

**Informing the Development of Mobile Apps for HIV Prevention,  
Treatment, & Care**

**Generic Information Collection request under 0920-0840**

**Section B: Supporting Statement**

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**CONTACT**

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## **B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS**

The following is a description of data collection procedures.

### **B.1. Respondent Universe and Sampling Methods**

Participants will be recruited from a variety of settings including hospitals, community based organizations (CBOs) and patient care and case management sites. In addition to being between the ages of 13-64, criteria for inclusion in the study include being an English or Spanish speaking member of one the following groups:

- 1-Persons living with HIV (PLWH)
- 2-HIV Healthcare Providers\*
- 3-High-risk MSM

\*Cycle 2 only

### **B.2. Procedures for the Collection of Information**

#### **B.2.1. Recruitment**

Participants will be recruited and screened using convenience samples from different settings including hospitals, community based organizations (CBOs) and patient care and case management sites in New York city. The research staff will post flyers in strategic locations at the selected facilities with contact numbers and emails for project staff. (**Attachments 5a-f**)

#### **B.2.2. Screening and Scheduling Procedures**

In cycle 2 and 3 of the study the potential participants will call a number on the recruitment flyers to be screened for study participation (**Attachments 5a-f**) for the focus groups and design sessions. If potential participants are screened as eligible, they will be scheduled for the focus groups (cycle 2) and/or design sessions (completed prior and after cycle 2 focus groups) based on their schedules. Cycle 2 will consist of 13 groups with approximately 5 focus groups of 10 to 12 participants being conducted with PLWH; 5 focus groups of 10 to 12 participants being conducted with High-risk MSM; and 3 focus groups of 10 to 12 participants being conducted with HIV healthcare providers. Cycle 3 will consist of 1 design session of 8 to 10 participants conducted with High-risk MSM; and 1 design session of 8 to 10 participants conducted with PLWH. End user surveys will be completed by participants prior and after cycle 3 design sessions.

### **B.2.3. Data Collection Methods**

*Focus groups (Qualitative Interviewing)* 130 English or Spanish speaking participants (50 PLWH, 50 High-risk MSM, and 30 HIV Healthcare providers) will be selected to be asked to participate in the focus groups. Focus groups will be scheduled at times convenient to accommodate the maximum number of study participants. Study staff will work with contacts at the various recruitment sites to co-ordinate dates, times and locations for each focus group. When respondents arrive, they will be greeted by project staff and directed to the focus group room. Prior to the start of the focus groups, facilitators will read the informed consent and ask potential participants to sign the form if he or she agrees to participate. Before beginning the recording, the moderator will ask if the participants agree to be recorded. Those that do not wish to be recorded will be excused from the group.

#### *Design Sessions, End user usability testing*

In Cycle 3, a total of 16 participants, 8 High-risk MSM, and 8 PLWH, will complete end user surveys (**Attachments 2k**). End user surveys will be conducted at the site of the design session prior and after the execution of the session. Care will be taken to ensure that the participants will not be able to view each other's responses. The End user survey program will be administered on paper.

### **B.3. Methods to Maximize Response Rates and Deal with Nonresponse**

The study staff will use multiple strategies to maximize response rates and to decrease non-response. In all phases of the study, the study staff will schedule focus groups at days and times when a maximum number of respondents are available. When attempting to schedule focus groups, respondents will be asked for two weekend dates when they will be available to participate in the groups. Once the groups are scheduled, participants will receive reminder phone calls from study staff to remind them to attend. To maximize study retention in the assessments, participants will be provided with a token of appreciation for their participation. Participants who participate in the focus groups will receive \$25 as a token of appreciation and HIV healthcare providers will be provided a \$50 token of appreciation for participating in focus groups. Participants in the end-user usability testing will receive a \$25 token of appreciation.

**B.4. Tests of Procedures or Methods to be Undertaken**

This submission is a request for authorization to conduct tests of procedures and methodologies typical in methods and instrument development.

**B.5. Individuals Consulted on Statistical Aspects and  
Individuals Collecting and/or Analyzing Data**

No other individuals were consulted on the statistical aspects or analysis of data from this sub-collection.