DIRECT AWARD NOTIFICATION

National HIV Behavioral Surveillance

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| **DIRECT AWARD JUSTIFICATION**  
**NATIONAL HIV BEHAVIORAL SURVEILLANCE** |
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<td><strong>BACKGROUND:</strong> The Georgia Department of Community Health (DCH) was created in 1999 (Senate Bill 241) with the responsibility for insuring over two million people in the State of Georgia to maximize the State's health care purchasing power, to coordinate health planning for state agencies, and to propose cost-effective solutions to reducing the numbers of uninsured. Within the Department, the Division of Public Health is responsible for disease control and prevention, the reduction of avoidable injury-related deaths and disabilities, and the promotion of healthy lifestyles. The three basic functions of public health include assessing the health status of the population; assuring that people have the resources and skills necessary to remain healthy; and establishing and implementing sound public health policy.</td>
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<td><strong>PROGRAM BACKGROUND:</strong> Georgia’s HIV Behavioral Surveillance system is part of the Centers for Disease Control and Prevention’s (CDC) National HIV Behavioral Surveillance (NHBS) system designed to collect important behavioral data from groups at increased risk of acquiring HIV infection. Georgia has been a participant in this supplemental HIV surveillance system since its inception in 2003. The goals of this surveillance system are to: (1) develop an integrated monitoring system to measure incidence of new HIV infections; (2) track the prevalence of disease; (3) monitor behaviors including those that increase the risk of HIV infection (for those who are HIV-uninfected) and those that increase the risk of disease progression (for those who are living with HIV); and, (4) provide locally relevant data for HIV prevention planning and evaluation.</td>
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<td><strong>PROGRAM DESCRIPTION:</strong> National HIV Behavioral Surveillance System activities consist of conducting formative research and community-based surveys and HIV testing with three distinct populations at increased risk of HIV infection: (1) men who have sex with men; (2) injection drug users; and, (3) high-risk heterosexuals. Data collection rotates each year among these populations. In 2010, NHBS data collection will occur among high-risk heterosexuals. Following CDC-developed protocols, Georgia will conduct approximately 600 surveys and HIV tests.</td>
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<td><strong>AWARD JUSTIFICATION:</strong> Georgia Division of Public Health has subcontracted with Emory University’s Rollins School of Public Health (RSPH) to conduct NHBS since first receiving the CDC award in 2003. The NHBS Project Team at RSPH has developed the extensive infrastructure necessary to support this system including the retention of many of the original staff who are highly trained and experienced in the implementation of complex sampling methodologies and project protocols associated with NHBS. The Principal Investigator at Emory has overseen the</td>
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system for four years and has attended CDC’s annual meetings related to leading this project. The staffing continuity is critical to the continued success of NHBS since there is no down time with this project; activities are year-round and require extensive training and experience to conduct. The NHBS Project Team has also developed relationships over the last 6 years with many community organizations serving the NHBS target populations and these supportive relationships are essential to the seamless recruitment of participants and collection of surveillance data. Additionally, RSPH has the administrative and financial infrastructure to continue supporting NHBS.

When the Georgia Division of Public Health initially bid the NHBS contract in 2003, Emory’s School of Public Health stood out above other applicants because of the then Principal Investigator’s established HIV behavioral research portfolio, the strong proposal they submitted demonstrating their capacity to conduct the required deliverables, and the established infrastructure at the school to support this type of research. The contract has been renewed annually and the NHBS research team has continued to demonstrate great success in implementing the complex NHBS system.

Emory’s strength as the leading partner for this project is supported by the history, mission, values, and resources of the institution. The relationships the university has garnered throughout its existence and the contributions of the University’s research have significantly enhanced the promotion and development of public health policy.

The mission of the Rollins School of Public Health of Emory University is to acquire, disseminate, and apply knowledge, and train leaders to promote health and prevent disease in human populations around the world.

At the Rollins School of Public Health (RSPH), students learn to identify, analyze, and intervene in today’s most pressing public health issues. The school’s location in Atlanta, referred to as the "Public Health Capital of the World," also is home to the U.S. Centers for Disease Control and Prevention; CARE; the national home office of the American Cancer Society; The Carter Center; the Arthritis Foundation; numerous state and regional health agencies; and the patient care, teaching, and health-related research programs of Emory University’s Woodruff Health Sciences Center. This setting is ideal for hands-on research, collaborations with the world’s leading public health agencies, and interdisciplinary work with national and international organizations.

The program is community oriented, and many students bring actual problem-solving experience with them. Students join the RSPH community from all fifty states and from more than forty foreign countries to contribute to the school and apply knowledge to promote health and prevent disease in human populations.
The school comprises six academic departments: behavioral sciences and health education, biostatistics, environmental and occupational health, epidemiology, health policy and management, global health, and hosts over 20 interdisciplinary centers. More than 160 full-time, doctoral-level faculty members teach and conduct research in areas such as mathematical modeling of infectious disease transmission, exploring relationships between nutrition and chronic disease, and investigating cancer causation and control. Other research interests include identifying the social determinants of health-risk behaviors, AIDS, developing church-based health promotion programs to foster changes in nutrition and other health-related behaviors, detecting and preventing adverse outcomes in occupational settings, and evaluating the cost of health care and the allocation of health resources.

The RSPH also draws strength from several unique local resources. The U.S. Centers for Disease Control and Prevention, the federal agency dedicated to developing and applying disease prevention and control programs, provides more than one-half of the school's more than 200 adjunct faculty. The Carter Center is involved in international health intervention programs that provide student practicum opportunities. Our students learn from staff of the Task Force for Child Survival and Development, both in the classroom and as interns in the field. The school also shares research activities with the national headquarters of the American Cancer Society and international headquarters of CARE, both based in Atlanta.

This will be a multi-year award contingent upon the availability of future funding.

AWARD(S):
TOTAL DIRECT AWARD FUNDS AVAILABLE: $375,000 - $393,000 Annually, Contingent upon FY2010 Federal Award.

TO SUBMIT INQUIRIES TO THIS DIRECT AWARD NOTIFICATION
Contact Romero Stokes, DCH Grant Compliance Monitor at rstokes@dch.ga.gov
no later than 2:00 on Friday, November 6, 2009.