

"Community-based Organization (CBO) Monitoring and Evaluation
Project of WILLOW (CMEP-WILLOW)"

Attachment 4

Participation Agreement

**Community-based Organization (CBO)
Monitoring and Evaluation Project of
WILLOW (CMEP-WILLOW)**

Participation Agreement Form

Purpose, Participation and Procedures

CMEP-WILLOW is an evaluation project funded by the Centers for Disease Control and Prevention (CDC) to look at (1) how WILLOW is delivered at **Agency name** and (2) changes in your self-reported sexual behaviors and attitudes after participating. The findings may help **Agency name** improve the way they deliver WILLOW and better serve their clients.

To be eligible to participate in CMEP-WILLOW, you must:

- 1) be female;
- 2) be 18 years of age or older;
- 3) be living with HIV; and
- 4) have been diagnosed with HIV infection at least 6 months ago

As part of CMEP-WILLOW, you are expected to participate in WILLOW and complete three interviews. The interviews will take place before WILLOW starts and again 3 and 6 months after WILLOW is finished. During these interviews, you will be asked questions about your background (e.g., year of birth, race, etc.), attitudes about HIV, and drug and sex behaviors. Your responses from all three interviews will be compared to see if there are changes in your attitudes and behaviors.

Risks and Discomfort

The questions asked during the interviews are very personal. To help keep your responses private, each interview may be given to you electronically through a computer or hand-held device. If you prefer, a face-to-face interviews may be done instead with a staff member using the computer to answer the questions. As a **voluntary** participant, you do not have to respond to any question you do not want to answer and can stop an interview at any time.

Benefits

There is no direct benefit to you for being in this project. However, the information from this project may help improve WILLOW at this agency.

Disclosure of Alternative Treatment

Your participation in this project is **voluntary**. If you do not want to participate in this project, you are still eligible to participate in WILLOW and other services provided by **Agency name**.

Confidentiality

The information collected during the interviews is very personal and sensitive in nature. To protect your confidentiality, the staff at **Agency name** will:

- ❖ Implement strict CDC security requirements, including the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule to ensure security of the data collection system and the confidentiality of all client information.
- ❖ Work with CDC to maintain client confidentiality and security standards throughout the project.
- ❖ Store hard copies of electronic files in a locked file cabinet, inside a locked room where the data will be kept secure and organized to ensure confidentiality. Project data will not contain any information to identify a client. In other words, your name will not be connected to your answers to any questions.
- ❖ Encrypt data before sending to CDC.
- ❖ Submit data to CDC via the Secure Data Network (SDN).

Once electronic data are received by CDC, they will be reviewed for completeness and errors and stored securely.

Compensation

Agency will need to insert information about the token of appreciation that participants will receive here.

Contact Information

Agency will need to insert contact information for CMEP agency staff here.

Agreement Statement and Signature

Your participation in this project is voluntary. In other words, you decide if you want to be in this project or not. If you agree to participate in this project and later decide that you no longer want to participate, you can withdraw at that time.

The staff explained the point of the project, the time needed, and the tokens of appreciation that will be given to be in the project.

- I agree to be in the evaluation project CMEP-WILLOW.

_____ Date

CMEP Participant

_____ Date

CMEP Representative

- I decline to be in the evaluation project CMEP-WILLOW.