the military
 - (2) Just another survey
9. We first requested that you complete the survey on the Internet because it helps us complete the survey process more quickly. **If we had sent you a postal mail questionnaire when we first contacted you, would you have been:**
- (1) More likely to answer the survey → why [open text] *(*Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org)*
 - (2) Less likely to answer the survey → why [open text] *(*Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org)*
 - (3) It would have made no difference in whether I responded
10. We wonder whether **sending a small gift** (such as a \$2 bill) with the request to answer the survey would have made you:
- (1) More likely to respond
 - (2) Less likely to respond
 - (3) It would have made no difference
11. At the present time, we are **sending small gifts** to people after they have completed the survey such as a hat or a gift card from one of several popular vendors. Would knowing about this gift make you:
- (1) More likely to respond
 - (2) Less likely to respond
 - (3) It would have made no difference

12. Do you **recall going online** and starting to complete the survey?

(1) Yes

(2) No → **Skip to item 13**

a. (If Yes) Do you recall whether you completed the survey or stopped part-way through?

(1) Completed the survey → **Skip to Question 13**

(2) Stopped part-way through

b. (If stopped part-way through) As best you can remember, why did you stop responding part-way through?

[open text] (**Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org*)

13. What are the main reason(s) for your **continued participation** in this study?

Source: Adapted from HCHS/SOL Visit 2 Participant Feedback Questionnaire, https://sites.csc.unc.edu/hchs/manuals-forms	No (0)	Yes (1)
a. To help my fellow service members and Veterans		
b. To learn more about health issues that affect service members and Veterans		
c. To receive the monetary incentive		
d. To document my health overtime		
e. To help with my military advancement or to receive volunteer credit		
f. Other reason		
Please specify: (<i>*Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org</i>)		

Source: Adapted from HCHS/SOL Visit 2 Participant Feedback Questionnaire, <https://sites.csc.unc.edu/hchs/manuals-forms>

14. Overall, **how motivated are you** to continue participating with the study?

(1) Not motivated

(2) Motivated

(3) Very motivated

15. For the past several years, we have contacted you every few years to follow-up and see how you are doing.

Please let us know **how satisfied you are** with the following:

Source: Adapted from HCHS/SOL Visit 2 Participant Feedback Questionnaire, https://sites.csc.unc.edu/hchs/manuals-forms	Very little (1)	Somewhat (2)	Very much (3)
a. The opportunity to complete your survey online on any device			
b. The opportunity to complete your survey by mail (paper)			
c. The respect and professionalism of the staff in communications			
d. The study results received			

e. The postcard mailers (Veteran’s Day Card and Memorial Day Card)			
f. Survey completion reminder letters/emails			
g. Study newsletters			

16. At times, **it has been difficult** to continue regular contact with the study because...

Source: Adapted from HCHS/SOL Visit 2 Participant Feedback Questionnaire, https://sites.csc.unc.edu/hchs/manuals-forms	No (0)	Yes (1)
a. I have changed my address or phone number many times		
b. I have many family/work obligations		
c. I am not very interested in the study		
d. The study is time consuming		
e. I am/was deployed		
f. I do not have access to reliable internet		
g. Other, please specify: (<i>*Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org</i>)		

17. Overall, **do you prefer** to answer your survey online or by paper?

- (1) Online
- (2) Paper
- (3) Either, no preference

18. Would you support the following **going into the future**?

	No (0)	Yes (1)
a. Receiving text message reminders If yes—please provide a cell phone number:		
b. Allowing a member of the family or an appointed person who can stay in touch with us on the status of your health due to a physical or mental limitation		
c. Completing an online only survey		
d. Staying engaged with the study until it ends		

19. Is there anything else that you would like to tell us that **may help improve your experience, or the experience of others**, as being a member of the Millennium Cohort Study?

[open text] (**Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org*)

20. Thank you for answering these questions. Your participation in this research project is vital to helping the Department of Defense and the Department of Veterans Affairs evaluate the long-term health of people who serve in the military. Do you have any **additional thoughts, questions, or comments** that you would like to share concerning this study? [open text] (**Pop-up will read: If you would like to share personal or identifiable information, please do not include it on this form. Please use the contact us form on our website at www.millenniumcohort.org*)

If you would like to contact the Millennium Cohort Study Team, please email us at usn.nhrc-milcohortinfo@health.mil or call us at toll-free: 1-888-942-5222 or DSN: 553-7465. You can also use this contact information if you would like to withdraw from participating in this study.