# DEIA Pulse Survey

Diversity - Equity - Inclusion - Accessibility

Thank you for your participation in this important survey. The purpose of this survey is to assess the state of diversity, equity, inclusion, and accessibility (DEIA) in your agency. The survey is designed to support Executive Order 14035 Advancing Diversity, Equity, Inclusion, and Accessibility in the Federal Workforce.

Your participation is **voluntary**, although full participation is encouraged so your agency can receive a full and accurate picture of its current state of DEIA. It should take **5-10 minutes** to complete the survey. The deadline for submission is [DATE}.

**What is DEIA?**

DEIA stands for Diversity, Equity, Inclusion, and Accessibility, which EO 14035 defines:

* The term “diversity” means the practice of including the many communities, identities, races, ethnicities, backgrounds, abilities, cultures, and beliefs of the American people, including underserved communities.
* The term “equity” means the consistent and systematic fair, just, and impartial treatment of all individuals, including individuals who belong to underserved communities that have been denied such treatment.
* The term “inclusion” means the recognition, appreciation, and use of the talents and skills of employees of all backgrounds.
* The term “accessibility” means the design, construction, development, and maintenance of facilities, information and communication technology, programs, and services so that all people, including people with disabilities, can fully and independently use them. Accessibility includes the provision of accommodations and modifications to ensure equal access to employment and participation in activities for people with disabilities, the reduction or elimination of physical and attitudinal barriers to equitable opportunities, a commitment to ensuring that people with disabilities can independently access every outward-facing and internal activity or electronic space, and the pursuit of best practices such as universal design.

**What will happen with my responses?**

OPM will report aggregate (group) responses to your agency. Scores will be calculated for your agency overall and for each demographic group with at least 10 respondents. Your agency may then include the results as part of a report to the Assistant to the President for Domestic Policy, the Office of Management and Budget, and the Office of Personnel Management.

**Is my feedback confidential?**

Yes, your responses will be completely confidential. The data will not contain any inherent identifiers, no one outside of OPM will have access to your individual ratings, and results will only be reported for groups of at least 10 respondents.

**Can I use this survey to report incidents of harassment or discrimination?**

No, this survey is not to be used for reporting incidents. To report an incident, contact [agency specific].

**What if I need help completing the survey?**

If you need help completing the survey, contact  SpecialEmailBox@opm.gov.

**Privacy Act Statement**

Pursuant to 5 U.S.C. § 552a(e)3), this Privacy Act Statement informs you of why OPM is requesting the information from you.

**Authority:** OPM is authorized to collect the information requested pursuant to 5 U.S.C. § 4702 – Research Programs.

**Purpose:** OPM is requesting this information to gather input about leadership competencies. OPM will use this information to identify leadership strengths and challenges and to identify strategies to enhance DEIA-related leadership behaviors.

**Routine Uses:** In any public release of survey results, no data will be disclosed that could be used to match your responses with your identity. The information requested may be shared externally as a “routine use” as specified in the system of records notice associated with this collection of information, OPM GOVT-6, Personnel Research and Test Validation Records, [OPM GOVT-6](https://www.opm.gov/information-management/privacy-policy/sorn/opm-sorn-govt-6-personnel-research-and-test-validation-records.pdf).

**Consequences of Failure to Provide Information:** Providing this information is completely voluntary and there is no penalty if you choose not to respond. However, maximum participation is encouraged so that the data will be complete and representative.

**Public Burden Statement**

The public reporting burden to complete this information collection is estimated at 8 minutes per response, including time for reviewing instructions, searching data sources, gathering, and maintaining the data needed, and the completing and reviewing the collected information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this collection information, including suggestions for reducing this burden to the Office of Personnel Management, Assessment & Evaluation at Organizational\_Assessment@opm.gov**.** Current information regarding this collection of information – including all background materials -- can be found at https:/www.reginfo.gov/public/do/PRAMain by using the search function to enter either the title of the collection (Leadership Assessment Surveys), or the **OMB Control Number (3206-0253**).

**Continue to the next page to begin the survey.**

**On the last page of the survey, click the Submit Responses button to submit your responses. Once you submit your responses, you will not be able to access your survey again for any reason.**

# Part 1: Demographics

The items in this section ask about your background and employment. This information will be used to better understand (1) the diversity of your agency and (2) the experiences of specific groups of employees. Your responses will be **completely confidential**: the data will not contain any inherent identifiers, no one outside OPM will have access to individual ratings, and results will only be reported in groups of at least 10 respondents.

1. What is your current GS grade level or equivalent?
* GS 1-4
* GS 5-8
* GS 9-12
* GS 13-15
* SES
* Other
1. What is your work role/position?
* Unpaid intern, fellow, or apprentice
* Paid intern, fellow, or apprentice
* Non-supervisor
* Team leader
* First-line supervisor
* Manager
* Executive
* Contractor
1. How long have you worked for your current agency?
* Less than 1 year
* 1 to 5 years
* 6 to 10 years
* 11 to 15 years
* 16 to 20 years
* More than 20 years
1. Where is your job located?
* Headquarters
* Field
* Remote/Full-time Telework
1. What gender do you identify as?
* Female
* Male
* Non-binary/third gender
* Prefer to self-describe
* Prefer not to say
1. Do you identify as transgender?
* No
* Yes
* Prefer not to say
1. Which of the following do you consider yourself to be?
* Bisexual
* Gay or Lesbian
* Straight/Heterosexual
* Prefer to self-describe
* Prefer not to say
1. Do you identify as Hispanic, Latino, or Spanish origin?
* No
* Yes
* Prefer not to say
1. Which category/categories best describes you? (Mark all that apply)
* American Indian or Alaska Native
* Asian
* Black or African American
* Middle Eastern or North African
* Native Hawaiian or Other Pacific Islander
* White
* Prefer to self-describe
* Prefer not to say
1. What is your age group?
	* 25 and under
	* 26 – 29
	* 30 – 39
	* 40 – 49
	* 50 – 59
	* 60 years or older
	* Prefer not to say
2. Are you an individual with a disability?
	* No
	* Yes
	* Prefer not to say

Executive Order (EO) 14035 defines *diversity* in terms of “the many communities, identities, races, ethnicities, backgrounds, abilities, cultures, and beliefs of the American people, including underserved communities.” The following item is designed to help gain a better understanding of diversity in your organization.

1. Please indicate which of the following characteristics describe you. Use the “Other” option to write-in any unlisted personal characteristics that contribute to your organization’s diversity (to protect your anonymity, write-in responses will NOT be reported, but they will be considered when refining future versions of the survey). (Mark all that apply)
* Veteran
* Military Spouse
* From a low-income background
* Live in a rural area
* Live in a suburban area
* Live in an urban area
* Pregnant during the last 12 months
* Parent or guardian
* Caregiver to an ill, elderly, or disabled individual
* Immigrant
* English as a second language
* First generation college
* Formerly incarcerated
* Require a disability accommodation
* Require a religious accommodation
* Other – specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Continue 🡺**

# Part 2: Your Organization’s DEIA

The items in this section ask about your agency’s DEIA climate, policies, and programs.

Rating scale: Strongly Disagree, Disagree, Neither Disagree nor Agree, Agree, Strongly Agree, Do Not Know/No Basis to Judge

## Recruitment

1. When hiring, my organization recruits from a diverse population.

## Hiring

1. When hiring, equal opportunity is extended to all applicants.

## Performance evaluation

1. My performance appraisal is a fair reflection of my performance.

## Training

1. Training opportunities are allocated fairly.

## Professional development

1. Career development opportunities are allocated fairly.

## Pay and compensation

1. Awards in my organization depend on how well employees perform their jobs.

## Promotion opportunities

1. Promotions in my organization are based on merit.

## Reasonable accommodation requests/Accessibility

1. If I needed an accommodation (e.g., for disability or religion), my request would be handled fairly.
2. My supervisor supports my need to balance work and other life issues.
3. I have sufficient resources (for example, people, materials, budget) to get my job done.

## Potential impact of agency actions (to overcome societal and org barriers)

1. Managers and supervisors are open to talking about DEIA issues.
2. Managers and supervisors are committed to building a diverse workplace.
3. My organization is taking the appropriate steps to ensure DEIA.

## Programs

1. My agency clearly communicates its DEIA-related policies, programs, and initiatives.
2. My agency clearly communicates its DEIA-related goals and objectives.
3. My agency’s DEIA-related policies, programs, and initiatives are effective.
4. I know who in my agency is responsible for DEIA-related policies, programs, and initiatives.
5. I know my rights and responsibilities related to harassment and discrimination.
6. I know how to report incidents of harassment and discrimination.
7. If I were to report an incident of harassment or discrimination, it would be dealt with properly.
8. In the last year, have you received DEIA-related training from your organization/agency?
	* Yes
	* No
	* Not sure

**Continue 🡺**

# Part 3: Your Experiences

The items in this section ask about your own personal experiences in your agency.

Rating scale: To no extent, To a minor extent, To a moderate extent, To a great extent, To a very great extent, Do Not Know

1. Overall, to what extent do you believe prejudice, discrimination, and/or harassment is a problem in your organization?

Rating scale: Strongly Disagree, Disagree, Neither Disagree nor Agree, Agree, Strongly Agree, Do Not Know/No Basis to Judge

1. I believe DEIA is important to meeting my organization’s mission.
2. My organization is a welcoming and inclusive place to work for all employees.
3. Managers and supervisors are representative of the diversity in the organization.
4. The people I work with treat each other with respect.
5. I feel safe to express my opinions at work.
6. I feel like an integral part of my organization.
7. In my organization, I feel valued as an individual.
8. I am satisfied with the diversity of my organization.
9. My work gives me a feeling of personal accomplishment.
10. I am emotionally energized at work.
11. I feel connected to the people I work with.
12. I feel empowered to do my job well.

Rating scale: Very Dissatisfied, Dissatisfied, Neither Dissatisfied nor Satisfied, Satisfied, Very Satisfied, Do Not Know

1. Considering everything, how satisfied are you with your pay?
2. Considering everything, how satisfied are you with your job?
3. Considering everything, how satisfied are you with your agency?
4. Are you considering voluntarily leaving your current position in the next 12 months?
* No
* Yes, to retire
* Yes, for another job within my agency
* Yes, for another job in a different agency
* Yes, for another job outside the federal government
* Yes, other

**Thank you for your participation.**

**Please continue to the next page to SUBMIT your responses.**