

**Funding Opportunity Announcement PS17-1704:
Comprehensive High-Impact HIV Prevention Projects for
Young Men of Color Who Have Sex with Men (YMSM) and
Young Transgender Persons of Color (YTG of Color)**

**PS17-1704 Pre-Application Technical Assistance
Workshops:
An Overview of
Capacity Building Assistance (CBA) for
High-Impact HIV Prevention**

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Capacity Building Branch**

Outline

- **Capacity Building Branch: Mission**
- **What is Capacity Building Assistance (CBA)?**
- **CDC CBA Structure**
 - Purpose of PS14-1403
 - PS14-1403 CBA Categories
 - PS14-1403 Strategies
- **How to Request CBA for PS17-1704**
- **How to Request other types of CBA services**

What is Capacity Building Assistance(CBA)

- **Capacity Building Assistance or “CBA” provision is free (not for fee) and is made available through a variety of methods including training, technical assistance (TA), and information dissemination.**
- **CBA is provided directly to community–based organizations, health departments and health care organizations.**
- **CBA services do not include the direct delivery of HIV prevention services, but may include on-going mentorship.**

Capacity Building Branch: Mission

- **To improve the performance of the HIV prevention workforce by increasing the knowledge, skills, technology, and infrastructure necessary to implement and sustain science-based, culturally appropriate HIV prevention interventions and strategies.**

Capacity Building Assistance (CBA) for High-Impact HIV Prevention: Program Structure

- **CDC funds 21 national organizations (23 CBA programs) to deliver services that will build the capacity of the HIV prevention workforce, including health departments (HDs), community-based organizations (CBOs), and health care organizations (HCOs).**

This portfolio includes:

- 8 CBA providers for HDs
- 11 CBA providers for CBOs
- 3 CBA providers for HCOs
- 1 CBA Resource Center

Capacity Building Assistance (CBA) for High-Impact HIV Prevention: Purpose

- **To strengthen the capacity of the HIV prevention workforce to optimally plan, implement, and sustain high-impact HIV prevention interventions and strategies within health departments, community-based organizations, and health care organizations.**
- **To reduce HIV infections and related morbidity, mortality, and health disparities across the United States and its territories.**

CBA for High-Impact HIV Prevention : Services

CBA services focus on:

- **High-Impact HIV Prevention (HIP) and supportive activities**
- **HIP behavioral, biomedical, and structural interventions and strategies**
- **Expanded HIV testing, strategies for prevention with HIV-positive (PwP) and prevention with negative (PwN) persons**

CBA for High-Impact HIV Prevention Categories

- **Category A: Health Departments**
- **Category B: Community-Based Organizations**
- **Category C: Health care Organizations**
- **Category D: CBA Resource Center**

CBA for High-Impact HIV Prevention: CBA for CBO Providers

- AIDS United
- Asian and Pacific Islander American Health Forum
- Asian and Pacific Islander Wellness Center
- ETR Associates
- JSI Research & Training Institute, Inc.
- Latino Commission on AIDS
- National Community Health Partners
- National Minority AIDS Council, Inc.
- New York City Department of Health and Mental Hygiene
- PROCEED, Inc. (Puerto Rican Organization for Community Education and Economic Development)
- The Regents of the University of California San Francisco

CBA for High-Impact HIV Prevention: Delivery Strategies

- **CBA Program Delivery Strategies**
 - **Training and skills building**
 - **Technical assistance**
 - **Information transfer**

CBA for High-Impact HIV Prevention : Delivery Strategies continued

- **Training and Skills Building**
 - **Training is the delivery of stand alone and interactive sessions to increase the knowledge, skills and abilities to plan, implement, evaluate or sustain HIP activities**
 - **Skills building involves the enhancement of skill-sets of key personnel whose activities contribute to increasing the capacity of an organization**

CBA for High-Impact HIV Prevention : Delivery Strategies continued

- **Technical Assistance (TA)**
 - TA is the provision and/or facilitation of culturally relevant and expert programmatic, scientific, and technical advice (mentoring/coaching) and support
 - TA services include but are not limited to: consultations, on-site services, and facilitation of peer-to-peer mentoring

CBA for High-Impact HIV Prevention : Delivery Strategies continued

■ Information Transfer

- Information transfer is the collection, packaging, and/or dissemination of information for the CBA service recipient
- Information may be disseminated through e-mail, list serves, batch faxes, and other methods

Capacity Building Assistance Services for PS17-1704 Applicants

- Review of existing HIP materials
- Consultation on preparation of grant applications
- HIV prevention program design and strategic planning
- Assistance with the development of SMART objectives and logic model
- Assistance with the selection, implementation, and adaptation of behavioral evidence-based interventions
- Assistance with the selection and implementation of biomedical and structural interventions and public health strategies

Capacity Building Assistance Services for PS17-1704 Applicants continued

- **Assistance with the implementation of HIV Continuum of Care activities, such as:**
 - HIV testing
 - Linkage to engagement, and re-engagement in care
 - Treatment adherence and viral suppression
 - Assistance with PwP and PwN strategies
 - Development of data management systems for HIV prevention program monitoring, evaluation, quality assurance, and reporting

Capacity Building Assistance Services for PS17-1704 Applicants continued

- **Development and/or enhancement of HIV prevention partnership strategies**
- **Development of human resources management**
- **Budget development and fiscal management systems**
- **Board development**
- **Assistance with organizational capacity to implement cost-effective programs, budget allocation modeling**
- **Third party billing systems**
- **Use of surveillance data to improve HIV prevention programs**

Capacity Building Assistance Services for PS17-1704 Applicants: Be Advised

- Organizations are encouraged to submit CBA requests early
 - Late submissions will not be honored
- CBA requests will be addressed in the order in which they are received
- CDC will accept CBA request forms until August 31, 2016
 - 14 days prior to the PS17-1704 application submission deadline
 - No CBA services will be delivered after September 6, 2016

Requesting CBA for PS17-1704

To request CBA services for PS17-1704, visit the PS17-1704 website and complete the CBO CBA Request Form and submit to the following email:

CBOCBARequest@cdc.gov

Requesting CBA for PS17-1704 continued

- **Following receipt of a PS17-1704 CBA request, CDC will route your request to the most appropriate CBA for CBO provider**
- **The CBA provider will contact your organization within 72 hours of receiving the request to initiate service delivery**
- **CBA will be delivered in the form of “information transfer” or “technical assistance”**

CBA Grant Writing Training Series

- **2- 2 day trainings**
- **6 cities**
- **Geographical approach**
- **No more than 2 participants per CBO**

CBA Grant Writing Training Series continued

Grant writing trainings will take place at the following geographical locations:

- **Atlanta**
- **Oakland**
- **Austin**
- **New York City**
- **Phoenix**
- **St. Louis**

For additional information please visit the PS17-1704 website and refer to the flyer at the pre-application workshops registration table

Additional CBA Resources

- High Impact HIV Prevention (HIP) Trainings
www.effectiveinterventions.cdc.gov
- PS17-1704: Comprehensive High-Impact HIV Prevention Projects for Young Men of Color Who Have Sex with Men (YMSM) and Young Transgender Persons of Color (YTG of Color)
- : <http://www.cdc.gov/hiv/topics/funding/PS17-1704/index.htm>
- Questions related to PS17-1704: CBOFOA@CDC.gov

Contact Information

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.