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HIV/AIDS Awareness Day Programs

Attachment # 3b: National Native HIV/AIDS Awareness Day (NNHAAD) Evaluation Report

Public reporting burden of this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attn: OMB-PRA (0920-0890)

Attachment # 3b: National Native HIV/AIDS Awareness Day Evaluation Report

Please help us evaluate the success of the National Native HIV/AIDS Awareness Day (NNHAAD).

This survey collects data regarding the number of communities involved in NNHAAD, types of activities, people involved, community impact, event resources, and product availability. The national planning body consists of the Centers for Disease Control and Prevention, Colorado State, Inter Tribal Council of Arizona, and the National native American AIDS Prevention Center. All information provided on the survey will be released for the benefit of communities as well as NNHAAD. Information "About Your Organization" will be kept confidential, except for state demographic information. Please be as open as possible, as we would like to find ways to enhance NNHAAD's future efforts and resources.

If your event was the result of a collaborative effort please communicate with your collaborating partners to ensure that we do not receive multiple surveys for a single event. This is to make certain that we receive accurate number of events held during NNHAAD. Thank you for taking the time to complete this online survey and we hope that your NNHAAD event was a success!

About your Yourself

Tell Us About Yourself:	
City:	State:
How did you hear about NNHAAD and corresponding events?	
Email announcement from a national agency	Email announcement from a local entity/organization
Newsletter from a local entity/organization	Heard about it at a conference or meeting
Participated in an event last year	Was told by a local prevention worker
Was told by a community leader	Other:
A friend or co-worker told me about it	
How did you honor NNHAAD?	
Attended/participated in an event	Received an HIV test
Wrote an article for the local newspaper	Wrote a letter to/visited a community letter
Volunteered for a local AIDS service organization	Donated food or materials to a local organization
Donated money to a local organization	Helped somebody living with HIV/AIDS
Went with a friend to receive an HIV test	Educated my friends or co-workers about HIV in Native communities
Committed to making changes in your own life	Other:

About your Organization

If you helped to put on an event honoring NNHAAD as part of your professional or volunteer responsibilities, the please complete the following set of questions. If you are not associated with an organization please check 'other' and indicate individual stakeholder.

Tell Us About Your Organization:	
Agency(ies)/Organization(s) that sponsored or co-sponsored your NNHAAD Event:	
Primary Contact for NNHAAD Activities:	
City:	State:
What type of organization are you?	
Community Based Organization	Foundation
Health Consortium	Clinic/hospital
Church/faith based organization	Tribal Health Department
State Health Department	Tribal College or University
Other:	

About your Event

If your event was the result of a collaborative effort please communicate with your collaborating partners to ensure that we do not receive multiple surveys for a single event.

Tell Us About Your Event:
of events held by your organization for NNHAAD?
What type of activity(ies) was/were held at your NNHAAD event? Please provide a brief description below. (i.e., HIV testing, condom distribution, guest speaker, powwow, memorial, etc). If more than one event was held by your organization, please list each individually in the space provided below.
1. Event1
2. Event2
3. Event3

Participants:

How many people attended your event?

HIV Testing:

If HIV testing was conducted at your event, how many HIV tests were performed?

Marketing

What do you feel was the most effective method you used to market your NNHAAD event?								
 Posters 	• Flyers							
E-mail announcements	Online banners							
Social marketing websites	Word of mouth							
Announcements at community events	Newsletter							
Newspaper ad	Radio ad/spot							
Text messages	Other:							

Community Impact:

Please rate the following related to Leadership and NNHAAD:	1 Disagree	2 Somewhat Disagree	3 Neutral	4 Somewhat Agree	5 Agree
Leaders in your community supported efforts around National Native HIV/AIDS Awareness Day?					
The community leadership's <u>knowledge</u> of HIV and AIDS increased? (i.e. Do they know how HIV is transmitted, the signs associated with the disease, or did anyone approach you stating they learned something new?)					
The community leadership has a better awareness of resources available in your community? (i.e. Do they know where to get tested? counseling services provide to positive patients?)					
Please provide any other comments for the leadership involvement?				•	

Please rate the following related to the Community At Large and NNHAAD:	1 Disagree	2 Somewhat Disagree	3 Neutral	4 Somewhat Agree	5 Agree
The community at large supported efforts around National Native HIV/AIDS Awareness Day?					
The Community At Large increased their <u>knowledge</u> about HIV and AIDS? (i.e. Do they know how HIV is transmitted, the signs associated with the disease, or did anyone approach you stating they learned something new?)					
The Community at large increased their awareness of resources available to them?					
(i.e. Do they know where to get tested? Or where to get counseling services?)					
Please provide any other comments for the Community involvement?					

Media Coverage

Media Coverage:						
Was there any local media coverage surrounding your event? If so, what type? Please check all that apply.						
Newspaper Tribal Newsletter						
Online article/posting	Radio Announcement/Public Service Announcement					
Television	YouTube Posting					
Other:						

Photos

Do you have any photos of your event? If yes, would you be willing to provide a copy of the photos for our NNHAAD files? (All photos must have a sign photo release). Photos and copies of sign releases can be submitted to the following organizations:

 $\textbf{CA7AE-} \\ \underline{aisrael@colostate.edu}, \textbf{NNAAPC-} \\ \underline{rfoley@nnaapc.org}, \textbf{ITCA-} \\ \underline{gwenda.gorman@itcaonline.com}$

Yes No

NNHAAD Resources

Please rate the following related to the NNHAAD Community Events Map:	1 Strongly Disagree	2 Disagree	3 Neutral	4 Agree	5 Strongly Agree
The Community Events Map was effective and helpful?					
The Community Events Map was easy to understand and user friendly?					
The Community Event Form was clear, easy to understand, and user friendly?					
Any other comments or recommendations for the Community Events Map?					

Please rate the following related to NNHAAD Products:	1 Strongly Disagree	2 Disagree	3 Neutral	4 Agree	5 Strongly Agree
The NNHAAD Poster represented Native populations well?					
The NNHAAD Save the Date Cards were helpful and informative?	•		•		
The NNHAAD Fact Sheet was helpful and informative?					
The NNHAAD Activity Sheet helped with event ideas and suggestions?	•		•		
The NNHAAD Product Order form was clear, easy to understand, and user friendly?					
The promotional items released were appropriate for your community?	•		•		
The promotional items released were well received by your community?					
Did you use the sample NNHAAD Public Service Announcement to produce local	Υ	es		١	10
PSA?					
Please provide any other comments or recommendations for NNHAAD products?					

Please rate the following related to NNHAAD Products and Shipping:	1 Strongly Disagree	2 Disagree	3 Neutral	4 Agree	5 Strongly Agree
You received your promotional items (posters, lapel pins and chap sticks, etc) that were shipped from a planning partner in a timely manner?					
You received promotional items (posters, lapel pins and chap sticks) that were shipped from ASHLIN INC/CDC in a timely matter?					
You received all items you requested? If you disagree, please provide more information below.					
Please provide any other comments or recommendations for the distribution/dissen	nination of N	NHAAD prod	ucts?		

Please answer the following related to Promotional Items for NNHAAD

You requested items from 2 or more of the principal NNHAAD Organizations (CA7AE, NNAAPC, and ITCA) to fulfill the needs for your event? Yes No

CA7AE NNAAPC

Please rate the following related to NNHAAD Promotional Items: **ITCA** Please indicate which organization(s) you requested and received items from

Please rate the following about NNHAAD Resources	1	2	3	4	5
	Not Very		Neutral		Very
	Important				Important
How important it is to you that there is a central resource website for National					
Native HIV/AIDS Awareness Day?					

Ac	lditional	Comment	s/	Recommend	la	tions/:	Suggest	ions:
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All three agency information will be placed here.