

Evaluation of the Trafficking Victim Assistance Program (TVAP) and Aspire: Child Trafficking Victim Assistance Program (Aspire)

OMB Information Collection Request New Collection

Supporting Statement Part A

December 2025

Type of Request: New

Submitted By:
Office of Planning, Research, and Evaluation
Administration for Children and Families
U.S. Department of Health and Human Services

4th Floor, Mary E. Switzer Building
330 C Street, SW
Washington, D.C. 20201

Project Officers:
Mary G. Mueggenborg
Kelly Jedd McKenzie

Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes

Part A

Executive Summary

- **Type of Request:**
This Information Collection Request is for a new data collection. We are requesting 1 year of approval.
- **Timeline:**
We aim to begin data collection by May 2026.
- **Description of Request:**
This request supports the Administration for Children and Families' Evaluation of the Trafficking Victim Assistance Program (TVAP) and Aspire: Child Trafficking Victim Assistance Program (Aspire). The proposed data collection includes interviews and a survey to document and examine the key characteristics and implementation of the programs, including the challenges, strengths, and successes. This study is not intended to promote statistical generalization to other sites or industries. We do not intend for this information to be used as the principal basis for public policy decisions.

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

A1. Necessity for Collection

This request supports the Administration for Children and Families' (ACF) *Evaluation of the Trafficking Victim Assistance Program (TVAP) and Aspire: Child Trafficking Victim Assistance Program (Aspire)*.

TVAP and Aspire are funded by the Office on Trafficking in Persons (OTIP) to provide time-limited comprehensive case management services to individuals who have experienced severe forms of human trafficking, including adults (TVAP) and children (Aspire). The programs also aim to (1) develop and maintain a nationwide network of providers to conduct human trafficking outreach and provide direct services and community referrals, and (2) establish local regional presence within each of the ACF geographic regions to coordinate project activities and direct services.

TVAP has undergone several changes in the past few years, shifting to a regional administration model and separating services for minors into a separate program called Aspire. The Office of Planning, Research, and Evaluation (OPRE), in collaboration with OTIP, is overseeing a process evaluation of the TVAP and Aspire programs. This proposed data collection will be the first evaluation of the TVAP and Aspire programs to understand its administration and implementation and its impact on thousands of individuals. The proposed data collection includes interviews and a survey to document and examine the key characteristics and implementation of the programs, including the challenges, strengths, and successes. This study is not intended to promote statistical generalization to other sites or industries. We do not intend for this information to be used as the principal basis for public policy decisions.

There are no legal or administrative requirements that necessitate this collection. ACF is undertaking the collection at the discretion of the agency. ACF has contracted with RTI International to complete this work.

A2. Purpose

Purpose and Use

The proposed information collection supports the process evaluation, which aims to document and assess the impact of the 2022 program redesign. The evaluation will examine how the redesigned programs are structured and administered, how partnerships are developed and maintained, client referral pathways, case management service provision, and factors that affect program implementation. The proposed information collection will compare and assess variation in these aspects of implementation across the regions under the regional administration model.

Findings will be used by ACF to inform their efforts to support human trafficking survivors. For example, if the evaluation findings suggest that particular approaches to program implementation may increase efficacy or efficiency or identify potential shifts to the regional approach, OTIP may use this information when writing Notices of Funding Opportunity or considering future research and evaluation efforts. Findings will also be shared with the TVAP and Aspire prime award recipient and subrecipients to ensure they benefit from the evaluation and can engage in continual process improvement. Findings may also be useful to other anti-trafficking organizations and professionals who provide case management services to similar client populations. Activities for this information collection request will answer the evaluation questions listed in **Exhibit A1**.

The information collected is meant to contribute to the body of knowledge on ACF programs. It is not intended to be used as the principal basis for a decision by a federal decision-maker and is not expected to meet the threshold of influential or highly influential scientific information.

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

Research Questions

The following are evaluation questions that will be addressed through this information collection.

Exhibit A1. TVAP and Aspire Process Evaluation Questions

Evaluation Questions
<p>1. What are the goals and objectives of the new TVAP and Aspire programs?</p> <p>a. How did the prime recipient, subrecipient, service providers, and clients experience the transition between the former TVAP model and the new programs (e.g. what were challenges, facilitators)?</p>
<p>2. How are the TVAP and Aspire programs structured and administered?</p> <p>a. What are the challenges and facilitators to implementing the regional approach, the tiered case management model, and other program administration components?</p>
<p>3. How does the prime recipient develop and maintain partnerships?</p> <p>a. How do formal TVAP and Aspire actors (OTIP, prime recipient personnel, subrecipients) collaborate?</p> <p>b. What other actors collaborate with TVAP and Aspire actors? How do they collaborate?</p> <p>c. How do partners and the prime recipient provide feedback to one another?</p> <p>d. What partnership and collaboration challenges do TVAP and Aspire actors face? How do they respond to these challenges?</p> <p>e. What are the facilitators to and successes of TVAP and Aspire partnerships and collaboration?</p>
<p>4. What are the pathways for clients to TVAP and Aspire?</p> <p>a. How are clients referred to TVAP and Aspire?</p> <p>b. How are targeted outreach and other approaches used to identify and refer clients?</p> <p>c. What are the TVAP and Aspire enrollment procedures and protocols?</p> <p>d. What are the challenges to client identification, referral, enrollment, and re-enrollment? How are they addressed?</p> <p>e. What are the facilitators to and successes of client identification, referral, enrollment, and re-enrollment?</p>
<p>5. How are TVAP and Aspire comprehensive case management services conducted for clients?</p> <p>a. What are the key elements of TVAP and Aspire case management approaches?</p> <p>b. What client assessment and service planning approaches do TVAP and Aspire use?</p> <p>c. What are TVAP and Aspire clients' primary service and assistance needs?</p> <p>d. What services and assistance are provided to TVAP and Aspire clients?</p> <p>e. Who provides what services to clients and why? How are services and assistance provided?</p> <p>f. What are clients' experiences of and perspectives about participating in TVAP and/or Aspire?</p> <p>g. What components of the TVAP and/or Aspire programs are perceived to help clients achieve their articulated goals?</p> <p>h. How do clients provide feedback regarding their experiences in the programs?</p> <p>i. How do clients transition out of TVAP and Aspire?</p> <p>j. What challenges do subrecipients' experience when delivering services to clients? How do they address these challenges?</p> <p>k. What are the facilitators to and successes of case management services delivery?</p>
<p>6. How do external contextual factors affect the TVAP and Aspire programs?</p> <p>a. What external factors affect TVAP and Aspire program implementation (e.g., child protection policies and practices)?</p> <p>b. How do identified external factors affect TVAP and Aspire program implementation?</p>

Study Design

With oversight from ACF's OPRE and OTIP, RTI International is conducting a regionally focused process evaluation. This will include the following:

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

- 1) Semi-structured virtual interviews focused in two or three select regions within the ACF geographic regions (see *Section B2 of Supporting Statement B (SSB)* for regional site selection criteria)
- 2) A survey of all past and current TVAP and Aspire subrecipient service providers.

The primary purpose of the interviews and survey is to describe demonstration grant program administration, including understanding program implementation approaches, timelines, facilitators, and barriers, from the perspectives of regional and local service provider staff, other local partner agencies, and adult program participants. The study design selected is intended to be the least burdensome while allowing for both a deep understanding of implementation experiences and comparative analysis across regions. Qualitative interviews will bring nuanced perspectives to this complex program. This approach uses a small, purposive sample to gain in-depth understanding. However, these findings cannot be generalized across all regions. The quantitative surveys will allow for inputs from a broader set of service providers with lower burden. Together, the qualitative and quantitative methods will assist in answering the evaluation questions. *SSB* provides more detail on the appropriateness of the design (*section B1*) and the study design (*section B2*). **Exhibit A2** provides an overview of the data collection efforts.

In alignment with the research questions, the results are context specific in nature and are not designed to be representative of or generalizable to a given subpopulation. Limitations will be noted in any publications resulting from the information collection.

Exhibit A2. Data Collection Instruments

<i>Data Collection Activity</i>	<i>Instruments</i>	<i>Respondent and Content of Collection</i>	<i>Mode and Duration</i>
Interviews with key subrecipients in the selected regions	Subrecipient Interview Guide	Respondents: TVAP and Aspire subrecipient program staff Content: Implementation models, participant and implementer engagement, and implementation facilitators and barriers.	Mode: Virtual Duration: 1.5 hours
Interviews with other service providers in the selected regions	Other Service Provider Interview Guide;	Respondents: Non TVAP/Aspire service providers (e.g., OVC grantees, community referrals) Content: Experience providing services to human trafficking survivors, challenges, lessons learned.	Mode: Virtual Duration: 1 hour
Interviews with local government systems in the selected regions	Local Government Systems Interview Guide	Respondents: Child welfare/protective services; Law enforcement Content: Experience working with service providers and program clients, challenges, lessons learned.	Mode: Virtual Duration: 1 hour
Interviews with current and former clients in the selected regions	Client Interview Guide	Respondents: Current and former clients of TVAP and Aspire Content: Clients desired outcomes from the program, aspects of the program that helped clients reach their goals, short term outcome after program involvement.	Mode: Virtual Duration: 1 hour

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

Survey of all subrecipient service providers	Subrecipient Survey	<p>Respondents: All TVAP and Aspire subrecipient program staff (including the subset of subrecipients who participated in interviews)</p> <p>Content: Subrecipient organization experiences with client referral and service provision, support provided by the prime award recipient, and overall program implementation.</p>	<p>Mode: Web-based survey</p> <p>Duration: 35 minutes</p>
--	---------------------	--	---

Other Data Sources and Uses of Information

The evaluation team is currently conducting a process evaluation of TVAP and Aspire from a national perspective across all ACF regions through virtual interviews with the following project respondents: OTIP and other federal personnel involved in TVAP and Aspire, TVAP and Aspire recipient leadership, regional coordinators (RCs), case managers (CMs), and select subrecipient service providers (Subs). These activities are not subject to the Paperwork Reduction Act as each respondent group included fewer than 10 people and received a unique set of questions. These activities focused on understanding the goals and objectives, program structure and administration, partnership and collaboration approaches, and pathways for client identification and referral.

ACF has also provided the evaluation team with TVAP and Aspire’s ACF-required performance progress reports (PPR; OMB #0970-0467)¹. This administrative data provides quantitative information about project participants (e.g., demographics, service needs and receipt), outreach, service delivery barriers, and training activities. As part of the PPR, the projects also submit a brief narrative report, which the contractor uses to inform the semi-structured interviews and regional site selection.

A3. Use of Information Technology to Reduce Burden

Interviews will be conducted via video or teleconference, depending on respondents’ preference. With respondents’ permission, interviews will be audio recorded to ensure accuracy of notes and minimize need for potential follow-up for clarification.

The survey will be programmed for web-based completion. Compared with a paper-and-pencil instrument, a web-based survey offers several features that make the survey more efficient, and thus less burdensome for the respondent, while also supporting data quality. First, this technology makes possible the self-administration of complex questionnaires with a level of accuracy that would otherwise not be feasible. Web-programmed surveys implement complex skip patterns based on responses to gateway questions and to fill specific wordings based on answers previously provided by the respondent. Second, this survey technology provides greater expediency with respect to data processing and analysis. A number of back-end processing steps, including editing, coding, and data entry become part of the data collection process.

A4. Use of Existing Data: Efforts to reduce duplication, minimize burden, and increase utility and government efficiency

¹ TVAP and Aspire project leadership were informed of the intent to use information from performance progress reports, as a strategy to utilize information they are already providing to ACF and minimize duplicative efforts.

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

The data required to address the study purpose is not available from existing sources and its collection will not duplicate previous efforts. Instead, the team will use other existing data to reduce burden and to help further analyze and contextualize the findings from this data collection.

Specifically, the study team has worked to reduce participant burden by compiling data from extant sources including available TVAP and Aspire grant material (e.g., Notice of Funding Opportunity), service delivery protocol, Subrecipient Memoranda of Understanding, and PPR. Use of existing information reduces participant burden because surveys and interviews will build on, rather than duplicate, any data collected from extant sources. Using extant data and previous research products also reduces the number of questions asked and level of detail required in interviews. However, the level of detailed information required for this evaluation cannot be entirely obtained through other sources.

The prime award recipient has subcontracted the University of South Carolina (USC) to conduct an internal evaluation with a focus on client satisfaction, which is not a component of the process evaluation described here. RTI and USC have communicated to prevent duplicative data collection efforts and ensure the data collected complement and build on each other.

A5. Impact on Small Businesses

No small businesses will be involved with this data collection.

A6. Consequences of Less Frequent Collection

This is a one-time data collection.

A7. Now subsumed under 2(b) above and 10 (below)

A8. Consultation

Federal Register Notice and Comments

In accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13) and Office of Management and Budget (OMB) regulations at 5 CFR Part 1320 (60 FR 44978, August 29, 1995), ACF published a notice in the Federal Register announcing the agency's intention to request an OMB review of this information collection activity. This notice was published on September 9, 2025 (90 FR 43451) and provided a sixty-day period for public comment. During the notice and comment period, no comments were received.

Consultation with Experts Outside of the Study

To ensure the evaluation results in meaningful and actionable findings, the RTI team has conducted engagement activities throughout the evaluation's design with the following individuals and groups:

- OTIP Personnel involved in TVAP and/or Aspire programs
- Select TVAP and Aspire Prime Recipient Personnel
- Select TVAP and Aspire Subrecipient Personnel
- Prime Recipient's Survivor Advisory Board
- USC TVAP and Aspire Research Team

A9. Tokens of Appreciation

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

We propose to offer a token of appreciation to participants in interviews and surveys. Tokens of appreciation are used to encourage participation and convey appreciation for participants' contribution to the research. While these evaluation data are not intended to be representative in a statistical sense, in that they will not be used to make statements about the prevalence of experiences of all respondents, it is important to include a range of respondents to capture a variety of possible experiences with the TVAP and Aspire programs. Tokens of appreciation support this varied participation.

As subrecipients are compensated per capita for TVAP/Aspire clients and other service providers and local government professionals are not compensated for their work serving TVAP and Aspire clients, participation in this evaluation is not within the scope of their professional day-to-day job responsibilities. Thus, we propose participants be offered the tokens of appreciation for each data collection activity as outlined by **Exhibit A3** for their participation and expertise. These individuals will be primarily from non-profit organizations and government agencies that have limited administrative funding to participate in these types of activities; research has demonstrated that direct service providers often “simply work harder and for longer hours” to cover administrative activities that cannot be reimbursed (Willging et al., 2017, p. 9).

Exhibit A3 Token of appreciation by data collection activity

Data Collection Activity	Avg. Data Collection Duration (in hours)	Token of Appreciation
Subrecipient Interview	1.5	\$60
Other Service Provider Interview	1	\$40
Local Government Systems Interview	1	\$40
Client Interview	1	\$125
Subrecipient Survey	0.58	\$25

Most qualitative research with this or adjacent populations does not publish response rates, however \$40 for 60 minutes and \$60 for 90 minutes is consistent with similar research involving interviews with direct providers of victim services and/or child and family services (research specific to personnel providing services to people who have experienced human trafficking is very limited). Service providers supporting people who have experienced intimate partner violence and implementing trauma-focused evidence-based practices and violence prevention programs for young people were provided \$40 for their participation in ~60-minute interviews (Shah et. al., 2023; Rodriguez et al., 2018; Evaluating the Prevention Effects of Men of Strength (MOST) Clubs on Sexual Violence and Teen Dating Violence Perpetration, n.d.). Similar service providers including healthcare and justice professionals participating in ~90-minute interviews or focus groups have received \$60 for participation (Jackson et. al., 2024; Musgrave et. al., 2025).

An appropriate token of appreciation may be particularly important with people who have experienced trafficking given a history with exploitation of labor. Guidance from the National Survivor Network, a survivor-led professional membership community for survivors of human trafficking who are engaged in anti-trafficking work, suggests that survivors who are not a primary contractor on a project but agree to

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

be interviewed about their experiences should be provided no less than \$100 for a 60-minute interview.² As we are asking about service experiences and program recommendations, we plan to provide TVAP and Aspire clients who participate in interviews with a \$125 token of appreciation.

\$25 tokens of appreciation for survey participation with similar populations including with social workers and child welfare representatives has been found to be effective (Chen et. al., 2025; Henson et. al. 2024).

In RTI's and other researchers' experiences, offering no tokens of appreciation will necessitate over-recruitment by higher percentages and may result in longer recruiting time as well as higher overall project costs to the government. The potential consequences of no or an insufficient token of appreciation include the following:

- Inability to recruit a sufficient sample of participants in interviews and surveys or increased time and cost of recruitment due to participation levels.
- Skewed participant demographics, with decreased representation of participants with lower incomes.
- Increased probability that interviews may need to be cancelled or postponed due to participants who do not show up as scheduled. This incurs additional costs and puts additional burden on participants.
- Delays to the project.

A10. Privacy: Procedures to protect privacy of information, while maximizing data sharing

The proposed information collection was reviewed by RTI's Office of Research Protection. It was determined to not be research as defined by the U.S. federal human subjects' regulations. The data collection was determined to be a program evaluation, and the Privacy Act is not applicable. RTI will prioritize privacy of participants in all phases of research, including surveys and focus groups.

Personally Identifiable Information (PII)

For all subrecipients, other service providers and local government systems professionals, name and contact information (email and/or phone number) are required to invite potential respondents and, if needed, coordinate or communicate about interview logistics. These elements will be stored separately from respondents' data and will not be directly linked.

For client interviews, respondents will be given the option to provide their name and contact information or participate anonymously with an assigned evaluation ID. If PII is inadvertently shared by a client, it will not be included in the interview notes and will be redacted from the transcript.

Assurances of Privacy

Information collected will be kept private to the extent permitted by law. As specified in the contract, the Contractor will comply with all Federal and Departmental regulations for private information.

Each interview guide and the survey include consent language that explains the voluntary nature of the interview and that respondents' information will be kept private to the extent permitted by law and deleted at the end of the project period, how the evaluation team stores and protects data, planned uses of the data, and privacy practices related to reporting (e.g., removing all identifying information

² <https://nationalsurvivornetwork.org/about/consultant-speakers-bureau/>

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

before dissemination). This information will be provided ahead of the survey or interview and read aloud to interview participants before starting. With respondents' permission, interviews will be audio recorded to ensure accuracy of notes. Recordings will only be accessible to the evaluation and transcription team and will be deleted after transcription.

Data Security and Monitoring

As specified in the contract, RTI shall protect respondent privacy and will comply with all Federal and Departmental regulations for private information. RTI has gone through the Assessment and Accreditation process and obtained a three-year Authority to Operate (ATO) in October 2024 for the system developed for this contract and on which all data will be stored and analyzed. Part of this process includes detailing how RTI will ensure that PII, as well as sensitive information, is collected, transmitted, stored, and monitored in a secure manner.

All evaluation data will be stored within RTI's Private Network. To protect all data collected, RTI has in place a System Security Plan (SSP) compliant with the HHS Information Security Program Policy and other applicable standards and guidelines to ensure that information transmitted, physically delivered, stored, and reported remains secure. The SSP describes the individual security controls in place that protect ACF data stored on RTI's corporate IT infrastructure. The SSP addresses each baseline security control family and the individual controls listed in National Institute of Standards and Technology Special Publication 800-53, Recommended Security Controls for Federal Information Systems.

Access to evaluation data will be limited to authorized project team members and to the types of transactions and functions that authorized users are permitted to exercise. Access to the project folder on the RTI Private Network is determined by the project team's position and need. The authorized users will be determined by project management, and only they will be given granular access to the project folder on the RTI Private Network. Access privileges are controlled using network login credentials, server-specific login credentials, and security groups.

RTI staff are required to take initial security awareness training within 30 days of hire and annually thereafter, or if the system undergoes a major change. Staff compliance is monitored through Human Resources and RTI University transcripts. Failure to accomplish training within the specified period will result in the user losing their network privileges.

A11. Sensitive Information³

No questions specifically ask for sensitive information. However, although project participants will be informed prior to the interview that we do not need information about their experience with trafficking, they may choose to share this information. If personal information about trafficking experiences is disclosed, it will not be recorded by the notetaker and will be removed from the transcript. Participants will also be asked about the services they have received, and it is possible that they may share

³ Examples of sensitive topics include (but not limited to): social security number; sex behavior and attitudes; illegal, anti-social, self-incriminating and demeaning behavior; critical appraisals of other individuals with whom respondents have close relationships, e.g., family, pupil-teacher, employee-supervisor; mental and psychological problems potentially embarrassing to respondents; religion and indicators of religion; community activities which indicate political affiliation and attitudes; legally recognized privileged and analogous relationships, such as those of lawyers, physicians and ministers; records describing how an individual exercises rights guaranteed by the First Amendment; receipt of economic assistance from the government (e.g., unemployment or WIC or SNAP); immigration/citizenship status.

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

information about mental health or substance use disorder services. These services are often critical to support project participants' recovery, and it is important for the evaluation to document general information like accessibility, cultural responsiveness, and satisfaction. If specific personal information, like diagnoses, is shared it will not be documented.

A12. Burden

Explanation of Burden Estimates

Table A3 presents an estimate of time burden for each semi-structured interview. These estimates are based on the evaluation team's experience conducting semi-structured interviews with professional staff and clients of service programs. The evaluation team will assist with scheduling and ensure that interviews are not scheduled for longer duration than the estimates provided.

The estimated time for the survey is based on testing from expert consultant subrecipients who provided input on the development of the survey.

Estimated Annualized Cost to Respondents

The total annual respondent cost for each semi-structured interview and the survey is presented in **Exhibit A4**. Costs for project and partner staff were calculated using mean hourly wages from the Department of Labor, Bureau of Labor Statistics, Occupational Employment and Wage Statistics, May 2024 (<https://data.bls.gov/oesprofile/>):

- **Subrecipient staff:** \$28.06 is the mean hourly wage for Community and Social Service Specialists (21-1099, Community and Social Service Occupations).
- **Other service provider staff:** \$28.06 is the mean hourly wage for Community and Social Service Specialists (21-1099, Community and Social Service Occupations).
- **Local government system staff:** \$31.45 is the average of the mean hourly wages across:
 - Police and Sheriff's Patrol officers (33-3051, Protective Service Occupations), \$38.14,
 - Child, Family, and School Social Workers (21-1021, Community and Social Service Occupations), \$30.25, and
 - Eligibility Interviewers, Government Programs (43-4061, Office and Administrative Support Occupations), \$25.95.

The cost to clients was calculated by averaging the minimum wage across the 50 U.S. states and the District of Columbia based on the Department of Labor's Consolidated Minimum Wage Table (<https://www.dol.gov/agencies/whd/mw-consolidated#4>, effective January 1, 2025). If a state has more than one minimum wage rate, the highest rate was used in the calculation. The calculated average hourly wage for **Clients** is \$11.17.

Exhibit A4. Estimates of Annualized Cost to Respondent

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

Instrument	No. of Respondents (total over request period)	No. of Responses per Respondent (total over request period)	Avg. Burden per Response (in hours)	Total Burden (in hours)	Annual Burden (in hours)	Average Hourly Wage Rate	Total Annual Respondent Cost
Subrecipient Interview Guide	30	1	1.5	45	23	\$28.06	\$645.38
Other Service Provider Interview Guide	20	1	1	20	10	\$28.06	\$280.60
Local Government Systems Interview Guide	10	1	1	10	5	\$31.45	\$157.25
Client Interview Guide	30	1	1	30	15	\$11.17	\$167.55
Subrecipient Survey	100	1	0.58	58	29	\$28.06	\$813.74
Total					82		\$2,064.52

A13. Costs

There are no additional costs to respondents.

A14. Estimated Annualized Costs to the Federal Government

As shown in **Exhibit A5**, the total estimated cost for the data collection activities under this request is \$273,745. This includes labor costs and other direct costs (e.g., tokens of appreciation, transcription) related to this data collection. The total costs were divided by 2 to account for a two-year approval period.

Exhibit A5. Estimated Annualized Costs to the Federal Government

Cost Category	Estimated Costs
Field Work	\$114,226
Analysis	\$87,036
Publications/Dissemination	\$72,483
Total costs	\$273,745
Total Annual costs	\$136,873

A15. Reasons for changes in burden

This is a new information collection request.

A16. Timeline

**Alternative Supporting Statement for Information Collections Designed for
Research, Public Health Surveillance, and Program Evaluation Purposes**

Exhibit A6 outlines the key time points for the study including data collection, analysis, and reporting.

Exhibit A6. Time Schedule

Project Activity	Timeframe (after OMB approval)
Data collection	15 months
Analysis	6 months
Reporting/dissemination	6 months

A17. Exceptions

No exceptions are necessary for this information collection.

Attachments

Instrument 1: Subrecipient Interview Guide

Instrument 2: Other Service Provider Interview Guide

Instrument 3: Local Government Systems Interview Guide

Instrument 4: Client Interview Guide

Instrument 5: Subrecipient Survey

Appendix A: Subrecipient Interview Recruitment and Advance E-mail

Appendix B: Other Service Provider Interview Recruitment and Advance E-mail

Appendix C: Local Government Systems Interview Recruitment and Advance E-mail

Appendix D: Client Interview Recruitment and Advance E-mail

Appendix E: Subrecipient Survey Recruitment E-mail

Alternative Supporting Statement for Information Collections Designed for Research, Public Health Surveillance, and Program Evaluation Purposes

References

- Chen, G., Petruzzi, L., Ryan, A., Mulchand, C., Blackwell, L. M., Turgeon, N. A., & Adler, J. T. (2025). Dialysis Social Workers' Perspectives on Barriers and Facilitators to Kidney Transplantation. *Progress in Transplantation*, 15269248251343378.
- Henson, M., Schelbe, L., & Lee, H. (2024, June). Helping youth in foster care develop life skills: Perspectives from caregivers, child welfare professionals, and agency representatives. In *Child & Youth Care Forum* (Vol. 53, No. 3, pp. 667-691). New York: Springer US.
- Jackson, D. I., Maa, T., Luna, J., Huang, Y., Fristad, M. A., & Sezgin, E. (2024). Challenges and opportunities for workplace violence training for healthcare workers: a qualitative study of staff experiences. Available at SSRN 4723436.
- Koshelev, R. A., Cao, J., Park, D. K., Tai, M., Emami-Naeini, P., & Stephenson, S. (2025, April). Investigating Legal Professionals' Knowledge and Attitudes Toward Technology-Enabled Abuse in Intimate Partner Violence. In *Proceedings of the Extended Abstracts of the CHI Conference on Human Factors in Computing Systems* (pp. 1-13).
- Musgrave, T., Bell, A., & Schoenebeck, S. (2025). Techno-mediated Justice: How Restorative Justice Practitioners Use Video Conferencing Platforms and What HCI Can Learn from Them. *Proceedings of the ACM on Human-Computer Interaction*, 9(2), 1-31.
- Polansky, L., Ferronato, H., & Echo-Hawk, A. Urban Indian Health Institute, Seattle Indian Health Board. (2021). *Service as ceremony: A journey toward healing*. Seattle, WA: Urban Indian Health Institute. Retrieved September 16, 2022, from <https://www.uihi.org/projects/protecting-the-sacred/>
- Rodriguez, A., Lau, A. S., Wright, B., Regan, J., & Brookman-Frazee, L. (2018). Mixed-method analysis of program leader perspectives on the sustainment of multiple child evidence-based practices in a system-driven implementation. *Implementation Science*, 13(1), 44.
- Shah, N. D., Nguyen, G., Wagman, J. A., & Glik, D. C. (2023). Factors influencing the use of domestic violence restraining orders in Los Angeles. *Violence against women*, 29(9), 1604-1622.
- Willing, C. E., Trott, E. M., Fettes, D., Gunderson, L., Green, A. E., Hurlburt, M. S., & Aarons, G. A. (2017). Research-supported intervention and discretion among frontline workers implementing home visitation services. *Research on Social Work Practice*, 27(6), 664-675. <https://doi.org/10.1177/1049731515601897>