

Project PrIDE

0920-New

SUPPORTING STATEMENT B

April 13, 2017

Contact Information

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B. Statistical Methods

This collection does not employ statistical methods.

1. Respondent Universe.

The respondents are the 12 state and city health departments funded by the Division of HIV/AIDS Prevention, NCHHSTP, of CDC to provide HIV prevention and care services for MSM and transgender clients and the estimated 2400 clients that are provided those services (200 clients per 12 health departments). Data will be collected from all grantees and clients.

HIV prevention program data for monitoring and evaluation (M&E) will be collected by grantees during the project period. Data will be collected for required services. Since all grantees report all funded intervention data, no sampling or respondent selection will be used. These data will be submitted to CDC semiannually.

The M&E data are used to monitor and evaluate HIV prevention programs, interventions, and activities. Data-driven program monitoring and evaluation better enables CDC, state and city health agencies, and local program managers to provide valuable feedback and assistance to front-line prevention service providers. The value of feedback is increased because counseling and assistance will be categorical at all levels and tailored to correct specific,

documented problems and deficiencies. The M&E data are also used to inform stakeholders, including federal and state executive offices and legislative bodies, based on specific information regarding how public health resources are used programmatically, for what purpose, and to what effect.

2. Procedures for the Collection of Information

Though data elements in this ICR are standardized, data collection across health departments and contracted agencies are not standardized. Data is collected as part of the usual and customary practice of the grantees. Grantees use their own data collection instruments and processes. M&E data is key-entered into EvaluationWeb or the grantees' own software system and uploaded to EvaluationWeb.

Alternatively, data may be key-entered into grantees' own software system and entered into Excel tables for submission to CDC. Data in EvaluationWeb is checked for data quality and conformity to M&E requirements, placed in analyzable data sets, and transmitted in encrypted form via Secure Socket Layer/Transport Layer Security (SSL/TLS) to CDC. No personally identifying information is submitted to CDC.

3. Methods to Maximize Response Rates and Deal with Nonresponse

Not applicable. Basic demographic data will be collected from clients who receive services; however, the

majority of the data will be information about services provided by the health departments and entered by the health department staff. Ongoing data quality processes will be implemented to ensure health department grantees are completing the data reporting requirements.

4. Tests of Procedures or Methods to be Undertaken.

Not applicable. Program data such as demographic information and services data have been previously submitted to CDC through the National HIV Prevention Program Monitoring and Evaluation System (OMB number 0920-0696; exp. 02/28/2019). Ongoing data quality processes will be implemented to ensure health department grantees are completing the data reporting requirements.

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

The monitoring and evaluation (NHM&E) variables and values have been developed over the past fourteen years by multiple branches and contractors, as coordinated by the Program Evaluation Branch under the direction of the Division of HIV/AIDS Prevention; National Center for HIV, Viral Hepatitis, STD, and TB Prevention. Additional evaluation variables have been developed by a collaboration between Prevention Research Branch, HIV Incidence and Case

Surveillance Branch, and Program Evaluation Branch staff within the Division of HIV/AIDS prevention. Data will be analyzed by the Program Evaluation Branch staff.