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INTRODUCTION

- 1. In which state/territory is your RPE organization doing work?
- 2. Does your RPE organization employ internal evaluation staff, external evaluation staff (e.g., contractors), or both internal and external evaluation staff?
 - a. Internal evaluation staff
 - b. External evaluation staff
 - c. Internal and external evaluation staff
- 3. If your organization employs external evaluation staff, please indicate the type of employer:
 - a. Contracting agency (please provide name)
 - b. University (please provide name)
 - c. Other (please provide name)

PROGRESS TOWARD GOALS

4. What evaluation measure(s) is being used to monitor progress towards NOFO strategies and activities?

Strategies and activities	Associated evaluation measure
Build internal capacity to facilitate and monitor implementation	
Build capacity for partner organizations	
Conduct or leverage a primary prevention capacity assessment with a focus on health for all, and especially for those at greatest risk.	
Participate in CDC sponsored activities	
Develop or enhance existing State/Territory/Tribal Action Plan with partners	
Leverage multi-sector partners towards SV prevention	
Engage multi-sector partners including but not limited to SA and Tribal Coalitions	

Identifying, implementing, and adapting SV prevention strategies at the	
community and societal level focused on reducing disparities	
Gather and synthesize publicly available data	
Use data to identify and select prevention strategies	
Develop and implement an evaluation plan focused on the health for all, and	
especially for those at greatest risk.	
Increase access to and use of monitoring and evaluation data to improve SV	
prevention implementation	

5. To what extent has your RPE organization made progress in the following short-term outcomes? Please base your responses on your most recent evaluation findings.

	Level of Progress			Level of Progress		
	Not yet measured	No progress	Very little progress	Moderate progress	Substantial progress	measured
Increased capacity/understanding of capacity to implement and evaluate primary prevention of SV at the community- and societal- levels within SHDs/in Indian Country						
Increased capacity to promote and incorporate health for all, and especially for those at greatest risk program activities relevant to SV prevention among partner organizations						
Increased partner and community awareness of states/territories/tribal efforts to prevent SV and the disproportionate burden of SV						
Increased partner and community awareness of effective primary prevention strategies and the disparate burden of SV						

Increased coordination and			
collaboration among partners			
and between SHDs, SA			
coalitions, Tribal SA			
coalitions, representatives			
from underserved			

communities and other			
sectors to prevent SV			
Increased community and			
society-level implementation			
of SV prevention strategies			
Increased implementation of			
prevention strategies among			
communities and populations			
with disproportionately high			
rates of SV			
Increased implementation of			
prevention strategies that			
seek to prevent SV by			
addressing social and			
structural determinants of			
health			
Increased awareness of			
availability of data to			
understand inequities within			
tribal populations and			
communities with			
disproportionately high rates			
of SV			
Increased access and use of			
data to understand inequities			
within populations and			
communities with			
disproportionately high rates			
of SV			
Increased monitoring and			
evaluation activities and			
sharing of data related to SV			
prevention			

- 6. Please provide a brief explanation of any challenges faced related to measurement of short-term outcomes (750 characters).
- 7. To what extent has your RPE organization made progress in the following intermediate-term outcomes? Please base your responses on your most recent evaluation findings.

	Level of Progress				How this is	
	Not yet measured	No progress	Very little progress	Moderate progress	Substantial progress	measured
Increased capacity for statewide program						

implementation and SV prevention			
Increased partner support to			
implement, evaluate, and			
adapt state- and community-			
level strategies to prevent SV			
Increased reach of			
prevention strategies that			
impact communities and			
populations with			
disproportionately high rates of SV			
Increase in number of			
community- and societal-			
level strategies that promote			
health for all, and especially			
for those at greatest risk and			
reduce inequities in SV by			
addressing social and			
structural			
determinants of health			
Increase in protective factors			
and decrease in risk factors			
associated with SV			
Increased access to data to			
understand inequities within			
tribal populations and			
communities with			
disproportionately high rates			
of SV			
Increased use of data-driven			
decision making to reduce			
inequities impacting			
populations and			
communities with			
disproportionately high rates			
of SV			

Increased state- and			
community-level monitoring			
of trends in SV outcomes and			
SDOH			

8. Please provide a brief explanation of any challenges faced related to measurement of intermediate-term outcomes. (750 characters)

DATA USE AND ACCESS

9. What barriers has your RPE organization experienced with respect to accessing data? How are you addressing those barriers? (750 characters)

10. What facilitators has your RPE organization experienced with respect to accessing data? (750 characters)

EVALUATION CAPACITY AND PROGRESS

- 11. As of today, how would you describe the status of your RPE organization's evaluation activities?
 - a. Experiencing significant delays
 - b. Experiencing minor delays
 - c. On track
- 12. What challenges have affected your RPE organization's evaluation progress to date? How are you addressing those challenges? (1000 characters)
- 13. What has facilitated your RPE organization's evaluation progress to date? (1000 characters)
- 14. Please describe how key partners have supported your RPE organization's evaluation capacity. (750 characters)
- 15. Please describe any changes made to your evaluation plan and the reason for those changes (e.g., changes in evaluation design, data collection, analysis methods, outcomes and indicators, product dissemination). (1,000 characters)
- 16. To what extent has your RPE organization used its evaluation data?
 - a. Not at all
 - b. A little
 - c. Somewhat
 - d. A great deal
- 17. What barriers has your RPE organization experienced with respect to using evaluation data for continuous program improvement? How are you addressing those barriers? (750 characters)
- 18. What facilitators has your RPE organization experienced with respect to using evaluation data for continuous program improvement? (750 characters)
- 19. How have evaluation findings been used to inform your RPE organization's program activities? (750 characters)
- 20. How is your RPE organization aligning its program- and policy-level evaluation with state/territory-level evaluation? (750 characters)
- 21. How would you rate the capacity of your RPE organization's sub-recipients to evaluate sexual violence prevention activities?

- a. Extremely low
- b. Moderately low
- c. Adequate
- d. Moderately high
- e. Extremely high
- 22. What factors have impacted your RPE organization's sub-recipients' capacity to evaluate SV prevention activities? (750 characters)
- 23. What evaluation-related trainings has your RPE organization provided to its partners? Which types of partners (e.g., health services, government, education, law enforcement, etc.) participated in these trainings?

Training Provided	Types of Partner(s) Participated

24. What evaluation products has your RPE organization developed? How does your RPE organization plan to disseminate its evaluation products, and to which audiences? (1200 characters)

TECHNICAL ASSISTANCE

- 25. Which types of technical assistance and support from the CDC and technical assistance partners have been useful to your RPE organization? (1000 characters)
- 26. How could technical assistance and support from CDC and technical assistance partners be improved? (1000 characters)

CONCLUSION

27. Thank you so much for taking the time to complete this survey! If you have any additional comments on evaluation, please provide them here. (1000 characters)