

Georgia Sexual Violence Prevention Program 2024-2025 Evaluation and Performance Measurement Plan

Chronic Disease Prevention Section Medical and Clinical Service Division Georgia Department of Public Health



Program Evaluation Plan

The Georgia Sexual Violence Prevention Program (GASVPP)

Prepared by:

Heidi Scherer Kennesaw State University - External Evaluator.

In Collaboration with

Vanessa Corona - Program Lead, Julian Serracin - Program Manager, Sarah Wilkinson - Deputy Director, Emma Bicego - Sr Deputy Director, and Kia Toddle - Director and Principal Investigator. Georgia Department of Public Health

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Section 1. Program Description: Provide a brief narrative that describes the overall efforts or big-picture goals of your NOFO efforts, including a brief description of your planned implementation activities.

State-level statistics provide overwhelming evidence that sexual violence (SV) is a severe yet preventable public health problem in Georgia (see e.g., Georgia Bureau of Investigation, 2023). While data indicates that SV adversely impacts individuals across all socio-demographic characteristics, there is also evidence that risk of SV is non-randomly distributed with certain populations and geographic regions experiencing a disproportionate and elevated risk of sexual violence (see e.g., Bureau of Justice Statistics, 2023). With funding and technical support from the CDC (CE-24-0027: Rape Prevention and Education), the Georgia Sexual Violence Prevention Program (GASVPP), also referred to as the Rape Prevention and Education Program, will implement a comprehensive prevention plan to impact SV across the state.

Starting in the first year of this funding cycle, there are several primary activities being implemented. To build infrastructure and increase the capacity for SV prevention, GASVPP will be engaging in various activities and trainings focused on increasing knowledge and skills of SV prevention among staff and key program partners, as well as opportunities to promote learning and collaboration among community members. To strengthen and improve Georgia's existing State Action Plan, GASVPP staff and key program partners – including the state's SV coalition, the Georgia Network to End Sexual Assault (GNESA) – will collaborate regularly to plan, prioritize, and establish the most effective SV prevention approaches to implement across the state. To strengthen economic supports for priority populations in Georgia, GASVPP will partner with local sexual assault centers (SACs) in high-risk areas to provide training/workshops to address needs in the community related, but not limited to, housing, food, and financial insecurities. To create protective environments, SACs, along with other organizations in their community (i.e., community task forces), will conduct community needs assessments to inform the creation and implementation of programming for priority populations in their communities that address one or more of the following areas: Improving School Climate and Safety, Improving Organizational Environments, Reducing Exposure to Community Level Risk, and Modifying the Physical and Social Environment. Three primary prevention strategies will be implemented that focus on promoting social norms that protect against violence. To empower girls, engage boys as allies, and promote healthy relationships, Athletes as Leaders (AAL) and Coaching Boys Into Men (CBIM) – complimentary evidence-based program – will be implemented at Georgia Recreation and Parks Association sites and high schools throughout the state. In addition, Public Health Districts will be responsible for implementing the Step Up. Step In. (SUSI) awareness cam

GASVPP is committed to ensuring that resources are allocated to implement programming among priority populations in the state. To meet this end, decisions related to selecting programming and community partners is informed by analyses of community-level data that identify counties and populations in the state that have the highest risks/greatest needs related to rates of SV, risk and protective factors of SV, and social/structural determinants of health (SDOH) inequalities. In Year 1, SACs, community task forces, AAL, CBIM, and SUSI all include target populations or high-risk locations (e.g., counties, schools) in their programming and initiatives.

Through the implementation of programs and approaches to increase SV protective factors, decrease SV risk factors, and address SDOH inequalities, GASVPP aims to make long-term positive changes in the state. These long-term goals include the reduction of social/structural determinants of health inequalities that impact SV disparities and rates at the state-level and among populations that have been identified as being at an increased risk of experiencing sexual violence.

Section 2. Evaluation Purpose: Provide a clear and concise explanation of the evaluation's scope and focus/goal, with reasoning behind the timeframe and needs.

Evaluation plays a central role in organizational learning, program planning, decision-making, and measurement of outcomes and thus is central to GASVPP's efforts to reduce sexual violence in the state. For this funding cycle, GASVPP has used the CDC Framework for Evaluation in Public Health and resources from the VetoViolence EvaluACTION to devise an evaluation to assess the state's SV prevention efforts. The primary purpose of this evaluation is to monitor the activities led by GASVPP and the state-wide implementation of various evidence-based programming and community interventions and conduct process and outcome evaluations to examine the fidelity and effectiveness of these efforts. The evaluation will use a mixed methods approach that involves quantitative and qualitative methodologies to 1) identify indicators of SV and SDOH that can lead to disparities in SV rates across populations and communities; 2) collect and analyze data from activities, programs, and initiatives; and 3) use data and findings to inform continuous program improvement.

Through this evaluation, the state aims to gain knowledge on whether and in what capacity GASVPP efforts have been successful in the state including building infrastructure for SV prevention, developing and enhancing the state action plan, implementing SV prevention approaches, and using data to inform action. Specifically, the state aims to learn whether efforts have impacted short-term and intermediate outcomes from the NOFO and state logic model including increases in capacity for SV prevention, coordination with partners across the state, high-quality program implementation, positive change in risk and protective factors of SV, and data monitoring to inform decision-making. Further, through evaluation activities GASVPP hopes to gain an understanding of whether SV prevention activities have impacted the long-term outcomes to decrease rates of SV in priority populations and statewide and reduced inequalities in SDOH that impact SV rates.

Data-informed decision-making is fundamental to GASVPP's SV prevention efforts in Georgia and data from this evaluation will be used to provide real-time insights into program effectiveness and other relevant metrics that can inform strategic planning and the continuous improvement of programming. In particular, findings from analyses of county-level data provides rankings of the 159 counties in Georgia to identify areas with the greatest needs regarding rates of SV, risk and protective factors of SV, and SDOH. This data will be used by GASVPP to help identify areas in the state to target prevention and by program partners to better understand the needs of their communities. Further, data from the process and outcome evaluations of programs will be used by GASVPP to assess the fidelity of program implementation and program effectiveness which will inform decision-making. Additionally, data collected on state capacity and partner collaboration will be used by GASVPP and key program partners to gain a greater understanding of successes and challenges that can promote continuous quality improvement. Findings from the GASVPP evaluation activities will be regularly disseminated to program partners via multiple communication methods, such as presentations at meetings, academic and professional conferences, and written documents, such as evaluation reports, briefs, and infographics.

Engaging and collaborating with program and multisector partners in the evaluation process is important to ensuring buy-in, support, and usefulness of evaluation at the stateand local-level. Given the importance of strong collaboration at the state-level, key strategic program partners will be engaged at multiple levels of the evaluation. First, program partners will meet regularly through the advisory board to provide strategic input into the State Action Plan and the Evaluation Plan and will provide feedback on GASVPP activities that can inform continual improvement of the evaluation process. In addition, program partners will be directly involved in the collection of data through evaluation activities such as completing progress reports and pretest/posttest surveys. Each year at the completion of program activities, GASVPP will also involve program partners in the review and dissemination of evaluation findings to seek input from them regarding how to enhance or improve program activities and what new initiatives or data collection instruments may be incorporated in the upcoming year. Because the state evaluation plan is a living document that can be changed and improved over time to better meet state needs, program partners will also be involved in its annual review to identify targeted recommendations and action steps and make evidence-based decisions that can lead to programmatic changes to enhance program quality, effectiveness, and efficiency.

Evaluation Questions:

The following list includes the primary evaluation questions to be addressed in this evaluation.

- Question 1: To what extent has the recipient accomplished the short- term and intermediate outcomes in the NOFO logic model?
- Question 2: To what extent has the recipient increased internal and partner capacity to facilitate/monitor the implementation of SV prevention strategies and promote health equity?
- Question 3: To what extent has the recipient leveraged multisector partnerships and resources toward SV prevention?
- Question 4: To what extent has the recipient implemented strategies that address SDOH?
- Question 5: To what extent has the recipient achieved high-quality implementation of SV prevention strategies that increase health equity at the community- and societal-levels?
- Question 6: To what extent has the recipient increased use of data-driven decision making, as well as state/territory- and community-level monitoring of trends, related to SV prevention and SDOH?
- Question 7: Which factors are critical for implementing selected prevention strategies and approaches?
- Additional evaluation questions may be added as programming evolves.

Section 3. Evaluation Activities: Description of Alignment of Evaluation with NOFO Strategies and Activities

This evaluation will include activities that gauge progress across all four of the NOFO strategies.

First, to gain an understanding of whether there was improvement in short-term and intermediate outcomes for building infrastructure for SV prevention, this evaluation will collect administrative data to identify what activities the state has engaged in to increase capacity to implement SV prevention. Specifically, program documentation from GASVPP staff, evaluation team members, program partners, and sub-recipients on conference/webinar registrations, certificates for trainings, and relevant information from workplans and contracts will be monitored to examine what activities have been engaged in that strengthen infrastructure for state-wide prevention efforts. To increase capacity to promote and incorporate health equity program activities relevant to SV prevention among partnering organizations, GASVPP will collect data on such indicators as the number of SV prevention and health equity webinars and accessible training events that are promoted to partners. Participation in these types of activities should help program partners better understand how to identify community needs and devise ways to address them.

Second, evaluation activities will also be incorporated into assessing the enhancement of the State Action Plan (SAP) and achievement of corresponding shortterm and intermediate outcomes. This evaluation will collect administrative data from program documentation on indicators related to partner and stakeholder engagement in the advisory board meetings where attendees from GASVPP, GNESA, and other key partners throughout the state will collaborate to provide input on the SAP, as well as data related to the amount of resources provided to partners on the state's prevention efforts and the number of individuals/ organizations that are participating in learning collaborative meetings. Together these activities and their corresponding indicators should provide GASVPP with a better understanding of how multi-sectoral partners worked together to decrease SV in Georgia.

Third, this evaluation will engage in a wide range of activities related to the collection and analysis of qualitative and quantitative data to gauge the effectiveness of the various program implementation. In order to analyze process evaluation data, this evaluation will collect data using a consistent and comprehensive format for progress reporting for each program (SUSI, CBIM, AAL, SACs, and Community Task Forces). These progress reports will collect information related to program fidelity (e.g., number of

sessions/meetings, topics covered, factors critical to program implementation, successes achieved, and challenges encountered) and information regarding what specific

activities were implemented to impact SDOHs and risk and protective factors of SV. To evaluate whether the selected SV prevention strategies led to improvements in targeted SV risk and protective factors, an outcome evaluation will be conducted that involves the collection and analysis of pretest and postest data by program participants including coaches and athletes (AAL and CBIM) and middle and high school students (SUSI).

Fourth, this evaluation will expand GASVPP's existing efforts to systematically monitor and track state-level indicators of SV outcomes and risk and protective factors in Georgia. Specifically, during this funding cycle, GASVPP will also monitor multiple measures of SDOH at the community-level (e.g., county-level) to identify priority populations in the state. Indicator data from multiple, periodically updated sources have been identified that will be used to examine trends over time at the state-level and gauge how Georgia compares to other states regarding rates of SV and the multifaceted risk, protective, and health-related factors that contribute to it. Annually, this data will be analyzed with hot spot mapping analyses to identify which of the 159 counties in Georgia experience a disproportionate burden of SV, risk factors of SV, and SDOH. In turn, this data will be used by GASVPP to identify priority populations and target SV prevention efforts among these at-risk populations and locations in the state. In addition to informing decision-making of GASVPP and the subsequent outreach to build new partnerships in these priority areas, analysis of this data will also be shared with program partners to help inform their efforts to understand the needs of the communities they serve.

Section 4: Outcomes and Indicators: For each outcome measured, compile and present the comprehensive details below within Table 1, ensuring all details align with each other.

#1 1)	Associated Effort(s)	🗹 Goal 1 🛛 Goal 2 🗇 Goal 3 🗇 Goal 4 🗇 Other
(1.	Evaluation Questions Addressed	□ Question 1 ☑ Question 2 □ Question 3 □ Question 4 □ Question 5 □ Question 6 ☑ Question 7
(1.1)	Description of Outcome	Increased capacity of the state health department to implement and evaluate primary prevention of SV at the community- and societal-levels
	Туре	🗹 Process 🗆 Program/ Policy Specific 🗆 Risk Factor 🗋 Protective Factor 🗆 Violence Outcome 🗆 NOFO Level 🗆 Other
	Indicator Title and Description #1	Number of SV prevention and/or evaluation webinars, accessible training events, and academic conference presentations attended by GASVPP staff and evaluation team
	Data Source Type	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description	Program documentation including webinar and training announcements and distribution records
	Indicator Population	GASVPP staff and evaluation team members
	Baseline Value	☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing
	Current Value	☑ Number: 0 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 12 □Percent: □Proportion: □Other:
	and evaluation team (N = 6). These events may inclu	
	Progress Notes [500] Data for this indicator will be co and evaluation team (N = 6). These events may inclu prevention and/or evaluation.	ollected via the monthly TTA updates. The Y5 target estimate is based on bimonthly participation in learning events by the RPE (N = ude internal (DPH, CDC, KSU) or external events that are focused specifically on new knowledge and/or skills on sexual violence
(1.2)	Progress Notes [500] Data for this indicator will be co and evaluation team (N = 6). These events may inclu	ollected via the monthly TTA updates. The Y5 target estimate is based on bimonthly participation in learning events by the RPE (N =
(1.2)	Progress Notes [500] Data for this indicator will be co and evaluation team (N = 6). These events may inclu prevention and/or evaluation. Associated Effort(s)	Image: Starting of the starting
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(1.2)	Progress Notes [500] Data for this indicator will be co and evaluation team (N = 6). These events may inclu- prevention and/or evaluation. Associated Effort(s) Evaluation Questions Addressed Description of Outcome	Image: State of the state
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(1.2)	Progress Notes [500] Data for this indicator will be co and evaluation team (N = 6). These events may inclu prevention and/or evaluation. Associated Effort(s) Evaluation Questions Addressed Description of Outcome Type Indicator Title and Description #1	 Delected via the monthly TTA updates. The Y5 target estimate is based on bimonthly participation in learning events by the RPE (N = ude internal (DPH, CDC, KSU) or external events that are focused specifically on new knowledge and/or skills on sexual violence Goal 1 Goal 2 Goal 3 Goal 4 Other Question 1 Question 2 Question 3 Question 4 Question 5 Question 6 Question 7 Increased capacity among partnering organizations to promote and incorporate health equity program activities relevant to SV prevention Process Program/ Policy Specific Risk Factor Protective Factor Violence Outcome NOFO Level Other Number of SV prevention and/or health equity webinars and accessible training attended by partners Needs Assessment Surveillance Data Law Enforcement Data Hospital Data Surveys Interviews
(1.2)	Progress Notes [500] Data for this indicator will be co and evaluation team (N = 6). These events may inclu- prevention and/or evaluation. Associated Effort(s) Evaluation Questions Addressed Description of Outcome Type Indicator Title and Description #1 Data Source Type	Image: State of the state
(1.2)	Progress Notes [500] Data for this indicator will be co and evaluation team (N = 6). These events may inclu- prevention and/or evaluation. Associated Effort(s) Evaluation Questions Addressed Description of Outcome Type Indicator Title and Description #1 Data Source Type Data Source Name and Description	☑ Goal 1 □ Goal 2 □ Goal 3 □ Goal 4 □ Other □ Question 1 ☑ Question 2 □ Question 3 □ Question 4 □ Question 5 □ Question 6 ☑ Question 7 Increased capacity among partnering organizations to promote and incorporate health equity program activities relevant to SV prevention ☑ Process □ Program/ Policy Specific □ Risk Factor □ Protective Factor □ Violence Outcome □ NOFO Level □ Other Number of SV prevention and/or health equity webinars and accessible training attended by partners □ □ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): □ Program documentation including webinar and training announcements and distribution records □ □
(1.2)	Progress Notes [500] Data for this indicator will be considered and evaluation team (N = 6). These events may inclusive prevention and/or evaluation. Associated Effort(s) Evaluation Questions Addressed Description of Outcome Type Indicator Title and Description #1 Data Source Type Data Source Name and Description Indicator Population	 Dilected via the monthly TTA updates. The Y5 target estimate is based on bimonthly participation in learning events by the RPE (N = ude internal (DPH, CDC, KSU) or external events that are focused specifically on new knowledge and/or skills on sexual violence Goal 1 Goal 2 Goal 3 Goal 4 Other Question 1 Question 2 Question 3 Question 4 Question 5 Question 6 Question 7 Increased capacity among partnering organizations to promote and incorporate health equity program activities relevant to SV prevention Process Program/ Policy Specific Risk Factor Protective Factor Violence Outcome NOFO Level Other Number of SV prevention and/or health equity webinars and accessible training attended by partners Needs Assessment Surveillance Data Law Enforcement Data Hospital Data Surveys Interviews Focus Groups Administrative Data National Data State-level Data Other (not listed): Program documentation including webinar and training announcements and distribution records Partner providers and sub-recipients
(1.2)	Progress Notes [500] Data for this indicator will be considered and evaluation team (N = 6). These events may inclusive prevention and/or evaluation. Associated Effort(s) Evaluation Questions Addressed Description of Outcome Type Indicator Title and Description #1 Data Source Type Data Source Name and Description Indicator Population Baseline Value	Delected via the monthly TTA updates. The Y5 target estimate is based on bimonthly participation in learning events by the RPE (N = ude internal (DPH, CDC, KSU) or external events that are focused specifically on new knowledge and/or skills on sexual violence Image: Content of the external events that are focused specifically on new knowledge and/or skills on sexual violence Image: Content of the external events that are focused specifically on new knowledge and/or skills on sexual violence Image: Content of Content of the external events that are focused specifically on new knowledge and/or skills on sexual violence Image: Content of Content of Content of the external events that are focused specifically on new knowledge and/or skills on sexual violence Image: Content of Conten of Conten of Content of Content of Content of Content

	Associated Effort(s)	🗆 Goal 1 🗹 Goal 2 🗆 Goal 3 🗆 Goal 4 🗆 Other
Outcome #3 (2.1)	Evaluation Questions Addressed	□ Question 1 □ Question 2 ☑ Question 3 □ Question 4 □ Question 5 □ Question 6 ☑ Question 7
))	Description of Outcome	Increased partner participation and awareness of Georgia's efforts to prevent SV
utc	Туре	☑ Process □ Program/ Policy Specific □ Risk Factor □ Protective Factor □ Violence Outcome □ NOFO Level □ Other
0	Indicator Title and Description #1	Percent of organizations attending all of the RPE advisory board meetings
l	Data Cauraa Tura	🗆 Needs Assessment 🗆 Surveillance Data 🗀 Law Enforcement Data 🗀 Hospital Data 🗀 Surveys 🗀 Interviews
	Data Source Type	🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🗀 State-level Data 🗀 Other (not listed):
	Data Source Name and Description	Program documentation including meeting minutes and records
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	□ Number: ☑ Percent: 0 (has not been previously tracked) □Proportion: □Other: □ Data are missing
	Current Value	□ Number: ☑ Percent: 0 □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□ Number: ☑ Percent: 80% □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗆 Goal exceeded 🗹 Unknown 🗅 Data missing
	Progress Notes [500] Data for this indicator will be co	llected from meeting attendance records. Organizations required to attend advisory board meetings include partnering health
	districts (SUSI), community task forces, sexual assault	t centers, Georgia Recreation and Parks Association (CBIM & AAL), and partnering high schools (CBIM & AAL).
#4 2)	Associated Effort(s)	🗆 Goal 1 🗹 Goal 2 🗆 Goal 3 🗆 Goal 4 🗆 Other
ne #4 (2.2)	Evaluation Questions Addressed	☑ Question 1 ☑ Question 2 ☑ Question 3 □ Question 4 □ Question 5 □ Question 6 ☑ Question 7
Outcome (2	Description of Outcome	Increased partner awareness of effective primary prevention strategies and the disparate burden of SV
no	Туре	☑ Process □ Program/ Policy Specific □ Risk Factor □ Protective Factor □ Violence Outcome □ NOFO Level □ Other
	Indicator Title and Description #1	Number of resources (e.g., informative emails, infographics, statistics, dashboards) distributed to partners that include
		information/guidance on SV prevention and/or health equity
	Data Source Type	🗆 Needs Assessment 🛛 Surveillance Data 🗋 Law Enforcement Data 🗋 Hospital Data 🗋 Surveys 🗋 Interviews
		□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description	Program documentation including resource distribution records (e.g., emails, listservs)
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	☑ Number: 0 (has not been previously tracked) □Percent: □Proportion: □Other: □ Data are missing
	Current Value	☑ Number: 0 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 12 □Percent: □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🛛 No change 🗋 Moving toward goal 🗖 Goal met 🖓 Goal exceeded 🗹 Unknown 🗋 Data missing
	• • •	ollected via a monthly data collection instrument completed by RPE to track and monitor activities. The Y5 estimate is based on
		on SV prevention and/or health equity. These resources could include internal documents related to GA RPE program evaluation
		nal resources about SV prevention from local, state, or national organizations.
ie #5 (2.3)	Associated Effort(s)	🗆 Goal 1 🗹 Goal 2 🗆 Goal 3 🗆 Goal 4 🗆 Other
me (2	Evaluation Questions Addressed	Question 1 🗹 Question 2 🗹 Question 3 🗆 Question 4 🗆 Question 5 🗆 Question 6 🗹 Question 7
Outcom	Description of Outcome	Increased coordination and collaboration opportunities among partners, health departments, the Georgia Network to End Sexual
õ	Time	Assault (GNESA), representatives from underserved communities and other sectors to prevent SV
	Туре	☑ Process □ Program/ Policy Specific □ Risk Factor □ Protective Factor □ Violence Outcome □ NOFO Level □ Other
	Indicator Title and Description #1	Number of peer-learning/collaborative meetings for sub-recipients, program partners, and community organizations
	Data Source Type	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews
		🗆 Focus Groups 🗹 Administrative Data 🗋 National Data 🗋 State-level Data 🗍 Other (not listed):

	Data Source Name and Description	Program documentation including meeting minutes, agendas, and records
	Indicator Population	Partner providers, sub-recipients, GNESA, and GASVPP staff
	Baseline Value	☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing
	Current Value	☑ Number: 0 □Percent: □Proportion: □Other: □ □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 4 □Percent: □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	
	Progress Notes [500] Data for this indicator will be co	plected via a monthly data collection instrument completed by RPE to track and monitor activities. The Y5 estimate is based on peer-
	• • •	d on a quarterly basis throughout the year. This indicator can include any events or meetings where multiple program partners (2+)
	are in attendance with the goal of learning from and	with each other. This could include events with either internal (DPH, program partners) or external speakers.
f6 1)	Associated Effort(s)	🗆 Goal 1 🗆 Goal 2 🗹 Goal 3 🗆 Goal 4 🗆 Other
Outcome #6 (3.11)	Evaluation Questions Addressed	🗹 Question 1 🗆 Question 2 🗹 Question 3 🗹 Question 4 🗹 Question 5 🗆 Question 6 🗆 Question 7
cor	Description of Outcome	Increased community-level implementation of SV prevention strategies
Out	Туре	□ Process ☑ Program/ Policy Specific □ Risk Factor □ Protective Factor □ Violence Outcome □ NOFO Level □ Other
	Indicator Title and Description #1	Number of sub-recipients implementing at least one community-level approach
	Data Source Ture	🗆 Needs Assessment 🛛 Surveillance Data 🖓 Law Enforcement Data 🖓 Hospital Data 🖓 Surveys 🖓 Interviews
	Data Source Type	🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🗀 State-level Data 🗀 Other (not listed):
	Data Source Name and Description	Program documentation including workplans and contracts
	Indicator Population	Partner providers and sub-recipients implementing community-level approaches
	Baseline Value	☑ Number: 17 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Current Value	☑ Number: 17 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 21 □Percent: □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗆 Goal exceeded 🗹 Unknown 🗆 Data missing
	Progress Notes [500] Year 1 sub-recipients implement	ting community-level approaches include: 5 community task forces, 6 SACs, and 6 health districts.
#7 2)	Associated Effort(s)	🗹 Goal 1 🗆 Goal 2 🗹 Goal 3 🗆 Goal 4 🗆 Other
Outcome #7 (3.2)	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 ☑ Question 4 ☑ Question 5 □ Question 6 □ Question 7
tcor	Description of Outcome	Increased implementation of prevention strategies among priority populations
no	Туре	🗆 Process 🗹 Program/ Policy Specific 🛛 Risk Factor 🗋 Protective Factor 🗍 Violence Outcome 🗌 NOFO Level 🗋 Other
	Indicator Title and Description #1	Percent of sub-recipients that are implementing SV prevention in counties identified as high-risk by mapping analysis
	Data Source Type	🗆 Needs Assessment 🛛 Surveillance Data 🗋 Law Enforcement Data 🖓 Hospital Data 🖓 Surveys 🖓 Interviews
	Data Source Type	🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🛛 State-level Data 🗔 Other (not listed):
	Data Source Name and Description	Program documentation including workplans and contracts and data from mapping analysis
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	□Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □Proportion: □Other: □ Data are missing
	Current Value	□Number: 🗹 Percent: 0 □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□Number: ☑ Percent: 50% □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🛛 No change 🗆 Moving toward goal 🖓 Goal met 🖓 Goal exceeded 🗹 Unknown 🗅 Data missing
	Indicator Title and Description #2	Percent of AAL, SUSI, and CBIM programming implemented at high-risk schools.
	Data Source Type	🗆 Needs Assessment 🛛 Surveillance Data 🗋 Law Enforcement Data 🗋 Hospital Data 🖾 Surveys 🗋 Interviews
		🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🗆 State-level Data 🗆 Other (not listed):
	Data Source Name and Description	Program documentation including workplans and contracts and data from the Governor's K-12 Report Card

Baseline Value		Indicator Population	Partner providers and sub-recipients
Qurrent Value Number: % Percent: 0 [Proportion: Other:			□Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □Proportion: □Other: □ Data are missing
Year Straget Number: [®] Percent: 50% largeprint::::::::::::::::::::::::::::::::::::	-	Current Value	
Change in Outcome Since Last Reporting Period Moving away from goal No kinge in Moving toward goal Goal meet Moving toward goal Goal meet Goal meet Goal meet Moving toward goal Goal meet		Year 5 Target	
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Year 5 Target ✓ Number: 10 Percent: Proportion: Other:		Baseline Value	☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing
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Indicator Title and Description #1 Number of sub-recipients who completed a community needs assessment Data Source Type	#9 1)	Associated Effort(s)	🗆 Goal 1 🛛 Goal 2 🗇 Goal 3 🗹 Goal 4 🗋 Other
Indicator Title and Description #1 Number of sub-recipients who completed a community needs assessment Data Source Type	ne # (4.	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 □ Question 4 □ Question 5 ☑ Question 6 ☑ Question 7
Indicator Title and Description #1 Number of sub-recipients who completed a community needs assessment Data Source Type	tcor	Description of Outcome	Increased access to and use of data to understand inequalities among priority populations
Indicator Title and Description #1 Number of sub-recipients who completed a community needs assessment Data Source Type	Out	Туре	☑ Process ☐ Program/ Policy Specific ☐ Risk Factor ☐ Protective Factor ☐ Violence Outcome ☐ NOFO Level ☐ Other
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		Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 📄 Goal exceeded 🗹 Unknown 🗅 Data missing
Associated Effort(s) Goal 1 Goal 2 Goal 3 Goal 4 Other Evaluation Questions Addressed V Question 1 Question 2 Question 3 Question 5 Question 5 Question 6 Question 7		Progress Notes [500] Data from task force (N=5) and	SAC (N=6) progress reports will be used to collect this information.
5 5 Evaluation Questions Addressed	ie 2)	Associated Effort(s)	🗆 Goal 1 🗆 Goal 2 🗆 Goal 3 🗹 Goal 4 🗆 Other
	com (4.2	Evaluation Questions Addressed	☑ Question 1 ☑ Question 2 □ Question 3 □ Question 4 □ Question 5 ☑ Question 6 □ Question 7
Description of Outcome Increased monitoring and evaluation activities and sharing of data related to SV prevention	Dut(#10	Description of Outcome	

	Туре	☑ Process ☐ Program/ Policy Specific ☐ Risk Factor ☐ Protective Factor ☐ Violence Outcome ☐ NOFO Level ☐ Other
	Indicator Title and Description #1	Number of times (meetings, emails, etc.) evaluation data findings/results are shared with partners
	Data Source Type	🗆 Needs Assessment 🛛 Surveillance Data 🖾 Law Enforcement Data 🖾 Hospital Data 🖾 Surveys 🖾 Interviews
		🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🗆 State-level Data 🗆 Other (not listed):
	Data Source Name and Description	Program documentation including email records and meeting agendas
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing
	Current Value	☑ Number: 0 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 14 □ Percent: □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗆 Goal exceeded 🗹 Unknown 🗆 Data missing
	Progress Notes [500] The Y5 estimate is based on the	e sharing of evaluation data both <i>before</i> and <i>after</i> the implementation of all programs including for 1) SUSI; 2) GRPA CBIM, 3) GRPA
		Task Forces, and 7) SACs. Before the programs are implemented, findings on evaluation results will be shared in the instructional
		of the program, additional evaluation data will be shared with program partners via executive summaries.
	Indicator Title and Description #2	Number of evaluation instruments/tools used for programs/strategies and NOFO activities
	Data Source Type	🗆 Needs Assessment 🛛 Surveillance Data 🗋 Law Enforcement Data 🗋 Hospital Data 🗍 Surveys 🗋 Interviews
		□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description	Program documentation from evaluation instructional packets and materials
	Indicator Population	GASVPP evaluation team
	Baseline Value	☑ Number: 22 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Current Value	☑ Number: 22 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 24 □ Percent: □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🛛 No change 🗋 Moving toward goal 🖓 Goal met 🖓 Goal exceeded 🗹 Unknown 🗋 Data missing
		CBIM (6): Surveys for Athletes and Coaches and Midpoint and Final Progress Reports; AAL (6): Surveys for Athletes and Coaches and ys for Students and First, Second, and Final Progress Reports; Community Task Force (2): Quarterly and Final Progress Reports; SACs y Population Analysis (1).
T ()	Associated Effort(s)	🗹 Goal 1 🗆 Goal 2 🗆 Goal 3 🗆 Goal 4 🗆 Other
e #11 (1.3)	Evaluation Questions Addressed	□ Question 1 ☑ Question 2 □ Question 3 □ Question 4 □ Question 5 □ Question 6 □ Question 7
ome	Description of Outcome	Increased capacity for statewide program implementation and SV prevention
Outcome #11 (1.3)	Туре	☑ Process □ Program/ Policy Specific □ Risk Factor □ Protective Factor □ Violence Outcome □ NOFO Level □ Other
0	Indicator Title and Description #1	Number of peer-networking experiences and/or events attended and shared by GASVPP staff
	Deta Cauna Tuna	🗆 Needs Assessment 🛛 Surveillance Data 🗇 Law Enforcement Data 🗇 Hospital Data 🖓 Surveys 🖓 Interviews
	Data Source Type	🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🗀 State-level Data 🗅 Other (not listed):
	Data Source Name and Description	Program documentation (e.g., agendas, meeting minutes, etc.) from report outs and team meetings
	Indicator Population	GA-SVPP staff
	Baseline Value	☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing
	Current Value	☑ Number: 0 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 3 □ Percent: □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗆 Goal exceeded 🗹 Unknown 🗆 Data missing

	Progress Notes [500] Data for this indicator will be co	ollected via the monthly TTA updates. The Y5 target estimate is based on participation in one peer networking event per staff member
		CDC) or external events that allow opportunities for staff to engage with peers to learn new skills, share experiences, and build
		information on the knowledge and/or skills gained by attendance at the training with staff at the report out meetings.
Outcome #12 (2.4)	Associated Effort(s)	🗆 Goal 1 🗹 Goal 2 🗆 Goal 3 🗆 Goal 4 🗆 Other
	Evaluation Questions Addressed	□ Question 1 ☑ Question 2 ☑ Question 3 □ Question 4 □ Question 5 □ Question 6 □ Question 7
	Description of Outcome	Increased partner support to implement, evaluate, and adapt state- and community-level strategies to prevent SV
	Туре	🗹 Process 🗆 Program/ Policy Specific 🗆 Risk Factor 🗋 Protective Factor 🗆 Violence Outcome 🗆 NOFO Level 🗆 Other
	Indicator Title and Description #1	Percent of partners and subrecipients who provide recommendations on program implementation or evaluation with GASVPP.
	Data Source Type	🗆 Needs Assessment 🗆 Surveillance Data 🗆 Law Enforcement Data 🗆 Hospital Data 🖾 Surveys 🗀 Interviews
		🗆 Focus Groups 🗹 Administrative Data 🛛 National Data 🗋 State-level Data 🗋 Other (not listed):
	Data Source Name and Description	Program documentation including email records and meeting agendas
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	□Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □Proportion: □Other: □ Data are missing
	Current Value	□Number: ☑ Percent: 0 □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□Number: ☑ Percent: 50% □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗆 Goal exceeded 🗹 Unknown 🗆 Data missing
	Progress Notes [500] Data for this indicator will be o	ollected via progress reports completed by sub-recipients. The Year 5 estimate is based on receiving constructive or addressable
	recommendations on problem implementation or ev	valuation from at least half of the program partners.
-3 4)	Associated Effort(s)	🗆 Goal 1 🗆 Goal 2 🗹 Goal 3 🗆 Goal 4 🗆 Other
Outcome #13 (3.4)	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 ☑ Question 4 □ Question 5 □ Question 6 □ Question 7
mo	Description of Outcome	Increased reach of prevention strategies that impact priority populations
Juto	Туре	🗆 Process 🗹 Program/ Policy Specific 🗆 Risk Factor 🗋 Protective Factor 🗇 Violence Outcome 🗇 NOFO Level 🗅 Other
0	Indicator Title and Description #1	Number of individuals reached through community task force and SAC activities
	Data Source Turne	🗆 Needs Assessment 🖾 Surveillance Data 🖾 Law Enforcement Data 🖾 Hospital Data 🖾 Surveys 🖾 Interviews
	Data Source Type	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Type Data Source Name and Description	
		🗆 Focus Groups 🗹 Administrative Data 🗋 National Data 🗋 State-level Data 🗋 Other (not listed):
	Data Source Name and Description	□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data
	Data Source Name and Description Indicator Population	 □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs
	Data Source Name and Description Indicator Population Baseline Value	 □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing
	Data Source Name and Description Indicator Population Baseline Value Current Value	 □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing ☑ Number: 0 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □Percent: □Proportion: □Other:
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be co	 □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing ☑ Number: 0 □ Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □Percent: □Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be co	 □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing ☑ Number: 0 □ Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □Percent: □Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be co be available in January 2025 at the completion of pro	 □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing ☑ Number: 0 □ Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □Percent: □Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be completion of prosent states and the completion states and the comple	 □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (<i>has not been previously tracked</i>) □Percent: □Proportion: □Other: □ Data are missing ☑ Number: 0 □ Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □Percent: □Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing □ ompiled from information collected in the final progress reports completed by community task forces and SACs. Data for Year 1 will operam implementation. The Y5 target is based on an estimate of approximately 100 people reached per community task force and
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be co be available in January 2025 at the completion of pro SAC sub-recipient.	□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (has not been previously tracked) □ Percent: □ Proportion: □ Other: □ Data are missing ☑ Number: 0 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □ Percent: □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing □ orgram implementation. The Y5 target is based on an estimate of approximately 100 people reached per community task force and Number of athletic teams engaged in SV prevention Number of athletic teams engaged in SV prevention
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be completion of prosent states and the completion states and the comple	□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (has not been previously tracked) □Percent: □Proportion: □Other: □ Data are missing ☑ Number: 0 □ Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □ Percent: □Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing □ orpited from information collected in the final progress reports completed by community task forces and SACs. Data for Year 1 will operam implementation. The Y5 target is based on an estimate of approximately 100 people reached per community task force and Number of athletic teams engaged in SV prevention ☑ Needs Assessment ☑ Surveys □ Interviews
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be completion of prosonal states and the completion states and the completing states and the completing states and the com	□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (has not been previously tracked) □Percent: □Proportion: □Other: □ Data are missing ☑ Number: 0 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □Percent: □Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing □ or prime information collected in the final progress reports completed by community task forces and SACs. Data for Year 1 will □ or present: □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing □ or presention collected in the final progress reports completed by community task forces and SACs. Data for Year 1 will □ or presention. The Y5 target is based on an estimate of approximately 100 people reached per community task force and Number of athletic teams engaged in SV prevention □ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data ☑ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data for this indicator will be completed by available in January 2025 at the completion of prosents Indicator Title and Description #2 Data Source Type Data Source Name and Description	□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): □ Community task force progress report data Members of the public living in counties with partnering task forces and SACs ☑ Number: 0 (has not been previously tracked) □ Percent: □ Proportion: □ Other: □ Data are missing ☑ Number: 0 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) ☑ Number: 1,100 □ Percent: □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data are missing □ mpiled from information collected in the final progress reports completed by community task forces and SACs. □ Data for Year 1 will □ orgram implementation. The Y5 target is based on an estimate of approximately 100 people reached per community task force and Number of athletic teams engaged in SV prevention □ □ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data ☑ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data Other (not listed): □ Pro

1	Current Value	☑ Number: 0 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 20 □ Percent: □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	□ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
	Progress Notes [500] Data for this indicator will be co	ollected from workplans and progress reports for both AAL and CBIM teams at schools and the Georgia Recreation and Parks
	Associations. The Y5 target estimate is based on tear	ns implementing programming at 12 GRPA sites and 8 schools.
	Indicator Title and Description #3	Percent of SUSI schools completing the hot spot mapping exercise
	Data Source Type	🗆 Needs Assessment 🛛 Surveillance Data 🗋 Law Enforcement Data 🗋 Hospital Data 🖾 Surveys 🖾 Interviews
	Data Source Type	🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🗆 State-level Data 🗆 Other (not listed):
	Data Source Name and Description	Program documentation including workplans and contracts
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	□ Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □ Other: □ Data are missing
	Current Value	□Number: ☑ Percent: 0 □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□Number: ☑ Percent: 90% □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🛛 No change 🖾 Moving toward goal 🖓 Goal met 🖓 Goal exceeded 🗹 Unknown 🖓 Data missing
		is conducted at SUSI schools and data for this indicator will be collected through progress reports completed for each school. Data for
	Year 1 will be available in December 2024 at the com	pletion of program implementation.
14 5)	Associated Effort(s)	🗆 Goal 1 🛛 Goal 2 🗹 Goal 3 🗆 Goal 4 🗋 Other
Outcome #14 (3.5)	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 ☑ Question 4 ☑ Question 5 □ Question 6 □ Question 7
mo	Description of Outcome	Increased number of community- and societal-level strategies that promote health equity and reduce inequalities in SV by
Dute		addressing SDOH
Ŭ	Туре	🗆 Process 🗹 Program/ Policy Specific 🗆 Risk Factor 🗋 Protective Factor 🗋 Violence Outcome 🗋 NOFO Level 🗋 Other
	Indicator Title and Description #1	Percent of the trainings/workshops provided by community task forces and SACs that address SDOH
	·	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews
	Data Source Type	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Type Data Source Name and Description	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data
	Data Source Type Data Source Name and Description Indicator Population	 □ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs
	Data Source Type Data Source Name and Description Indicator Population Baseline Value	 □ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □ Other: □ Data are missing
	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value	 Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (has not been previously tracked) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other:
	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period	 □ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (has not been previously tracked) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021)</u> review of SDH indicators will be used to identify which prevention strategies conducted by task forces
	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progres	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (has not been previously tracked) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021)</u> review of SDH indicators will be used to identify which prevention strategies conducted by task forces ess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that
	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progre are provided by sub-recipients for task force membe	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (has not been previously tracked) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Data are missing □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021)</u> review of SDH indicators will be used to identify which prevention strategies conducted by task forces ess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that rs and/or members of the public.
15 .6)	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progres	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): □ Community task force progress report data □ Community task forces and SACs □ Number: □ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021)</u> review of SDH indicators will be used to identify which prevention strategies conducted by task forces sess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that rs and/or members of the public. ☑ Goal 1 □ Goal 2 ☑ Goal 3 □ Goal 4 □ Other
ne #15 (3.6)	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progre are provided by sub-recipients for task force membe	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data □ Community task forces and SACs □ □ Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021)</u> review of SDH indicators will be used to identify which prevention strategies conducted by task forces ess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that rs and/or members of the public. ☑ ☑ Goal 1 □ Goal 2 ☑ Goal 3 □ Goal 4
come #15 (3.6)	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progre are provided by sub-recipients for task force membe Associated Effort(s)	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (has not been previously tracked) □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Nounds away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021)</u> review of SDH indicators will be used to identify which prevention strategies conducted by task forces sess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that rs and/or members of the public. ☑ ☑ Goal 1 □ Goal 2 ☑ Goal 3 □ Goal 4 □ Other ☑ Question 1 □ Question 2 □ Question 3 □
Outcome #15 (3.6)	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progre are provided by sub-recipients for task force membe Associated Effort(s) Evaluation Questions Addressed Description of Outcome Type	 Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021</u>) review of SDH indicators will be used to identify which prevention strategies conducted by task forces ess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that rs and/or members of the public. ☑ Goal 1 □ Goal 2 ☑ Goal 3 □ Goal 4 □ Other ☑ Question 1 □ Question 2 □ Question 3 □ Question 4 ☑ Question 5 □ Question 6 □ Question 7 Increased protective factors and decreased risk factors associated with SV □ Process □ Program/ Policy Specific ☑ Risk Factor ☑ Protective Factor □ Violence Outcome □ NOFO Level □ Other
Outcome #15 (3.6)	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progre are provided by sub-recipients for task force membe Associated Effort(s) Evaluation Questions Addressed Description of Outcome	 Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □ Other: □ □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021)</u> review of SDH indicators will be used to identify which prevention strategies conducted by task forces ess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that rs and/or members of the public. ☑ Goal 1 □ Goal 2 ☑ Goal 3 □ Goal 4 □ Other ☑ Question 1 □ Question 2 □ Question 3 □ Question 4 ☑ Question 5 □ Question 6 □ Question 7 Increased protective factors and decreased risk factors associated with SV □ Process □ Program/ Policy Specific ☑ Risk Factor ☑ Protective Factor □ Violence Outcome □ NOFO Level □ Other Percent of individuals who are intolerant of sexual violence/bullying
Outcome #15 (3.6)	Data Source Type Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] <u>WHO's (2010)</u> SDH framework a and SACs meet the criteria of targeting SDOH. Progre are provided by sub-recipients for task force membe Associated Effort(s) Evaluation Questions Addressed Description of Outcome Type	 Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data Community task forces and SACs □ Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □ Proportion: □Other: □ Data are missing □ Number: ☑ Percent: 0 □ Proportion: □Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □Other: □ Data are missing (program unable to collect this reporting period) □ Number: ☑ Percent: 50% □ Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing and <u>Armstead et al.'s (2021</u>) review of SDH indicators will be used to identify which prevention strategies conducted by task forces ess report data from task forces and SACs will be used to compile this information. Trainings and workshops can include events that rs and/or members of the public. ☑ Goal 1 □ Goal 2 ☑ Goal 3 □ Goal 4 □ Other ☑ Question 1 □ Question 2 □ Question 3 □ Question 4 ☑ Question 5 □ Question 6 □ Question 7 Increased protective factors and decreased risk factors associated with SV □ Process □ Program/ Policy Specific ☑ Risk Factor ☑ Protective Factor □ Violence Outcome □ NOFO Level □ Other

	Data Source Name and Description	Evaluation data from assessments administered to AAL, CBIM, and SUSI program participants
	Indicator Population	Program participants
	Baseline Value	□Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □Proportion: □Other: □ Data are missing
	Current Value	□ Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□ Number: ☑ Percent: 60% □Proportion: □Other:
	Change in Outcome Since Last Reporting Period	□ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
	Indicator Title and Description #2	Percent of individuals who are willing to intervene to prevent violence
	Data Source Type	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data ☑ Surveys □ Interviews
		□ Focus Groups □ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description	Evaluation data from assessments administered to AAL, CBIM, and SUSI program participants
	Indicator Population	Program participants
	Baseline Value	□Number: ☑ Percent: 0 (<i>has not been previously tracked</i>) □Proportion: □Other: □ Data are missing
	Current Value	□Number: ☑ Percent: 0 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□ Number: ☑ Percent: 60% □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	□ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
		e collected from survey data administered on students and athletes being exposed to the AAL, CBIM, or SUSI programs. The Y5 target
		e sexual violence/bullying as problematic and be willing to intervene to prevent violence. Data for Year 1 will be available in
	December 2024 at the completion of program imple	mentation.
.6 3)	Associated Effort(s)	🗆 Goal 1 🗆 Goal 2 🗆 Goal 3 🛛 🗹 Goal 4 🗆 Other
Outcome #16 (4.3)	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 □ Question 4 □ Question 5 ☑ Question 6 □ Question 7
ũ.	Description of Outcome	Increased use of data-driven decision-making to reduce inequities impacting priority and high-risk populations
Dutc	Туре	□ Process ☑ Program/ Policy Specific □ Risk Factor □ Protective Factor □ Violence Outcome □ NOFO Level □ Other
0	Indicator Title and Description #1	Number of data sources used to inform the selection of sub-recipients in high-risk populations
	Data Sauraa Tuma	🗆 Needs Assessment 🛛 Surveillance Data 🖓 Law Enforcement Data 🖓 Hospital Data 🛛 🗹 Surveys 🖓 Interviews
	Data Source Type	
		🗆 Focus Groups 🗹 Administrative Data 🗆 National Data 🗀 State-level Data 🗀 Other (not listed):
	Data Source Name and Description	□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Program documentation and evaluation report data from the county-level mapping analysis
	Data Source Name and Description	Program documentation and evaluation report data from the county-level mapping analysis
	Data Source Name and Description Indicator Population	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state
	Data Source Name and Description Indicator Population Baseline Value	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Comparison of the state Image
	Data Source Name and Description Indicator Population Baseline Value Current Value	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Comparison of the state Image
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Number: 7 Image: Proportion: Image: Image: Image: Proportion: Image: Image: Image: Proportion: Image: Image: Proportion: Image: Image: Proportion: Proportion: Image: Proportion: Image: Proportion: Image: Proportion: Image: Proportion: Image: Proportion: Proportion: Proportion: Proportion: Proportion: Proportion: Proportion: Proportion: Proportion: Proportio: Proportion: P
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data includes the Priority Popu Georgia Division of Family and Children Services, Cource	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Number: 7 image: 7
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data includes the Priority Popu Georgia Division of Family and Children Services, Cou Labor). The Y5 target estimate includes the inclusio	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Number: 7 image: Proportion: image: Proport: Propor
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data includes the Priority Popu Georgia Division of Family and Children Services, Cource	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Number: 7 image: Percent: Image: Proportion: Image: Other: Image: Proportion: Image: Other: Image: Proportion: Image: Proport:
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data includes the Priority Popu Georgia Division of Family and Children Services, Cou Labor). The Y5 target estimate includes the inclusio Indicator Title and Description #2	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Number: 7 image: Percent: image: Proportion: image: Other: image: Data are missing (program unable to collect this reporting period) Image: Number: 7 image: Percent: image: Proportion: image: Other: image: Data are missing (program unable to collect this reporting period) Image: Number: 7 image: Percent: image: Proportion: image: Other: image: Data are missing (program unable to collect this reporting period) Image: Number: 9 image: Percent: image: Proportion: image: Other: Image: Nowing away from goal image: Proportion: image: Other: Image: Nowing away from goal image: No change image: No change image: Other: Image: Nowing away from goal image: No change image: Nowing toward goal image: Other: Other: Image: Nowing away from goal image: No change image: Nowing toward goal image: Other: Other: Other: Image: Nowing away from goal image: No change image: Nowing toward goal image: Other: Other: Other: Image: Nowing away from goal image: No change image: Nowing toward goal image: Other: Other: Image: Nowing away from goal image: No change image: Nowing toward goal image: Other: Image: Nowing away from goal image: No change: Other:
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data includes the Priority Popu Georgia Division of Family and Children Services, Cou Labor). The Y5 target estimate includes the inclusio Indicator Title and Description #2 Data Source Type	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Table Comparison of table
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data includes the Priority Popu Georgia Division of Family and Children Services, Cou Labor). The Y5 target estimate includes the inclusio Indicator Title and Description #2 Data Source Type Data Source Name and Description	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state ✓ Number: 7 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ✓ Number: 7 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ✓ Number: 9 □Percent: □Proportion: □Other: □ Data are missing (program unable to collect this reporting period) ✓ Number: 9 □Percent: □Proportion: □Other: □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ✓ Unknown □ Data missing lation Report which consists of 7 sources of data (Georgia Bureau of Investigation, Georgia Department of Community Supervision, unty Health Rankings, Governor's Office of Student Achievement, Georgia Student Health Survey, and the Georgia Department of n of additional sources of data on the nature and extent of sexual violence such as Find Help Georgia and NIRBS. Percent of community task forces and SACs using county-level data sources to inform prevention strategies □ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews □ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed): Community task force progress report data
	Data Source Name and Description Indicator Population Baseline Value Current Value Year 5 Target Change in Outcome Since Last Reporting Period Progress Notes [500] Data includes the Priority Popu Georgia Division of Family and Children Services, Cou Labor). The Y5 target estimate includes the inclusio Indicator Title and Description #2 Data Source Type	Program documentation and evaluation report data from the county-level mapping analysis Priority populations in the state Image: Table Comparison of table

	Current Value	□Number: ☑ Percent: 0 □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□ Number: ☑ Percent: 50% □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	 □ Moving away from goal □ No change □ Moving toward goal □ Goal met □ Goal exceeded ☑ Unknown □ Data missing
	Progress Notes [500] Data for this indicator will be co	pompiled from information collected in the final progress reports completed by community task forces and SACs. Data for Year 1 will
	be available in January 2025 at the completion of pro	
17 4)	Associated Effort(s)	🗆 Goal 1 🗆 Goal 2 🗆 Goal 3 🗹 Goal 4 🗆 Other
Outcome #17 (4.4)	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 □ Question 4 □ Question 5 ☑ Question 6 □ Question 7
	Description of Outcome	Increased state- and community-level monitoring of trends in SV outcomes and SDOH
Duto	Туре	☑ Process ☐ Program/ Policy Specific ☐ Risk Factor ☐ Protective Factor ☐ Violence Outcome ☐ NOFO Level ☐ Other
0	Indicator Title and Description #1	Number of county-level indicators of SV, risk factors of SV, and SDOH monitored for annual mapping analysis
	Data Causa Tura	🗆 Needs Assessment 🗹 Surveillance Data 🗹 Law Enforcement Data 🗆 Hospital Data 🗅 Surveys 🗅 Interviews
	Data Source Type	🗆 Focus Groups 🛛 Administrative Data 🗇 National Data 🗹 State-level Data 🗔 Other (not listed):
	Data Source Name and Description	Evaluation report data from the county-level mapping analysis
	Indicator Population	Counties in the state
	Baseline Value	☑ Number: 29 □ Percent: □ Proportion: □ Other: □ □ Data are missing (program unable to collect this reporting period)
	Current Value	☑ Number: 29 □ Percent: □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	☑ Number: 40 □ Percent: □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗇 Goal exceeded 🗹 Unknown 🗅 Data missing
	Progress Notes [500] Priority population mapping da	ta from Y1 includes 29 indicators from 7 sources of data. The Y5 target estimate is based on the goal to expand the analysis of sexual
	violence data at the county-level which should be fac	cilitated by the nationwide move to the <u>NIBRS</u> system.
18	Associated Effort(s)	🗆 Goal 1 🗆 Goal 2 🗹 Goal 3 🛛 🗹 Goal 4 🗆 Other
Outcome #18	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 □ Question 4 ☑ Question 5 □ Question 6 □ Question 7
mos	Description of Outcome	Decreased rates of SV in priority populations and high-risk communities
Dute	Туре	🗆 Process 🛛 Program/ Policy Specific 🗋 Risk Factor 🗋 Protective Factor 🗹 Violence Outcome 🗋 NOFO Level 🗋 Other
Ŭ	Indicator Title and Description #1	Percent of sustainable programs offered in high-risk communities
	Data Source Type	🗆 Needs Assessment 🛛 Surveillance Data 🖾 Law Enforcement Data 🖾 Hospital Data 🖾 Surveys 🖾 Interviews
		□ Focus Groups I Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description	Program documentation including workplans, contracts, and progress reports
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	□Number: □Percent: □Proportion: □Other: ☑ Data are missing (program unable to collect this reporting period)
	Current Value	□Number: □Percent: □Proportion: □Other: ☑ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□ Number: V Percent: 50% □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🛛 No change 🗆 Moving toward goal 🖾 Goal met 🖓 Goal exceeded 🗹 Unknown 🗅 Data missing
		n the goal to have approximately 50% of sub-recipients in high-risk communities expressing intentions to continue their SV
	prevention efforts beyond the end of the current fun	ding cycle into the future.
	Associated Effort(s)	□ Goal 1 □ Goal 2 ☑ Goal 3 ☑ Goal 4 □ Other
	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 □ Question 4 ☑ Question 5 □ Question 6 □ Question 7
	Description of Outcome	Decreased rates of SV at the state-level
	Туре	🗆 Process 🛛 Program/ Policy Specific 🗋 Risk Factor 🗋 Protective Factor 🗹 Violence Outcome 🗋 NOFO Level 🗋 Other

	Indicator Title and Description #1	Percent of partners engaged in community-specific prevention who were retained for four or more years and have committed to
		be leaders in SV prevention across the state of GA
Outcome #19	Data Source Type	□ Needs Assessment □ Surveillance Data □ Law Enforcement Data □ Hospital Data □ Surveys □ Interviews
		□ Focus Groups ☑ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description	Program documentation including workplans, contracts, and progress reports
	Indicator Population	Partner providers and sub-recipients
	Baseline Value	□Number: □Percent: □Proportion: □Other: ☑ Data are missing (program unable to collect this reporting period)
	Current Value	□Number: □Percent: □Proportion: □Other: ☑ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□ Number: 🗹 Percent: 50% □ Proportion: □ Other:
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🛛 No change 🗆 Moving toward goal 🖓 Goal met 🖓 Goal exceeded 🗹 Unknown 🗅 Data missing
	Progress notes [500] The year 5 estimate is based of	n the goal to have at least 50% of all long-term (partners for 4+ years) sub-recipients who were engaged in community-specific
	prevention efforts expressing intentions to continue	their SV prevention efforts beyond the end of the current funding cycle into the future.
20	Associated Effort(s)	□ Goal 1 □ Goal 2 ☑ Goal 3 ☑ Goal 4 □ Other
te #	Evaluation Questions Addressed	□ Question 1 □ Question 2 □ Question 3 □ Question 4 ☑ Question 5 □ Question 6 □ Question 7
Son	Description of Outcome	Reduced inequalities in SDOH that impact disparities in SV rates
Outcome #20	Туре	🗆 Process 🗆 Program/ Policy Specific 🗹 Risk Factor 🗅 Protective Factor 🗅 Violence Outcome 🗅 NOFO Level 🗅 Other
0	Indicator Title and Description #1	Percent of Georgians reporting food insecurity
	Data Caurea Tura	🗆 Needs Assessment 🗹 Surveillance Data 🗀 Law Enforcement Data 🗀 Hospital Data 🗀 Surveys 🗀 Interviews
	Data Source Type	🗆 Focus Groups 🛛 Administrative Data 🗋 National Data 🖾 State-level Data 🖾 Other (not listed):
	Data Source Name and Description	County Health Rankings
	Indicator Population	Representative sample of Georgia residents
	Baseline Value	□ Number: ☑ Percent: 11 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Current Value	□ Number: ☑ Percent: 11 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□Number: □ Percent: □Proportion: ☑ Other: 10% reduction from baseline
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗆 Goal exceeded 🗹 Unknown 🗅 Data missing
	Indicator Title and Description #2	Percent of Georgians reporting poor mental health days
	Data Source Type	🗆 Needs Assessment 🗹 Surveillance Data 🗆 Law Enforcement Data 🗆 Hospital Data 🗆 Surveys 🗆 Interviews
		□ Focus Groups □ Administrative Data □ National Data □ State-level Data □ Other (not listed):
	Data Source Name and Description	County Health Rankings
	Indicator Population	Representative sample of Georgia residents
	Baseline Value	□ Number: ☑ Percent: 4.5 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Current Value	□ Number: ☑ Percent: 4.5 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)
	Year 5 Target	□Number: □ Percent: □Proportion: ☑ Other: 10% reduction from baseline
	Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🛛 No change 🗆 Moving toward goal 🖓 Goal met 🖓 Goal exceeded 🗹 Unknown 🗅 Data missing
	Indicator Title and Description #3	Percent of Georgians reporting severe housing problems
	Data Sauraa Turaa	🗆 Needs Assessment 🗹 Surveillance Data 🗀 Law Enforcement Data 🗀 Hospital Data 🗀 Surveys 🗀 Interviews
	Data Source Type	🗆 Focus Groups 🛛 Administrative Data 🗋 National Data 🖾 State-level Data 🗔 Other (not listed):
	Data Source Name and Description	County Health Rankings
	Indicator Population	Representative sample of Georgia residents
	Baseline Value	□ Number: ☑ Percent: 15 □ Proportion: □ Other: □ Data are missing (program unable to collect this reporting period)

Current Value	□Number: ☑ Percent: 15 □Proportion: □Other: □ Data are missing (program unable to collect this reporting period)
Year 5 Target	□Number: □ Percent: □Proportion: ☑ Other: 10% reduction from baseline
Change in Outcome Since Last Reporting Period	🗆 Moving away from goal 🗆 No change 🗆 Moving toward goal 🗆 Goal met 🗆 Goal exceeded 🗹 Unknown 🗅 Data missing
Progress Notes [500] Data for these indicators can be	e collected from the County Health Rankings dashboard at the state- and county-levels:
https://www.countyhealthrankings.org/health-data/	georgia?year=2024. The target value will be to observe a 10% decrease in the % observed across the 5-year reference period.

Section 5. Barriers and Facilitators: In this section, identify the barriers and facilitators your program encountered or anticipates encountering.

Table 2. Barriers (add rows as needed)

	Barrier Type	Select all that apply	Evaluation issues	
	"	□ Lack of buy-in from partners	□ Staffing issues	
		□ Lack of community engagement	☑ Lack of skills or capacity	
		□ Insufficient funding or resources	State or local climate	
		✓ Inability to access/collect data	□ Other (not listed): Please specify	
		□ Implementation issues	·····, ····, ·····,	
	Description of Barrier	Anticipated Barrier: Given a lack of experience	conducting community needs assessments, it is anticipated that some of the community task forces	
	(max 2000 characters with spaces)	and SACs may experience difficulties developing and administering their community needs assessments such as identifying how to identify and		
с н		sample their target populations to produce representative samples. In turn, if these difficulties are not addressed there is the potential that the		
er #		findings from the assessments may not be fully representative of community needs, which could lead task forces to develop strategies or		
Barrier #1		interventions that may be less effective.		
B	Program Component	Select all that apply	☑ Data to Action	
		🗆 Work Plan	Evaluation	
		☑ State Action Plan/Strategic Plan	Sustainability	
		✓ Prevention Strategies	Capacity Assessment	
	Actions Taken	To prepare for this possibility, the evaluation team will provide a presentation and Q&A session on best practices for sampling, identifying target		
	(max 2000 characters with spaces)	populations, and appropriate sample sizes for community needs assessment for community task forces and SACs before they finalize their		
		assessment activities. Infographics will be created to support these efforts.		
	Resources Used	To create materials for the presentation, peer-reviewed research and guidance on community needs assessment will be referenced. Coordination		
	(max 2000 characters with spaces)	and cooperation of program partners and an online meeting space (MS Teams) will also be used.		
	Barrier Type	Select all that apply	Evaluation issues	
		Lack of buy-in from partners	□ Staffing issues	
		Lack of community engagement	□ Lack of skills or capacity	
		✓ Insufficient funding or resources	☑ State or local climate	
#2		✓ Inability to access/collect data	Other (not listed): Please specify	
Barrier #2		Implementation issues		
arri	Description of Barrier	There is a limited number of up-to-date sexual violence sources at the county- and state-level. For the limited data available, most data are from		
8	(max 2000 characters with spaces)	official law enforcement sources, and none are victimization-focused and provide insights on the assaults not reported to law enforcement (e.g.,		
		the dark figure of sexual violence) which is estimated to be almost 80% of all rapes/sexual assaults that occurred nationwide in 2022 (BJS, 2023).		
		Therefore, police data substantially underestimates the real rates in the state. Further, rape/sexual assault rates are not available for all areas of		
			nts in the state do not report their data to the GBI/FBI. In addition, when data is available, the	
release is typically lagged by over a year which limits the ability to inform decision-making in real time.			limits the ability to inform decision-making in real time.	

	Program Component	Select all that apply	☑ Data to Action	
	Frogram component	□ Work Plan		
		State Action Plan/Strategic Plan	Sustainability	
		Prevention Strategies	Capacity Assessment	
	Actions Taken	To address this barrier, the evaluation will Include additional measures of SV in the county-level analyses to help fill the gaps in the missing crime		
	(max 2000 characters with spaces)	rate data. These sources include data from the correctional system such as county-rates of individuals on the sexual offender registry and on		
		community supervision for sexual violence offenses.		
	Resources Used	Helpful resources to address this barrier in the future could include additional measures of SV at the county-level, particularly those that measure		
	(max 2000 characters with spaces)	victimization rather than perpetration.		
	Barrier Type	Select all that apply	Evaluation issues	
		Lack of buy-in from partners	✓ Staffing issues	
		□ Lack of community engagement	✓ Lack of skills or capacity	
		Insufficient funding or resources	State or local climate	
		Inability to access/collect data	□ Other (not listed):	
		Implementation issues		
	Description of Barrier	Anticipated Barrier: As a result of county-level	hot spot mapping analyses, high-risk populations and counties in Georgia have been identified as in	
	(max 2000 characters with spaces)	need for SV prevention efforts. However, man	y of these counties have not previously been involved in GASVPP's efforts to reduce SV in the state	
#3		and therefore relationships between GASVPP and county program partners in these areas are limited. Therefore, it is possible that there will need		
ier		to be some initial work to increase knowledge/awareness in an effort to expand prevention efforts into new areas in the state and develop new		
Barrier #3		partnerships with organizations in these areas.		
	Program Component	Select all that apply	Data to Action	
		🗆 Work Plan	Evaluation	
		□ State Action Plan/Strategic Plan	Sustainability	
		☑ Prevention Strategies	Capacity Assessment	
	Actions Taken	To address this potential barrier, GASVPP can continue to reach out and make connections to organizations in these counties to share funding		
	(max 2000 characters with spaces)	opportunities and inform the counties on the efforts that the state is undertaking to reduce sexual violence.		
	Resources Used	Resources that can be used to address this potential barrier include listservs or email lists of individuals/organizations across the state that GASVPP		
	(max 2000 characters with spaces)	can use to share relevant information on prevention efforts/opportunities.		
	Barrier Type	Select all that apply	Evaluation issues	
		☑ Lack of buy-in from partners	☑ Staffing issues	
		Izek of community engagement	□ Lack of skills or capacity	
		□ Insufficient funding or resources	☑ State or local climate	
		Inability to access/collect data	Other (not listed): Please specify	
		Implementation issues		
44	Description of Barrier	Anticipated Barrier: It is anticipated that some partners implementing programs may experience some technology limitations when conducting		
Barrier #4	(max 2000 characters with spaces)	evaluation activities that require access to smart phones, tablets, or computers.		
Barr	Program Component	Select all that apply		
	· ·	□ Work Plan	☑ Evaluation	
		□ State Action Plan/Strategic Plan	□ Sustainability	
		□ Prevention Strategies	Capacity Assessment	
	Actions Taken	To address this barrier, additional guidance is provided in the evaluation instructions to help prepare for the administration of the surveys and		
	(max 2000 characters with spaces)	access to technology to complete them. In addition, when needed, paper-based copies of the survey have also been prepared and shared with sub-		
			able to complete the assessments electronically.	
		recipients when program participants are not a	and to complete the dates ments electronically.	

Resources Used	This barrier may be addressed through increased flexibility in the evaluation procedures used among some priority populations.
(max 2000 characters with spaces)	

Table 3. Facilitators (add rows as needed)

	Facilitator Type	☑ Strong partners	□ Strong evaluation	
		Connection to community	□ Adequate, experienced staff	
Facilitator #1		□ Access to funding or resources	□ Adequate, experienced starr	
		Access to data		
			Other (not listed): Please specify	
	Description of Facilitator	Strong implementation Strong partnerships with organizations and ind	lividuals across the state who are passionate about reducing sexual violence and are engaged in high	
	(max 2000 characters with spaces)	Strong partnerships with organizations and individuals across the state who are passionate about reducing sexual violence and are engaged in high- quality program implementation in their communities and among high-risk populations.		
	Program Component	Select all that apply	Data to Action	
		□ Work Plan	☑ Data to Action	
		☑ State Action Plan/Strategic Plan	☑ Sustainability	
		✓ Prevention Strategies	Capacity Assessment	
	Resources Used		entify appropriate partners and foster relationships necessary for fruitful partnerships and state-level	
	(max 2000 characters with spaces)	data on SV and SDOH that informed the identif		
-	, , ,			
	Facilitator Type	□ Strong partners	 ✓ Strong evaluation ✓ Adequate, experienced staff 	
		Connection to community		
		□ Access to funding or resources	□ Access to training/technical assistance	
		Access to data	Other (not listed): Please specify	
		Strong implementation		
#2	Description of Facilitator	GASVPP team members' and external evaluators' knowledge and expertise on sexual violence that support the selection of evidence-based		
Facilitator #2	(max 2000 characters with spaces)	strategies, program implementation and evaluation, and using data to inform decision-making.		
lita	Program Component	Select all that apply	☑ Data to Action	
aci		☑ Work Plan	✓ Evaluation	
<u>ш</u>		☑ State Action Plan/Strategic Plan	Sustainability	
		Prevention Strategies	Capacity Assessment	
	Resources Used	Access to professional development trainings a	and sexual violence research and resources.	
	(max 2000 characters with spaces)			
	Facilitator Type	□ Strong partners	□ Strong evaluation	
		Connection to community	□ Adequate, experienced staff	
		□ Access to funding or resources	□ Access to training/technical assistance	
		□ Access to data	□ Other (not listed): Please specify	
#3		✓ Strong implementation		
tor	Description of Facilitator	Evidence-based programming and strategies th	nat: (1) target SV outcomes, risk and protective factors of SV, and SDOH inequalities; (2) address the	
ilita	(max 2000 characters with spaces)	focus areas of strengthening economic support, creating protective environments, and promoting social norms that protect against violence; and (3)		
Facilitator #3		promote fidelity of curricula through TA suppo	rt, site visits, and regularly meetings with program partners.	
	Program Component	Select all that apply	Data to Action	
		🗆 Work Plan	Evaluation	
		□ State Action Plan/Strategic Plan	□ Sustainability	
		✓ Prevention Strategies	Capacity Assessment	
	1			

	Resources Used	Access to resources on SV programming and evaluation data on the program's effectiveness and multiple staff members who provide individual		
	(max 2000 characters with spaces)	attention and support to program partners.		
	Facilitator Type	□ Strong partners	Strong evaluation	
		Connection to community	Adequate, experienced staff	
		□ Access to funding or resources	☑ Access to training/technical assistance	
		□ Access to data	Other (not listed): Please specify	
#4		□ Strong implementation		
	Description of Facilitator	Support, expertise, and guidance of the CDC program and evaluation officers.		
Facilitator	(max 2000 characters with spaces)			
acili	Program Component	Select all that apply	☑ Data to Action	
ű		🗆 Work Plan	✓ Evaluation	
		State Action Plan/Strategic Plan	□ Sustainability	
		✓ Prevention Strategies	Capacity Assessment	
	Resources Used	Monthly meetings between CDC officers and GASVPP, shared materials and guidance via email and partner portal, and GASVPP requests for TTA		
	(max 2000 characters with spaces)	received from partners via reporting and meetings.		
	Facilitator Type	□ Strong partners	Strong evaluation	
		Connection to community	Adequate, experienced staff	
		□ Access to funding or resources	□ Access to training/technical assistance	
		☑ Access to data	Other (not listed): Please specify	
		□ Strong implementation		
#2	Description of Facilitator	Multiple county-level data sources on structural determinants of health inequalities that can be analyzed to identify priority populations.		
ort	(max 2000 characters with spaces)			
Facilitator #5	Program Component	Select all that apply	☑ Data to Action	
acil		🗆 Work Plan	Evaluation	
ů.		State Action Plan/Strategic Plan	Sustainability	
		Prevention Strategies	Capacity Assessment	
	Resources Used	Public websites and data depositories that inc	clude county-level data.	
	(max 2000 characters with spaces)			

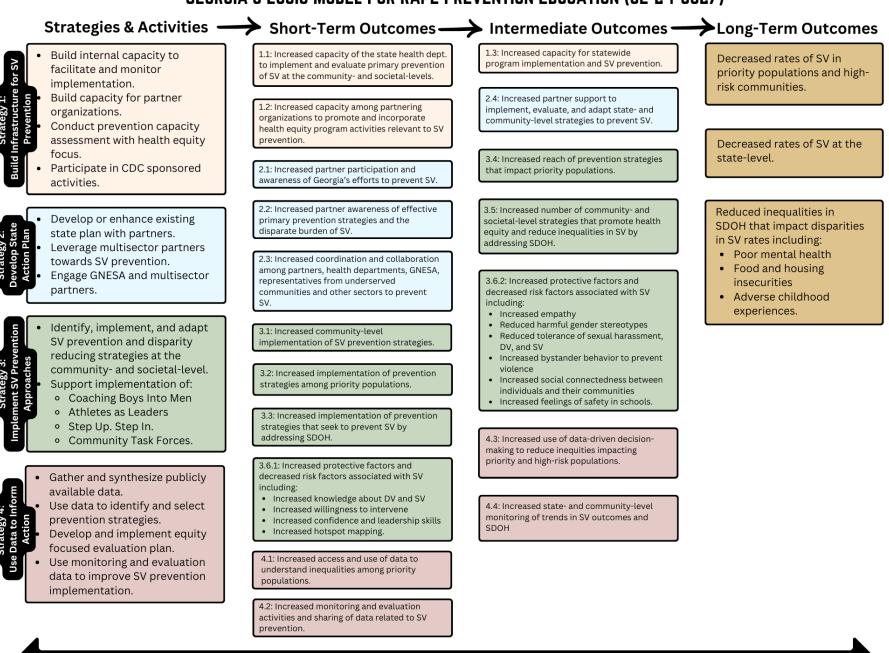
Section 6. Evaluation Timeline: Provide an overview of the main evaluation tasks and a timeline, including the work schedule, key tasks, assigned personnel, and resources needed for evaluation activities in Table 4.

Table 4. Evaluation Timeline (add rows as needed)

Key Evaluation Tasks	Resources Needed	Partners Involvement	Person(s) Responsible	Timeline (start/end date)
Data Collection				
Develop/update process and outcome evaluation tools for each specific approach/program.	Data about the purpose/goals of programs, curriculum and/or materials used, information on program implementation, Qualtrics for creating pre/post- tests, website builder for administration of pre/post-tests (GASVPP.com).	GASVPP team provides the resources needed, the external evaluation team develops the evaluation tools, and program partners provide feedback on evaluation materials and instructions.	Heidi Scherer (Lead External Evaluator) Sara Evans (External Evaluator) Beverly Churchwell (External Evaluator)	Annually, February - July
Collect pre- and post-test data and progress report data for each approach/program.	Data collection instructions, Qualtrics software, and program facilitator to administer surveys.	External evaluators develop instructions, GASVPP team distributes and explains instructions, program facilitators collect the data, and the state GASVPP Team Lead oversees the entire process.	Vanessa Corona (RPE Team Lead)	Annually, August - December
Collect county-level data on sexual violence, risk factors of sexual violence, and structural determinants of health inequality indicators.	Access to county- and state-level data.	The external evaluation team collects data on all selected county-level indicators.	Heidi Scherer (Lead External Evaluator)	Annually, April – July
Data Analysis				
Analyze county-level data on sexual violence, risk factors of sexual violence, and structural determinants of health inequality outcomes to create rankings and hot spot maps.	Access to data, statistical software, and graphic software for producing tables and figures for the report.	The external evaluation team analyzes data on all selected county-level indicators and produces reports, maps, and infographics for the GASVPP team.	Heidi Scherer (Lead External Evaluator)	Annually, August - October
Analyze process and outcome evaluation data for each specific approach/program and produce	Access to data, statistical software, and graphic software for	The external evaluators compile datasets, analyze the data, report the findings, and produce a written evaluation report.	Heidi Scherer (Lead External Evaluator)	Annually, November - January

report with findings and	producing tables and figures for		Sara Evans (External	
recommendations.	the report.		Evaluator)	
			Beverly Churchwell	
			(External Evaluator)	
Data Use				
Prepare report card summaries and	Access to data, statistical	The external evaluators will produce these summaries	Heidi Scherer (Lead	Annually,
sharable infographics on evaluation	software, and graphic software for	based on the analyzed program data.	External Evaluator)	January
data.	producing tables and figures for		Sara Evans (External	
	the report.		Evaluator)	
			Beverly Churchwell	
			(External Evaluator)	
Meet with program partners and	Coordination and cooperation of	GASVPP team coordinates a meeting with partners to	Vanessa Corona (RPE	Annually,
partners to discuss and receive	program partners and a meeting	discuss programs and evaluation team discusses and	Team Lead) + RPE program	February -
feedback on evaluation. Discuss	space (phone, online, or in-	receives feedback on the evaluation. The external	managers	May
findings and make recommendations	person).	evaluators will discuss the evaluation findings with		
for program and/or evaluation		the GASVPP team and will work together to make		
improvements.		recommendations for program and/or evaluation		
		improvements. The GASVPP and evaluation team will		
		communicate these findings and recommendations to		
		other program partners and receive input from		
		program partners.		
Report findings/data in APR.	Access to evaluation report and	Using the findings from program documentation and	Vanessa Corona (RPE	Annually,
	access to DVP Partner Portal.	the evaluation report, the RPE team will input the	Team Lead)	October
		relevant findings in the DVP Partner Portal.		
Discuss plans for incorporating	Access to evaluation report and	GASVPP, evaluation team, and program partners will	Vanessa Corona (RPE	Annually,
recommendations into program	partner feedback. Coordination	meet to discuss plans for implementing feedback into	Team Lead) + RPE program	February -
implementation and evaluation.	and cooperation of program	continual improvement of programming and	managers	Мау
	partners and a meeting space	evaluation.		
	(phone, online, or in-person).			

GEORGIA'S LOGIC MODEL FOR RAPE PREVENTION EDUCATION (CE-24-0027)



Program Monitoring and Evaluation