

Attachment 4b. Instrument and Protocol: Key Informant Interview – Evaluator

Form Approve
OMB No: 0920-1412
Exp. Date: 08-31-26

Public Reporting burden of this collection of information is estimated at 30 minutes, 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 NW, MS H21-8, Atlanta, GA 30333; Attn: PRA (0920-1412).

INTRODUCTION AND WELCOME

Thank you for meeting with us today. My name is <<insert name>> and on the call is my colleague <<insert name>>, and we are with Centers for Disease Control and Prevention (CDC). We are conducting qualitative interviews with State Domestic Violence Coalition Project Leads who are overseeing DELTA AHEAD initiatives in their state. This will help us understand how DELTA AHEAD program and policy efforts (PPEs) are being implemented to prevent Intimate Partner Violence (IPV).

We plan for this interview to take no longer than 30 minutes. We are interested in hearing your honest and candid responses. Your participation is voluntary, and you may choose not to answer any questions without penalty. You may end the interview at any time. Your participation or recusal will not affect your funding or relationship with the funders.

Information collected from this interview will inform CDC's evaluation of the DELTA AHEAD initiative and help to inform future NOFOs. We will conduct analysis to aggregate findings across participants. The aggregated findings will be shared with DELTA AHEAD recipients and other key partners in IPV violence prevention work. Data contained in the analysis will not link your name, role, or Coalition to any specific responses in any reports developed from this project.

<<Insert name>> will be taking notes during the interview so that we accurately capture your views and experiences. All information we collect from you will be kept secured and the only people who will have access to identifiable information are the CDC team involved in the project. We would also like to audio-record today's interview. The audio-recording will be used to supplement our notes and will not be shared outside our project team. It will be destroyed at the completion of the project.

Do I have your permission to record this interview? [*Facilitator should note that every participant has responded*]

[IF NO → Thank participant and confirm that the interview will not be recorded.]

[IF YES → Thank participant and confirm their verbal consent.]

Do you have any questions for me about our meeting before we begin? [*Pause for participant response.*]

Please feel free to ask questions at any time during the discussion.

Okay. We are ready to begin, so I will turn on the recorder. <<BEGIN RECORDING>>

Interviewer Notes:

1. Tailor the discussion guide based on the interviewee and their role.

SECTION 1: EVALUATOR ROLE

We'd like to start by asking about your role as an evaluator of the DELTA AHEAD program in your state.

- 1. Please describe your relationship to the coalition regarding evaluation.**
 - a. Are you an employee of the coalition or a contractor outside of the coalition?
 - b. How do you interact and coordinate with the DELTA AHEAD coalition team at the state levels and community levels (CCRs)?
- 2. Please describe the process for how the coalition and the Coordinated Community Response Teams (CCRTs) initiate and/or coordinate with you on evaluation efforts for the project.**

SECTION 2: STATE- AND COMMUNITY-LEVEL PPE EVALUATION

- 3. What factors have facilitated or impeded your evaluation efforts at the state level?**
- 4. What factors have facilitated or impeded your evaluation efforts with the community level teams?**
- 5. What changes, if any, have you observed in local level partners' attitudes toward evaluating IPV primary prevention work?**

SECTION 3: USE OF DATA

- 6. How do you use data and evaluation work to inform DELTA AHEAD and PPE-specific activities?**
 - a. How do you use data on social determinants of health to inform planning and implementation of DELTA activities?
- 7. How have you used surveillance data to establish baseline indicator data and to monitor changes at the state- and community-levels over time?**
- 8. How do you plan to share evaluation findings with partners?**

SECTION 4: CAPACITY BUILDING

- 9. Since March 2023, what changes have you noticed in your coalition's capacity to evaluate PPEs implemented at the state level? (Category B)**
 - a. What changes have you seen in the Coordinated Community Response Teams' capacity to evaluate PPEs at the **local or community level**?

10. What are the biggest challenges you experience as an evaluator of this program?

- b. How, if at all, are these challenges different at the state and community levels?

SECTION 5: Assuring Optimal Health for All

11. How, if at all, have you assured that everyone has the highest level of health in implementing DELTA AHEAD activities?

- a. What challenges have you faced with assuring that everyone has the highest level of health?
- b. How have you, or do you plan to, overcome these challenges?
- c. If you have not incorporated assuring that everyone has the highest level of health into the evaluation of DELTA AHEAD, can you please explain why?

CLOSING AND THANK YOU

12. What are the most important lessons you have learned about evaluating IPV Primary Prevention strategies that would you share with unfunded states?

Before we conclude our discussion, is there anything that we have not discussed that you think would be important for us to know?

Do you have any questions for me? [*Address any questions*]

Thank you again for taking the time to speak with me. We sincerely appreciate and value your input

a.