

SUPPORTING STATEMENT - PART A

DoD-wide Generic Clearance for the Data Collection and Analysis for Qualitative and Quantitative Data Collection on the Independent Review Commission Recommendation Evaluation (OMB Control Number 0704-0644)

Title of Collection: *Addressing Barriers to Mental Health Care for Active-Duty Sexual Trauma Survivors*

Expected Fielding Dates: 4 June 2024 – 1 December 2024

1. Need for the Information Collection

The Independent Review Commission on Sexual Assault in the Military recommended that Active Duty Service members survivors be authorized to access health care for their sexual trauma, through the Department of Veterans Affairs without a referral, citing stigma as a significant barrier to accessing mental health care. This recommendation (4.2.b) was modified by the Department to explore the feasibility of this recommendation, and whether this addresses stigma and other associated barriers to help-seeking.

The literature review, “Rollison, Julia, et. al. “Psychological Harms and Treatment of Sexual Assault and Sexual Harassment in Adults: Systematic and Scoping Review to Inform Improved Care for Military Populations”, 2023, identified potential additional barriers to accessing mental health care at the Department of Veterans Affairs for the active duty population, underscoring the importance of identifying barriers to help-seeking among existing care within the Department.

To best understand the barriers and facilitators to mental health help-seeking among Active Duty survivors of sexual trauma, information collection from installation stakeholders (DoD personnel who respond to sexual trauma, support, and assist survivors), command leaders, Active Duty Service members and Active Duty survivors is required to better understand their attitudes, beliefs, knowledge, and experience with available mental health care. The information collected from these listening sessions will provide critical information necessary to address barriers and make program and policy improvements that facilitate help seeking among sexual trauma supporters.

2. Use of the Information

Information collection will occur through listening sessions and individual meetings or phone calls utilizing a set of questions identified for the specific stakeholder population (see Facilitator Guide) at selected military installations with identified respondents. Military installations were selected by Military Department feedback, analysis of sexual assault reporting data, and availability of mental health care to identify a cross-section of military installations that are resource rich and those that are remote.

Site visitors will coordinate with the designated installation points of contact to schedule individual listening sessions with each of the stakeholder groups. Active Duty survivor volunteers will be facilitated through the Sexual Assault Response Coordinator, with individual meetings, groups, or phone calls, scheduled, based upon survivor preference. Respondents will be asked questions from the facilitators and may receive a copy of the questions, if requested.

Respondents are DoD personnel (DoD civilians and Active duty personnel) and will include installation personnel; Sexual Assault Response Coordinators, Sexual Assault Prevention and Response Victim Advocates, Family Advocacy Program personnel, Chaplains, Military Equal Opportunity personnel, law enforcement, Special Victims Counsel/Victims Legal Counsel, Special Trial Counsel, Defense Attorneys, Command leadership, Military Medical Treatment Facility Behavioral Health Providers, Forensic Health Care Examiners, Active Duty Service Members, and Active Duty survivors.

Respondents will attend listening sessions and provide their verbal responses to the facilitators. There is no requirement for respondents to complete any paperwork nor a follow-up upon the conclusion of the listening session. However, an information brief (attached to this package) will be read at the beginning of each listening session, with a summary of the intent of the project and the listening sessions and informed that participation is voluntary, and they can participate at the level with which they are comfortable. That statement is provided with this SSA.

Notetakers will record responses by the respondents in the listening session. The information collected will be consolidated into a non-attributional summary for each installation, with a final internal report outlining a summary of the findings with recommendations to the Department. The notetaker notes from the listening sessions will be destroyed once the final report is fully coordinated and approved by the Assistant Secretary of Defense for Health Affairs for submission to the Under Secretary of Defense for Health Affairs.

The result from this collection will be the identification of policy and programmatic improvements that support active Duty survivors and facilitate their ability to access the mental health care they need.

3. Use of Information Technology

Information collected will be solely through listening sessions. There will be no requests for information collected through an electronic process. However, virtual listening sessions through Microsoft Teams or by telephone, with stakeholders and survivors will be available to accommodate schedules and individual survivor preferences, where appropriate. Any virtual sessions will be conducted in the same manner as in-person listening sessions with a facilitator and notetaker. The site visitors will not record (i.e. Microsoft Teams recording capabilities) any virtual sessions.

4. Efforts to Identify Duplication

The information obtained through this collection is unique and is not already available for use or adaptation from another cleared source.

5. Burden on Small Businesses

This information collection does not impose a significant economic impact on a substantial number of small businesses or entities.

6. Consequences of Less Frequent Collection

A one-time information collection is planned to address the Independent Review Commission recommendation 4.2.d. to explore the feasibility of allowing Active duty Service members access to VA health care services for sexual trauma, without a referral. The intent of the listening sessions is to identify whether this recommendation addresses stigma, and other barriers to mental health help-seeking among Active duty trauma survivors. Further, the information collected will be used to identify additional programmatic and policy changes that will remove barriers and facilitate help-seeking for Active duty sexual trauma survivors.

7. Paperwork Reduction Act Certification

This collection of information does not require collection to be conducted in a manner inconsistent with the guidelines delineated in 5 CFR 1320.5(d)(2).

8. Solicitation of Comments

A 30-Day Federal Register Notice for the collection published Monday, September 16, 2024. The 30-Day FRN citation is 89 FRN 75534.

9. Gifts or Payment

No payments or gifts are being offered to respondents as an incentive to participate in the collection.

10. Confidentiality

A Privacy Act Statement is not required for this collection because we are not requesting individuals to furnish personal information for a system of records.

A System of Record Notice (SORN) is not required for this collection because records are not retrievable by PII.

A Privacy Impact Assessment (PIA) is not required for this collection because PII is not being collected electronically.

The final internal Department of Defense report will be retained for 30 years, in accordance with DAA-0330-2021-008-0001, with any associated documents outlining the analysis.

11. Sensitive Questions

The listening sessions are not asking any questions regarding sexual behavior, or attitudes, religious beliefs, race and/or ethnicity or collection of PII of any kind, from respondents.

However, the listening sessions will ask questions regarding barriers and facilitators to Active duty sexual trauma survivors accessing mental health care after experiencing their trauma. Further, questions about stigma and experiences with mental health care services will be asked, however, no questions specific to an actual sexual trauma experience will be asked of any respondents. A statement will be read at beginning of the listening sessions highlighting the voluntary nature of the sessions and informing respondents that they can participate to the level for which they are comfortable, including decisions to not answer any questions. Should survivors need support following the listening sessions, they will be offered the assistance of the local Sexual Assault Prevention and Response Program.

12. Respondent Burden and its Labor Costs

Part A: ESTIMATION OF RESPONDENT BURDEN

1) Collection Instrument(s)

Listening Sessions

- a) Number of Respondents: 500
- b) Number of Responses Per Respondent: 1
- c) Number of Total Annual Responses: 500
- d) Response Time: 1 hour
- e) Respondent Burden Hours: 500

2) Total Submission Burden (Summation or average based on collection)

- a) Total Number of Respondents: 500
- b) Total Number of Annual Responses: 500
- c) Total Respondent Burden Hours: 500 hours

Part B: LABOR COST OF RESPONDENT BURDEN

1) Collection Instrument(s)

Listening Sessions

- a) Number of Total Annual Responses: 500
- b) Response Time: 1 hour
- c) Respondent Hourly Wage: \$49.07
- d) Labor Burden per Response: \$49.07
- e) Total Labor Burden: \$24,535

2) Overall Labor Burden

- a) Total Number of Annual Responses: 500
- b) Total Labor Burden: \$24,535

The respondent hourly wage was determined by using the Bureau of Labor Statistics Wage Estimate Website mean hourly wage for “Healthcare Practitioner and Technical Occupations”, Occupation code 29-0000, https://www.bls.gov/oes/current/oes_nat.htm

13. Respondent Costs Other Than Burden Hour Costs

There are no annualized costs to respondents other than the labor burden costs addressed in Section 12 of this document to complete this collection.

14. Cost to the Federal Government

Part A: LABOR COST TO THE FEDERAL GOVERNMENT

Labor Cost to the Federal Government is covered in contracting expenses listed under operational and maintenance cost.

1) Collection Instrument(s)

Listening Sessions

- a) Number of Total Annual Responses: 500
- b) Processing Time per Response: 0 hours
- c) Hourly Wage of Worker(s) Processing Responses: \$0
- a) Cost to Process Each Response: \$0
- b) Total Cost to Process Responses: \$0

2) Overall Labor Burden to the Federal Government

- a) Total Number of Annual Responses: 500
- b) Total Labor Burden: \$0

Part B: OPERATIONAL AND MAINTENANCE COSTS

1) Cost Categories

- a) Equipment: \$0
- b) Printing: \$0
- c) Postage: \$0
- d) Software Purchases: \$0
- e) Licensing Costs: \$0
- f) Other: Government employee travel expenses to conduct listening sessions
\$35,000 and contract expenses \$288,926.80: \$323,926.80

2) Total Operational and Maintenance Cost: \$323,926.80

Part C: TOTAL COST TO THE FEDERAL GOVERNMENT

1) Total Labor Cost to the Federal Government: \$0

2) Total Operational and Maintenance Costs: \$323,926.80

3) Total Cost to the Federal Government: \$323,926.80

15. Reasons for Change in Burden

This is a new collection with a new associated burden.

16. Publication of Results

The results of this information collection will not be published.

17. Non-Display of OMB Expiration Date

We are not seeking approval to omit the display of the expiration date of the OMB approval on the collection instrument.

18. Exceptions to “Certification for Paperwork Reduction Submissions”

We are not requesting any exemptions to the provisions stated in 5 CFR 1320.9.