2023 On-Site Installation Evaluation Summary

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The estimated cost of this report or study for the
Department of Defense is approximately
$1,185,000 for the 2023 Fiscal Year. This
includes $689,000 in expenses and $495,000 in
DoD labor.

Generated on 2023Aug04   RefID: 0-A312807

Table of Contents

Executive Summary

On February 26, 2021, Secretary of Defense Austin directed an inaugural round of on-site installation evaluations (OSIEs) at select installations with a focus on each installation's prevention capabilities and ability to effectively address risk for sexual assault (SA), sexual harassment (SH), suicide, and other harmful behaviors. This initial round of OSIEs served as a pilot for the OSIE process and to ensure an enduring evaluation capability that could be replicated in subsequent years.

On March 30, 2022, in response to the 2021 OSIE report and findings, Secretary Austin directed future OSIEs be conducted on a biennial basis. In accordance with the Secretary's direction and Department of Defense Instruction (DoDI) 6400.11, "DoD Integrated Primary Prevention Policy for Prevention Workforce and Leaders," OSIEs were conducted in 2023 to better understand current gaps and best practices to provide the necessary tools to enhance prevention of harmful behaviors, including SA, SH, suicide, retaliation, domestic abuse, and child abuse and neglect.

The 2023 OSIEs built on the successes of the 2021 OSIEs and improved the processes and methods where necessary and applicable. The thirteen sites and twelve ships selected for 2023 OSIEs were based on newly developed risk index scores that captured leading indicators of harmful behaviors or mitigating factors informed by survey data and other information. The site visits occurred between January and May 2023.

The 13 sites and 12 ships visited in 2023 were as follows (individual units assessed are found in Table 2 below). Unless noted as promising, the sites and ships were selected based on high scores on the risk index:

- Army Recruiting Company, Dearborn, MI
- Army Reserve Center, Ashley, PA
- Camp Carroll, South Korea
- Camp Casey and Camp Hovey, South Korea
- Fort Liberty, NC
- Fort Carson, CO
- Fort Cavazos, TX
- Fort Stewart, GA
- Los Angeles Air Force Base (AFB), CA (Promising)
- Louisiana National Guard
- Malmstrom AFB, MT
- Marine Corps Support Facility (MCSF) Blount Island, FL (Promising)
- Naval Air Station (NAS) Lemoore, CA
- Ships homeported at Naval Station (NS) Mayport, FL
  - USS Carney
  - USS Donald Cook
  - USS St. Louis (Promising)
- Ships homeported at NS Norfolk, VA
  - USS Bainbridge
  - USS Fort Lauderdale (Promising)
  - USS Gunston Hall
  - USS Kearsarge
  - USS Mahan
  - USS Tortuga
- Ships homeported at Commander Fleet Activities (CFA) Yokosuka, Japan
  - USS Blue Ridge
  - USS Ronald Reagan

o USS Howard

Findings and Actions:

The 2023 OSIEs assessed prevention capabilities and climates of sites, ships, and units of interest using standardized information collection procedures. This generated nine validated metrics that assessed the priority, preparation, and quality implementation of protective environments, integrated prevention, and stakeholder engagement. Like the 2021 OSIE findings, 2023 findings indicate prevention capabilities are in an early phase of development and, in most cases, prevention efforts do not align with best practices. These findings underscore certain preconditions must exist to achieve mature prevention capabilities and be poised to effectively prevent harmful behaviors. First, primary prevention must be made a priority throughout the entire chain of command and within prevention support offices and personnel. Then, leaders and personnel must be adequately prepared, which is largely dependent on having local subject matter experts (e.g., the Integrated Primary Prevention Workforce (IPPW)) in place. Once these two requisites are in place, research-based primary prevention activities can be effectively implemented.

Many findings found across the Military Services during the 2023 OSIEs are currently being addressed through implementation of existing Independent Review Commission on SA in the Military (IRC-SAM) and Suicide Prevention and Response Independent Review Committee (SPRIRC) recommendations, as approved by the Secretary of Defense; however, enhancements to these efforts can be made at the OSIE sites to address more directly several of the findings.

In general, continued implementation of DoDI 6400.09, "DoD Policy on Integrated Primary Prevention of Self-Directed Harm and Prohibited Abuse or Harm," and DoDI 6400.11, "DoD Integrated Primary Prevention Policy for Prevention Workforce and Leaders," will advance capabilities at OSIE sites, as many gaps identified at OSIE sites are addressed by requirements in those policies. Implementation of these Department of Defense (DoD) policies, in addition to the approved IRC-SAM and SPRIRC recommendations, will ensure significant progress toward directly addressing many of the findings in this report.

The results of the 2023 OSIEs are broken down into four main areas detailed in the 2023 report and the Department is initiating or continuing actions in these areas to address the findings:

1. Findings that reinforce SPRIRC and IRC-SAM findings

2. Institutional factors beyond a site's/ship's control

3. Lack of consistent prevention priority

4. Site-specific findings

In addition, 2023 visits identified best practices that foster healthy climates and prevention efforts. These include:

- Clear communication throughout the chain of command with feedback loops for Service members and their families

- Buy-in for prevention of harmful behaviors through support and integration of prevention personnel

- Supportive leaders that understand the needs and concerns of the diverse Service members they lead and actively work to address gaps in services

Conclusion

Over the past several years, the Department has initiated unprecedented actions to prevent harmful behaviors and improve climate. Many of these changes require institutional and structural changes that take time to

implement and to attain measurable benefits. The OSIEs are one tool that assess incremental improvements and identify additional areas for improvement. As with the 2021 OSIEs, it was expected that sites and ships would be early in their development of prevention capabilities. The 2023 OSIEs made clear that leadership at all levels recognize the need for, and importance of, a strong prevention system; however, they are not effectively or consistently communicating its priority due to challenges such as high operational tempo (OPTEMPO), manning shortages, lack of Service prevention policies and regulations, and IPPW billets remaining unfilled. Prevention must be a consistent and concerted effort. Lack of priority has cascading effects, leaving leaders and prevention personnel at all levels lacking preparation and the necessary skills and competencies to effectively implement prevention.

Prevention is essential to properly assist and care for Service members and to recognize, address, and reduce harmful behaviors across the Total Force. The Department is currently taking steps to implement existing SPRIRC and IRC-SAM recommendations, as approved by the Secretary of Defense, that address many OSIE findings. The Department has taken unprecedented steps to develop and resource integrated prevention, but to maximize those investments, complete buy-in from leadership at all levels is required. The Office of the Secretary of Defense (OSD), Military Departments (MILDEPS), and National Guard Bureau (NGB) must continue to reinforce the importance of prevention for the well-being of Service members. Prevention of harmful behaviors is an imperative investment in the future of the Department, strengthening readiness and resiliency across the Total Force.

Introduction

As Secretary of Defense Austin noted in his September 2022 memorandum, "Taking Care of our Service Members and Families," the Department has a sacred obligation to take care of its Service members. To meet this obligation, the DoD is committed to creating safe environments where all Service members can thrive.

The DoD has conducted multiple independent reviews in the past five years. These include the "Report of the Fort Hood Independent Review Committee," the IRC-SAM, and the SPRIRC. These reviews highlighted the need for continuing evaluations to ensure the Department is succeeding in its efforts. In a March 30, 2022, memorandum, Secretary Austin directed OSIEs be conducted on a biennial basis. The OSIEs are coordinated site visits to a select group of military sites/ships to assess the development of prevention capabilities and support the enhancement of the Department's command climate efforts. OSIEs allow the Department to better identify and understand current gaps in prevention and prevention support efforts and provide recommendations to enhance prevention capabilities and continually improve command climate.

The 2021 OSIEs served as a pilot for OSD to rollout the OSIE framework, methodology, and processes. One of the largest successes of the initial OSIEs was the affirmation of the OSIE framework described below and in Table 4. The framework was built around the three areas of priority, preparation, and implementation, and has proven to be a solid and valuable means of understanding and assessing site/ship prevention capabilities and climate. The 2021 and 2023 OSIEs show these three framework areas are clearly interconnected in ways that make each necessary to achieve positive prevention outcomes.

Throughout the implementation of the 2023 OSIEs, the OSIE mission of oversight, detection of risk, assessing priority, preparedness, and evaluating implementation has been highlighted as essential to identifying where and how necessary change is failing to be implemented or is stalled. This summary seeks to highlight how the Department must improve prevention efforts and offers change-oriented actions and strategies to continue to care and provide a safe environment for its Service members.

From January to May 2023, OSIEs were conducted at 13 sites and 12 ships. For sites, the units with the highest risk or protective scores within each site (Table 2) were evaluated. In addition, the helping agencies[1] and prevention personnel that supported these units and ships were also assessed.

Methodology

The focus of the OSIEs is on integrated primary prevention for the military community. The following definitions guided the methods used to identify sites/ships and develop evaluation metrics.

Table 1: OSIE Prevention Definitions

Primary Prevention	Stopping harmful acts before they occur. Can be implemented for an entire group or population without regard to risk (universal primary prevention) or can be implemented for individuals, groups, or a population that is at risk (selected primary prevention).
	Primary prevention activities can target: 1. Influencers, such as leaders who set a climate and shape norms, but may not be present when harmful acts occur 2. Bystanders, who may be present when harmful acts occur 3. Individuals who may commit harmful acts

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	4. Individuals who may be affected by harmful acts
Integrated Primary Prevention	Prevention activities that simultaneously address multiple self-directed harm and prohibited abusive or harmful acts or the inclusion of prevention activities across self-directed harm and prohibited abusive or harmful acts into a cohesive, comprehensive approach that promotes unity of effort, avoids unnecessary duplication, and lessens training fatigue.
Military Community	All individuals (e.g., Service members, DoD civilian employees, dependents) who live and work together in the same geographic area, such as a DoD installation. Military community exists based on relationships and the potential to interact with one another regardless of Service affiliation and chain of command.

Identification of OSIE Sites

For 2023 site selection, a five-factor risk index was used to assess a range of risk and protective factors across the social ecology that may impact a site's/ship's risk for harmful behaviors.

Sites Identified

The following table summarizes the sites/ships identified by OSIEs based on their OSIE risk index score, the risk index score for the overall site/ship and, for sites, the Defense Organizational Climate Survey (DEOCS) risk and protective percentile score for each unit that participated in the OSIE. Ships homeported at NS Mayport, NS Norfolk, and CFA Yokosuka were treated as stand-alone sites for the purposes of the OSIEs and, thus, have a risk index score and not DEOCS protective/risk percentile scores for units of interest.

The scope of the site visits included units within each site that had the highest risk or protective percentile scores on the DEOCS, as well as the helping agencies and leadership, typically at the installation level or within a higher-level command, that supported those units' prevention and response efforts. At large sites/ships, site visits assessed only a small portion of the total military community. At small sites/ships, site visits may have included most of the military community. In sites where assessed units included those with high risk and high protective percentile scores, consistency of findings across these units provided clues about whether highlighted findings were widespread across the site or localized within those units.

Factors contributing to risk and protective factors that informed site/ship and unit identification are varied and complex. Assumptions about the environment, morale, leadership, etc. should be avoided, and a focus on the OSIE findings is recommended.

Table 2: Risk Index Score and DEOCS Unit Protective and DEOCS Risk Percentile Scores for Participating Sites, Ships, and Units[2]

Site, Ships, and Units of Interest	Risk Index Percentile[3]	Protective Percentile Score	Risk Percentile Score
Ashley, PA Reserve Center	86	--	--
340th Military Police Battalion*[4]	--	81	27
362d Military Police Detachment	--	27	69
Camp Carroll	81	--	--
Headquarters and Headquarters Detachment, 25th Transportation Battalion	--	24	79

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[2] Ships were treated as sites, so do not have DEOCS risk and protective percentile scores. The broader OSIE risk index was used to select ships of interest.
[3] Risk index percentiles are based on data as of August 3, 2023.
* Denotes site, ship, or unit that was identified as promising based on the risk index or risk/protective percentile scores.

95th Transportation Company	--	20	75
541st Quartermaster Company	--	10	97
B Battery, 2-1 Air Defense Artillery	--	13	77
Headquarters and Headquarters Battery, 2-1 Air Defense Artillery	--	18	86
Camp Casey	80	--	--
Camp Hovey	89	--	--
6-37 Field Artillery	--	13	91
1-38 Field Artillery	--	20	82
579th Forward Support Company	--	17	83
CFA Yokosuka	69	--	--
USS Blue Ridge	99	--	--
USS Ronald Reagan	99	--	--
USS Howard	99	--	--
Dearborn Recruiting Company	94	--	--
Dearborn Recruiting Company	--	13	78
Fort Carson	95	--	--
110th Military Police Company	--	10	90
A Company, 3-10 Special Forces*	--	91	26
B Battery, 3-29 Field Artillery	--	7	96
F Company, 704th Base Support Battalion	--	3	94
US Army Garrison-Fort Carson*	--	91	9
Fort Cavazos	95	--	--
74th Engineer Company	--	2	93
120th Quartermaster Company	--	7	93
E Company, 115th Base Support Battalion	--	3	92
Headquarters Support Company, 615th Aviation Support Battalion	--	7	90
Rear Detachment, 64th Military Police Company	--	12	91
Fort Liberty	93	--	--
F Company, 98th Civil Affairs Battalion*	--	95	17
D Company (Forward Support), 3d Special Forces Group*	--	97	16
A Company, Womack Army Medical Center	--	4	96
25th Quartermaster Company	--	4	95
I Company, 407th Brigade Support Battalion		7	95
Fort Stewart	94	--	--
287th Quartermaster Company	--	2	97
A Company, 10th Engineer Battalion	--	9	93
C Company, 3-69 Armor Battalion	--	8	94
E Company, 3d Base Support Battalion	--	4	97
I Company, 703d Base Support Battalion	--	8	93
Louisiana National Guard	83	--	--
1-199 Training Regiment	--	15	84
A Company, 769th Engineer Battalion	--	21	88
B Company (Rear Detachment), 199th Base Support Battalion	--	9	88
Forward Support Company, 527th Engineer Battalion	--	21	80
Los Angeles AFB*	17	--	--
61st Communications Squadron (AFSPC)	--	60	35

61st Civil Engineer and Logistic Squadron*	--	87	10
Space-Missile Systems (Enterprise Corps)	--	64	35
Space-Missile Systems	--	63	37
Space-Missile Systems	--	73	20
Malmstrom AFB	75	--	--
10th Missile Squadron	--	77	24
12th Missile Squadron*	--	88	24
341st Security Forces Group*	--	83	23
341st Security Forces Squadron	--	3	90
819th Red Horse Squadron	--	10	85
MCSF Blount Island*	14	--	--
Blount Island Command*	--	69	35
Blount Island Command*	--	72	23
NAS Lemoore	92	--	--
Center for Naval Aviation Technical Training Unit-Lemoore *	--	77	37
Carrier Air Wing 9*	--	79	31
Strike Fighter Weapons School-PAC*	--	78	25
Strike Fighter Squadron 41	--	23	75
Strike Fighter Squadron 122	--	25	82
Strike Fighter Squadron 125	--	26	79
NS Norfolk	89	--	--
USS Bainbridge	100	--	--
USS Fort Lauderdale*	7	--	--
USS Gunston Hall	99	--	--
USS Kearsarge	98	--	--
USS Mahan	98	--	--
USS Tortuga	99		
NS Mayport	82	--	--
USS Carney	100	--	--
USS Donald Cook	98	--	--
USS St. Louis*	27	--	--

OSIE Risk Index

Data sources and DEOCS factors were categorized into five levels or domains based on the social ecological model. A social ecological model is a public health framework used to understand the complex interaction between the individual, interpersonal, organizational, and community factors that affect a person's overall health and well-being.[5] This framework enables preventionists to better understand the factors that contribute to incidents of harm and abuse and opportunities to mitigate the harmful behaviors by addressing the contributing factors. To create environments free from harm and abuse, it is necessary to enhance protective factors and reduce risk factors at every level of the social ecological model.[6]

The traditional levels of the social ecological model were adapted to reflect a site's/ship's setting in which a Service member is embedded in an existing chain of command or leadership structure. The social ecological

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[5] Bronfenbrenner, U. (2005). Ecological systems theory (1992). In U. Bronfenbrenner (Ed.), Making human beings human: Bioecological perspectives on human development (pp. 106–173). Sage Publications Ltd.
[6] The Centers for Disease Control and Prevention. (2022). "The Social-Ecological Model: A Framework for Prevention." https://www.cdc.gov/violenceprevention/about/social-ecologicalmodel.html

model used to produce the site/ship risk index reflects risk and protective factors at five different levels (see Figure 1):

1. Individual (e.g., individual behaviors, attitudes)
2. Workplace (e.g., work peers, interpersonal teams)
3. Leadership (e.g., organizational factors controlled by the command team or supervisor)
4. Installation (e.g., installation historical prevalence or incidence rates)
5. Community (e.g., health and safety trends in the surrounding civilian community)

Figure 1: Five Domains of the OSIE Risk Index[7]

These five domains constitute a robust social ecological model tailored for the military environment. A "best fit" approach was used that placed each risk and protective factor into a single level of the social ecological framework. More information on the five domains can be found in Appendix B.

Each site profile in Appendix A includes the risk percentiles for the five domains. Higher percentiles denote higher risk.

Data Sources

The following data sources were used to develop the OSIE risk index.

DEOCS 5.0

DEOCS 5.0 assesses 19 protective and risk factors that can impact a unit's/organization's climate and ability to achieve their mission.

Protective factors are attitudes, beliefs, and behaviors associated with positive outcomes for units or organizations. Higher favorable scores on protective factors are linked to a higher likelihood of positive outcomes, such as improved performance, increased readiness, and higher retention, and are also linked to a lower likelihood of negative outcomes, such as suicide, SH, and SA.

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[7] All acronyms in Figure 1 are spelled out in the Data Sources subsection below.

Risk factors are attitudes, beliefs, and behaviors associated with negative outcomes for units or organizations. Higher unfavorable scores on risk factors are linked to a higher likelihood of negative outcomes, such as suicide, SH, and SA, and are also linked to a lower likelihood of positive outcomes such as increased performance, higher readiness, and elevated retention.

Certain leadership factors are measured for different leadership levels and were treated separately in this analysis. Specifically, transformational leadership and passive leadership are measured for both the unit/organization leader and the senior noncommissioned officer (NCO). Toxic leadership is measured for the immediate supervisor and senior NCO. Leadership support is measured for the immediate supervisor only.

Risk and protective factors are shown in Table 3.

Table 3: Risk and Protective Factors from DEOCS 5.0

DEOCS 5.0 Risk Factors	DEOCS 5.0 Protective Factors
Alcohol Impairing Memory	Cohesion
Binge Drinking	Connectedness
Stress	Engagement and Commitment
Passive Leadership	Fairness
Toxic Leadership	Inclusion
Racially Harassing Behaviors	Morale
Sexually Harassing Behaviors	Safe Storage for Lethal Means
Sexist Behaviors	Work-Life Balance
Workplace Hostility	Leadership Support
	Transformational Leadership

2018 Workplace and Gender Relations Survey of Active Duty Members (WGRA) – Contextual Analysis

Office of People Analytics' (OPA's) 2018 WGRA provides insights regarding the estimated prevalence and characteristics of SA, SH, and gender discrimination in the Active Component based on Service members' self-reported experiences, including perceptions of unit culture and climate.

2018 Defense SA Incident Database (DSAID)

DSAID is the Department's authoritative, centralized database used to collect and maintain information about SA cases involving members of the U.S. Armed Forces.

2020-2022 Defense Suicide Prevention Office (DSPO) Suicide Counts

DSPO provided the OSIE team with a record of every military suicide from 2020 through the first quarter of 2022

2021 Family Advocacy Program (FAP) Domestic and Child Abuse Counts

The OSIE team used aggregate counts of domestic abuse and child abuse and neglect incidents reported to FAP in Fiscal Years 2019-2021 by installation.[8] Only data that met criteria for the Department's definition of abuse per DoDI 6400.01, "Family Advocacy Program (FAP)," were used. FAP is the DoD's program designated to prevent and respond to domestic abuse and child abuse and neglect.

2022 U.S. County Health Rankings and Roadmaps (CHR&R)[9]

The CHR&R compiles U.S. local health data to help communities identify opportunities to improve their health. The CHR&R spans several health focus areas: length of life, quality of life, tobacco use, diet and exercise,

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[8] Rates of domestic abuse, child abuse, and child neglect are not applicable to ships as those incidents are counted at the homeport installation.
[9] Community refers to the community at large surrounding the installation and not just the military community.

alcohol and drug use, sexual activity, access to clinical care, quality of clinical care, education, employment, income, family and social support, community safety, air and water quality, housing and transit, and demographics.

On-Site Evaluation and Framework of Prevention Capability Assessment

OSIE teams conducted site visits that spanned several days and included focus groups, interviews, and surveys across all helping agencies (e.g., integrated prevention personnel, prevention support personnel), leadership teams, and Service members. These focus groups, interviews, and surveys collected data on integrated prevention efforts related to harmful behaviors such as SA, harassment, retaliation, suicide, domestic abuse, and child abuse and neglect.

The teams included Service members and civilian employees, which allowed for a mixture of military perspectives and insight into Service and site/ship culture.

Prevention Capability Assessment Methods:

In 2021, OSD, in collaboration with RAND, used identified nine dimensions (see

Table 4) to guide the assessment of prevention capabilities for the OSIEs. These dimensions were identified through an analysis of the focus areas not covered by existing DoD compliance checklists and DoD assessment tools to enforce relevant prevention policies, as well as the OSIE framework outlined in the 2021 OSIE Report.

OSD prioritized three domains of focus for the development of new metrics:

- ***Healthy and Protective Environment***: Research shows that command climates can positively or negatively impact behaviors such as SA and SH

- ***Integrated Prevention***: Effective prevention targets a mix of risk and protective factors that are both common across issue areas as well as unique to specific harmful behaviors

- ***Stakeholder Engagement***: Outcomes can be improved when multiple stakeholders have genuine involvement in prevention activities

Three additional domains were added from the OSIE framework:

- ***Priority***: Higher-level leadership sets the tone and sustains consistent focus on harmful behaviors

- ***Preparation***: Prevention personnel and intermediate leadership are equipped with the knowledge, skills, and abilities (KSAs), and exist within a structure, that incentivize and support addressing harmful behaviors

- ***Implementation***: Approach aligns with best practices and is done well (i.e., with high quality)

Crossing the three domains from the OSIE framework (columns in Table 4) with the three domains (i.e., focus areas) in existing compliance checklists and assessment tools (rows in Table 4) yielded a matrix of nine dimensions to be included in the assessment.

Table 4: Prevention Capabilities Assessed in OSIEs

| | | OSIE FRAMEWORK AREA | | |
		PRIORITY	PREPARATION	IMPLEMENTATION
FOCUS AREAS	HEALTHY AND PROTECTIVE ENVIRONMENT	(1) Leaders prioritize fostering a protective environment by their actions and communications.	(2) Leaders have the requisite KSAs and access to training to develop those KSAs.	(3) Leaders employ best practices known to support a protective environment.
	INTEGRATED PREVENTION	(4) Leaders prioritize prevention activities.	(5) Leaders and prevention personnel have the requisite KSAs to carry out prevention successfully.	(6) Prevention activities that target risk and protective factors across multiple harmful behaviors are evaluated.
	STAKEHOLDER ENGAGEMENT	(7) Leaders prioritize engaging stakeholders.	(8) Prevention personnel have the resources and requisite KSAs to engage stakeholders effectively.	(9) Stakeholders are genuinely engaged in prevention activities across multiple planning stages.

OSIE Results

Similar to the 2021 OSIE findings, 2023 findings indicate prevention capabilities are in an early phase of development at the sites/ships visited and, in most cases, prevention efforts do not align with best practice. These findings underscore certain preconditions must exist to achieve mature prevention capabilities and be poised to effectively prevent harmful behaviors. First, primary prevention must be made a priority throughout the entire chain of command and within prevention support offices and personnel. Then, leaders and personnel must be adequately prepared, which OSIEs found is largely dependent on having local subject matter experts (SMEs) (e.g., the IPPW) in place. Once these two requisites are in place, effective research-based primary prevention activities can be implemented.

While institutional change can be slow and difficult, the estimated rates of SA, SH, and suicide as reported in recent years necessitate a Department-wide effort to integrate meaningful change into policies, procedures, and processes that may create or exacerbate risk factors. High OPTEMPO, manning shortages, and communication challenges all serve as barriers to even the most committed leadership who prioritize Service members receiving the care they need and deserve; however, it is imperative for leadership across the Department to focus on and prioritize prevention to properly care for Service members.

Many findings found across Services during the 2023 OSIEs are currently being addressed through implementation of existing IRC-SAM and SPRIRC recommendations, as approved by the Secretary of Defense; however, enhancements to these efforts can be made at the OSIE sites to address more directly several of the findings.

In general, continued implementation of DoDI 6400.09, "DoD Policy on Integrated Primary Prevention of Self-Directed Harm and Prohibited Abuse or Harm", and DoDI 6400.11, "DoD Integrated Primary Prevention Policy for Prevention Workforce and Leaders," will advance capabilities at OSIE sites, as many gaps identified at OSIE sites are addressed by requirements in those policies. Implementation of these policies, in addition to the implementation of the approved IRC-SAM and SPRIRC recommendations, will ensure significant progress toward directly addressing many of the findings in this report.

Therefore, taking into account current actions underway, results of the 2023 OSIEs are broken down into four main areas below:

1. Findings that reinforce actions underway consistent with the approved SPRIRC and IRC-SAM recommendations

   o Examples of findings in this domain include:

      – Service members do not have confidence that complaints or reports are taken seriously due to perceived lack of accountability.

      – Challenges accessing behavioral health and lack of healthy options for social engagements is exacerbating risk for harmful behaviors.

      – Slow implementation of Department prevention policy is delaying positive changes in prevention efforts, given that full-time personnel are needed to support leaders in command climate assessments and implement research-based prevention efforts.

2. Institutional factors beyond a site's/ship's control

   o In addition to findings related to prevention and climate, OSIE teams often identify contextual or institutional factors, outside of the site or ship's control, that may exacerbate risk for harmful behaviors or create barriers for effective prevention. Examples of findings in this domain include:

      – Operational tempo and manning shortages across the force are driving increased stress, impacting command climate and the prevention environment, which then have deleterious effects on recruiting, readiness, and retention.

      – Cost of living continues to impact remote areas with no military housing and limited healthcare access.

      – Lack of FAP resources for Reserve Component personnel and their families creates a gap in services for seeking care and assistance before, during, or after incidents of violence or neglect.

      – Recruiters are under tremendous stress and operate in geographically dispersed and often remote areas.

      – Gaps in services and challenges with TRICARE Prime Remote create significant barriers that keep recruiters and their families from receiving consistent physical and mental health care.

      – Rollout issues are common when deploying new personnel systems which negatively impact Service members' pay. Additional financial readiness and emergency loan education should be highlighted by leadership prior to system changes.

      – Adaptations to the prevention and response workforce models are needed to provide prevention support and response services in deployed and geographically dispersed units.

      – MILDEP and Service policies and regulations are needed that provide guidance and authority for implementation of DoDIs 6400.09 and 6400.11, clearly delineate prevention

workforce roles within each Service, and take into consideration the unique needs of the Reserve Component.

- – Unique gaps in behavioral health care continue to exist on ships and in remote locations.

3. Lack of consistent prevention priority

   o As the Department is currently investing in integrated prevention, OSIE findings underscore a critical and foundational first step is prioritizing prevention efforts to have long-term change. Leadership sets the tone and focus for prevention of harmful behaviors; however, at the selected OSIE sites, the consistent focus on prevention was lacking. Importantly, the OSIEs identified many factors affecting the sites/ships that were out of their control; however, all leaders and OSIE sites can immediately implement actions that prioritize prevention. Examples of findings in this domain include:

     - – Senior leaders' vision for healthy climates is not consistently communicated through the chain of command, leading to perceived lack of emphasis on prevention of harmful behaviors.
     - – Perceived barriers to help-seeking, such as limiting the times/days Service members can make appointments, sends mixed messages about the priority placed on Service members' well-being.

4. Site-specific findings

   o Examples of findings in this domain include:

     - – Lack of onboarding, initial orientation, and sponsorship efforts for Service members new to a site result in decreased connection to the mission and already-onsite personnel.
     - – Lack of communication and awareness regarding a loss of a unit member decreased trust in leaders and perceived value of Service members.
     - – Prevention personnel are actively working to establish collaborative relationships with NCOs and program specialists but require leadership support to encourage and maintain connections.

5. Characteristics of promising sites

   o In 2023, four promising sites/ships (Table 2) were visited, which are sites/ships with overall high protective percentile scores. Several promising units (Table 2), which are units with overall high protective percentile scores, were also visited.

   o There are several key characteristics that distinguish promising sites/ships and units. Understanding characteristics associated with promising sites/ships helps to increase protective factors and improve prevention activities and prevention support across the Department.

   o *Clear Communication:*

     - – Briefings and discussions are tailored to specific groups (e.g., commanding officer tailors townhall by rank).
     - – Small group trainings reflect a positive culture of addressing harmful behaviors head-on.
     - – Leaders take the time and effort to explain the "why" behind a request, event, or requirement to provide greater understanding of, and connection to, the mission.
     - – Generational differences are acknowledged, and clear, mutual understanding is sought.

   o *Prevention Buy-In:*

- Senior leaders are engaged and showcase high prioritization of prevention.
- Mid-level leaders are encouraged to have a vision regarding positive and safe work environments, and are given "white space" to build them.
- Junior enlisted members understand the importance of prevention and actively seek to become engaged.
- IPPW is effectively integrated with prevention support services.
  - *Supportive Leaders:*
    - Service members are fully supported regardless of gender, role in unit, or other discerning features.
    - Change is accepted, managed, and supported instead of being viewed as a feared disruption.
    - Leaders at all levels are encouraged to participate in community/prevention meetings and are encouraged to apply the data presented to develop interventions at the unit level.
    - Gaps in services are quickly identified and actively managed to limit disruption to quality of life.
    - Leaders ensure subordinates and peers have a meaningful work-life balance.

DoD Actions to Address Findings that Align to IRC-SAM and SPRIRC

To address findings that aligned to approved IRC-SAM and SPRIRC recommendations, the Department will continue its swift and thoughtful implementation of those efforts.

MILDEP and NGB Actions to Address Institutional Factors

[MILDEPS/NGB] Promote DoD SPARX Connection Prevention Community of Practice among prevention workforce supporting Reserve Component locations to ensure National Guard and Reserve prevention program managers collaborate, share information about resources, and identify needs and sources of data. *(Integrated Prevention)*

[MILDEPS/NGB] Collaborate with servicing acquisition offices to explore options relating to contractors working on a site or ship, if any. *(Healthy and Protective Environment)*

[Department of Army] Explore and implement, as appropriate, additional data/metrics to evaluate recruiters' workload and performance, highlight best practices per region, and better understand how taking care of the recruiters will impact the mission. *(Healthy and Protective Environment)*

[Department of Army] Evaluate recruiting specific pre-command training to ensure it adequately addresses strategies to provide support to personnel in geographically dispersed locations. *(Stakeholder Engagement)*

Actions to Address Lack of Consistent Prevention Priority

Several requirements included in DoDI 6400.11, "DoD Integrated Primary Prevention Policy for Prevention Workforce and Leaders," still pending implementation, such as professional military education and other appropriate leadership development opportunities that prepare individuals to lead and support integrated primary prevention, are designed to help improve prevention priority. In addition, the following actions apply to military leaders at all sites/ships with a specific focus on improving priority scores.

- Complete DoD SPARX Knowledge Part 1: A one-hour developmental course for prevention personnel and leaders to build foundational prevention knowledge and skills.

- Review DoD SPARX Leadership Action Toolkit (available on www.prevention.mil) and DoD SPARX Knowledge Nuggets: Tools for leaders to develop a deeper understanding of harmful behaviors and how to be engaged prevention partners.

- Following completion of DoD SPARX tools, host quarterly small group discussions with subordinate leaders to communicate the importance of integrated prevention (e.g., on addressing shared risk and protective factors for multiple harmful behaviors) and discuss opportunities for prevention of harmful behaviors and methods to facilitate communication up and down the chain of command, enhance healthy command climates, and ensure leadership's vision and intent is carried throughout the organization consistently and over time.

Site-Specific Findings

Certain OSIE findings were unique to a site or applied to only a few sites. Following are those findings broken down by each site and grouped based on the three integrated prevention areas of Protective Environments, Integrated Prevention, and Stakeholder Engagement.

Table 5: Ashley Army Reserve Center Findings

Protective Environments
• Increase efforts to strengthen connectedness such as enhancing sponsorship programs and created standardized in-processing that encourages unit cohesion
Integrated Prevention
• Enhance collaboration between prevention program managers and both internal and external collaborators
Stakeholder Engagement
• Provide Soldiers with updated, easily accessible contact data for critical services and, where possible, provide resource information local to the Soldier's home residence

Table 6: Camp Carroll Findings

Protective Environments

• Foster use of "This is My Squad" (TIMS), which allows Soldiers to talk to leadership about any topic other than work
  ○ TIMS helps breakdown personal barriers and offers opportunities to discuss new programs
  ○ Junior Soldiers who may not want to talk with behavioral health personnel may be more willing to present concerns to unit leaders
• Implement on-site "office hours" for distant support services at Camp Carroll so Soldiers do not need to travel to another location, and to help foster a "drop in and talk" mentality

Integrated Prevention
• Encourage the use of guest speakers at the end of formations to build awareness of resources and to reinforce the importance of prevention • Foster development of healthy relationship skills (e.g., communications, problem recognition skills) so Soldiers can recognize potential problems and act
Stakeholder Engagement

- Build faith in the chain of command through action; demonstrate leadership's vision for prevention by engaging with small groups and taking on problem behaviors head-on
- Foster reinvigoration of the Better Opportunities for Single Soldiers (BOSS) program, which was seen as a valuable resource by junior officers who recognized NCO involvement in BOSS as building positive command climates

Table 7: Camp Casey and Camp Hovey Findings

Protective Environments
- Identify opportunities and best practices to quickly assimilate new arrivals - Evaluate Morale, Welfare, and Recreation (MWR) leisure and travel opportunities for alignment with junior Soldiers' interests (e.g., e-sports venues vs. city tours) - Assess the breadth and depth of marital challenges and available support resources. Subsequently, FAP should develop research-based prevention activities tailored to the population - Develop an orientation process at Camp Casey that highlights local garrison resources
Integrated Prevention
- Incoming leaders should tap into civilian personnel who offer extensive and enduring knowledge on unique local problems - Develop a plan for short- and longer-term engagement with the integrated prevention team at Camp Humphreys - Identify opportunities to share lessons learned and insights from other areas within Korea
Stakeholder Engagement
- Leverage female leaders to increase mentorship and support opportunities for junior female Service members

Table 85: CFA Yokosuka Findings

Protective Environments
- Promote and expand access to healthy leisure activities as a prevention measure against harmful behaviors - Identify additional research-based measures to manage stress for Sailors in departments disproportionally impacted by high OPTEMPO - Review the administrative assignment process and revise as needed to ensure gender-neutral assignments - Implement prevention activities into daily activities to provide training in small doses and to consistently communicate the importance of prevention
Integrated Prevention
- Promote collaboration and enhance communication between shore side resources and ship assets to ensure continuity and integration of prevention efforts - Develop evidence-informed processes and opportunities for shore side and other resources to collaborate and integrate prevention activities
Stakeholder Engagement

- Leverage female leaders to increase mentorship and support opportunities for junior female Service members

- Enhance peer support networks while maintaining communication channels remain open and available

- Review current communication methods and employ diversified social media platform use to ensure effectiveness of communication to those Sailors in high-risk categories

- Identify mechanisms to sustain and institutionalize recognition and reward of Sailors' achievements and good conduct through traditional and creative means (e.g., music choice on Friday)

Table 9: Dearborn Recruiting Company Findings

Protective Environments
• Prioritize care-seeking over routine recruiting tasks
Integrated Prevention
• Fully staff the Soldier and Family Assistance roles to include the assistant position   o Clarify position duties, encourage boundaries, and create connections to share responsibilities • Maintain and train on a digital Sexual Harassment/Assault Response and Prevention continuity tool that leverages capabilities and information in the "WeCare" app to increase access to support • Work with other local Services (e.g., National Guard, Army Reserve, Navy Reserve) to identify MWR and support resources for each station to establish broad community connections in alignment with the approved SPRIRC recommendation 5.27
Stakeholder Engagement
• Provide regular updates to Soldiers on command climate findings and actions taken to address concerns, to increase accountability • Leverage U.S. Army Recruiting Command (USAREC) and brigade leaders in planned messaging that acknowledges challenges and provides support resources (e.g., USAREC "WeCare" app) • Provide a quarterly resource update that addresses trending topics and provides solutions

Table 10: Fort Carson Findings

Protective Environments
• Prioritize care-seeking over routine maintenance and other non-critical tasks • Identify ways to increase access to community resources and safety through after-hours shuttles or on-call designated drivers
Integrated Prevention
• Increase technical assistance for evaluation of prevention efforts to measure quality and impact
Stakeholder Engagement
• Engage Soldiers and increase awareness of prevention activities and resources before there is a crisis • Use the leadership competencies in DoDI 6400.11 to provide training and mentorship for mid-level leaders so they become more effective in understanding their Soldiers' stressors • Leverage female leaders to increase mentorship and support opportunities for junior female Service members

Table 11: Fort Cavazos Findings

Protective Environments
• Prioritize care-seeking over routine maintenance and non-critical tasks
• Minimize negative repercussions for scheduling care appointments when services are needed and available
Integrated Prevention
• Continue to expand the use of the People First Center beyond vignette-based training and create a one-stop shop for all things prevention and response
Stakeholder Engagement
• Leverage generational differences in knowledge and skills (i.e., technological expertise) to enhance innovation within career fields/daily tasks and foster fresh ideas

Table 12: Fort Liberty Findings

Protective Environments
• Conduct an internal review of practices and local policies regarding when Service members with suicidal ideations may be required to participate in duty-related situations that pose an increased risk for self-harm or increased access to lethal means
• Institute "Kitchen Police" rotations to mitigate the impact of manning shortages and shift work
• Ensure all tenant organizations (e.g., Special Operations Command units) are sharing appropriate risk/protective factor data and are aware of community resources and are encouraged to use them
Integrated Prevention
• Establish service sharing agreements and support personnel office hours at geographically dispersed locations to ensure greater access to support
Stakeholder Engagement
• Leverage affinity groups and unit-level engagement opportunities to better connect with unit members

Table 13: Fort Stewart Findings

Protective Environments
• Review barracks work orders related to physical security to assess process efficiency and completion timelines
• Ensure Soldiers are aware of applicable privately owned weapons/ammunition policies and safe-handling procedures
Integrated Prevention
• Analyze IPPW and program specialist requirements in DoDI 6400.11 and clarify roles and relationships between the IPPW and program specialists
Stakeholder Engagement
• Review newcomer orientation and other opportunities and apply findings to inform Service members and leaders of all available prevention and prevention support resources and how to access them

Table 14: Louisiana National Guard Findings

Protective Environments

- Promote a battle rhythm for weekend drill efforts that constructively uses time to enhance knowledge, skills, and abilities

- Prioritize and equip members to make it to drill

  - Facilitate alternate drill days or assist with identifying carpooling options/resources and childcare arrangements, when possible

  - Local commands should engage Service Member and Family Programs (SMFP) to leverage resources they have (e.g., financial and family readiness) to assist with difficulties Service members have during drill or training

  - Evaluate the feasibility of expanding the Camp Beauregard childcare support model to other locations across the state and consider early adoption of the National Guard Weekend Drill Childcare Pilot Program

  - The Adjutant General should request inclusion into the Weekend Drill Childcare Pilot Program prior to the full program rollout in Fiscal Year 2025

  - States should leverage the Army Fee Assistance Program when eligible and consider partnerships with organizations under a Memorandum of Agreement construct for childcare, when possible

Integrated Prevention

- IPPW should continue to participate in needs assessment training, continue utilizing the Integrated Primary Prevention Tool, and leverage national level support from NGB to inform prevention activities

- Actively promote the newly developed SMFP mental health support capabilities across the state

- Expand the SMFP footprint to increase availability of services across the state

- Empower NCOs to participate in and collaborate with the prevention workforce

- Complete a new standard operating procedure to:

  - Raise awareness of available resources

  - Reinforce opportunities for prevention personnel engagement

  - Establish clear communication, understanding, and transparency between prevention support services

  - Implement measurement standards to evaluate performance

  - Use SMEs to facilitate trainings

Stakeholder Engagement

- Leverage female leaders to increase mentorship and support opportunities for junior female Service members

- Redefine "handle things at the lowest level" to encourage information sharing vice information harboring

Table 15: Los Angeles AFB Findings

Protective Environments

- Review newcomer orientation and other opportunities and apply findings to inform Service members and leaders of all available prevention and prevention support resources and how to access them

Integrated Prevention

- Encourage mid-level leadership to lay out the vision for positive and safe work environments

- Review the implementation and delivery impact of the Space Force receiving prevention support through the Air Force

Stakeholder Engagement
• Identify and address the different needs or concerns of long-term civilian employees vs. newly arrived Service members (e.g., housing costs, commuting distances, childcare options)
• Review policies and plan for insights on prevention implementation at locations with a significant civilian employee presence

Table 166: Malmstrom AFB Findings

Protective Environments
• Coordinate with Air Force to ensure awareness materials are current
• Ensure Military and Family Life Counselors are clearly visible, and that Airmen understand that there is no "chain of command" to access them
• Leverage the established interfaith alliance to build a community-based coalition of services and encourage Airmen involvement in off-base activities
Integrated Prevention
• Use SMEs to facilitate trainings
• Evaluate outcomes of secondary trauma training outcomes and report lessons learned
• Ensure Community Action Team/Community Action Board (CAT/B) membership aligns with Air Force guidance   o CAT/B chairs should evaluate adding special victims counsel and Inspector General as members as allowed by Air Force Instruction 90-5001
• Analyze information shared, audiences, frequency, etc. from various data sharing meetings to determine potential duplication and opportunities for efficiency
Stakeholder Engagement
• Leverage Wing leadership's visibility to have discussions about what "dignity and respect" means to them as well as the Airmen, families, and civilians throughout the community   o Capture those messages and share them widely

Table 17: MCSF Blount Island Findings

Protective Environments
• Mentor young Marines to become future leaders that uphold the values of current leadership
• Leverage female leaders to increase mentorship and support opportunities for junior female Service members
Integrated Prevention
• Ensure collateral duty prevention staff have the necessary resources to be successful
• Examine ways to improve access to prevention support services (e.g., a shuttle or bringing prevention support personnel to Blount Island on a periodic but regular basis)
Stakeholder Engagement

• Improve relationship between civilian employees and Service members
   o Invite DoD civilian managers and supervisors to be a part of the Force Preservation Council
   o Ensure visibility on the availability of civilian-specific prevention resources (i.e., Employee Assistance Programs) on the installation

Table 18: NAS Lemoore Findings

Protective Environments
• Evaluate the impact of variable bonuses for Sailors assigned and make recommendations to the Department of Navy, if necessary

Prioritize improvements in quality of life (e.g., transportation, housing, food, and parking)

Integrated Prevention
• Prioritize units with high numbers of limited duty personnel for support from integrated prevention staff

Stakeholder Engagement
• To ensure no gaps in services, and to further clarify the "warm handoff" process, formalize processes that enable chaplains to fully integrate into community wide prevention activities and formally establish relationships with prevention support agencies as appropriate and to the extent permitted by law and regulation

Table 19: NS Mayport Findings

Protective Environments
• Provide increased opportunities for prevention and prevention support organizations to bring those services and conduct outreach/education events on the ships
• Invite family members to military community events to build connectedness and increase knowledge of resources and hold events during work hours to not interfere with work-life balance
• Prioritize care-seeking over routine maintenance and non-critical tasks despite OPTEMPO
• To the extent possible, extend childcare hours at the locations available to Sailors

Integrated Prevention
• Empower and encourage NCOs to participate in and collaborate with the prevention workforce

Stakeholder Engagement
• Implement a system that confirms care appointments (for accountability) rather than requiring proof of the medical issue or concern
• Leverage female leaders to increase mentorship and support opportunities for junior female Service members

Table 70: NS Norfolk Findings

Protective Environments
• Engage with the Commander, Navy Installations Command Programming to support Sailors and mission readiness across the installation and tenant units
• Increase care for the caregivers and provide them specific and additional resources
• Evaluate compliance with the Comprehensive Crew Endurance Management Policy to ensure it is being consistently followed
• Prioritize public-private venture housing for sailors in the shipyard and maintenance phase

Integrated Prevention
• Clarify that Deployed Resiliency Counselors (DRCs) can serve the support strike group at the pier
• Expand mental health resources and prevention personnel, such as DRCs and Embedded Integrated Prevention Coordinators, in all ships regardless of size with a focus on continuity of care and ease of access

Stakeholder Engagement
• Examine how negative perceptions of females, especially pregnant females, is detrimental to commands, the community, and the Navy
• Hold regular meetings between tenant units and site command to identify gaps

- Increase the availability of mental health providers by outsourcing mental health care

Conclusion

Over the past several years, the Department has initiated unprecedented actions to prevent harmful behaviors and improve climate. Many of these changes require institutional and structural changes that take time to implement and attain measurable benefits. The OSIEs are one tool that assess incremental improvements and identify additional areas for improvement. As with the 2021 OSIEs, it was expected that sites and ships would be early in their development of prevention capabilities. The 2023 OSIEs made clear that leadership at all levels recognize the need for and importance of a strong prevention system; however, they are not effectively or consistently communicating its priority due to challenges such as high OPTEMPO, manning shortages, lack of Service prevention policies and regulations, and IPPW billets remaining unfilled. Prevention must be a consistent and concerted effort. Lack of priority has cascading effects, leaving leaders and prevention personnel at all levels lacking preparation and the necessary skills and competencies to effectively implement prevention.

Prevention is essential to properly assist and care for Service members and to recognize, address, and reduce harmful behaviors across the force. The Department is currently taking steps to implement approved SPRIRC and IRC-SAM recommendations that address many OSIE findings, and will reassess 2021 OSIE sites in 2024 to measure progress and gather lessons learned.

The Department has taken unprecedented steps to resource integrated prevention, but to maximize those investments, complete buy-in from leadership at all levels is required. OSD, the MILDEPS, and NGB must continue to reinforce the importance of prevention for the well-being of Service members. Prevention of harmful behaviors is an imperative investment in the future of the Department, strengthening readiness and resiliency across the Total Force.

Appendix A: Site Selection Methodology

Background

On February 26, 2021, Secretary of Defense Lloyd Austin issued the memorandum, "Immediate Actions to Counter SA and SH and the Establishment of a 90-Day IRC-SAM," which directed immediate actions to address SA and SH. Immediate Action 2 directed OSD to conduct OSIEs and to provide quarterly command climate updates.

To support identification of sites/ships for the 2021 evaluations, Under Secretary of Defense (Personnel and Readiness) (USD(P&R)) directed the completion of a force-wide DEOCS. The DEOCS was selected as the primary data source for the 2021 installation evaluations because it serves as the most timely and sensitive Defense-wide measure of command climate and because other relevant data were delayed due to COVID. In 2022, command climate updates employed a multi-measure approach to better capture the many facets of site risk.

Data Sources

2021-2022 DEOCS
Designed by OPA, the DEOCS 5.0 assesses 19 protective and risk factors that can impact a unit's/organization's climate and ability to achieve their mission. The DEOCS 5.0 measures nine risk factors and 10 protective factors.

Protective factors are attitudes, beliefs, and behaviors associated with positive outcomes for organizations or units. Transformational leadership[10] ratings for the unit/organization leader and the senior non-commissioned officer/senior enlisted leader (senior NCO/SEL), if applicable, are treated as two separate factors.

Risk factors are attitudes, beliefs, and behaviors associated with negative outcomes for organizations or units. Passive leadership[11] is measured for both the unit/organization leader and the senior non-commissioned officer (senior NCO/SEL).

2018 WGRA – Contextual Analysis:
OPA's 2018 WGRA provides insights regarding the estimated prevalence and characteristics of SA, SH, and gender discrimination in the Active Component; Service members' experiences with reporting these types of incidents; and perceptions of unit culture and climate.

2018 DSAID:
DSAID is the Department's authoritative, centralized database used to collect and maintain information about SA cases involving members of the U.S. Armed Forces.

2020-2022 DSPO Suicide Counts:
DSPO provided the OSIE team with military suicide data from 2020 through the first quarter of 2022. DSPO is part of the Office of the Under Secretary of Defense for Personnel and Readiness (OUSD(P&R)) and is the authoritative source for suicide data in the DoD.

2021 FAP Domestic and Child Abuse and Neglect Counts:
The Office of the Deputy Assistant Secretary of Defense for Military Community and Family Policy provided the OSIE team with aggregate counts of domestic abuse and child abuse and neglect incidents reported to FAP in

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[10] Transformational leadership is a leadership style that inspires staff by providing motivation and meaning to their work, giving attention to individuals' unique needs, and directing their focus to higher goals, such as those of the mission.
[11] Passive leadership is a leadership style that avoids and neglects mistakes or problems until they can no longer be ignored.

Fiscal Years 2019-2021. Only data that met criteria for the Department's definition of abuse per DoDI 6400.01 were provided. FAP is the DoD's program designated to prevent and respond to domestic abuse and child abuse and neglect.

2022 U.S. CHR&R:
The CHR&R is a program of the University of Wisconsin Population Health Institute that compiles U.S. local health data to help communities identify opportunities to improve their health. The CHR&R spans several health focus areas: length of life, quality of life, tobacco use, diet and exercise, alcohol and drug use, sexual activity, access to clinical care, quality of clinical care, education, employment, income, family and social support, community safety, air and water quality, housing and transit, and demographics.

Data Ingestion and Merging

Each data source informing the OSIE risk index was ingested into Advana for visualization and analysis.

Appendix B: OSIE Process, Integrated Prevention Metric Development, Validation, and Scoring

Measures

Based on an analysis of the requirements in DoDI 6400.09 and the elements of the OSIE framework (priority, preparation, and implementation), OSD, in coordination with RAND, developed nine new metrics to assess prevention capabilities associated with specific focus areas in DoDI 6400.09: healthy and protective environments, integrated prevention, and stakeholder engagement.[12] Three main tools (focus group discussion protocols, tabletop exercises, and surveys) were used to collect data to inform maturity scores which capture an site/ship's overall capacity for integrated prevention. This section presents the dimensions on which sites/ships were scored and the data collection tools used.

Nine dimensions were used to guide the assessment of prevention capabilities for the OSIE report.

The OSD prioritized three domains of focus:

1) *Healthy and Protective Environment*: Research shows that command climates can positively or negatively impact behaviors such as SA and SH.

2) *Integrated Prevention*: Effective prevention targets a mix of risk and protective factors that are both common across problem areas as well as unique to specific harmful behaviors.

3) *Stakeholder Engagement*: Outcomes can be improved when multiple stakeholders have genuine involvement in prevention activities.

Three additional domains are also included in OSIE framework:

1) *Priority*: Higher-level leadership sets the tone and sustains consistent focus on harmful behaviors.

2) *Preparation*: Prevention personnel and intermediate leadership are equipped with the ability, and exist within a structure, that incentivizes and supports addressing harmful behaviors.

3) *Implementation*: Approach aligns with best practices and is done well (i.e., with high quality).

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[12] Information collection for these metrics were approved by Office of Management and Budget (OMB Control Number 0704-0610).

Table 21: Prevention Capabilities Assessed at OSIEs

		OSIE FRAMEWORK AREA		
		PRIORITY	PREPARATION	IMPLEMENTATION
FOCUS AREAS	HEALTHY AND PROTECTIVE ENVIRONMENT	(1) Leaders prioritize fostering a protective environment by their actions and communications.	(2) Leaders have the requisite KSAs and access to training to develop those KSAs.	(3) Leaders employ best practices known to support a protective environment.
	INTEGRATED PREVENTION	(4) Leaders prioritize prevention activities.	(5) Leaders and prevention personnel have the requisite KSAs to carry out prevention successfully.	(6) Prevention activities that target risk and protective factors across multiple harmful behaviors are evaluated.
	STAKEHOLDER ENGAGEMENT	(7) Leaders prioritize engaging stakeholders.	(8) Prevention personnel have the resources and requisite KSAs to engage stakeholders effectively.	(9) Stakeholders are genuinely engaged in prevention activities across multiple planning stages.

These areas are referred to as core dimensions. Given the breadth of these nine dimensions, each was divided into multiple subdimensions, which are narrower in focus. Subdimensions were worded as positive statements (e.g., "Leaders consistently deter harmful behaviors") to represent high-quality standards to which sites/ships should aspire. Within each subdimension are even narrower "data elements," which serve as the foundation for the dimension scores.

Each data element, also worded as a positive standard to achieve, is judged to be "present" or "absent" by considering multiple data sources collected at the site. A scoring rubric was created to specify the number of data elements that must be "present" within a subdimension for the subdimension to be considered "present" at the site. To be rated "present," evidence supporting the subdimensions must be visible across the site/ship (e.g., within each unit and at multiple levels of the chain of command). As the number of data elements varies by subdimension, the number of "present" data elements required for a subdimension to be rated as "present" also varies across subdimensions. Figure 22 shows an example for Core Dimension 1 (Healthy and Protective Environment – Priority) and its subdimensions. This dimension has five subdimensions and the two data elements are shown for subdimension 1.2. In the scoring rubric, both data elements (1.2.1 and 1.2.2) must be rated as present for Subdimension 1.2 to be rated as present.
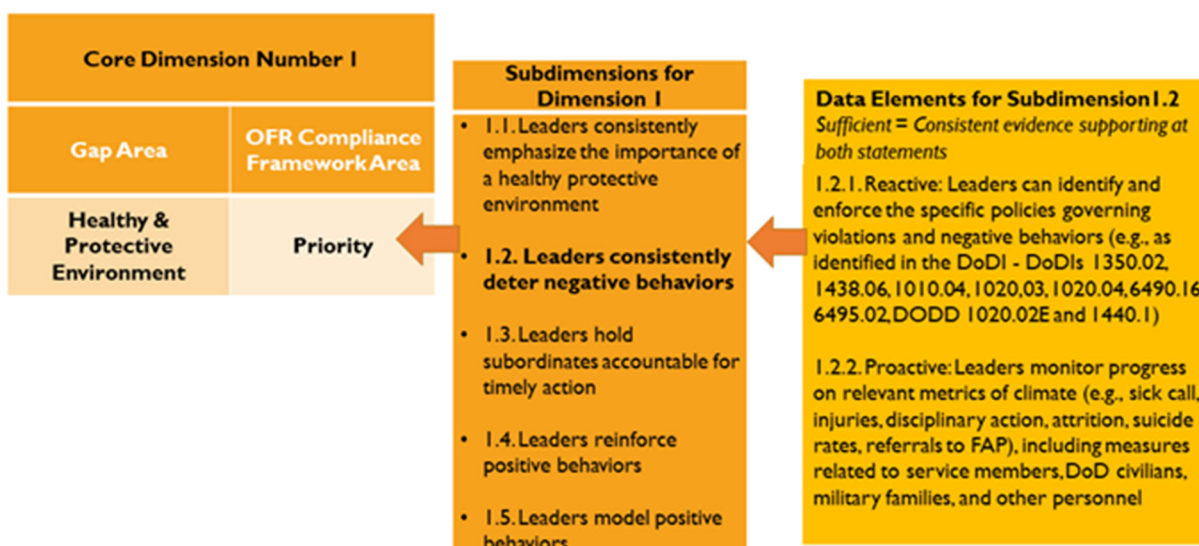
Once it is determined which subdimensions are present and absent, then a maturity score is used to determine the final score for the core dimension. Table 22 below shows the maturity scoring for each core dimension. Although a six-point scale is used to reflect the range of maturity, the exact makeup of the scoring rubric for each core dimension varies by the number of subdimensions. Typically, the highest level of maturity not only has all the subdimensions present, but also an additional requirement for a more robust presence of those subdimensions.

Background on Maturity Scoring

RAND developed a structured maturity scoring system tailored to each core dimension. In its simplest form, a maturity model is a set of characteristics, attributes, indicators, or patterns that represent progression and achievement in a particular domain or discipline. The artifacts that make up the model are typically agreed upon by the domain or discipline and are validated through application and iterative recalibration. A maturity model allows an organization or industry to have its practices, processes, and methods evaluated against a clear set of artifacts that establish a benchmark. These artifacts typically represent best practice and may incorporate standards or other codes of practice that are important in a particular domain or discipline. By having the ability to benchmark, organizations can use maturity models to determine their current level of achievement or capability and then apply these models over time to drive improvement. However, when used in a broader sense, maturity models can also help organizations benchmark their performance against other organizations in their domain or industry, and help an industry determine how well it is performing by examining the achievement or capability of its member organizations. Architecturally, maturity models typically have "levels" along an evolutionary scale that defines measurable transitions from one level to another. The corresponding attributes define each level; in other words, if an organization demonstrates these attributes, it is said to have achieved both that level and the capabilities that the level represents. Having measurable transition states between the levels enables an organization to use the scaling to:

- Define its current state
- Determine its future, more "mature" state; and
- Identify the attributes it must attain to reach that future state

RAND tailored the general maturity approach, developing a specific scoring method for each individual dimension (see Table 22). Thus, rather than one overall, generic scoring system, the maturity approach

focused on the specifics of each dimension. This approach was based on an assessment process OSD and RAND used in a DoD project rating the SA and SH prevention capabilities of U.S. Military Service Academies (Acosta et al., 2022).

In general, for each dimension, a higher maturity rating indicated a greater number of subdimensions that were rated as present (which were driven by the number of data elements present). For example, there are five subdimensions for Dimension 1 (Healthy and Protective Environment – Priority). A site could achieve a maturity score of 2 by having any three subdimensions present. This scoring method was chosen because it assigns a higher score for more subdimensions present, while also allowing sites to express their level of maturity in different ways. For many of the dimensions, to obtain the highest score, a site needs to show consistent evidence that the subdimensions (and their underlying data elements) have been maintained over the past two or more years despite competing priorities.

As implemented, the maturity model can serve three purposes: it will allow DoD and others to understand sites' current capabilities, it may help sites identify ways to strengthen their prevention efforts, and it may permit comparison within and across sites.

Table 22: Link between Data Elements, Subdimensions, and Maturity Scoring

Dimension Maturity Scoring	Subdimensions (# of data elements needed to rate Subdimension as 'present'/total # data elements)
1. Healthy and Protective Environment – Priority	
Maturity Score: 5-Present in all 5 and consistent evidence that presence has been maintained over the past two years despite competing priorities 4-Present in all 5 subdimensions 3-Present in 4 out of 5 subdimensions 2-Present in 3 out 5 subdimensions 1-Present in 1 or 2 out of 5 subdimensions 0-None are Present	1.1. Consistently emphasize the importance of a healthy protective environment (3/4) 1.2. Consistently deters negative behaviors (2/2) 1.3. Leaders hold subordinates accountable for timely action (2/2) 1.4. Leaders reinforce positive behaviors (1/1) 1.5. Leader's role model positive behaviors (1/1)
2. Integrated Prevention – Priority	
Maturity Score: 5-Present in all 4 subdimensions and consistent evidence that sufficiency has been maintained over time despite competing priorities 4-Present in all 4 subdimensions 3-Present in 3 out of 4 subdimensions 2-Present in 2 out 4 subdimensions 1-Present in 1 out of 4 subdimensions	2.1. Leaders see integrated primary prevention as a consistent and enduring priority and communicate it to subordinates (2/2) 2.2. Leaders hold prevention personnel accountable for sustained integrated prevention (2/2) 2.3. Leaders reinforce best practice prevention processes (i.e., sufficient dose, theory-based, evaluated, trained deliverers, interactive content) (2/2) 2.4. Leaders prioritize data and evaluation related to prevention (2/2)
3. Stakeholder Engagement – Priority	
Maturity Score:	3.1. Leaders and prevention personnel use stakeholder engagement to inform priorities (1/1)

5-Present in 3 out of 3 subdimensions, including support from the data call, and consistent evidence that presence has been maintained over time despite competing priorities 4-Present in 3 out of 3, including support from the data call 3-Present in 3 out of 3 subdimensions 2-Present in 2 out of 3 subdimensions 1-Present in 1 out of 3 subdimensions 0-None are Present	3.2. Leader communications stress the importance of stakeholder engagement (1/1) 3.3. Leaders and prevention personnel provide positive reinforcement for stakeholder engagement (2/2)

4. Healthy and Protective Environment – Preparation

Maturity Score: 5-Present in all 4 subdimensions, plus mean of data element 2.1.1 is greater than 4.0 4-Present in 4 out 4 subdimensions 3-Present in 3 out of 4 subdimensions 2-Present in 2 out of 4 subdimensions 1-Present in 1 out of 4 subdimensions 0-None are Present	4.1. Leaders are knowledgeable and skilled in building a protective environment** 4.2. Established or systematic processes/structure to support healthy climate 4.3. Leaders and subordinates maintain present connections (3/4) 4.4 Leaders monitor climate-related efforts and behaviors and consider them in performance evaluations (2/2) **This data element is scored via a survey = overall mean score above 3.0 for the eleven leader survey items

5. Integrated Prevention – Preparation

Maturity Score: 5-Present in all 5 subdimensions 4-Present in 4 of the 5 subdimensions 3-Present in 3 out of 5 subdimensions 2-Present in 2 out of 5 subdimensions 1-Present in 1 out of 5 subdimensions 0-None are Present	5.1. Prevention personnel receive ongoing and systematic training and professional development to continually improve their approach to integrated prevention (2/3) 5.2. Leaders are knowledgeable and skilled in primary prevention** 5.3. Prevention personnel are dedicated, knowledgeable and skilled in primary prevention (2/2) 5.4. Collaborative structure exists to support integrated primary prevention (2/2) 5.5. Continuity of prevention staff and effective prevention activities are maintained over time (2/2) **This data element is scored via a survey = overall mean score above 3.0 for the eight leader survey items

6. Stakeholder Engagement - Preparation

Maturity Score: 5-Present in all 4 subdimensions and mean of 8.1 OR 8.2 is greater than 4 4-Present in all 4 subdimensions 3-Present in 3 out of 4 subdimensions 2-Present in 2 out of 4 subdimensions 1-Present in 1 out of 4 subdimensions	6.1. Leaders have the knowledge and skills needed to conduct stakeholder engagement** 6.2. Prevention personnel are dedicated, knowledgeable and skilled in conducting stakeholder engagement^^ 6.3. Stakeholders are knowledgeable about prevention (2/2) 6.4. Sufficient resources exist to conduct stakeholder engagement (1/1)

0-None are Present	**This data element is scored via a survey = overall mean score above 3.0 for the four leader survey items ^^ This data element is scored via a survey = overall mean score above 3.0 for the six prevention survey items

7. Healthy and Protective Environment – Implementation

Maturity Score: 5-Present in all 5 subdimensions 4-Present in 4 of the 5 subdimensions 3-Present in 3 out of 5 subdimensions 2-Present in 2 out of 5 subdimensions 1-Present in 1 out of 5 subdimensions 0-None are Present	7.1. Subordinates and peers are referred to appropriate resources when at-risk for harmful behaviors (2/2) 7.2. Leaders clearly communicate expectations for benchmarks, roles, and responsibilities for improving/maintaining protective environments to subordinates (2/3) 7.3. Leaders proactively monitor the stress levels of subordinates (2/2) 7.4. Leaders and Service members are held accountable for harmful behaviors in a consistent manner (e.g., through standard operating procedure) (2/2) 7.5. Positive behaviors are rewarded/recognized (1/1)

8. Integrated Prevention - Implementation

Maturity Score: 5-Present in all 5 subdimensions 4-Present in 4 of the 5 subdimensions 3-Present in 3 out of 5 subdimensions 2-Present in 2 out of 5 subdimensions 1-Present in 1 out of 5 subdimensions 0-None are Present	8.1. Prevention approach is integrated (use common messages, consistent collaboration, common operating procedures) (3/4) 8.2. Prevention approach is comprehensive (3/4) 8.3. Prevention approach is evaluated (3/3) 8.4. Prevention approach is continuously improved (2/2) 8.5. Resistance to the prevention approach is monitored and addressed (2/3)

9. Stakeholder Engagement - Implementation

Maturity Score: Score based on the following scale: • NONE (0): Feedback from stakeholders is neither sought nor used by leaders or prevention personnel. • INFORM (1): Leaders and prevention personnel share information in a variety of ways with key stakeholder groups ("We will keep you informed"). No effort is made to get input. • INVOLVE (2): Leaders and prevention personnel seek input from stakeholders AFTER decisions are made. • PARTICIPATE (3): Leaders and prevention personnel see input BEFORE decisions are made. • COLLABORATE (4): Leaders and prevention personnel work with stakeholders to jointly frame the problem and the solutions. Leaders and prevention personnel regularly circle back with stakeholders to update them on progress. • COLLABORATE PLUS (5): Leaders and prevention personnel work with stakeholders to jointly frame the problem and the solutions, using a standing group of stakeholders. This includes leaders and prevention	9.1. Level of collaboration

	personnel regularly circling back with stakeholders to update the group on progress.	

Subdimensions

Core dimensions were designed to be broad categories. In contrast, subdimensions were designed to address narrower topics. Striking a balance between breadth and simplicity, each core dimension contains three to five subdimensions, except for core dimension nine (Stakeholder Engagement – Implementation) which contains one subdimension. Subdimensions were chosen for their theoretical connection to the dimension, their support in the research literature, and their focus on a narrower aspect of the core dimension. Below is a summary of the subdimensions used to assess each of the nine core dimensions and relevant references supporting their inclusion.

Subdimensions for Dimension 1: Healthy and Protective Environment – Priority

This dimension contains five subdimensions that aim to assess the extent to which leaders prioritize a healthy and protective environment and set the tone to sustain a focus on a protective environment.

	Subdimensions	References
1.1	Leaders consistently emphasize the importance of a healthy protective environment	Crittendon & Hope, 2017, pp.18-21; Hoover, Randolph, Elig, & Klein, 2001, pp. 31-33; Ratcliff, Key-Roberts, Simmons, & Jiménez-Rodríguez, 2018, pp. 4-18
1.2	Leaders consistently deter negative behaviors	Cook, Jones, Lipari, & Lancaster, 2005; Ratcliff, Key-Roberts, Simmons, & Jiménez-Rodríguez, 2018, pp. 4-16
1.3	Leaders hold subordinates accountable for timely action	Jones & Bullis, 2003, pp. 24-25
1.4	Leaders reinforce positive behaviors	Jones & Bullis, 2003, pp. 21-40
1.5	Leaders role model positive behaviors	Ratcliff, Key-Roberts, Simmons, & Jiménez-Rodríguez, 2018, pp.2

Subdimensions for Dimension 2: Integrated Prevention – Priority

This dimension contains four subdimensions that aim to assess the extent to which leaders prioritize integrated primary prevention and set the tone to sustain a focus on a prevention.

	Subdimensions	References
2.1	Leaders see integrated primary prevention as a consistent and enduring priority and communicate it to subordinates	Noonan et al., 2009; Kreuter, Lezin, & Young, 2000; McCartan, Kemshall, & Tabachnick, 2015; Campbell & Wasco, 2005; Patton, 2010
2.2	Leaders hold prevention staff accountable for sustained integrated prevention	Thompson, Taplin, McAfee, Mandelson, & Smith, 1995; Nation et al., 2003; McIntosh, Filter, Bennett, Ryan, & Sugai, 2010
2.3	Leaders reinforce best practice prevention processes (sufficient dose, theory-based,	Kratochwill, Volpiansky, Clements, & Ball, 2007; Hawkins, Shapiro, & Fagan, 2010; Mihalic & Irwin, 2003; McDonald, Charlesworth, &

	evaluated, trained deliverers, interactive content)	Graham, 2015; Murnieks, Allen, & Ferrante, 2011
2.4	Leaders prioritize data and evaluation related to prevention	DeGue et al., 2012; Brubaker, 2009; Provost & Fawcett, 2013; Mandinach, 2012; Sable, Danis, Mauzy, & Gallagher, 2006

Subdimensions for Dimension 3: Stakeholder Engagement – Priority

This dimension contains three subdimensions that aim to assess the extent to which leaders prioritize stakeholder engagement and set the tone to sustain a focus on stakeholder engagement to inform primary prevention.

	Subdimensions	References
3.1	Leaders and prevention personnel use stakeholder engagement to inform priorities	Ahmed & Palermo, 2010; Dills, Fowler, & Payne, 2016; Goodman et al., 2017; Hood et al., 2010
3.2	Leader communications stress the importance of stakeholder engagement	Ahmed & Palermo, 2010; Jolibert & Wesselink, 2012
3.3	Leaders and prevention staff provide positive reinforcement for stakeholder engagement	Hood et al., 2010

Subdimensions for Dimension 4: Healthy and Protective Environment – Preparation

This dimension contains four subdimensions that aim to assess the extent to which leaders and prevention staff are equipped—with skills and knowledge—and empowered with a clear line of sight across the chain of command to maintain a healthy and protective environment.

	Subdimensions	References
4.1	Leaders are knowledgeable about and skilled at building a protective environment	Cook, Jones, Lipari, & Lancaster, 2005, pp. 9-10
4.2	Established or systematic processes/structure support a protective environment	Crittendon & Hope, 2017, pp. 20-29
4.3	Leaders and subordinates maintain sufficient connections	Ratcliff, Key-Roberts, Simmons, & Jiménez-Rodríguez, 2018, pp. 4 & 17
4.4	Leaders monitor climate-related efforts and behaviors and consider them in performance evaluations	Hoover, Randolph, Elig, & Klein, 2001, pp. 32-33

Subdimensions for Dimension 5: Integrated Prevention – Preparation

This dimension contains five subdimensions that aim to assess the extent to which leaders and prevention staff are equipped—with skills and knowledge—and empowered with a clear line of sight across the chain of command to sustain high-quality integrated primary prevention.

Subdimensions	References

5.1	Prevention personnel receive ongoing and systematic training and professional development to continually improve their approach to integrated prevention	Kratochwill, Volpiansky, Clements, & Ball, 2007; Hawkins, Shapiro, & Fagan, 2010; Mihalic & Irwin, 2003; McDonald, Charlesworth, & Graham, 2015; Murnieks, Allen, & Ferrante, 2011
5.2	Leaders are knowledgeable and skilled at primary prevention	Kratochwill, Volpiansky, Clements, & Ball, 2007; Hawkins, Shapiro, & Fagan, 2010; Mihalic & Irwin, 2003; McDonald, Charlesworth, & Graham, 2015; Murnieks, Allen, & Ferrante, 2011
5.3	Prevention personnel are dedicated, knowledgeable and skilled in primary prevention	Kratochwill, Volpiansky, Clements, & Ball, 2007; Hawkins, Shapiro, & Fagan, 2010; Mihalic & Irwin, 2003; McDonald, Charlesworth, & Graham, 2015; Murnieks, Allen, & Ferrante, 2011
5.4	Collaborative structure exists to support integrated primary prevention	DeGue et al., 2012; Brubaker, 2009; Provost & Fawcett, 2013; Mandinach, 2012; Sable, Danis, Mauzy, & Gallagher, 2006
5.5	Continuity of prevention staff and effective prevention activities are maintained over time	Dills, Fowler, & Payne, 2016; Wandersman & Florin, 2003; Lundgren & Amin, 2015; Bond & Hauf, 2004; McMahon, Postmus, & Koenick, 2011

Subdimensions for Dimension 6: Stakeholder Engagement – Preparation

This dimension contains four subdimensions that aim to assess the extent to which leaders and prevention staff are equipped—with skills and knowledge—and empowered with a clear line of sight across the chain of command to sustain stakeholder engagement efforts to inform primary prevention.

Subdimensions		References
6.1	Leaders have the skills and knowledge needed to conduct stakeholder engagement	SAMHSA, 2021
6.2	Prevention staff are dedicated, knowledgeable and skilled in conducting stakeholder engagement	Scaccia et al., 2015; Powell et al., 2015; SAMHSA, 2021
6.3	Stakeholders are knowledgeable about prevention	Desai, 2017
6.4	Sufficient resources exist to conduct stakeholder engagement	Noonan et al., 2009; Krug, Mercy, Dahlberg, & Zwi, 2002; García-Moreno et al., 2015; Hawkins, Shapiro, & Fagan, 2010

Subdimensions for Dimension 7: Healthy and Protective Environment – Implementation

This dimension contains five subdimensions that aim to assess the extent to which actions taken by leaders and prevention staff are aligned with best practices for building a healthy and protective environment and are done well (i.e., with high quality).

	Subdimensions	References
7.1	Subordinates and peers are referred to appropriate resources when at-risk for harmful behaviors	Crittendon & Hope, 2017, pp.18-21
7.2	Leaders clearly communicate expectations for benchmarks, roles, and responsibilities for improving/maintaining protective environments to subordinates	Ratcliff, Key-Roberts, Simmons, & Jiménez-Rodríguez, 2018, pp.4-16, 18
7.3	Leaders proactively monitor the stress level of subordinates	Hoover, Randolph, Elig, & Klein, 2001, pp. 4
7.4	Leaders and Service members are held accountable for harmful behaviors in a consistent manner (e.g., through standard operating procedure)	Cook, Jones, Lipari, & Lancaster, 2005 Ratcliff, Key-Roberts, Simmons, & Jiménez-Rodríguez, 2018
7.5	Positive behaviors are rewarded/recognized	Jones & Bullis, 2003, pp. 21-40

Subdimensions for Dimension 8: Integrated Prevention – Implementation

This dimension contains five subdimensions that aim to assess the extent to which actions taken by leaders and prevention staff are aligned with best practices for integrated primary prevention and are done well (i.e., with high quality).

	Subdimensions	References
8.1	Prevention approach is integrated (use common messages, consistent collaboration, common operating procedures)	Gidycz et al., 2018.
8.2	Prevention approach is comprehensive	Bronfenbrenner, 1992, 2005; Casey & Lindhorst, 2009; Banyard, Eckstein, & Moynihan, 2010; Prochaska & Prochaska, 2011; Vladutiu, Martin, & Macy, 2011
8.3	Prevention approach is evaluated	Chinman et al., 2016; 2018; Francisco, Paine, & Fawcett, 1993
8.4	Prevention approach is continuously improved	Chinman et al., 2016; 2018; Francisco, Paine, & Fawcett, 1993
8.5	Resistance to the prevention approach is monitored and addressed	Nation et al., 2003; Rich, Utley, Janke, & Moldoveanu, 2010

Subdimension for Dimension 9: Stakeholder Engagement – Implementation

This dimension contains one subdimension that aims to assess the extent to which actions taken by leaders and prevention staff are aligned with best practices for stakeholder engagement and are done well (i.e., with high quality).

Subdimensions		References
9.1	Level of collaboration ranging from none, to inform (sharing information, lowest level) to collaborate (sharing decision making and implementation, highest level)	International Association for Public Participation, 2018

Focus Group Discussion Protocols (DPs)

In the initial OSIE process, seven DPs were developed to measure integrated prevention and prevention capacity. DPs were designed to guide discussions among certain stakeholders.

Table 23: Discussion Protocols and Target Participants

Discussion Protocol	Target Participants
DP1	Command
DP2	Service Members – E1-E4, O1-O3, W1-W2
DP3	Service Members – E1-E4, E5-E6
DP4[13]	Leaders – O3-O4, W3-W4
DP5	Leaders – E7-E9
DP6	Prevention Personnel
DP7	Prevention Support Personnel

Surveys

The OSIEs administered surveys to Service member personnel. Surveys were generally completed using pen and paper.

Tabletop Exercise (TTX)

The TTX is an activity that prompts prevention personnel to complete a prevention-related activity. The TTX used at most military installations usually consists of an exercise involving deployment/redeployment prevention readiness based off a real-world scenario.

Data Collection

OSIE site visits were conducted by multi-disciplinary teams which were led by a Senior Executive or GS-15 and included seven staff members representing OUSD(P&R) (Office of Force Resiliency; Office of Diversity, Equity, and Inclusion; DSPO; SAPRO; Military Community Advocacy, Office of People Analytics; and the Diversity Management Operation Center). The teams also included representation from the Military Services (military and civilian employees) and the NGB. Teams were comprised of both Service members and civilian employees. The Service members assigned to each OSIE team acted as a senior subject matter expert. This allowed for a mixture of military perspectives and insight into service and site/ship culture. Research assistants were also present during focus group interviews to record interviewee responses, allowing team members to engage with focus group participants in a fluid manner.

Several improvements and modifications were made from the 2021 OSIEs in advance of the 2023 OSIEs. These improvements included adjusting the language and flow of the discussion protocols to improve clarity and simplicity. Improvements were also made to scoring and reporting, such as the development of a process for organizing notes to better facilitate scoring.

At the end of the each OSIE site visit, research assistants from Miami University (through an Intergovernmental Personnel Act agreement with DoD) compiled responses from the DPs and TTX into a single document using

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[13] Also used with officers above O4/W4 if not in command position.

the Qualtrics (2023) online secure survey platform. The compiled document and survey mean scores were then sent to the site visit team for scoring. Individually, team members used the data to derive a maturity score for each dimension. Individual scores were provided to the team leader. To ensure inter-rater reliability, the individual scores were provided to the team leader to measure the consistency of scoring across team members. The team lead was responsible for validating scores. When team member scores differed, the team conferred to assign and validate scores. Only validated team scores were used for the final assessment of a site/ship.

Appendix C: Acronyms List

AFB	Air Force Base
BOSS	Better Opportunities for Single Soldiers
CFA	Commander Fleet Activities
CHR&R	U.S. County Health Rankings and Roadmaps
DEOCS	Defense Organizational Climate Survey
DoD	Department of Defense
DoDI	Department of Defense Instruction
DP	Discussion Protocol
DRC	Deployed Resiliency Counselor
DSAID	Defense Sexual Assault Incident Database
DSPO	Defense Suicide Prevention Office
FAP	Family Advocacy Program
FIPS	Federal Information Processing Standards
IPPW	Integrated Primary Prevention Workforce
IRC-SAM	Independent Review Commission on Sexual Assault in the Military
KSAs	knowledge, skills, and abilities
MCSF	Marine Corps Support Facility
MILDEPS	Military Departments
MWR	Morale, Welfare, and Recreation
NAS	Naval Air Station
NCO	noncommissioned officer
NGB	National Guard Bureau
NS	Naval Station
OPA	Office of People Analytics
OPTEMPO	operational tempo
OSD	Office of the Secretary of Defense
OSIE	on-site installation evaluation
OUSD(P&R)	Office of the Under Secretary of Defense for Personnel and Readiness
SA	sexual assault
SAPRO	Sexual Assault Prevention and Response Office
SEL	senior enlisted leader
SH	sexual harassment
SME	subject matter expert
SMFP	Service Member and Family Programs
SPRIRC	Suicide Prevention and Response Independent Review Committee
TIMS	This is My Squad
TTX	tabletop exercise
USD(P&R)	Under Secretary of Defense for Personnel and Readiness
WGRA	Workplace and Gender Relations Survey of Active Duty Members

Appendix D: References

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