

**CENTER FOR SUBSTANCE ABUSE PREVENTION
(CSAP) MINORITY AIDS INITIATIVE (MAI)
PROGRESS REPORT
QUESTION-BY-QUESTION INSTRUCTION GUIDE**

Updated May 2022

Table of Contents

Introduction	1
1. Administration	2
1.1 Grantee Information.....	2
2. Behavioral Health Disparities	3
2.1 Cultural Competence and Behavioral Disparities Impact Statement (Disparities Impact Statement Work Plan)	4
2.2 Cultural Competence and Behavioral Health Disparities Activities	5
2.3 Accomplishments and Barriers.....	6
2.4 Conclusions and Recommendations	8
3. Assessment	9
3.1 Community Needs Assessment Synopsis Information (Needs Assessment Work Plan).....	9
3.2 Community Needs Assessment Changes and Updates	14
3.3 Accomplishments and Barriers.....	15
3.4 Conclusions and Recommendations	16
4. Capacity	17
4.1 Project, Organization/Institution, and Community Capacity (Capacity Building Work Plan).....	17
Staff Roster.....	17
Advisory Group and Governing Board Roster	18
4.2 Project Advisory Council Meetings	21
4.3 Training and Technical Assistance (T/TA)	21
4.4 Accomplishments and Barriers	23
4.5 Conclusions and Recommendations	24
5. Planning	25
5.1 Strategic Prevention Plan Synopsis (Strategic Prevention Plan Work Plan)	25
5.2 Goals, Objectives, and Outcome Categories.....	27
5.3 Direct Service Planning.....	30
5.4 Indirect Service Planning.....	33
5.5 HIV Testing Planning.....	41
5.6 Viral Hepatitis (VH) Testing Planning.....	42

5.7	Viral Hepatitis (VH) Vaccination Planning.....	43
5.8	Accomplishments and Barriers.....	44
5.9	Conclusions and Recommendations	45
6.	Implementation	46
6.1	Numbers Served.....	46
6.2	Numbers Reached.....	46
6.3	Grant Expenditures	48
6.4	Direct Service Intervention Implementation	49
6.5	Indirect Service Implementation.....	51
6.6	HIV Testing Implementation.....	53
6.7	Viral Hepatitis (VH) Testing Implementation.....	55
6.8	Viral Hepatitis (VH) Vaccination Implementation	57
6.9	Referrals for Services Not Funded by MAI Funds.....	58
6.10	Participant Outreach/Recruitment Activities	58
6.11	Promising Approaches and Innovations	59
6.12	Accomplishments and Barriers.....	59
6.13	Conclusions and Recommendations	60
7.	Evaluation.....	62
7.1	Evaluation Plan.....	62
7.2	Evaluation Report.....	63
7.3	Accomplishments and Barriers.....	64
7.4	Conclusions and Recommendations	64
7.5	Closeout Evaluation Report.....	65
	Appendix A: Direct Service Intervention Name List	67

Introduction

Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) Minority AIDS Initiative (MAI) grantees are required to complete progress reports throughout the life of their grant. Grantees use SAMHSA's Performance Accountability and Reporting System (SPARS) to complete progress reports that follow the steps of SAMHSA's Strategic Prevention Framework (SPF). Grantees will work through each of the SPF steps in order to populate progress reports. Progress reports capture information about the grantees' progress in implementing their projects. Please reference the "Guidance and Related Definitions" column throughout the document for more information about what to report for each data item.

This *Question-by-Question Instruction Guide* provides guidance for successfully completing the Progress Report. The guide is based on the MAI Progress Report Tool, which you can download from the [SPARS website](#) to use as a reference. SAMHSA requires that grantees complete the items marked with an asterisk (*) throughout this document. Grantees must submit progress report data electronically through SPARS each quarter. MAI 2015, 2016, and 2017 grantees are required to submit Progress Reports quarterly; they are due one month after the end of each quarter. MAI grantees funded in 2018 and 2019 submit annual Progress Reports; they are due by December 30 each year. Prevention Navigator 2020 grantees also submit annual Progress reports; they are due by November 28 each year.

Table 1: Reporting Deadlines for MAI 2017

Quarter	Reporting Period	Due Date
1	October 1–December 31	January 31
2	January 1–March 31	April 30
3	April 1–June 30	July 31
4	July 1–September 30	October 31

Table 2: Reporting Deadline for MAI 2018 and MAI 2019

Report	Reporting Period	Due Date
1	October 1–September 30	December 28

Table 3: Reporting Deadline for Prevention Navigator 2020 and Prevention Navigator 2021

Report	Reporting Period	Due Date
1	September 1–August 31	November 28

NOTE: Grantees should follow the deadlines in their Notice of Award (NOA). Deadlines may vary slightly by cohort.

1. Administration

1.1 Grantee Information

Use this section to revise and update your Grantee information as necessary.

Select “Edit Grantee Information” to begin entering data. SPARS will pre-fill the project officer information (which Grantees cannot edit).

ID	Data Item	Response Options	Guidance and Related Definitions
1.1	Address*	Open-ended text	The field accepts up to 100 characters.
1.2	City*	Open-ended text	The field accepts up to 100 characters.
1.3	State/Territory*	Drop-down menu	Select the state or territory from the list.
1.4	ZIP*	Numerical	The field only accepts 5 numerals.
1.5	Project Director Name	Open-ended text	The field accepts up to 100 characters.
1.6	Project Director E-mail Address	Open-ended text	The field accepts up to 100 characters.
1.7	Project Director Phone Number	Open-ended text	The field accepts up to 25 characters. Please enter the phone number in the format XXX-XXX-XXXX.
1.8	Project Coordinator Name	Open-ended text	The field accepts up to 100 characters.
1.9	Project Coordinator E-mail Address	Open-ended text	The field accepts up to 100 characters.

ID	Data Item	Response Options	Guidance and Related Definitions
1.10	Project Coordinator Phone Number	Numerical	The field accepts up to 25 characters.
1.11	Lead Evaluator Name	Open-ended text	The field accepts up to 100 characters.
1.12	Lead Evaluator E-mail Address	Open-ended text	The field accepts up to 100 characters.
1.13	Lead Evaluator Phone Number	Numerical	The field accepts up to 25 characters.
1.14	Epidemiological Lead Name	Open-ended text	The field accepts up to 100 characters.
1.15	Epidemiological Lead E-mail Address	Open-ended text	The field accepts up to 100 characters.
1.16	Epidemiological Lead Phone Number	Numerical	The field accepts up to 25 characters.

2. Behavioral Health Disparities

SAMHSA defines behavioral health as mental/emotional well-being and/or actions that affect wellness. The phrase “behavioral health” is also used to describe service systems that encompass prevention and promotion of emotional health; prevention of mental and substance use disorders, substance use, and related problems; treatments and services for mental and substance use disorders; and recovery support.

Healthy People 2030 prioritizes eliminating health disparities, achieving health equity, and attaining health literacy to improve the health and well-being of all. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

In this section, we would like you to describe the efforts and activities that your state, tribe, or jurisdiction has undertaken in the project to address Behavioral Health Disparities related to HIV or substance use disorders risks, prevalence, and outcomes.

When: MAI grantees should complete the Health Disparities section as part of the annual submission.

From the Health Disparities tab in the Progress Report in SPARS, select “View” to open each section listed below.

2.1 Cultural Competence and Behavioral Disparities Impact Statement (Disparities Impact Statement Work Plan)

Grantees should complete the Disparities Impact Statement (DIS) at the beginning of each grant and submit it in SPARS separately from the Progress Report. To upload your DIS, navigate to the Work Plans section on your Dashboard in SPARS and select the plus (+) sign under the Actions column next to Disparities Impact Statement. If you need to make changes to a Work Plan report that has already been accepted, select “Create New Version” under the Actions Menu on your Dashboard. Select “Edit this Record” to open the section to add information or make revisions. This section cannot be changed through the Progress Report; all changes must be made through the Work Plans section and will be automatically reflected in the Progress Report once the revised Work Plan has been submitted to and accepted by the Government Project Officer (GPO).

Once you upload the DIS, your GPO will review and approve it. You will only update this section if there is a newly identified disparate population or if you are revising plans to improve the quality of programming to address the needs (access, use/reach, outcomes) of the disparate population. If you do not have an approved DIS, please continue to work with your GPO to finalize it as soon as possible. You should not enter any additional information in the Behavioral Health Disparities module until it is approved.

ID	Data Item	Response Options	Guidance and Related Definitions
2.1	Upload Document	Document upload function	Click “View” to open the Disparities Impact Statement work plan section and then select “Add a Document.” Use the “Browse” button to select a file from your computer and then select the “Upload” button to add your document. If your document has not changed since your previous upload, then you do not need to upload a new document.

ID	Data Item	Response Options	Guidance and Related Definitions
2.2	Provide a brief description of your document and, if relevant, note any differences between this version and the previous one.	Free text	Enter a description of the document, then click the “Save” button. If your document has not changed since your previous upload, you do not need to upload a new document. The field accepts up to 1,000 characters.

2.2 Cultural Competence and Behavioral Health Disparities Activities

ID	Data Item	Response Options	Guidance and Related Definitions
2.2.1	*Which of the following health disparities-related activities did your organization or institution conduct during this reporting period?	<ul style="list-style-type: none"> ▪ Conducted needs assessment activities specific to behavioral health disparities (e.g., identified subpopulations experiencing health disparities and their specific needs, collected data on identified subpopulations) ▪ Involved members of subpopulations experiencing behavioral health disparities in your CSAP/MAI activities, such as assessment, capacity building, planning, implementation, and evaluation ▪ Built organizational capacity for addressing behavioral health disparities (e.g., received trainings or built coalitions specifically for addressing disparities) ▪ Implemented strategies to address behavioral health disparities (e.g., interventions tailored to vulnerable subpopulations, efforts to increase access of vulnerable subpopulations to SA and HIV prevention and treatment services) ▪ Increased access to substance use and HIV prevention services for subpopulations experiencing behavioral health disparities (i.e., increased these populations’ ability to get to or use these services). Increased access may refer to enhanced health coverage, services, timeliness, and workforce. ▪ Evaluated effects of implemented strategies on subpopulations experiencing health disparities ▪ Developed a plan to sustain progress made in addressing substance use and HIV-related health disparities beyond the CSAP/MAI grant ▪ Other (Specify) 	Select “Edit this Record” to open this section. Select the health disparities-related activities that your organization or institution conducted during this reporting period. Select all that apply. If you select “Other,” enter a brief description of the activity.

2.3 Accomplishments and Barriers

Use this section to enter information on accomplishments and/or barriers that you experienced while performing activities *related to health disparities*.

ID	Data Item	Response Options	Guidance and Related Definitions
2.3.1	<p>*What, if any, barriers are there to improving cultural competence in substance abuse and HIV prevention through your CSAP/MAI grant?</p>	<ul style="list-style-type: none"> ▪ No barriers ▪ Limited availability of culturally specific evidence-based interventions for the target group(s) ▪ Need for staff that are of the same race or ethnicity as the target group(s) ▪ Need for staff training that is culturally specific to the target group(s) ▪ Lack of commitment to cultural competence by partner organizations ▪ Competing priorities under the CSAP/MAI grant ▪ Other (Specify) 	<p>Select “Add Barriers/Challenges” to open this section. Select the barriers to improving cultural competence that your project experienced. Select all that apply. If you select “Other,” enter a brief description of the barrier.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
2.3.2	<p>*During this reporting period, what, if any, specific accomplishments have you made toward the goal of improving being culturally informed and responsive cultural competence and/or addressing behavioral health disparities in substance abuse and HIV prevention through your CSAP/MAI grant?</p>	Open-ended text	<p>Select “Add Accomplishments” to open this section. Enter any specific accomplishments made toward improving cultural competence or addressing health disparities in substance use and HIV prevention through your CSAP MAI grant.</p> <p>Examples: Translated informational materials or surveys into the language of our vulnerable subpopulations; added members of vulnerable subpopulations to our advisory board; trained staff in meeting the target population’s diverse racial, ethnic, cultural, age, sex/gender orientation, and disability challenges.</p>

2.4 Conclusions and Recommendations

Grantees are encouraged to report any conclusions and recommendations that they formed while performing activities *related to health disparities*.

Select “Add Conclusion/Recommendation” to open this section. This section is not required.

ID	Data Item	Response Options	Guidance and Related Definitions
2.4.1	Date Identified	Date (mm/dd/yyyy)	Enter the date when you identified the conclusion or recommendation.
2.4.2	Conclusion/ Recommendation Name	Open-ended text	Enter the name of the conclusion or recommendation. Example: Community representation on advisory board
2.4.3	Description of Conclusion/ Recommendation	Open-ended text	Enter a description of the conclusion or recommendation. Example: Ensure that members of the community and populations served are included as advisory board members.

3. Assessment

The *Assessment* process involves the systematic gathering and examination of data about alcohol and drug problems, related conditions, and consequences in the area of concern to the community prevention planning group. Problem assessment means pinpointing where the problems are in the community and identifying the affected populations. It also means examining the conditions within the community that put it at risk for the problems and identifying conditions that now or in the future could protect against the problems.

In the Assessment section, the tool asks grantees to provide a summary of their Community Needs Assessment by reporting about their target population(s) (e.g., gender, race, ethnicity, sexual orientation, age group) and describing their community's needs, resources, and gaps. This information must be based on the results of a needs assessment conducted by the community through collection and review of epidemiological data to understand the issues facing the community and the underlying factors that may influence them. Grantees should submit their full Community Needs Assessment to their Government Project Officer (GPO) for review and approval, when required.

Part of the assessment process also involves determining the community's readiness to implement a prevention strategy and the requirements for additional capacity. Grantees must indicate the capacity needs that they intend to address.

When: Section 3.1 (Community Needs Assessment Synopsis Information) corresponds to the Needs Assessment Work Plan, which new grantees are required to complete. Section 3.2 (Community Needs Assessment Changes and Updates) only needs to be completed if changes are needed to the Needs Assessment. Section 3.3 (Accomplishments and Barriers) and Section 3.4 (Conclusions and Recommendations) need to be updated with each submission of the Progress Report.

From the Assessment tab in the Progress Report in SPARS, select "View" to open each section listed below.

3.1 Community Needs Assessment Synopsis Information (Needs Assessment Work Plan)

The Needs Assessment is completed at the beginning of the project period and submitted in the Work Plans section in SPARS separately from the Progress Report. To complete the Needs Assessment Work Plan, navigate to the Work Plans section on your Dashboard in SPARS and select the plus sign under the Actions column next to Needs Assessment. If you need to make changes to a Work Plan report that has already been accepted, select "Create New Version" under the Actions Menu on your Dashboard. Select "Edit this Record" to open the section to add information or make revisions. This section cannot be changed through the Progress Report; all changes must be made through the Work Plans section and will be automatically reflected in the Progress Report once the revised Work Plan has been submitted to and accepted by the GPO.

ID	Data Item	Response Options	Guidance and Related Definitions
3.1.1	*Date Approved	N/A	After you submit your Needs Assessment Work Plan in SPARS and your GPO approves it, your Dashboard in SPARS will indicate the date it was accepted.
3.1.2	*Target Community or Institution Name	Open-ended text	Enter the name of the target community or institution.
3.1.3	*Target Geographical Area	<ul style="list-style-type: none"> ▪ Large urban area ▪ Smaller urban area ▪ Small town or urban cluster ▪ Rural ▪ Tribal Area ▪ Campus ▪ Other (Specify) 	<p>Select all target geographical areas that apply. If you select “Other,” enter a brief description of the area.</p> <p>Large urban area: Population of more than 500,000</p> <p>Smaller urban area: Population of 50,000 to 500,000</p> <p>Small town or urban cluster: Population of 2,500 to 50,000</p>
3.1.4	*Target Gender	<ul style="list-style-type: none"> ▪ Male ▪ Female ▪ Transgender ▪ Other (Specify) 	Select your project’s target gender. Select all that apply. If you select “Other,” enter a brief description of the target gender. For nonbinary individuals, please select “Other” and specify nonbinary in the text.
3.1.5	*Target Race	<ul style="list-style-type: none"> ▪ White ▪ Black/African American ▪ American Indian/Alaska Native (AI/AN) ▪ Native Hawaiian or Other Pacific Islander ▪ Asian ▪ Other (Specify) 	Select your project’s target race. Select all that apply. If you select “Other,” enter a brief description (e.g., two or more races).
3.1.6	*Target Ethnicity	<ul style="list-style-type: none"> ▪ Hispanic or Latino ▪ Not Hispanic or Latino 	Select your project’s target ethnicity. Select all that apply.
3.1.7	*Target Sexual Orientation	<ul style="list-style-type: none"> ▪ Straight or Heterosexual ▪ Bisexual ▪ Gay or Lesbian ▪ Queer, Pansexual, and/or Questioning ▪ Other (Specify) 	Select your project’s target sexual orientation. Select all that apply. If you select “Other,” enter a brief description of the target sexual orientation.

ID	Data Item	Response Options	Guidance and Related Definitions
3.1.8	*Target Age Group	<ul style="list-style-type: none"> ▪ 12 - 15 ▪ 16 - 17 ▪ 18 - 20 ▪ 21 - 24 ▪ 25 - 29 ▪ 30 - 39 ▪ 40 - 49 ▪ 50 - 59 ▪ 60 - 69 ▪ 70+ 	Select your project's target age group. Select all that apply.
3.1.9	*Target Population(s)	<ul style="list-style-type: none"> ▪ Adolescents (Age 12–17) ▪ Young Adults (Age 18–24) in college ▪ Young Adults (Age 18–24) not in college ▪ Older Adults (Age 50 and over) ▪ American Indian/Alaska Natives (AI/AN) ▪ Native Hawaiian/Other Pacific Islanders ▪ Asian ▪ Black/African American Women ▪ Black/African American Men ▪ Latina or Hispanic Women ▪ Latino or Hispanic Men ▪ Men Having Sex with Men (MSM) ▪ LGBTQ2 ▪ Military/Veterans ▪ Reentry Populations ▪ Homeless ▪ Sex Workers ▪ Low Income ▪ Other (Specify) 	Select your project's target population. Select all that apply. If you select "Other," enter a brief description of the population.
3.1.10	Target Zip Codes	Open-ended text (5-digit zip codes)	Enter the zip codes that your programs are targeting. If your program is county-wide, enter all zip codes in the county.

ID	Data Item	Response Options	Guidance and Related Definitions
3.1.11	*Description of Needs, Resources, Gaps	Open-ended text	<p>Enter any needs, resources, or gaps that you found in your Community Needs Assessment.</p> <p>Example: Our needs assessment identified gaps in prevention services targeting Black/African American young adults who are not in college.</p>
3.1.12	*Findings of Epi Data	Open-ended text	<p>Enter a summary of the findings from your epidemiological data review that is most relevant to your needs assessment. Grantees can use data from local agencies and institutions for their needs assessment. Data easily found include vital statistics, crime and accident statistics, hospital admissions, and student behavior data (from school districts). A community may also choose to conduct surveys to collect needed data in order to better understand different patterns and issues in the community. If you need additional information to understand certain data or survey results, you may choose to conduct focus group discussions or key informant interviews to help provide context and additional information for what the data are showing.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
3.1.13	*Target Risk Factors/Target Protective Factors	<ul style="list-style-type: none"> ▪ Attitudes supporting heavy alcohol use ▪ Attitudes supporting illicit drug use ▪ Attitudes supporting risky sexual behaviors ▪ Perceived risk of harm from unprotected sex ▪ Perceived risk of harm from heavy alcohol use ▪ Perceived risk of harm from illicit drug use ▪ Access to health services ▪ Awareness of health services ▪ Easy access to alcohol ▪ Positive alcohol expectancies ▪ Easy access to drugs ▪ Victimization ▪ Poor mental health ▪ Criminal justice involvement ▪ Experience with discrimination ▪ Life stress ▪ Early initiation of alcohol use ▪ Early initiation of drug use ▪ Injection drug use ▪ High knowledge of HIV ▪ Sexual self-efficacy ▪ High access to condoms or other forms of protection ▪ High social support ▪ Family connectedness ▪ Involvement with prosocial peer groups ▪ Positive intimate partner relationship ▪ Other (Specify) 	<p>Select the risk factors and protective factors that your project is targeting. Select all that apply. If you select "Other," enter a brief description of the factor.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
3.1.14	*Targeted Capacity Expansion Type	<ul style="list-style-type: none"> ▪ Determining need based on data ▪ Developing prevention workforce ▪ Logically planning prevention services to address needs ▪ Providing evidence-based prevention services ▪ Evaluating prevention services delivered 	Identify areas where you need to expand your project's capacity and select the type of capacity expansion that your project will target. Select all that apply.
3.1.15	Anticipated Impact of Targeted Capacity Expansion Type(s) on Organization's Capacity (Optional)	Open-ended text	<p>Enter a brief description of the effect that you anticipate the targeted capacity expansion type will have on your organization's capacity.</p> <p>Example: Targeting the expansion of our capacity to evaluate our prevention services will allow us to better understand the effects of our interventions and improve future prevention strategies.</p>
3.1.16	Upload/Attach Needs Assessment Report	File upload	Upload a copy of your Needs Assessment Report for GPO approval.

3.2 Community Needs Assessment Changes and Updates

This part of the Assessment section is required only if you need to make changes to your Community Needs Assessment. To make changes, navigate to the Work Plans section and select "Create New Version" under the Actions Menu on your Dashboard. A "Revise current work plan" screen will appear asking you to fill in the information listed below.

ID	Data Item	Response Options	Guidance and Related Definitions
3.2.1	*Date Identified	Date (mm/dd/yyyy)	Enter the date that you made changes or updates to your Community Needs Assessment.

ID	Data Item	Response Options	Guidance and Related Definitions
3.2.2	*Change/ Update Name	Open-ended text	Enter a name to identify the change or update. Example: Additional target population
3.2.3	*Description	Open-ended text	Enter a description of the change or update. Please be specific. Example: Added the additional target population of LGBTQ2 based on new data that we recently reviewed.

3.3 Accomplishments and Barriers

This part of the Assessment section is the only part of Assessment that is required to be completed for each Progress Report. Complete this section separately for each accomplishment or barrier that you experienced while performing activities *related to the assessment process*. Select “Add Accomplishments/Barriers” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
3.3.1	*Type	<ul style="list-style-type: none"> ▪ Accomplishment ▪ Barrier 	From the drop-down menu, select whether you are entering an accomplishment or barrier.
3.3.2	*Accomplishment/ Barrier Name	Open-ended text	Enter a name to identify the accomplishment or barrier. Example (Accomplishment): Environmental scan Example (Barrier): Lack of intervention service awareness

ID	Data Item	Response Options	Guidance and Related Definitions
3.3.3	*Description	Open-ended text	<p>Provide a brief description of the accomplishment or barrier</p> <p>Example (Accomplishment): We completed an environmental scan to identify gaps in services in the community. As a result, we plan to work with another local organization to develop programs focused on LGBTQ2 youth.</p> <p>Example (Barrier): The lack of knowledge among providers and consumers about community resources is a barrier. According to a phone survey, 31 percent did not know where to go to receive substance use services.</p>

3.4 Conclusions and Recommendations

We encourage grantees to report any conclusions and recommendations that they experienced while performing activities *related to assessment*.

Select “Add Conclusion/Recommendation” to open this section. This section is not required.

ID	Data Item	Response Options	Guidance and Related Definitions
3.4.1	Date Identified	Date (mm/dd/yyyy)	Enter the date when you identified the conclusion or recommendation.
3.4.2	Conclusion/ Recommendation Name	Open-ended text	<p>Enter a name to identify the conclusion or recommendation.</p> <p>Example: Strategies for reentry adults</p>
3.4.3	Description of Conclusion/ Recommendation	Open-ended text	<p>Enter a detailed description of the conclusion or recommendation.</p> <p>Example: To ensure a successful project, it is imperative to incorporate key guiding principles and implement research-based strategies for reentry adults.</p>

4. Capacity

Capacity refers to the various types and levels of resources available to establish and maintain a community prevention system that can identify and leverage resources that will support an effective strategy aimed at the priority problems and identified risk factors in the community at the appropriate population level. Capacity to carry out prevention strategies depends not only upon the resources of the community organizations and their function as a cohesive problem-solving group, but also upon the readiness and ability of the larger community to commit its resources to addressing the identified problems.

When: Section 4.1 (Project, Organization/Institution, and Community Capacity) corresponds to the Capacity Building Work Plan which new grantees are required to complete as part of their grant award. This section, along with Section 4.2 (Project Advisory Council Meetings), Section 4.3 (Training and Technical Assistance), Section 4.4 (Accomplishments and Barriers), and Section 4.5 (Conclusions and Recommendations), should be completed and updated as needed with each Progress Report.

From the Capacity tab in the Progress Report in SPARS, select “View” to open each section listed below.

4.1 Project, Organization/Institution, and Community Capacity (Capacity Building Work Plan)

The Capacity Building Work Plan is completed at the beginning of each grant and submitted in SPARS separately from the Progress Report. To complete the Capacity Building Work Plan, navigate to the Work Plans section on your Dashboard in SPARS and select the plus sign under the Actions column next to Capacity Building. If you need to make changes to a Work Plan report that has already been accepted, select “Create New Version” under the Actions Menu on your Dashboard. This section cannot be changed through the Progress Report; all changes must be made through the Work Plans section and will be automatically reflected in the Progress Report once the revised Work Plan has been submitted to and accepted by the GPO.

Use the Capacity Building Work Plan to add organizations and individual members relevant to your project. You can add several group types in this section, including Staff, Advisory Group and Governing Board, and Collaborator. Select “Add Organization/Individual Members” to add new members. Use the drop-down menu to select the type of roster to which you would like to add member information. Select “Edit” next to existing records to revise previously entered member information.

Staff Roster

ID	Data Item	Response Options	Guidance and Related Definitions
4.1.1	*Name	Open-ended text	Enter the staff member’s name.
4.1.2	*Date Joined	Date (mm/dd/yyyy)	Enter the date the staff member joined your project.

ID	Data Item	Response Options	Guidance and Related Definitions
4.1.3	*Position Title	Open-ended text	Enter the staff member's position title (e.g., Project Manager).
4.1.4	Full Time Equivalent (FTE) Actual	Open-ended numerical response (percentage)	Enter the actual Full Time Equivalent (FTE) percentage that the staff member dedicates to the project (e.g., a staff member who works 10 hours per week on the project would be 25 percent).
4.1.5	Full Time Equivalent (FTE) Approved	Open-ended numerical response (percentage)	Enter the Full Time Equivalent (FTE) percentage that SAMHSA approved for this staff member to work on the project.
4.1.6	*Status	<ul style="list-style-type: none"> ▪ Active ▪ Inactive 	<p>Select whether the staff member is active or inactive.</p> <p>Active: The staff member is currently working with your organization. If the staff member is currently attending project meetings, mark the member as active.</p> <p>Inactive: The staff member no longer works on the project.</p>
4.1.7	Date Exited	Date (mm/dd/yyyy)	If a staff member is inactive, indicate the date when the member became inactive.

Advisory Group and Governing Board Roster

ID	Data Item	Response Options	Guidance and Related Definitions
4.1.8	*Name	Open-ended text	Enter the advisory group/board member's name.
4.1.9	*Date Joined	Date (mm/dd/yyyy)	Enter the date the advisory group/board member joined your project.
4.1.10	*Affiliation	Open-ended text	Enter the advisory group/board member's affiliation (i.e., the name of the member's organization, agency, or foundation).

ID	Data Item	Response Options	Guidance and Related Definitions
4.1.11	*Member Type	<ul style="list-style-type: none"> ▪ Community Stakeholder ▪ Consumer 	<p>Identify whether the member is a community stakeholder or a consumer.</p> <p>Community stakeholders: Residents, members of a community group, developers, business owners, or neighborhood leaders who have an interest in the community.</p> <p>Consumers: People living with HIV/AIDS who provide input and advice for improving HIV prevention strategies in the community.</p>
4.1.12	*Group Type	<ul style="list-style-type: none"> ▪ Project Advisory Group ▪ Governing Board 	<p>Select the type of group to which the member belongs.</p> <p>Project Advisory Group: Provides strategic planning related to an organization’s mission and helps with the overall structure and management of the organization. Advisory groups do not have any authority.</p> <p>Governing Board: Oversees the organization’s mission, fiscal integrity, and strategic focus.</p>
4.1.13	*Status	<ul style="list-style-type: none"> ▪ Active ▪ Inactive 	<p>Select whether the member is active or inactive.</p> <p>Active: The member is currently working with your organization. If a member is currently attending project meetings, mark the member as active.</p> <p>Inactive: The member no longer works with your organization.</p>
4.1.14	Date Exited	Date (mm/dd/yyyy)	If inactive, indicate the date when the member became inactive.

Collaborator Roster

Collaborators are partner organizations that assist the grantee in accomplishing its goals. Collaborators include representatives from state government agencies; publicly funded sexually-transmitted disease (STD) programs; juvenile and adult criminal justice, correctional, and parole systems; reentry programs; the National Immunization Program; CDC-funded HIV/AIDS projects; American Indian/Alaska Native (AI/AN) tribal councils, tribal community-based organizations, tribal governments, and Indian Health Service-funded programs; and community programs such as HIV Prevention Community Planning Groups and Health Resources and Services Administration (HRSA) Ryan White Planning Councils.

ID	Data Item	Response Options	Guidance and Related Definitions
4.1.15	*Name (Organization Name)	Open-ended text	Enter the name of the collaborator organization.
4.1.16	*Date Joined	Date (mm/dd/yyyy)	Enter the date the collaborator organization joined with your organization.
4.1.17	*Collaborator Type	<ul style="list-style-type: none"> ▪ Government ▪ Nongovernment 	Select the collaborator type.
4.1.18	*Government Type	<ul style="list-style-type: none"> ▪ Federal ▪ State ▪ Local 	If the collaborator type is Government , select whether the collaborator is federal, state, or local government.
4.1.19	*Organization Scope	<ul style="list-style-type: none"> ▪ National ▪ Statewide ▪ Local 	If the collaborator type is Nongovernment , select whether the organization's scope is national, statewide, or local.
4.1.20	*Status	<ul style="list-style-type: none"> ▪ Active ▪ Inactive 	<p>Select whether the collaborator is active or inactive.</p> <p>Active: The collaborator is currently working with your organization. If a collaborator organization is currently attending project meetings, mark the organization as active.</p> <p>Inactive: The collaborator no longer works with your organization.</p>
4.1.21	Date Exited	Date (mm/dd/yyyy)	If a collaborator is inactive, indicate the date when the organization became inactive.

4.2 Project Advisory Council Meetings

In this section, record information about meetings held by Project Advisory Council members. Select “Add Meeting” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
4.2.1	*Meeting Date	Date (mm/dd/yyyy)	Enter the date when you held the meeting.
4.2.2	*Meeting Name/ Topic	Open-ended text	Enter a brief description of the meeting based on the meeting content or topic.
4.2.3	Upload/Attach Agenda	File upload	Upload a copy of the meeting agenda.
4.2.4	Attendees	Open-ended text	Select the Project Advisory Council members who attended the meeting. The system will pre-populate a list of members from the Staff, Advisory Group and Governing Board, and Collaborators.

4.3 Training and Technical Assistance (T/TA)

Grantees use the training and technical assistance (T/TA) section to record information about T/TA that they need or that members of their organization or community already received. Select “Add Training and Technical Assistance” to open this section. Grantees can request data technical assistance through the [SPARS Technical Support Request System \(TSRS\)](#). Additional information can be found in the [TSRS User Guide](#) in the Resource Library.

Complete all items in this section separately for each T/TA event.

ID	Data Item	Response Options	Guidance and Related Definitions
4.3.1	*Date Requested	Date (mm/dd/yyyy)	Enter the date when you requested T/TA. If you have not yet requested T/TA, leave the date blank and complete it once you request the T/TA.

ID	Data Item	Response Options	Guidance and Related Definitions
4.3.2	*Status	<ul style="list-style-type: none"> ▪ Needed, not yet requested ▪ Requested ▪ Received ▪ Closed 	<p>Select the current status of the T/TA from the drop-down menu. Select only one.</p> <ul style="list-style-type: none"> ▪ Needed, not yet requested: You would like to receive T/TA but have not yet requested it. ▪ Requested: You requested T/TA, but you have not received it. ▪ Received: You received T/TA. ▪ Closed: You no longer need T/TA.
4.3.3	Date Closed	Date (mm/dd/yyyy)	This data item is only available if you selected “Closed” for item 4.3.2. If you selected “Closed,” enter the date that the T/TA request was closed.
4.3.4	*Training/TA Topic	<ul style="list-style-type: none"> ▪ Assessment ▪ Capacity ▪ Planning ▪ Implementation ▪ Evaluation ▪ Participatory Involvement ▪ Culturally Informed and Responsive ▪ Sustainability ▪ Continuous Quality Improvement ▪ Other (Specify) 	Select the T/TA topic. Select all that apply. If you select “Other,” enter a brief description of the topic.
4.3.5	*Delivery Mechanism	<ul style="list-style-type: none"> ▪ Distance learning ▪ Technical assistance by telephone ▪ On-site/in-person technical assistance ▪ Technical assistance by email ▪ In-person class ▪ Conference or workshop ▪ Teleconference or telephone-based training ▪ Written materials 	Select the option that best describes how the contractor delivered the T/TA or how you would like to receive the T/TA. Select one option from the drop-down menu.

ID	Data Item	Response Options	Guidance and Related Definitions
4.3.6	*Source of Assistance	<ul style="list-style-type: none"> ▪ PTTC ▪ CSAP Project Officer ▪ SPARS ▪ State Prevention Organization ▪ Other (Specify) 	Use the drop-down menu to select the option that best describes who provided the T/TA or who you would like to provide the T/TA. If you select “Other,” specify who provided or will provide the T/TA. Other sources of assistance may include the Peer Recovery Center of Excellence or the SAMHSA/CDC Harm Reduction Technical Assistance Center .
4.3.7	*Was the training or TA provided in a timely and effective manner?	<ul style="list-style-type: none"> ▪ Yes ▪ No (please explain) 	Indicate whether you think that you received the T/TA in a timely and effective manner. If you select “No,” provide a brief explanation.
4.3.8	*Description	Open-ended text	Enter a brief description of the T/TA that you received or are requesting.

4.4 Accomplishments and Barriers

Complete this section separately for each accomplishment or barrier *related to capacity planning and building*. Select “Add Accomplishments/Barriers” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
4.4.1	*Type	<ul style="list-style-type: none"> ▪ Accomplishment ▪ Barrier 	Use the drop-down menu to indicate whether you are entering an accomplishment or barrier.
4.4.2	*Accomplishment/Barrier Name	Open-ended text	Enter a name to identify the accomplishment or barrier. Example (Accomplishment): Successful partnership with local university Example (Barrier): Consumer members

ID	Data Item	Response Options	Guidance and Related Definitions
4.4.3	*Description	Open-ended text	<p>Provide a brief description of the accomplishment or barrier.</p> <p>Example (Accomplishment): We fostered a successful partnership with a local university that will expand our capacity to use data to shape our project and evaluate outcomes of our interventions.</p> <p>Example (Barrier): We need to identify additional consumer members for our advisory group. We are committed to involving consumers and are in the process of identifying additional members.</p>

4.5 Conclusions and Recommendations

We encourage grantees to report any conclusions and recommendations that they reached while performing activities *related to capacity planning and building*. Select “Add Conclusion/Recommendation” to open this section. This section is not required.

ID	Data Item	Response Options	Guidance and Related Definitions
4.5.1	Date Identified	Date (mm/dd/yyyy)	Enter the date when you identified the conclusion or recommendation.
4.5.2	Conclusion/ Recommendation Name	Open-ended text	<p>Enter a name to identify the conclusion or recommendation.</p> <p>Example: Collaboration with a research center</p>
4.5.3	Description of Conclusion/ Recommendation	Open-ended text	<p>Enter a detailed description of the conclusion or recommendation.</p> <p>Example: We found it helpful to collaborate with our county medical research center that provides hepatitis C treatment. This collaboration allowed us to gain insight into the community’s needs for viral hepatitis prevention services.</p>

5. Planning

Planning involves following logical sequential steps designed to produce specific results. The desired results (Outcomes) are based upon data obtained from a formal assessment of needs and resources. The plan, then, outlines what will be done over time to create the desired change.

From the Planning tab in the Progress Report in SPARS, select “View” to open each section listed below

When: Section 5.1 (Strategic Prevention Plan Synopsis) is completed for the Strategic Prevention Plan Work Plan which new grantees are required to complete as part of their grant award. All other Planning sections should be completed at least once during the Planning phase and updated if your goals or objectives change, or you add additional interventions or testing services.

5.1 Strategic Prevention Plan Synopsis (Strategic Prevention Plan Work Plan)

The Strategic Prevention Plan Work Plan is completed at the beginning of each grant and submitted in SPARS separately from the Progress Report. To complete the Strategic Prevention Plan Work Plan, navigate to the Work Plans section on your Dashboard in SPARS and select the plus sign under the Actions column next to Strategic Prevention Plan. If you need to make changes to a Work Plan report that has already been accepted, select “Create New Version” under the Actions Menu on your Dashboard. Select “Edit this Record” to open the section to add information or make revisions. This section cannot be changed through the Progress Report; all changes must be made through the Work Plans section and will be automatically reflected in the Progress Report once the revised Work Plan has been submitted to and accepted by the GPO.

ID	Data Item	Response Options	Guidance and Related Definitions
5.1.1	*Date Approved	N/A	After you submit your Strategic Prevention Plan Work Plan in SPARS and your GPO approves it, your Dashboard in SPARS will indicate the date it was accepted.
5.1.2	*Estimate the total number of people you plan to serve each year through direct-service interventions.	Open-ended numerical response	Enter the number of people you plan to serve through direct service interventions for each year of the grant.

ID	Data Item	Response Options	Guidance and Related Definitions
5.1.3	<p>*Estimate the number of people you plan to serve each year through direct-service interventions by target population.</p>	<p>For each target population listed below, open-ended numerical response for number of people you plan to serve for each year of the grant:</p> <ul style="list-style-type: none"> ▪ Adolescents (Age 12–17) ▪ Young Adults (Age 18–24) in college ▪ Young Adults (Age 18–24) not in college ▪ Older Adults (Age 50 and over) ▪ American Indian/Alaska Natives (AI/AN) ▪ Native Hawaiian or Other Pacific Islanders ▪ Asian ▪ Black/African American Women ▪ Black/African American Men ▪ Latina or Hispanic Women ▪ Latino or Hispanic Men ▪ Men Having Sex with Men (MSM) ▪ LGBTQ2 ▪ Military/Veterans ▪ Reentry Populations ▪ Homeless ▪ Sex Workers ▪ Low Income ▪ Other (Specify) 	<p>(Enter the number planned to serve by target population. NOTE, the number planned to serve for any given target population should not exceed the total planned to serve entered above in item 5.1.2). If you do not plan to serve a particular target population, enter “0” for that population.</p>
5.1.4	<p>*Work Plan/ Timeline Description</p>	<p>Open-ended text</p>	<p>Enter information about the time required to complete your Strategic Prevention Plan.</p> <p>Example: We will begin substance abuse prevention interventions on 2/1/17. Group counseling and risk reduction education activities will begin on 3/1/17.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
5.1.5	*Explain how substance abuse and HIV prevention services will be integrated.	Open-ended text	Enter a description of how you will integrate substance use and HIV prevention services. Example: Group counseling will focus on both substance use and HIV prevention. Our social media campaign will highlight negative consequences associated with substance use and risky sexual behaviors.
5.1.6	Upload/Attach your Strategic Plan	File upload	Upload a copy of your Strategic Prevention Plan.

5.2 Goals, Objectives, and Outcome Categories

Select “Add Goal” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
5.2.1	*Targeted Goal(s)	<ul style="list-style-type: none"> ▪ Increase capacity to provide substance abuse, HIV, or viral hepatitis prevention services ▪ Prevent, slow the progress, and reduce the negative consequences of substance abuse ▪ Prevent, slow the progress, and reduce the negative consequences of HIV or viral hepatitis transmission ▪ Reduce health disparities in the community 	Use the drop-down menu to select a goal that your grant is targeting. Add a separate goal for each goal you are targeting. For each goal that you add, complete an objectives roster, select outcome categories, and select outcome measures. You do not need to complete the objectives and outcomes sections for goals that you are not targeting.

Grantees must identify related objectives for each goal selected and complete the following information for each objective. You may identify multiple objectives for each goal.

An *objective* is what the grantee must accomplish during a specific period to move toward goal achievement. You must express objectives in specific, measurable terms.

Click on the name of a goal, then select “Add Objectives” to add an objective.

ID	Data Item	Response Options	Guidance and Related Definitions
5.2.2	*Objective Name	Open-ended text	Enter a brief description to identify the objective. This name should be a short phrase to help you remember your objective when completing future sections of the Progress Report (e.g., increase HIV knowledge, provide HIV testing and counseling, increase perception of risk related to alcohol use).
5.2.3	*Objective Description	Open-ended text	<p>Enter a description of the objective. Include the population targeted for the objective, as well as at least one measurable outcome and the timeframe for achieving the outcome.</p> <p>Example 1: Increase the percentage of correct answers by 20 percent on the HIV knowledge scale among reentry participants during the course of the project</p> <p>Example 2: Provide HIV testing and counseling services to 200 Hispanic men between October 2011 and September 2012</p>
5.2.4	*Date Started	Date (mm/dd/yyyy)	Enter the date when your project started or plans to start working on this objective.
5.2.5	*Planned Completion Date	Date (mm/dd/yyyy)	Enter the date when you plan to complete the objective.
5.2.6	*Current Status	<ul style="list-style-type: none"> ▪ Not started ▪ Less than half completed ▪ Half completed ▪ More than half completed ▪ Completed ▪ Exceeded target 	Select a status category to indicate the progress made on the objective thus far.
5.2.7	Date Completed	Date (mm/dd/yyyy)	If you select “Completed” or “Exceeded target” in item 5.2.6, enter the date when you completed the objective.

ID	Data Item	Response Options	Guidance and Related Definitions
5.2.8	Outcome Category	<p>Goal: Prevent, slow the progress, and reduce the negative consequences of substance abuse</p> <ul style="list-style-type: none"> ▪ Perception of risk of harm from substance abuse (participant level) ▪ Disapproval of substance abuse (participant level) ▪ Other substance abuse risk/protective factors (participant level) ▪ Past 30-day substance use (participant level) ▪ Consequences of substance abuse (participant level) ▪ Substance abuse related community-level outcomes <p>Goal: Prevent, slow the progress, and reduce the negative consequences of HIV or viral hepatitis transmission</p> <ul style="list-style-type: none"> ▪ HIV knowledge, beliefs, and attitudes (participant level) ▪ Risky sexual behaviors (participant level) ▪ Other HIV or viral hepatitis risk/protective factors (participant level) ▪ HIV or viral hepatitis related community-level outcomes <p>Goal: Reduce behavioral health disparities in the community</p> <ul style="list-style-type: none"> ▪ Access to services (participant level) ▪ Community-level measures of behavioral health disparities 	<p>Select one or more outcomes.</p> <p>Note: This data item does not appear for the goal “Increase capacity to provide substance abuse, HIV, or viral hepatitis prevention services.”</p>

5.3 Direct Service Planning

Complete all items in this section separately for each direct service intervention that you are planning. In this context, *intervention* refers to an activity or a set of coordinated activities to which a group or individual is exposed in order to change their behavior or their knowledge/attitudes associated with behavior change. Select “Add an Intervention” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
5.3.1	*Direct service Intervention Name	Drop-down menu with direct service intervention names listed in Appendix A	See Appendix A for a list of direct service intervention names. Select the name from the drop-down menu. If your planned direct service intervention is not included on the list, please select “Other” and specify the name of the intervention.
5.3.2	*Date Added	Date (mm/dd/yyyy)	Enter the date when you added the direct service intervention.
5.3.3	*Objective(s)	Objectives that were identified in Section 5.2	Select objectives that you identified in Section 5.2 that are relevant to this direct service intervention. Select all objectives that apply.
5.3.4	*Intervention Target(s)	<ul style="list-style-type: none"> ▪ SA ▪ HIV ▪ Viral hepatitis ▪ Other (Specify) 	Indicate whether the intervention targets substance use (SA), HIV, viral hepatitis, or other. Select all that apply. If you select “Other,” provide a brief description of what the service is targeting.
5.3.5	*Intervention Description	Open-ended text	Enter a description of the intervention. Example: We are implementing Safety Counts, which is an HIV prevention intervention aimed at reducing risky sexual behaviors and drug use. The intervention includes group and individual counseling sessions, social events, and HIV testing and counseling.

ID	Data Item	Response Options	Guidance and Related Definitions
5.3.6	*Does this direct service intervention target:	<ul style="list-style-type: none"> ▪ Individuals ▪ Community ▪ Both 	Use the drop-down menu to indicate whether the direct service intervention targets individuals, the community, or both.
5.3.7	*Is this direct service intervention evidence-based?	<ul style="list-style-type: none"> ▪ Yes ▪ No 	Use the drop-down menu to indicate whether the direct service intervention is evidence-based.
5.3.8	Evidence-based Justification	<ul style="list-style-type: none"> ▪ Inclusion in a Federal List or Registry of evidence-based interventions or other evidence-based practice resource center. ▪ Being reported (with positive effects) in a peer reviewed journal. ▪ Documentation of effectiveness based on all three of the following criteria: 1) based on solid theory validated by research; 2) supported by a body of knowledge generated from similar interventions; 3) consensus among informed experts of effectiveness based on theory, research, practice, and experience. 	If you selected “Yes” for “Is this direct service intervention evidence-based?” (item 5.3.7), provide justification for the intervention being evidence-based. Select all that apply. Please refer to SAMHSA’s Evidence-Based Practices Resource Center , the CDC’s Compendium of Evidence-Based Interventions and Best Practices for HIV Prevention , or other evidence-based resource centers.
5.3.9	Do you plan to adapt this direct service intervention from the original?	<ul style="list-style-type: none"> ▪ Yes ▪ No 	If you selected “Yes” for “Is this direct service intervention evidence-based?” (item 5.3.7), use the drop-down menu to indicate whether you plan to adapt the direct service intervention.

ID	Data Item	Response Options	Guidance and Related Definitions
5.3.10	Description of Adaptation	Open-ended text	<p>If you selected “Yes” for “Do you plan to adapt this direct service intervention from the original?” (item 5.3.9), enter a description of <i>how</i> you plan to adapt the intervention.</p> <p>Example: We plan to offer only group counseling sessions and no individual counseling sessions at this time due to staffing limitations.</p>
5.3.11	*Status	<ul style="list-style-type: none"> ▪ Active ▪ Inactive 	Use the drop-down menu to indicate whether the direct service intervention is currently active or inactive.
5.3.12	Planned Direct Service Intervention Begin Date	Date (mm/dd/yyyy)	Enter the date when you plan to implement the direct service.
5.3.13	*Number of Sessions Planned (Frequency)	Open-ended numerical response	Enter a number to indicate the number of sessions planned (frequency) for this direct service intervention per participant (for individual-format services) or group of participants (for group-format services). For example, if you are planning to provide 15 sessions for each person in the intervention, enter 15 here.
5.3.14	*Number of Minutes Planned (Dosage)	Open-ended numerical response	Enter a number to indicate the number of minutes planned (dosage) for all sessions of this direct service intervention per participant, rounded to the nearest 5 minutes (e.g., if you are planning to implement 900 minutes for each person in the intervention, enter 900 here). <i>Enter responses in minutes.</i> Please do not use hours.

5.4 Indirect Service Planning

Complete all items in this section separately for each Indirect Service you are planning to provide through your grant.

An *indirect service* is a prevention activity intended to change the institutions, policies, norms, and practices of the entire community or to disseminate information to the entire community. Typically, grantees deliver the service to an entire population rather than to a specific individual or a group, and the service provider and service recipients are not necessarily in the same location at the same time.

Environmental Strategy: A prevention activity intended to change community standards, codes, and practices, related to undesirable health behaviors in the general population (e.g., changes in rules and regulations or systems changes at the organization or community level).

Information Dissemination: A prevention activity intended to provide knowledge about undesirable health behaviors and their adverse effects, or about available behavioral health services, to an entire community (e.g., media campaigns, informational brochures, posters, website).

Select “Add an Indirect Service” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.1	*Date Added	Date (mm/dd/yyyy)	Enter the date when you added the indirect service.
5.4.2	*Objective(s)	Objectives identified in Section 5.2	Select the objective(s) you identified in Section 5.2 that are relevant to this indirect service. Select all that apply.

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.3	*Indirect Service Type	<ul style="list-style-type: none"> ▪ Environmental Strategy ▪ Information Dissemination 	<p>Use the drop-down menu to indicate whether the indirect service type is an environmental strategy or information dissemination.</p> <p>Environmental Strategy: A prevention activity intended to change community standards, codes, and practices, related to undesirable health behaviors in the general population (e.g., changes in rules and regulations or systems changes at the organization or community level).</p> <p>Information Dissemination: A prevention activity intended to provide knowledge about undesirable health behaviors and their adverse effects, or about available behavioral health services, to an entire community (e.g., media campaigns, informational brochures, posters, websites).</p>

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.4A	Indirect Service (Environmental Strategy)	<ul style="list-style-type: none"> ▪ Efforts to improve neighborhood or campus safety ▪ Enhancing accesses to SA/HIV/VH prevention services ▪ Enhancing access to opioid reversal devices ▪ Enforcement efforts (e.g., compliance checks, sobriety checkpoints, dormitory inspections) ▪ Collaboration with law enforcement ▪ Educating elected officials or other community leaders ▪ Training environmental influencers (e.g., police, beverage servers, healthcare providers, campus administrators) ▪ Efforts to increase sanctions for alcohol or drug use ▪ Condom distribution ▪ Enhancing access to HIV and/or viral hepatitis testing through health policy or organizational change ▪ Promoting changes to alcohol pricing and/or taxation ▪ Gathering of Native Americans (GONA) ▪ Promoting policy changes to limit alcohol advertising ▪ Promoting policy changes (e.g., in workplaces or campuses) to prevent sexual violence ▪ Other efforts to change community or organizational policies ▪ Other (Specify) 	<p>If you selected “Environmental Strategy” as the Indirect Service Type (item 5.4.3), select one of the indirect services listed. If you select “Other,” provide a description of the indirect service.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.4B	Indirect Service (Information Dissemination)	<ul style="list-style-type: none"> ▪ Public speeches or lectures ▪ Town hall meetings ▪ Social marketing ▪ Social norms campaigns ▪ Prevention-focused websites ▪ Information dissemination through social media (e.g., Facebook, Twitter, YouTube) ▪ E-mail blasts ▪ Instagram ▪ Applications for mobile devices (e.g., Smart phones, tablets) ▪ Posters or billboards ▪ Public service announcements (PSA) on radio or television ▪ Newspaper or magazine advertisements ▪ Newspaper articles or letters to the editor ▪ Informational booklets, brochures, flyers, or newsletters ▪ Workshops, seminars, or symposiums ▪ Health fairs ▪ Condom demonstrations ▪ Health & fitness promotions and demonstrations ▪ Information phone lines or hotlines ▪ Other (Specify) 	<p>If you selected “Information Dissemination” as the Indirect Service Type (item 5.4.3), select one of the following indirect services. If you select “Other,” provide a description of the indirect service.</p>
5.4.5	*What does this indirect service target?	<ul style="list-style-type: none"> ▪ SA ▪ HIV ▪ Viral hepatitis ▪ Other (Specify) 	<p>Indicate whether the indirect service targets substance use, HIV, viral hepatitis, or other. Select all that apply. If you select “Other,” provide a brief description of what the service is targeting.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.6	Environmental Strategy Purpose	<ul style="list-style-type: none"> ▪ Limit access to substances ▪ Change culture and context within which decisions about substance use or sexual behaviors are made ▪ Change physical design of the environment (e.g., improve lighting, add emergency phones) ▪ Reduce negative consequences associated with substance use or risky sexual behaviors ▪ Reduce morbidity and mortality related to opioid overdose ▪ Enhance access or reduce barriers to prevention and healthcare resources ▪ Increase access to condoms or other forms of protection ▪ Change social norms ▪ Reduce glamorization of substance abuse ▪ Increase pricing of alcohol ▪ Increase penalties or sanctions ▪ Capacity/coalition building ▪ Educate for policy change ▪ Increased access to viral hepatitis vaccine ▪ Other (Specify) 	<p>If you selected “Environmental Strategy” as the Indirect Service Type (item 5.4.3), indicate the purpose. Select all that apply. If you select “Other,” enter a description of the purpose.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.7	Information Dissemination Purpose	<ul style="list-style-type: none"> ▪ To raise awareness of substance abuse, HIV, or viral hepatitis related problems in the community ▪ To gain support from the community for your prevention efforts ▪ To provide information on community norms related to substance use or sexual behaviors ▪ To provide information on the harms of substance use or risky sexual behaviors ▪ To provide information on how to prevent substance abuse or HIV/VH transmission among family and friends ▪ To change individual behaviors with regard to substance use or risky sexual behaviors ▪ To provide intervention program information (e.g., contact information, meeting times) ▪ To provide surveillance and monitoring information (e.g., information about whom to contact if you witness underage alcohol sales or consumption) ▪ To provide information about prevention and healthcare resources in the community ▪ To educate for policy change ▪ Other (Specify) 	<p>If you selected “Information Dissemination” as the Indirect Service Type (item 5.4.3), indicate the purpose. Select all that apply. If you select “Other,” enter a description of the purpose.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.8	*Indirect Service Description	Open-ended text	Provide a description of the indirect service. Example: We will implement a social media campaign that highlights the harms associated with substance use and risky sexual behaviors. Platforms will include Facebook, Twitter, Instagram, and YouTube.
5.4.9	*Planned Indirect Service Begin Date	Date (mm/dd/yyyy)	Enter the date when you plan to implement the indirect service.
5.4.10	*Planned Indirect Service End Date	Date (mm/dd/yyyy)	Enter the date when you anticipate ending the indirect service.
5.4.11	*How many people do you plan to reach through this indirect service?	Open-ended numerical response	Enter an estimate of the number of people you plan to reach through the indirect service.
5.4.12	*Is this indirect service evidence-based?	<ul style="list-style-type: none"> ▪ Yes ▪ No 	Use the drop-down menu to indicate whether the indirect service is evidence-based.

ID	Data Item	Response Options	Guidance and Related Definitions
5.4.13	Evidence-based Justification	<ul style="list-style-type: none"> ▪ Inclusion in a Federal List or Registry of evidence-based interventions or other evidence-based practices resource center ▪ Being reported (with positive effects) in a peer reviewed journal <p>Documentation of effectiveness based on all three of the following criteria: 1) based on solid theory validated by research; 2) supported by a body of knowledge generated from similar interventions; 3) consensus among informed experts of effectiveness based on theory, research, practice, and experience</p>	<p>If you selected “Yes” for “Is this indirect service evidence- based?” (item 5.4.12), indicate justification for the indirect service being evidence-based.</p>

5.5 HIV Testing Planning

Select "Edit this Record" to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
5.5.1	*How does your organization plan to provide HIV testing services?	<ul style="list-style-type: none"> ▪ Rapid HIV testing will be provided by the grantee organization ▪ Rapid HIV testing will be available through referral to an outside organization ▪ Confirmatory HIV testing will be available through referral to an outside organization 	Select all response options that apply.
5.5.2	*Please describe how HIV testing will be conducted and where.	Open-ended text	Provide a description of how and where you will conduct HIV testing (e.g., off-site, local health department, subcontract, hospital). If the testing is conducted through an outside organization, include the name of the organization and if there is an established MOU or MOA.
5.5.3	*How many people do you expect will receive an HIV test using CSAP/MAI grant funds each year?	Open-ended numerical response	Provide an estimate for the number of people you anticipate will receive an HIV test through CSAP/MAI grant funds each year.

5.6 Viral Hepatitis (VH) Testing Planning

Note: This section is only for Minority Serving Institutions Partnerships with Community-based Organizations (MSI CBO) 2014, MSI CBO 2015, and HIV Capacity Building Initiative (HIV CBI) grantees. Select “Edit this Record” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
5.6.1	*How does your organization plan to provide VH testing services?	<ul style="list-style-type: none"> ▪ Rapid VH testing will be provided by the grantee organization ▪ Rapid VH testing will be available through referral to an outside organization ▪ Confirmatory VH testing will be available through referral to an outside organization 	Select all response options that apply.
5.6.2	*Please describe how VH testing will be conducted and where.	Open-ended text	Provide a description of how and where you will conduct VH testing (e.g., off-site, local health department, subcontract, hospital). If the testing is conducted through an outside organization, include the name of the organization and if there is an established MOU or MOA.
5.6.3	*How many people do you expect will receive a VH test using CSAP/MAI grant funds each year?	Open-ended numerical response	Provide an estimate for the number of people you anticipate will receive a VH test through CSAP/MAI grant funds throughout the life of your grant for each year.

5.7 Viral Hepatitis (VH) Vaccination Planning

Note: This section is for HIV CBI grantees only. Select “Edit this Record” to open this section. This section is not required.

ID	Data Item	Response Options	Guidance and Related Definitions
5.7.1	How does your organization plan to provide VH vaccination services?	<ul style="list-style-type: none"> ▪ VH vaccinations will be provided by the grantee organization ▪ VH vaccinations will be available through referral to an outside organization 	Select all response options that apply. Please note that SAMHSA funds should not be used to provide VH vaccinations.
5.7.2	Please describe how VH vaccinations will be conducted and where.	Open-ended text	Provide a description of how and where you will conduct VH vaccinations (e.g., off-site, local health department, subcontract, hospital). If providing VH vaccinations through an outside organization, list the name of the organization and if there is an established MOU or MOA.
5.7.3	How many people do you expect will receive a VH vaccination using CSAP/MAI grant funds each year?	Open-ended numerical response	CSAP/MAI grantees are advised to skip this question as it is no longer applicable, since SAMHSA grant funds should not be used for VH vaccinations.

5.8 Accomplishments and Barriers

Complete this section separately for each accomplishment or barrier *related to planning*. Select “Add Accomplishments/Barriers” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
5.8.1	*Type	<ul style="list-style-type: none"> ▪ Accomplishment ▪ Barrier 	Use the drop-down menu to indicate whether you are entering an accomplishment or barrier.
5.8.2	*Accomplishment/ Barrier Name	Open-ended text	<p>Enter a name to identify the accomplishment or barrier.</p> <p>Example (Accomplishment): Data collection protocol</p> <p>Example (Barrier): Additional data needed</p>
5.8.3	*Description	Open-ended text	<p>Provide a brief description of the accomplishment or barrier that your grant experienced while completing the planning process.</p> <p>Example (Accomplishment): We developed a protocol to ensure that data is collected in a consistent and standardized manner. The protocol provides guidelines on when to collect data, how to administer the surveys, how and where to store data, and how to protect privacy and confidentiality. This will improve our data quality and accuracy going forward.</p> <p>Example (Barrier): Additional data are needed in order to identify and effectively plan for reducing health disparities.</p>

5.9 Conclusions and Recommendations

Grantees are encouraged to use this section to record any conclusions or recommendations *related to planning*. Select “Add Conclusion/Recommendation” to open this section. This section is not required.

ID	Data Item	Response Options	Guidance and Related Definitions
5.9.1	Date Identified	Date (mm/dd/yyyy)	Enter the date when you identified the conclusion or recommendation.
5.9.2	Conclusion/ Recommendation Name	Open-ended text	Enter a name to identify the conclusion or recommendation. Example: Meetings with HIV Planning Council
5.9.3	Description of Conclusion/ Recommendation	Open-ended text	Enter a detailed description of the conclusion or recommendation related to planning. Example: Holding regular meetings with the HIV Planning Council has helped to ensure that our Strategic Prevention Plan meets the community’s needs.

6. Implementation

The Implementation phase occurs when you conduct the activities developed and defined in the Assessment, Capacity, and Planning steps. In this section of the Progress Report, grantees report information on the number of people served through direct and indirect service interventions—both total numbers and total numbers by target populations. Grantees also report their grant expenditures related to these two types of interventions.

In the remaining parts of the Implementation section, report the number of people who received an HIV test, VH test, or VH vaccination. Also report on referrals to other services not funded by the grant as well as information about any outreach or recruitment activities that took place during this reporting period.

When: You should update the Implementation section with each Progress Report submission during the Implementation phase.

6.1 Numbers Served

Numbers served are collected using the participant-level instrument.

6.2 Numbers Reached

Select “Edit this Record” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.2.1	*Date Entered	Date (mm/dd/yyyy)	Enter the date when you input the data.
6.2.2	*So far this federal fiscal year, how many people did you reach through <u>indirect services</u> ?	Open-ended numerical response	Enter the total number of people reached so far this federal fiscal year through indirect service interventions.

ID	Data Item	Response Options	Guidance and Related Definitions
6.2.3	<p>*So far this federal fiscal year, how many people did you reach through indirect service interventions by the following demographic categories?</p>	<p>Open-ended numerical response for number of people reached through indirect service interventions for each demographic category listed below:</p> <p><u>Gender</u></p> <ul style="list-style-type: none"> ▪ Female ▪ Male ▪ Transgender ▪ Unknown <p><u>Ethnicity</u></p> <ul style="list-style-type: none"> ▪ Hispanic ▪ Non-Hispanic ▪ Unknown <p><u>Race</u></p> <ul style="list-style-type: none"> ▪ African American or Black ▪ American Indian or Alaska Native ▪ Asian ▪ Native Hawaiian or Other Pacific Islander ▪ White ▪ More Than One Race <p><u>Age</u></p> <ul style="list-style-type: none"> ▪ Ages 12–17 ▪ Ages 18 or older ▪ Unknown 	<p>Enter the number of people reached for the current federal fiscal year for each demographic category. If you do not know the exact number, please enter your best estimate.</p> <p>Note: The number reached for any given demographic category should not exceed the total entered for the number of people reached through indirect service interventions (item 6.2.2).</p>

ID	Data Item	Response Options	Guidance and Related Definitions
6.2.4	*Is the number of people reached from indirect service interventions actual or an estimate?	<ul style="list-style-type: none"> ▪ Actual ▪ Estimate 	Select whether the number of people reached from indirect service interventions is the actual number or an estimate. Select only one.

6.3 Grant Expenditures

Select "Edit this Record" to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.3.1	*Date Updated	Date (mm/dd/yyyy)	Enter the date when you updated the grant expenditures section.
6.3.2	*So far this reporting period, how many of the following did your agency purchase using CSAP/MAI grant funds?	<p>For each item listed below, enter the number your agency purchased:</p> <ul style="list-style-type: none"> ▪ HIV test kits ▪ VH test kits ▪ VH vaccines 	For VH vaccines, CSAP/MAI grantees are advised to skip this question as it is no longer applicable, since SAMHSA grant funds should not be used for VH vaccinations.

ID	Data Item	Response Options	Guidance and Related Definitions
6.3.3	*So far this reporting period, how many grant dollars were spent on...	For each item listed below, enter the amount of grant dollars spent: <ul style="list-style-type: none"> ▪ Direct Services Implementation ▪ Indirect Services Implementation ▪ HIV Testing ▪ VH Testing ▪ VH Vaccinations ▪ Other Expenses (Specify) ▪ Total Grant Dollars Spent (auto sum) 	For VH vaccinations, CSAP/MAI grantees are advised to skip this question as it is no longer applicable, since SAMHSA grant funds should not be used for VH vaccinations.

6.4 Direct Service Intervention Implementation

An *intervention* is an activity or set of activities to which a group or individual is exposed in order to change the group or individual's behavior, or knowledge/attitudes associated with behavior change. Use this section to record the implementation of your direct service interventions and any adaptations you may have made. If you need to add an intervention, do so in the Planning section. Complete this section separately for each implementation of each direct service intervention you listed in Section 5.3. *Each time you implement a direct service intervention for a different group of individuals, it counts as a separate implementation of that intervention.* For example, if you implement a health education curriculum to three different groups, each of those counts as a separate implementation of the intervention.

Select "Add an Intervention" to begin this section. At least one Direct Service Intervention must be entered under Direct Service Planning in order to complete the Direct service Intervention Implementation section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.4.1	*Date Implementation Started	Date (mm/dd/yyyy)	Enter the date when the implementation started.
6.4.2	*Date Implementation Ended	Date (mm/dd/yyyy)	Enter the date when the implementation ended.

ID	Data Item	Response Options	Guidance and Related Definitions
6.4.3	*Direct service Intervention Name	Drop-down menu	Use the drop-down menu to select an intervention name that you listed in Section 5.3.
6.4.4	*Were all direct services/topics/sessions from the planned intervention covered?	<ul style="list-style-type: none"> ▪ Yes ▪ No 	Select whether you covered all direct services/topics/sessions from the planned intervention.
6.4.5	*How did the direct services/topics/sessions differ from what was planned?	Open-ended text	<p>Only complete this question if you selected “No” for the question “Were all direct services/topics/sessions from the planned intervention covered?” (item 6.4.4). If you selected “No,” indicate how the direct services/topics/sessions differed from what you planned.</p> <p>Example: We planned to offer four group sessions and ended up offering five sessions in order to continue discussion and address topics not covered in the first four sessions.</p>
6.4.6	*What are the reasons the intervention differed from planned?	Open-ended text	<p>Only complete this question if you selected “No” for the question “Were all direct services/topics/sessions from the planned intervention covered?” (item 6.4.4). If you selected “No,” explain why the intervention differed from what you planned.</p> <p>Example: The topics in the four initial sessions led to in- depth discussions and we were not able to cover all of the planned topics, so we added a fifth session.</p>

ID	Data Item	Response Options	Guidance and Related Definitions
6.4.7	*Retention Activities	Open-ended text	Enter a description of your retention activities. Example: In the first group session, we emphasized the importance of attending all sessions. Participants who attended all four initial sessions received a \$10 gift card to a local restaurant.
6.4.8	*Incentives	<ul style="list-style-type: none"> ▪ Merchant Gift Cards ▪ Transportation ▪ Evaluation Incentives ▪ Other (Specify) 	Use the drop-down menu to select the incentives used for participants of the intervention. If you select “Other,” enter a description of the incentive provided for participants.
6.4.9	Number of Sessions (Frequency)	Open-ended numerical response	Enter a number to indicate the number of sessions conducted for this direct service intervention per participant (for individual-format services) or group of participants (for group-format services). For example, if you provided 15 sessions for each person in the intervention, enter 15 here.
6.4.10	Number of Minutes (Dosage)	Open-ended numerical response	Enter a number to indicate the number of minutes spent delivering all sessions of this direct service intervention per participant, rounded to the nearest 5 minutes (e.g., if you met for 900 minutes for each person in the intervention, enter 900 here). <i>Enter responses in minutes.</i> Please do not use hours.

6.5 Indirect Service Implementation

Complete this section separately for each time you implement each Indirect Service that you entered in Section 5.4. Select “Add Indirect Service Implementation” to begin this section. At least one indirect service must be entered under Indirect Service Planning in order to complete the Indirect Service Implementation section. Select an Indirect Service Name from the drop-down menu. The drop-down menu will display the Indirect Service Names that you entered in the Indirect Service Planning section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.5.1	*Date Service Started	Date (mm/dd/yyyy)	Enter the date when the service started.
6.5.2	*Date Service Ended	Date (mm/dd/yyyy)	Enter the date when the service ended.
6.5.3	*Indirect Service	Drop-down menu	Select an indirect service that you listed in Section 5.4 from the drop-down menu.
6.5.4	*Did the implementation of this indirect service go according to plan?	<ul style="list-style-type: none"> ▪ Yes ▪ No 	Select whether the implementation of the indirect service went according to plan. Select only one.
6.5.5	*How did implementation differ from the planned indirect service?	Open-ended text	<p>Only complete this question if you selected “No” for the question “Did the implementation of this indirect service go according to plan?” (item 6.5.4). Explain how the implementation differed from the original plan.</p> <p>Example: We planned to share a new post/topic to social media twice a week but ended up posting once a week.</p>
6.5.6	*What are the reasons this indirect service differed from planned?	Open-ended text	<p>Only complete this question if you selected “No” for the question “Did the implementation of this indirect service go according to plan?” (item 6.5.4). Explain why implementation differed from the original plan.</p> <p>Example: We reduced the number of social media posts due to staffing limitations.</p>

6.6 HIV Testing Implementation

Select "Edit this Record" to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.6.1	*Date Entered	Date (mm/dd/yyyy)	Enter the date when you input the data.
6.6.2	*So far this federal fiscal year, how many people received an HIV test using funds from this grant?	Open-ended numerical response	Enter the total number of people who received an HIV test so far this federal fiscal year using CSAP/MAI funds.

ID	Data Item	Response Options	Guidance and Related Definitions
6.6.3	<p>*Of the total tested for HIV mentioned above (i.e., total number of people who received an HIV test using funds from this grant), how many were:</p>	<p>Open-ended numerical response for each of the demographic categories listed below:</p> <p><u>Gender</u></p> <ul style="list-style-type: none"> ▪ Female ▪ Male ▪ Transgender ▪ Unknown <p><u>Ethnicity</u></p> <ul style="list-style-type: none"> ▪ Hispanic ▪ Non-Hispanic ▪ Unknown <p><u>Race</u></p> <ul style="list-style-type: none"> ▪ African American or Black ▪ American Indian or Alaska Native ▪ Asian ▪ Native Hawaiian or Other Pacific Islander ▪ White ▪ More Than One Race ▪ Unknown <p><u>Age</u></p> <ul style="list-style-type: none"> ▪ Ages 12–17 ▪ Ages 18–24 ▪ 25 years or older ▪ Unknown <p><u>Homeless</u></p> <ul style="list-style-type: none"> ▪ Homeless or unstably housed <p><u>Test Information</u></p> <ul style="list-style-type: none"> ▪ Tested for the 1st time ▪ Test Results Positive ▪ Informed of HIV Status ▪ Tested positive and was referred to treatment 	<p>Enter totals by demographic category. The number entered for any given demographic category should not exceed the total reported above in 6.6.2.</p>

6.7 Viral Hepatitis (VH) Testing Implementation

Select "Edit this Record" to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.7.1	*Date Entered	Date (mm/dd/yyyy)	Enter the date when you input the data.
6.7.2	*So far this federal fiscal year, how many people received a VH test using funds from this grant?	Open-ended numerical response	Enter the total number of people who received a VH test so far this federal fiscal year using CSAP/MAI funds.

ID	Data Item	Response Options	Guidance and Related Definitions
6.7.3	<p>*Of the total tested for VH mentioned above (i.e., total number of people who received a VH test using funds from the grant), how many were:</p>	<p>Open-ended numerical response for number of people who received a VH test using CSAP/MAI grant funds for each demographic category listed below:</p> <p><u>Gender</u></p> <ul style="list-style-type: none"> ▪ Female ▪ Male ▪ Transgender ▪ Unknown <p><u>Ethnicity</u></p> <ul style="list-style-type: none"> ▪ Hispanic ▪ Non-Hispanic ▪ Unknown <p><u>Race</u></p> <ul style="list-style-type: none"> ▪ African American or Black ▪ American Indian or Alaska Native ▪ Asian ▪ Native Hawaiian or Other Pacific Islander ▪ White ▪ More Than One Race ▪ Unknown <p><u>Age</u></p> <ul style="list-style-type: none"> ▪ Ages 12–17 ▪ Ages 18–24 ▪ 25 years or older ▪ Unknown <p><u>Homeless</u></p> <ul style="list-style-type: none"> ▪ Homeless or unstably housed <p><u>Test Information</u></p> <ul style="list-style-type: none"> ▪ Tested for the 1st time? ▪ Test Results Positive? ▪ Informed of VH Status? ▪ Tested positive and was referred to treatment? 	<p>Enter the total amount of grant dollars you spent on each item this reporting period. The system will automatically sum the categories to calculate the total grant dollars spent this reporting period.</p>

6.8 Viral Hepatitis (VH) Vaccination Implementation

Select "Edit this Record" to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.8.1	Date Entered	Date (mm/dd/yyyy)	Enter the date when you input the data.
6.8.2	So far this reporting period, how many people were referred for VH vaccination?	Open-ended numerical response	CSAP/MAI grantees are advised to skip this question as it is no longer applicable, since SAMHSA grant funds
6.8.3	Of the total for VH vaccinations mentioned above (i.e., total number of people who received a VH vaccination using funds from this grant), how many were:	<p>Open-ended numerical response for number of people who received a VH vaccination using CSAP/MAI grant funds for each demographic category listed below:</p> <p><u>Gender</u></p> <ul style="list-style-type: none"> ▪ Female ▪ Male ▪ Transgender ▪ Unknown <p><u>Ethnicity</u></p> <ul style="list-style-type: none"> ▪ Hispanic ▪ Non-Hispanic ▪ Unknown <p><u>Race</u></p> <ul style="list-style-type: none"> ▪ African American or Black ▪ American Indian or Alaska Native ▪ Asian ▪ Native Hawaiian or Other Pacific Islander ▪ White ▪ More Than One Race ▪ Unknown <p><u>Age</u></p> <ul style="list-style-type: none"> ▪ Ages 12–17 ▪ Ages 18–24 ▪ 25 years or older <p><u>Homeless</u></p> <p>Homeless or unstably housed</p>	<p>CSAP/MAI grantees are advised to skip this question as it is no longer applicable, since SAMHSA grant funds should not be used for VH vaccinations.</p>

6.9 Referrals for Services Not Funded by MAI Funds

Referrals are collected using the participant-level instrument.

6.10 Participant Outreach/Recruitment Activities

Complete this section separately for each outreach/recruitment activity conducted during the quarter. Select “Add Recruitment Activity” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.10.1	*Date Activity Started	Date (mm/dd/yyyy)	Enter the date when the activity started.
6.10.2	Date Activity Ended	Date (mm/dd/yyyy)	Enter the date when the activity ended.
6.10.3	*Activity Name	Open-ended text	Enter the activity name. Example: Testing counseling
6.10.4	*Activity Description	Open-ended text	Enter a description of the activity. Example: We recruited participants during HIV testing counseling sessions.
6.10.5	*During this quarter, how many people did you reach through these recruitment activities?	Open-ended numerical response	Enter the number of people that you reached through recruitment activities this quarter.

6.11 Promising Approaches and Innovations

Use this section to enter information on any promising approaches or innovations demonstrated during your implementation of the grant. Only update this section if you implemented new promising approaches or innovations during this reporting period.

ID	Data Item	Response Options	Guidance and Related Definitions
6.11.1	Promising Approach or Innovation Name	Open-ended text	Enter the name of the promising approach or innovation that you implemented.
6.11.2	Briefly describe the promising approach or innovation implemented	Open-ended text	Provide a brief description of the promising approach or innovation that you implemented.

6.12 Accomplishments and Barriers

Use this section to enter information on any Accomplishments and/or Barriers that you observed or experienced while performing activities related to Implementation. Select “Add Accomplishments/Barriers” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
6.12.1	*Type	<ul style="list-style-type: none"> ▪ Accomplishment ▪ Barrier 	Select whether you are entering an accomplishment or barrier from the drop-down menu.
6.12.2	*Accomplishment/Barrier Name	Open-ended text	Enter a name to identify the accomplishment or barrier. Example (Accomplishment): Group counseling Example (Barrier): Staff turnover

ID	Data Item	Response Options	Guidance and Related Definitions
6.12.3	*Description	Open-ended text	<p>Enter a brief description of the accomplishment or barrier.</p> <p>Example (Accomplishment): Group counseling sessions have been very effective. We received positive feedback from participants. One participant said, “These sessions have given me a support network I did not have before. Since I started with XYZ I am drinking less and I am more aware of the risks related to binge drinking. I have made positive lifestyle changes as a result of my participation. I’m no longer missing work because of my drinking and I have a different outlook on life. I could not have done it without XYZ.”</p> <p>Example (Barrier): We had a lot of staff turnover, which was a barrier to implementing the planned number of trainings.</p>

6.13 Conclusions and Recommendations

Grantees are encouraged to report any conclusions and recommendations that you reached while performing activities *related to Implementation*.

Select “Add Conclusion/Recommendation” to open this section. This section is not required.

ID	Data Item	Response Options	Guidance and Related Definitions
6.13.1	Date Identified	Date (mm/dd/yyyy)	Enter the date when you identified the conclusion or recommendation.
6.13.2	Conclusion/ Recommendation Name	Open-ended text	<p>Enter a name to identify the conclusion or recommendation.</p> <p>Example: Recommend providing direct service according to plan</p>

ID	Data Item	Response Options	Guidance and Related Definitions
6.13.3	Description of Conclusion/ Recommendation	Open-ended text	<p>Enter a detailed description of the conclusion or recommendation.</p> <p>Example: We recommend implementing a direct service according to plan. We were unable to implement the planned number of trainings due to staff turnover, therefore we did not achieve our intended outcomes.</p>

7. Evaluation

The Evaluation step is comprised of conducting, analyzing, reporting, and using the results of outcome evaluation. The outcome evaluation involves collecting and analyzing information about whether you achieved the intended goals and objectives. Evaluation results identify areas where you may need modifications to prevention strategies and you can use the results to help plan for sustaining the prevention effort as well as future endeavors.

When: Grantees must complete the Evaluation section at least once during the Evaluation phase and update the section as needed.

7.1 Evaluation Plan

In the Evaluation Plan section, grantees can upload documents related to their Evaluation Plan. Select “Upload Files” to open this section.

D	Data Item	Response Options	Guidance and Related Definitions
7.1.1	*Upload/ Attach Evaluation Plan	File upload	Under “File Description,” enter a brief file name to describe the document. To upload a copy of your grant’s evaluation plan, go to “Upload a file” and select “Browse” to locate the file on your computer. Choose the file, then select “Upload.” Select “Save” to complete the upload.
7.1.2	Upload/Attach Supporting Documents	File upload	Upload any supporting documents related to your grant’s evaluation plan. To upload additional documents, select “Upload Files.” Under “Upload a file,” select “Browse,” choose the file from your computer, select “Upload,” and then select “Save.” Repeat the process for each file you would like to upload.

7.2 Evaluation Report

In the Evaluation Report section, grantees can upload documents related to their Evaluation Report. Select “Upload Files” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
7.2.1	*Upload/Attach Evaluation Report	File upload	Under “File Description,” enter a brief file name to describe the document. To upload a copy of your grant’s evaluation report, go to “Upload a file” and select “Browse” to locate the file on your computer. Choose the file, then select “Upload.” Select “Save” to complete the upload. Grantees whose grant is ending should also upload a copy of their closeout report in this section.
7.2.2	*Is this Evaluation Report a draft or final version?	<ul style="list-style-type: none"> ▪ Draft ▪ Final Version 	Select a response to indicate whether the evaluation report is a draft or a final version.
7.2.3	Upload/Attach Supporting Documents	File upload	<p>Upload any supporting documents related to your grant’s evaluation report. To upload additional documents, select “Upload Files.” Under “Upload a file,” select “Browse,” choose the file from your computer, select “Upload,” and then select “Save.” Repeat the process for each file you would like to upload.</p> <p>Note: Enter outcome data for your indirect services in the “MAI HIV Indirect Services Outcomes Reporting Tool.”</p>

7.3 Accomplishments and Barriers

Complete this section separately for each accomplishment or barrier *related to evaluation*. Select “Add Accomplishments/Barriers” to open this section.

ID	Data Item	Response Options	Guidance and Related Definitions
7.3.1	*Type	<ul style="list-style-type: none"> ▪ Accomplishment ▪ Barrier 	In the drop-down menu, indicate whether you are entering an accomplishment or barrier.
7.3.2	*Accomplishment/Barrier Name	Open-ended text	Enter a name to identify the accomplishment or barrier. Example (Accomplishment): Evaluation planning Example (Barrier): Challenge completing evaluation of all goals
7.3.3	*Description	Open-ended text	Provide a brief description of the accomplishment or barrier that your grant experienced while performing activities related to evaluation. Example (Accomplishment): We planned for evaluation throughout the project and ensured that we collected accurate data on an ongoing basis. Example (Barrier): Completing our full evaluation plan is delayed as we await additional data.

7.4 Conclusions and Recommendations

Grantees are encouraged to use this section to record any conclusions or recommendations *related to evaluation*. Select “Add Conclusion/Recommendation” to open this section. This section is not required.

ID	Data Item	Response Options	Guidance and Related Definitions
7.4.1	Date Identified	Date (mm/dd/yyyy)	Enter the date when you identified the conclusion or recommendation.

7.4.2	Conclusion/ Recommendation Name	Open-ended text	Enter a name to identify the conclusion or recommendation. Example: Evaluation planning recommendation
7.4.3	Description of Conclusion/ Recommendation	Open-ended text	Enter a detailed description of the conclusion or recommendation related to evaluation. Example: When planning evaluation include alternative timeline to account for potential staff turnover.

7.5 Closeout Evaluation Report

This section is only required at closeout. As you complete your closeout evaluation report, consider how your interventions addressed the goals of MAI. Think about key areas such as capacity building, substance abuse prevention, HIV/VH prevention, reducing health disparities, etc. Be sure to include information on anything that was interesting or surprising about your findings. Were there any implementation issues that could explain your findings? How about contextual, population, and other variables? Are there any questions that these findings raise? What are the implications of these findings? As you answer the questions below, please be sure to make a logical connection between evaluation findings and conclusions/recommendations. This is an opportunity for SAMHSA to learn about your project and to use evaluation findings for future efforts. Please feel free to upload pamphlets, flyers, and success stories from your program.

ID	Data Item	Response Options	Guidance and Related Definitions
7.5.1	What were your key accomplishments, strengths, or special achievements?	Open-ended text	Describe your project's key accomplishments, strengths, and any special achievements.
7.5.2	Describe any major problems, issues, challenges, or barriers you encountered.	Open-ended text	Describe any major challenges your project encountered.

ID	Data Item	Response Options	Guidance and Related Definitions
7.5.3	Describe your dissemination strategies.	Open-ended text	Describe your project's dissemination strategies.
7.5.4	What actions have you taken to ensure sustainability after your federal MAI grant funding ends?	Open-ended text	Describe your project's sustainability planning efforts.
7.5.5	What were your lessons learned and/or what suggestions do you have for us to improve MAI going forward?	Open-ended text	Describe any lessons learned and recommendations for improving the MAI program.
7.5.6	Upload/Attach Supporting Documents	File upload	Upload any supporting documents that you may have.

Appendix A: Direct Service Intervention Name List

- Across Ages
- Alcohol Literacy Challenge (ALC)
- AlcoholEdu for High School
- All Stars
- American Indian Life Skills Development/Zuni Life Skills Development
- AMIGAS
- Assisting in Rehabilitating Kids (ARK)
- Be Proud! Be Responsible!
- Becoming a Responsible Teen (BART)
- Border Binge Drinking Reduction (environmental)
- Brief Alcohol Screening and Interventions for College Students (BASICS)
- Brief Strategic Family Therapy (BSFT)
- Building Assets - Reducing Risks (BARR)
- CASA Striving Together to Achieve Rewarding Tomorrows (CASASTART)
- CAST (Coping and Support Training)
- Challenging College Alcohol Abuse (environmental)
- CHAT Intervention
- Class Action
- Choosing Life: Empowerment, Action, Results! (CLEAR)
- Color It Real
- Communities Mobilizing for Change on Alcohol (environmental)
- Community Trials Intervention to Reduce High Risk Drinking (environmental)
- Comparative Risk Counseling Services (CRCS)

- Connect
- Connect 2
- Connect - Couples
- Connect - Woman Alone
- ¡Cuidate!
- Coping with Work and Family Stress
- Creating Lasting Family Connections/Creating Lasting Connections
- d-up: Defend Yourself!
- FamiliasUnidas
- Families and Schools Together (FAST)
- Family Matters
- Focus on the Future
- Focus on Youth + ImPACT
- Guiding Good Choices
- Healer Women Fighting Disease (HWFD)
- Healthy Love
- Healthy Relationships
- Healthy Workplace
- Hip-Hop 2 Prevent Substance Abuse and HIV (H2P)
- Holistic Health Recovery Program (HHRP)
- InShape
- Joven Noble
- Keep a Clear Mind (KACM)
- Keepin' It REAL

- Life Skills Training
- Lions Quest Skills for Adolescence
- Living in Balance
- Many Men, Many Voices
- Modelo de Intervencion Program (MIP)
- Motivational Enhancement Therapy (MET)
- Motivational Interviewing
- Mpowerment
- Nia
- NIDA Community Outreach Model
- Parenting Wisely
- Partnership for Health
- Popular Opinion Leader
- Positive Action
- PRIME for Life
- Program to Encourage Active, Rewarding Lives for Seniors (PEARLS)
- Project AIM
- Project ALERT
- Project IMAGE
- Project Northland
- Project START
- Project SUCCESS
- Project Towards No Drug Abuse
- Project Venture

- Peers Reaching Out and Modeling Intervention Strategies (PROMISE)
- Protecting You/Protecting Me
- Protocol-Based HIV Counseling and Testing (PBC)
- Real AIDS Prevention Project (RAPP)
- Reconnecting Youth: A Peer Group Approach to Building Life Skills (RY)
- RESPECT
- Right Decisions, Right Now: Be Tobacco Free (RDRN)
- Safe Dates
- Safe in the City
- Safety Counts
- Salud, Educacion, Prevencion y Autocuidado (SEPA)
- Say It Straight (SIS)
- Screening, Brief Intervention, and Referral to Treatment (SBIRT)
- Seeking Safety
- Self-Help in Eliminating Life-Threatening Diseases (SHIELD)
- Sisters Informing Healing Living and Empowering (SIHLE)
- Sisters Informing Sisters about Topics on AIDS (SISTA)
- Sister to Sister
- SPORT
- Stars for Families
- Storytelling for Empowerment
- Street Smart
- Strengthening Families Program
- Team Awareness

- Teen Health Project
- The Future is Ours
- Together Learning Choices (TLC)
- Too Good for Drugs
- Training for Intervention ProcedureS (TIPS)
- Video Opportunities for Innovative Condom Education and Safer Sex (VOICES/VOCES)
- Wellness Outreach at Work
- Women Involved in Life Learning from Other Women (WILLOW)
- Other
- Invalid Data