

**SUPPORTING STATEMENT PART B**

**OMB No. 0920-XXXX**

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**DELTA IMPACT RECIPIENT EVALUATION DATA COLLECTION  
INSTRUMENTS**

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**ATTACHMENTS**

- Att. 1 Authorizing Legislation: Family Violence and Prevention Services Act (FVPSA) statute (42 USC § 10414)
- Att. 2 **Published 60-Day Federal Register Notice**
- Att. 3 Protocol: Key Informant Interview – Project Lead
- Att. 4 Protocol: Key Informant Interview – Evaluator
- Att. 5 Instrument: Subrecipient Survey
- Att. 6 Instrument: Prevention Infrastructure Assessment
- Att. 7 Institutional Review Board (IRB) Determination
- Att. 8 - Crosswalk of DELTA Impact Evaluation Questions and Data Collection Methods

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

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

Information will be collected from a total of 37 respondents across all 10 recipients and all 17 subrecipients of the DELTA Impact Program cooperative agreement. Project leads and program evaluation leads from each of the 10 State Domestic Violence Coalitions (SDVCs) will participate in key informant interviews. Designated personnel from the 17 subrecipient organizations will complete web-based surveys. Respondents will report information to CDC about their experiences planning and implementing DELTA Impact program or policy efforts and conducting related evaluation activities. In addition, project leads will complete a web-based survey in years 3 and 5 to measure changes in capacity to implement community and societal level prevention efforts. Statistical sampling methods are not applicable to this information collection because information will only be collected from all funded recipients and subrecipients.

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

#### **a. Data Collection Instruments**

##### Coalition Key Informant Interviews

Data will be collected via telephone interviews (see **Attachment 3 and 4**). CDC staff will conduct individual, semi-structured interviews with a) project leads and b) evaluation leads associated with each the 10 SDVCs. The interview guides are designed to solicit qualitative information on the facilitators and barriers to implementing the State Action Plan, supporting subrecipients to implement prevention efforts, and coordinating program evaluation and implementation activities.. The interview guides are tailored such that the questions pertain to each interviewees' role (project lead or program evaluator).

##### Subrecipient Survey

The DELTA Impact project lead at each subrecipient organization will complete the web-based Subrecipient Survey (see **Attachment 5**). The point of contact at each SDVC will provide the contact information for each of the subrecipient project leads in their state. The survey contains primarily multiple-choice questions, with several open-ended questions for respondents to offer further explanation or additional feedback. The survey collects information on each subrecipients experience implementing a DELTA Impact program or policy effort. Survey items include progress toward meeting key milestones, perception of training and technical assistance received, and prioritization of community and societal level prevention strategies.

##### Prevention Infrastructure Assessment

The Prevention Infrastructure Assessment is a web-based survey (see **Attachment 6**) to be completed by the primary contact for DELTA Impact at each SDVC. The assessment collects information on the SDVCs infrastructure and capacity to implement primary prevention at the community and societal level and conduct related program evaluation activities. The

survey consists primarily of multiple-choice questions. It will be administered in years 3 and 5 to measure change over the project period. The Prevention Infrastructure Assessment includes items pertaining to recipients' expertise and knowledge, training, partnerships, and prioritization of primary prevention.

**b. Respondent Notification/Recruitment**

Data collection processes will be introduced to recipients during regularly scheduled project calls. Additionally, the CDC project officers will send email notifications to the interview and survey respondents. The email notification will explain:

- The purpose of the data collection and why participation is important
- Methods to safeguard responses
- That responses will have no impact on funding
- The expected response time to schedule the interview or to complete the survey
- CDC contact person to whom questions should be directed

Following the distribution of the email notifications, respondents will have 20 business days to schedule a telephone interview or complete the web-based surveys. Those who do not respond will receive a reminder email. Those who do not respond in 10 business days will receive a reminder phone call. Those who respond to schedule an interview or complete the surveys will receive a confirmation email.

**c. Data Collection and Management**

Each telephone interview will be conducted by two CDC staff members. One staff member will take the lead on conducting the interview, while the other takes the lead on documenting the results and assures that the information recorded is complete and accurate. The notes will be compiled and finalized after each telephone interview is completed. The telephone interviews will be audio-recorded to aid with development and compilation of notes. Verbal permission will be obtained from respondents at the beginning of the interview.

The survey tools will be administered using web-based survey software. The primary contacts at the SDVCs and at the subrecipients will receive an email notification with the abovementioned information and the links to complete the surveys. After the surveys close, the data will be imported into a reporting database, available only to CDC staff and contractors.

All notes, survey responses, audio recordings, and materials will be kept on a secure password protected CDC server accessible only to project team members. Audio recordings will be destroyed once interview summary notes are finalized. All other data will be kept through the end of the DELTA Impact funding period plus two additional years for analysis purposes.

**d. Analysis and Publication Plan**

CDC will not use complex statistical methods for analyzing information. Most statistical analyses will be descriptive (i.e., frequencies and crosstabs) and content analysis. For example, the selection on a Likert scale assessing skills pertaining to implementation will be documented and analyzed. Qualitative data will be coded and analyzed thematically. Themes

will be generated inductively from reading the notes as well as deductively organized by the topics covered during the interviews.

Themes and findings identified across the recipients will be synthesized into aggregated reports. These reports will not link specific findings to a recipient. These aggregated findings and lessons learned will be shared with recipients, local organizations participating in violence prevention work, researchers and practitioners working in the field of violence prevention, as well as CDC program stakeholders and leadership. Aggregated findings will be shared through presentations, webinars, meetings, conferences, translation products for recipients and scientific manuscripts.

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

The CDC project team will make every effort to maximize the rate of response. The instruments were designed to minimize response burden by including the minimum number of questions and to be streamlined to allow for skipping questions. The data collection process and timeline will be discussed in regularly scheduled project calls with recipients. Reminder emails will be sent to respondents 20 business days after the initial email to those who have not replied to schedule an interview or complete the web-based surveys. Respondents who do not reply to the reminder email within 10 business days will receive a phone call from the CDC project team. Given that the data collection can be completed at the time and location convenient for respondents the project team is confident the response rate will be high.

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

The instruments were developed in consultation with other CDC staff who have developed similar instruments for other programs. The instruments were also pilot tested with CDC program staff.

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

The following individuals consulted on development of the data collection tools:

Jessica Crowell, Behavioral Scientist, CDC, (404) 718-5132 [wuz6@cdc.gov](mailto:wuz6@cdc.gov)

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The core CDC personnel who will collect and/or analyze the data include:

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