Division of Violence Prevention
Prevention Development and Evaluation Branch
Centers for Disease Control and Prevention (CDC)

Program Effectiveness Evaluation of a Workplace Intervention for Intimate Partner Violence

Office of Management and Budget Information Collection Request Supporting Statement and Data Collection Instruments

Supporting Statement A

Phyllis Holditch Niolon (PNiolon@CDC.GOV)
National Center for Injury Prevention and Control
Division of Violence Prevention
4770 Buford Hwy, NE, MS F-63
Atlanta, GA 30341

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This is a request for a 3 month extension on OMB package 0920-0789, entitled "Program Effectiveness Evaluation of a Workplace Intervention for Intimate Partner Violence." The request for an extension has been made necessary due to unexpected delays beyond the control of the research team. This extension would not increase the burden hours of the original approved study; it would merely allow further time for the last data collection point due to these unexpected delays. The purpose of the current study is to evaluate one U.S. company's manager training on domestic violence and its impact on employees and the work environment. The design of the study is quasi-experimental, involving a baseline survey with untrained managers and their employees, a mid-point survey with the managers, and a 1-year follow-up survey with managers and their employees. The company estimated that about half of the managers would have received the training during the year between data collection points, creating roughly equal comparison groups with which to evaluate the effects of the training. However, just before the mid-point survey (intended to occur 6 months after the baseline survey), the person at the company who led the trainings and was the liaison to this research study was laid off during a massive downsizing at the company. As a result, our mid-point survey was delayed by 3.5 months, and no trainings occurred during this time. Therefore, in order to 1) provide enough time between the mid-point survey and the final follow-up survey, and 2) allow enough time for an adequate number of managers to be trained, we need to collect the final follow-up survey in January and into February of 2010, which is past the OMB package termination date of December 31, 2009. The final follow-up survey is critical to the research project; without these surveys, the data collected thus far will be useless in evaluating the manager training, and the money and effort spent on the project thus far would be wasted.

This package was approved in August of 2008. After approval, the research team began working with the company to set up the baseline and manager surveys. These surveys were conducted in October and November of 2008. We attempted to conduct the 6 month surveys in April, but 2 weeks prior to launch of the survey we learned that our study liaison and the person in charge of scheduling and conducting the trainings was being laid off. It was two months before the company reassigned the training responsibilities to someone else. At this point, we were able to begin the mid-point survey process again. The mid-point surveys were conducted in July and early August of 2009. In summary, the project has completed the first two of the three originally proposed data collection points. A three month extension is needed to finish the study and to collect the final surveys in January and February of 2010. The final surveys are critical to the completion of the study.

A. JUSTIFICATION

A1. Circumstances Making the Collection of Information Necessary

The Centers for Disease Control and Prevention (CDC) requests clearance to conduct a study on workplace strategies to prevent and manage intimate partner violence (IPV). Estimates from the National Crime Victimization Survey (NCVS) indicate that women suffered nearly 600,000 nonfatal violent victimizations by an intimate partner in 2001 and that 85 percent of IPV incidents were against women (Rennison, 2003). According to the National Violence Against Women Survey (NVAWS), 5.3 million victimizations occur annually for adult women (Tjaden & Thoennes, 2000). IPV has a substantial impact on the workplace. Its effects are both indirect

(e.g., through absenteeism and decreased productivity of the victim and perpetrator while at work) and direct (e.g., the victim is harassed, threatened, or attacked at the workplace [Wilkinson, 2001]). It has been estimated that 74 percent of IPV victims are harassed at work by their abuser (Davis, 1987). Annually, 13,000 acts of violence against women are committed in the workplace by intimate partners (Bachman, 1994).

IPV is associated with high personal and societal costs, including physical injury and death, psychological trauma, substance abuse, suicide attempts, and depression. The widespread impact of IPV extends into high healthcare costs and costs for social and criminal justice services related to IPV. IPV perpetrated against women cost over $5.8 billion dollars in 1995, including $320 million for rape, $4.3 billion for physical assault, $342 million for stalking, and $893 million for murder (National Center for Injury Prevention and Control, 2003). Most of this ($4.1 billion) is for direct medical and mental health care services. Lost productivity (from paid work and household chores for victims of nonfatal IPV) accounts for $0.9 billion, and lost lifetime earnings by IPV homicide victims accounts for $0.9 billion (National Center for Injury Prevention and Control, 2003). Companies bear 52 percent of the economic costs of IPV (National Center for Injury Prevention and Control, 2003).

In preventing IPV, the identification of effective programming continues to be a major need in all sectors of the community, including workplace settings. Companies have a vested interest in developing workplace IPV prevention programs, not only for the general well-being and safety of their employees but also for the subsequent effects on employee productivity, health costs, and a myriad of other outcomes with cost implications. At the federal level, agencies such as the National Institute for Occupational Safety and Health (NIOSH) and the Occupational Safety and Health Administration (OSHA) have implemented fairly general, widespread efforts in improving workplace safety and health with a limited amount of focus directly on issues of workplace IPV prevention. However, there are a few national associations that focus specifically on issues of workplace IPV prevention efforts. Two of the largest national associations (composed primarily of Fortune 500 companies) that have helped raise corporate awareness of IPV and guide the development of workplace IPV prevention activities for employers are the Corporate Alliance to End Partner Violence (CAEPV), with a membership of approximately 80 companies, and the National Business Group on Health, with a membership of approximately 185 companies and large public sector employers.

In the workplace, a variety of strategies for preventing or responding to IPV can be implemented, including:

- Policies (e.g., policies specifying paid or unpaid time off for victims to attend court, procedures regarding protective/restraining orders)
- Security measures (e.g., employee escorts, relocating employees, cell phone provision, building access control)
- Victim resources (assistance with obtaining protective orders, legal assistance, flexible hours, paid leave, unpaid leave, family assistance)
- Education (e.g., formal manager trainings, employee trainings, awareness-raising activities)

Based on the general design of the IPV programs in existence in the workplace, it is evident that such activities are primarily designed to increase the likelihood that employees who are

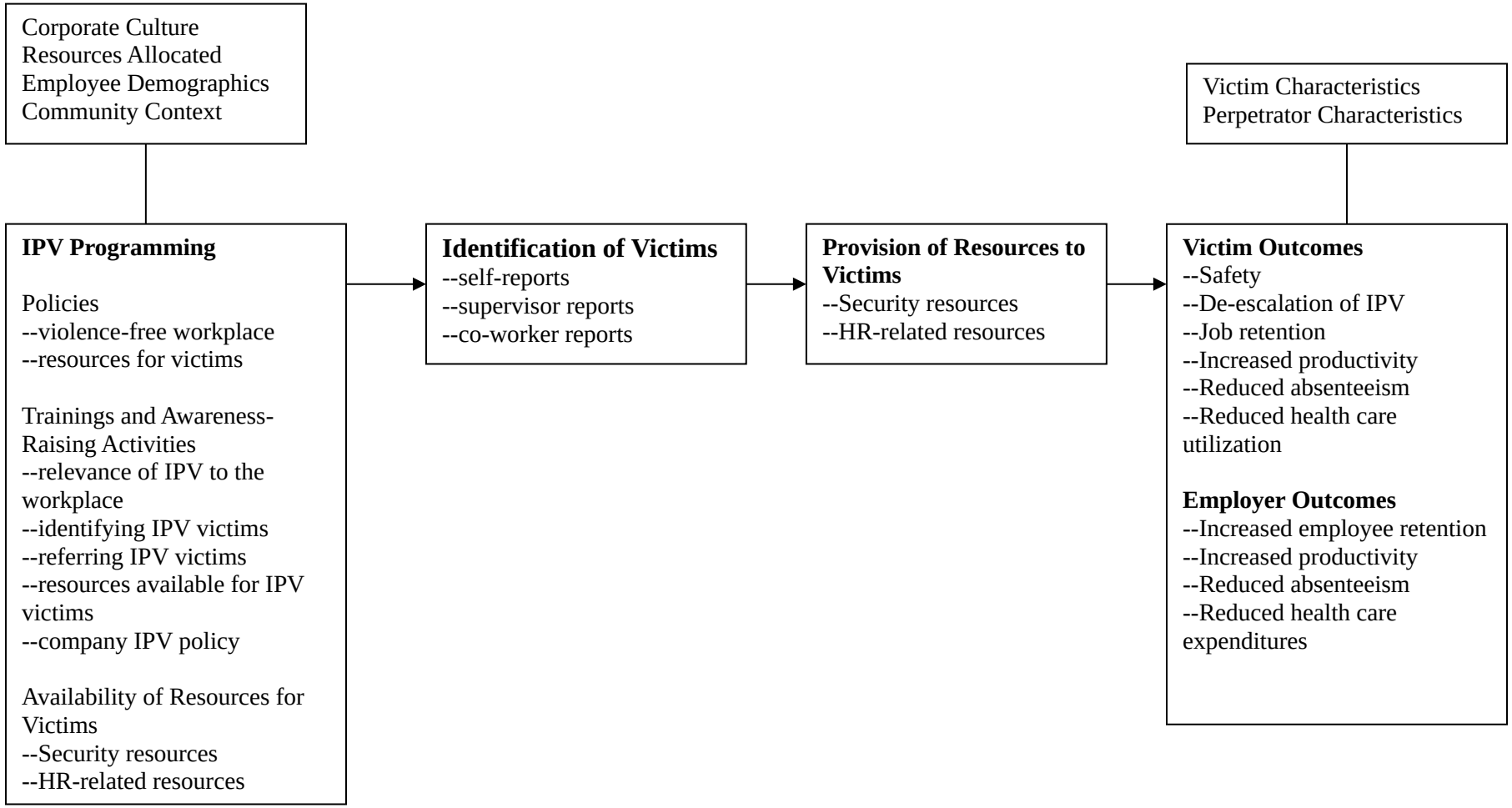
experiencing IPV will be identified and referred for services available through the company's IPV program. By receiving IPV services, the employees will be more likely to be able to continue working, remain productive, and stay safer and healthier than they would have been otherwise. Figure 1 is a logic model demonstrating the hypothesized pathway by which workplace IPV programs may have an impact.

Although some preliminary research documenting the extent of these types of IPV activities at 26 private sector companies has been conducted(Lindquist, Clinton-Sherrod, Hardison, and Weimer, 2006), no research attempted to determine how effective (and cost-effective) such activities are. The current study will document in detail the IPV activities delivered by a large corporation that has had a workplace IPV program in place for several years, evaluate the impact of the company's IPV activities on a variety of outcomes, determine the costs of IPV activities, and estimate the impact required for cost-effectiveness. The specific information collection described in this statement pertains to the primary study component, which is an evaluation of the impact of the Domestic Violence Training for Managers offered by the company on a voluntary, periodic basis, on intermediate outcomes (e.g., manager awareness of company resources, victim referrals) and the ultimate outcomes of employee productivity and job retention. Data collection will consist of web-based surveys of managers and employees at the participating company (described in more detail subsequently). Over a 13-month period, a proportion of the managers will receive the manager domestic violence training, and the study is designed to determine the impact of the manager training on both manager- and employee-level outcomes. It is essential to collect data directly from the managers and employees themselves for this evaluation; no existing data appropriate for use in evaluating the impact of the manager training are available.

By evaluating the cost and effectiveness of strategies at one major corporation, the CDC will help to guide the development of meaningful, cost effective IPV prevention efforts in workplaces across the US. Such efforts represent an important step in reducing IPV and its tremendous personal and societal costs.

The legal justification for this survey may be found in Section 301 of the Public Health Service Act (see **Appendix A**).

Figure 1. Logic Model Showing the Hypothesized Impact of Workplace IPV Programming



A2. Purpose and Use of the Information Collection

This study represents the first systematic evaluation of employer strategies for IPV prevention. The evaluation is designed to accomplish three goals: (1) to document in detail the IPV activities delivered by the company (process evaluation), (2) to determine the impact of the IPV activities on intermediate outcomes (e.g., awareness of company resources, victim referrals) and the ultimate outcomes of employee productivity and job retention (outcome evaluation), and (3) to determine the costs of IPV activities and estimate the impact required for cost-effectiveness (economic evaluation). The primary component of the outcome evaluation is the evaluation of the impact of a manager training on domestic violence offered on an ongoing basis by the participating company. Data collection for the evaluation of the manager training will include web-based surveys of managers and employees. The manager and employee surveys are the only components of the study subject to clearance by the Office of Management and Budget. All other data sources for the study will involve unstructured interviews with a very small number of stakeholders at the participating company.

CDC's Division of Violence Prevention (DVP), which is responsible for preventing injuries and deaths caused by violence, will use findings from the study to provide support to its private sector partners in understanding the effectiveness and returns on investment associated with workplace IPV prevention activities. Findings will also help business to tailor IPV prevention activities to their particular worksites for maximum effectiveness.

Two national organizations of Fortune 1000 companies interested in workplace IPV prevention, the Corporate Alliance to End Partner Violence and the National Business Group on Health, have endorsed this study. These organizations (and others) recognize that study findings can be used immediately to inform effective strategies for workplace IPV prevention among their members.

Without the data collection specified in this statement, DVP will not be able to provide informed guidance to US corporations regarding effective and potentially cost-saving workplace IPV programs. Further, without this data collection, DVP will not be able to ensure that any workplace IPV programming implemented under its auspices will produce the intended outcomes.

A3. Use of Improved Information Technology and Burden Reduction

In order to maximize efficiency and reduce burden, a Web-based survey design is proposed for data collection (see **Appendices B and C** for survey instruments). All individuals who will be recruited for the surveys have Internet access at the workplace. The participating company has used Web-based data collection successfully to survey its staff. The corporation will email a message to respondents (see **Appendix D** for recruitment e-mails) that explains the survey and encourages participation. The email message will contain a link to the Web-based instrument, which will be confidential for employees and managers. The survey will be easy to use for the respondent, allowing the automatic administration of complex skip patterns and the inclusion of specific modules targeted at particular sub-populations while maintaining simple, seamless navigation.

The use of a Web-based survey will reduce the burden associated with hardcopy duplication, distribution, shipping and storage. It will help to ensure data quality via internal range and consistency checks performed during data collection, and will provide a faster turnaround time between data collection and analysis.

A4. Efforts to Identify Duplication and Use of Similar Information

To date, the few studies that have been conducted in the area of IPV and its impact on the workplace (or workplace responses to IPV) have been descriptive in nature and have focused simply on capturing employer attitudes toward IPV and its impact on the workplace, employee experiences with IPV, and employment stability among IPV victims. For example, a recent special issue of the *Journal of Interpersonal Violence* specifically focusing on IPV and the workplace ("Intimate Partner Violence, Employment and the Workplaces: An Interdisciplinary Perspective") included studies examining the consequences of intimate partner stalking on women's employment (Logan, Shannon, Cole, and Swanberg, 2007), coping strategies that women experiencing IPV use at work and whether informing someone at work or receiving support from co-workers are associated with employment status (Swanberg, Macke, and Logan, 2007), a review of the literature on IPV circumstances among women in higher wage, high status jobs (Kwesiga, Pattie, Bell, and Moe, 2007), costs associated with IPV to organizations (Reeves and O'Leary-Kelly, 2007), and the relationship between IPV, social support, employment stability, and job turnover among welfare recipients (Staggs, Long, Mason, Krishnan, and Riger, 2007).

No previous or current data collection efforts of which we are aware have evaluated the effectiveness or cost-effectiveness of workplace IPV activities. A series of employer focus groups funded by CDC's National Center for Injury Prevention and Control (NIJ, 2005) found that employers believed that workplace policies and programs to address domestic violence issues could produce positive outcomes for the employee and employer. The only study we identified that has even attempted to document the impact of company's IPV programming considered the impact of Harman International's workplace domestic violence training program on a limited set of intermediate outcomes. The study found that the program increased self-reported supportive behaviors and awareness of resources related to domestic violence among those who participated in the training (Urban, 2004). However, the study did not examine the impact of the training on employee outcomes (e.g., safety, productivity, employment stability). In addition, it did not use a comparison group (of untrained employees), which precludes our ability to draw conclusions about the effectiveness of this training even on the limited intermediate outcomes explored.

We conducted extensive document and literature reviews, which confirmed that no experimental or quasi-experimental assessments of workplace IPV prevention strategies have been or are currently being conducted. A recent review of workplace IPV literature (Swanberg, Logan & Macke, 2005) indicated that the outcomes of workplace IPV interventions have not been adequately studied. Another published review (Peek-Asa et al, 2001) also found a dearth of rigorous evaluations of workplace IPV prevention.

In addition, the lead researchers from the organization contracted to conduct the proposed study have attended several recent conferences at which current research on IPV prevention was shared, including the NIJ Conference (Washington, DC, 2005, 2006), the American Society of Criminology Conference (Toronto, Ontario, 2005; Los Angeles, CA, 2006), the Annual Meeting of the Society for Prevention Research (San Antonio, TX, 2006), and the International Family Violence and Child Victimization Conference (Portsmouth, NH, 2006). None of these conferences included evaluation studies pertaining to workplace IPV activities.

A5. Impact on Small Businesses or Other Small Entities

No small businesses or other small entities will be involved in the data collection.

A6. Consequences of Collecting the Information Less Frequently

This request is for a very limited information collection period. It is a "one-time" study involving an employee survey administered in two waves and a manager survey administered at baseline and 6 and 12 months post-baseline. All data collection activities will be conducted over a 13-month period. Data collection will not be repeated.

A7. Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

There are no special circumstances involved with this data collection.

A8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

A. Public Comment. A 60-day notice to solicit public comments was published in the Federal Register (March 7, 2007, Vol. 72, No. 44, pp. 10219-10220) (**Appendix F**). A 60-day notice to solicit public comments for the extension request was published in the Federal Register on August 26, 2009 (Vol. 74, No. 164, pp. 43138-43139) **(Appendix M).**

One public comment was received in response to the Federal Register notice during the 60-day comment period. The comment, submitted via email by an individual in the DHHS Office of Population Affairs, was a request to receive the draft instruments and supporting statement. The draft instruments were forwarded to the individual, along with an offer to provide the supporting statement once finalized. The comment and the response provided are included as **Appendix G**.

One public comment was received in response to the Federal Register notice for the extension request during the 60-day comment period. However, the comment was non-substantive in nature. It is included as **Appendix N**.

B. Consultation with Experts. Consultations were held with key organizations involved in workplace IPV prevention, including the National Business Group on Health, the Corporate Alliance to End Partner Violence, the Family Violence Prevention Fund, and Peace at Work (see **Appendix E**). A lead researcher in the field, Jennifer Swanberg at the University of Kentucky, was also consulted. Advisors internal to the organization contracted to conduct the study were also conducted, with study design documents and early drafts of the instrument

shared with internal advisors (listed in **Appendix H**). A number of revisions were made based on their suggestions, such as broadening the constructs and refining particular items. These revisions are all reflected in the current submission.

C. Pilot Test. Both instruments will be pilot tested with a convenience sample of five employees at RTI International, the contractor conducting the evaluation. The purpose of the pilot test will be to test the overall flow and length of the survey, in addition to identifying any programming errors and questions that may be difficult for respondents to answer. The "debriefing" questions that will be asked of pilot test participants are included in **Appendix I**.

A9. Explanation of Any Payment or Gift to Respondents

All manager survey respondents will be entered into a drawing at each data collection time point. For each time point (baseline, 6 months and 12 months), 50 respondents will randomly be selected to receive a $100 gift card to Amazon.com.

After each of the 2 waves of the employee survey, all respondents will be entered into a drawing. For each interview wave, 150 respondents will randomly be selected to receive a $100 gift card to Amazon.com.

It is widely accepted that the provision of incentives is an important strategy for maximizing response rates (and thereby increasing the validity of study findings). According to a recent meta-analysis (Heerwegh, 2006), several studies have demonstrated that providing a drawing-type incentive, wherein respondents are entered in a drawing rather than receiving a direct incentive, produced a significant increase in response rates for Web surveys. Therefore, we feel that the incentive structure developed for this study is appropriate.

For the manager survey component, which will not be anonymous, the incentive process will be simple. Each manager who decides to participate in the survey will enter his/her study identification number (provided in the recruitment e-mail described in more detail subsequently) when he/she enters the survey website. On the last page of the survey website, respondents will be thanked and told that they will be informed of the results of the drawing on [date] (the date will immediately follow the two week period in which the survey is being conducted). Then, at the conclusion of the two-week period during which the survey is open for participants, all study identification numbers that generated a completed survey will be compiled. From this pool, 50 study identification numbers will be randomly selected. Immediately after selection, all managers who participated in the survey will be e-mailed notifying them of whether they were selected or not. For managers who were selected to receive the incentive, the e-mail will include an Amazon.com gift code worth $100. The same process will be used for all three administrations of the manager survey.

For the employee survey component, the incentive process will be more complicated, because this incentive process will be anonymous. The protocols developed for this component were specifically designed so that the employees' responses could not be linked to their identity except for purposes of associating each employee survey response with the manager by whom the respondent is supervised. However, information on whether the employees actually take the

survey or not will be documented, for the purposes of following up with non-respondents and allowing for the provision of incentives. The incentive process for the employee survey involves the following steps. As employees enter the survey website, they will not enter any kind of identification number. Although the recruitment e-mails will provide each employee with a study identification number, this number will not be entered anywhere on the survey website. Employees will simply enter the website and take the survey. After they finish the last page of the survey, they will be thanked and provided with a "survey completion code" which is automatically generated by the survey. Respondents will be told to write down or print up the survey completion code. Then, respondents will be directed to a completely separate website (which will open up in a new window in their browser, in order to demonstrate that it is independent from the survey website). At this "validation" website, the respondent will be prompted to enter their survey completion code and the study identification number that was included in their recruitment e-mail. The program will immediately validate the numbers (ensuring that only valid survey completion codes and study identification numbers are used and that a single study identification number cannot be used more than once, which would demonstrate an attempt to enter the drawing multiple times). Upon validation, the respondents will be informed that they have been successfully entered into the drawing for a $100 Amazon.com gift code and that they will be informed of the results of the drawing on [date] (the date will immediately follow the two week period in which the survey is being conducted). Then, at the conclusion of the two-week period during which the survey is open to participants, all study identification numbers that were paired with a survey completion code on the "validation" website (the only way that we know whether an individual completed the survey) will be compiled (note: this is the only proxy for whether an individual completed the survey; it is possible that some employees took the survey but did not go to the "validation" website and/or enter their codes, but these individuals cannot be entered in the drawing because we have no way of identifying them). From this pool, 150 study identification numbers will be randomly selected. Immediately after selection, all employees who participated in the survey will be e-mailed notifying them of whether they were selected or not. For employees who were selected to receive the incentive, the e-mail will include an Amazon.com gift code worth $100. The same process will be used for both waves of the employee survey.

A10. Assurance of Confidentiality Provided to Respondents

Manager Survey

This submission has been reviewed for Privacy Act applicability and it has been determined that the Privacy Act does not apply. Although the managers' names, email addresses and division/unit will be collected, survey responses will be filed and retrieved by a study identification number. All personal information will be maintained separately by RTI and only RTI will hold the link to the study participants and study identification number. Identifiable information will be maintained until project completion, or no more than 5 years from the date the final survey is administered. After this time, the file linking survey responses with respondent identities will be destroyed. Any survey results shared with CDC, the participating company or disseminated to the public will only be summary results (i.e., at the aggregate level). In addition, minimum cell size requirements will be used when

presenting the summary data on respondents, so that categories in which 3 or fewer respondents are represented will not be shown.

The manager survey component is longitudinal in nature; managers will be asked to complete the survey at 3 periods in time, which will require participants to be tracked over time. However, their status as a study participant and the data itself will be kept in a secure manner, which means that no identifying information about the managers will be shared with anyone outside of the RTI study team. The survey data will identify the manager only by a study identification number (rather than name).

The survey data will be collected and transmitted back to RTI via an encrypted Internet connection utilizing a Secure Socket Layer (SSL) certificate. Once at RTI, the data will be stored securely on RTI's internal network in a private SQL database. RTI's data quality assurance standards ensure that all survey data are stored in a secured and organized manner to eliminate accidental loss, exposure, or destruction of confidential survey data. Computer-based tools are used to detect and identify vulnerabilities on RTI systems. This ensures that vulnerabilities, if detected, can be corrected before unauthorized persons exploit them. Multiple layers of automated network and server monitoring quickly identify failures or unusual activity levels, which may be an indication of an attempted security breach. Alerts are sent 24 hours a day, 7 days a week via e-mail and pager to on-call staff for evaluation and resolution.

Identifying information about the managers will be kept in a separate file, with the link between the survey data file and the file containing identifiers only available to the RTI project team members authorized to access the files (and who will have signed a confidentiality agreement). The file containing the identifiers will be called the "respondent database" and will include first and last name, e-mail address, division/unit, and the study identification number. All data elements in the respondent database except the study identification number will be provided (via a password protected spreadsheet uploaded onto a secure FTP site maintained by RTI) by the participating company. RTI will generate the study identification numbers for the respondents.

The lead letter from the company, recruitment e-mails, and introductory page on the survey website will clearly convey to the managers the extent to which their data will be kept confidential. As shown in **Appendix D**, managers are told that "Your responses to the survey questions will be kept in a secure manner and will only be seen by the authorized research staff at RTI. Neither your name nor any identifying information about you will be used in connection with your responses to the interview questions. In addition, no data that can be linked to an individual will be shared with [Company name]." Additionally, the company has noted assurances of privacy for employees and this is noted in these materials.

Any survey results shared with the participating company or disseminated to the public will only be summary results (i.e. at the aggregate level). We will employ conventional "minimum cell

size requirements" when presenting summary data on the respondents, such that categories in which 5 or fewer respondents are represented will not be shown.

Employee Survey

The employee survey component will have several elements of anonymity: there will be no way to connect the employees' survey responses to his or her identity, except for purposes of associating each employee survey response with the manager by whom the respondent is supervised. In other words, the survey database will not contain a study identification number or any other direct identifier. We will, however, document whether the employees' study identification number was linked with a valid survey completion code, as a proxy measure for whether the employee completed the survey. Although this study could theoretically be designed to use the survey completion code to link a respondent's survey responses with his or her identity (i.e., one could retrospectively use the information contained in the "validation" database to link an employee's survey identification number--and therefore his/her identity--to the survey database by using the survey completion code), the system developed for this study will specifically be designed to preclude this possibility. The survey database contains no other information other than the responses to the survey questions. The "respondent database", which cannot be linked to the survey database, will contain the employees' first and last name, e-mail address, division/unit, manager, and study identification number (with the last piece of information generated by RTI and the remaining data elements provided by the participating company in a secure fashion). Throughout the time the survey is open to participants, the respondent database will also be populated with an indicator of whether the study identification number has been used in conjunction with a valid survey completion code to enter the employee in the drawing. This piece of information is necessary in order to follow-up with non-respondents and to notify respondents of the results of the drawing.

As with the manager survey data, the employee data will be collected and transmitted back to RTI via an encrypted Internet connection utilizing a Secure Socket Layer (SSL) certificate. Once at RTI, the data will be stored securely on RTI's internal network in a private SQL database. RTI's data quality assurance standards ensure that all survey data are stored in a secured and organized manner to eliminate accidental loss, exposure, or destruction of confidential survey data. Computer-based tools are used to detect and identify vulnerabilities on RTI systems. This ensures that vulnerabilities, if detected, can be corrected before unauthorized persons exploit them. Multiple layers of automated network and server monitoring quickly identify failures or unusual activity levels, which may be an indication of an attempted security breach. Alerts are sent 24 hours a day, 7 days a week via e-mail and pager to on-call staff for evaluation and resolution.

The lead letter from the company, recruitment e-mails, and introductory page on the survey website will clearly convey to the employees that the survey is anonymous. As shown in **Appendix D**, employees are told: "There will be no way to link the responses you provide to the survey questions to your identity. You will not enter an identification number to take the survey. At the end of the survey, you will be given a survey completion code. You will then be directed to a separate website (unconnected with the survey) where you will enter the survey completion code AND the following study identification number." **Additionally, the company has noted**

assurances of privacy for employees and this is noted in these materials.

As with the manager survey, any employee survey results shared with the participating company or disseminated to the public will only be summary results (i.e. at the aggregate level). We will employ conventional "minimum cell size requirements" when presenting summary data on the respondents, such that categories in which 5 or fewer respondents are represented will not be shown.

The approval notice for the proposed data collection was granted on January 18, 2008 from the nationally accredited Institutional Review Board maintained by CDC's contractor, RTI International (see **Appendix J**). CDC scientists will not be interacting with study participants nor will they have access to any identifiable study data; therefore, the protocol for this data collection will be reviewed only by the local (RTI) Institutional Review Board. The study protocol and instruments were revised to comply with the requirements of the local Board.

A11. Justification for Sensitive Questions

The objectives of the proposed data collection necessitate collecting data regarding IPV victimization experiences among employees and managers in the participating company. This requires the inclusion of potentially sensitive questions regarding intimate partner violence experiences in the employee and manager surveys (see **Appendices B and C**). Without such information, it would not be possible to make a meaningful assessment of the effectiveness of a workplace IPV prevention intervention. It will be necessary to identify employees who have experienced IPV victimization, in order to effectively establish the pathway through which the manager training impacted employee productivity, stability, and health care utilization. Specifically, it will be necessary to document the proportion of employees who experience IPV victimization among both the "trained" and "untrained" manager groups, and determine whether any improvements in employee outcomes as a result of the manager domestic violence training are attributed to increased resource utilization by employees who are IPV victims. In addition, the cost-effectiveness analysis will use data from the employee and manager surveys in determining the economic impact of IPV victimization on companies, and will need victimization data. Because the study design is not experimental (managers will not be randomly assigned to receive the domestic violence training), it will be extremely important to document any factors that might influence the likelihood of a manger's deciding to request the manager training. Personal experience with IPV victimization may be such a factor, so it will be necessary to document IPV victimization experiences among managers. Finally, two recent large scale telephone surveys specifically addressed the issue of fear and upset from sensitive questions about IPV. The study found that most respondents answered sensitive IPV questions without fear or upset (regardless of whether they had been victimized) and 92% of respondents said the questions were important to ask (Black, Kresnow, Simon, Arias, & Shelley, 2006).

More detail about the purpose of each construct included in the surveys is specified in **Appendix L**.

The IPV questions included in the surveys are from the Revised Conflict Tactics Scale (CTS2S; Strauss & Douglas, 2004), which has been widely used for decades and has been validated on a number of populations. This scale, adapted to elicit incidents of violence with past as well as current partners, was recently approved for use in the National Intimate Partner and Sexual Violence Survey (OMB 0920-0724).

We recognize that some survey respondents, particularly victims of IPV, may become distressed during or after taking the survey. In order to minimize negative outcomes, e-mail messages and the survey will contain links to local and national resources for IPV victims. The introductory screen will contain a link (and accompanying text) to the "resource page". In addition, each page of the survey will contain a link to the "resource page" at the bottom of the web page.

Both the recruitment e-mails and the introductory screen of the survey will clearly inform respondents of the topic areas of the survey. These materials will state that the survey is voluntary and that respondents may refuse to answer any of the questions.

A12. Estimates of Annualized Burden Hours and Costs

Managers at the participating company who have not completed the Domestic Violence Training for Managers as of the time of baseline data collection will be recruited for the manager survey component, which includes survey data collection at baseline and at 6- and 12-month follow-up intervals. Employees supervised by managers who participate in the baseline manager survey will be recruited for each wave of the employee survey, with the sample "refreshed" prior to the second-wave data collection. The estimates for the number of respondents for both types of surveys included in Table 1 were provided by the participating company. The average burden estimates for hours per response are based on the anticipated average duration of each survey. The hourly wages of $51.28 for managers and $21.92 for non-managers were calculated based on estimates provided by the participating company.

A12a. ESTIMATED ANNUALIZED BURDEN HOURS

Type of Respondent	Form Name	Number of Respondents	Number of Responses per Respondent	Average Burden per Response (in hours)	Total Burden Hours
Manager	Manager Baseline and Follow-up Survey	500	3	30/60	750
Employee	Employee Survey	1500	1	15/60	375

Total					1125

A12b. ESTIMATED ANNUALIZED COST TO RESPONDENTS

Type of Respondent	Total Burden Hours	Hourly Wage Rate	Annualized Hourly Costs
Manager	750	$51.28	$34,614
Employee	375	$21.92	$8,220
Total			$42,834

A13. Estimates of Other Total Annual Cost Burden to Respondents or Record Keepers

There are no other costs to respondents.

A14. Annualized Costs to the Federal Government

The annualized cost to the Federal government of this data collection is estimated to be $293,820. Of the total costs, $238,264 is for developing and administering the evaluation study, including survey design and data collection. Approximately $55,556 is for federal oversight provided by CDC.

ANNUALIZED COSTS TO THE FEDERAL GOVERNMENT

Costs Directly Related to Conducting Project	$ 238,264
Project Oversight by Federal Government	$ 55,556
Total Costs	$ 293,820

A15. Explanation for Program Changes or Adjustments

This is a request for a 3 month extension on OMB package 0920-0789, entitled "Program Effectiveness Evaluation of a Workplace Intervention for Intimate Partner Violence." The request for an extension has been made necessary due to unexpected delays beyond the control of the research team. This extension would not increase the burden hours of the original approved study; it would merely allow further time for the last data collection point due to these unexpected delays.

A16. Plans for Tabulation and Publication and Project Time Schedule

a) Plans for tabulation and publication.

The results from the study will be used to generate a final report. The report will include detailed information on the data collection methods, survey results, and recommendations regarding the effectiveness of workplace IPV initiatives (see **Appendix K** for a sample report outline). The final report will be based on findings from this data collection effort and other components of the evaluation, including the process evaluation and the cost-effectiveness component, which will be based on unstructured interviews with a very small number of key stakeholders at the participating company. The report will be submitted to CDC.

The CDC will use the final report to create program and research recommendation for future employer-based IPV prevention programs. CDC will also publish the findings from the evaluation in collaboration with RTI.

In addition to the detailed final report, the results of the study will also be summarized in several short topical brief reports intended for dissemination to the Corporate Alliance to End Partner Violence and other organizations focused on IPV and the workplace.

b) Project timeline.

Exhibit 3. PROJECT TIMELINE

Task	Time Schedule
Baseline recruitment e-mail sent to managers	2 weeks from OMB clearance
Baseline manager survey conducted	2 weeks from OMB clearance
Baseline recruitment e-mail sent to employees	2.5 weeks from OMB clearance
Baseline employee survey conducted	2.5 weeks from OMB clearance
Follow-up 1 recruitment e-mail sent to managers	6.5 months from OMB clearance
Follow-up 1 manager survey conducted	6.5 months from OMB clearance
Follow-up 2 recruitment e-mail sent to managers	12.5 months from OMB clearance
Follow-up 2 manager survey conducted	12.5 months from OMB clearance
Follow-up recruitment e-mail sent to employees	13 months from OMB clearance
Follow-up employee survey conducted	13 months from OMB clearance

A17. Reason(s) Display of OMB Expiration is Inappropriate

This information collection effort does not ask to be exempted from displaying the OMB expiration date.

A18. Exceptions to Certification for Paperwork Reduction Act Submissions

No exceptions to the certification statement are requested.

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