



Block 2

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Dear Program Developer,

Your program, \${e://Field/ProgramName}, is posted on the Evidence-Based Cancer Control Programs (EBCCP) website, formerly known as the Research-tested Intervention Programs (RTIPs). The National Cancer Institute is interested in updating the programs on the site and to learn if your program has new outcomes to report, new publications, if your program has been used by others, and understanding accessibility of posted programs for people with disabilities (mental or physical). Your input is valuable in keeping the EBCCP website up to date and current. All questions are optional, and you may exit the survey at anytime. Please send questions to ebbcpr@icf.com.

Contact

What is your full name?

What is your email address?

What is your phone number?

Program Loop

Are you able to provide information about the \${e://Field/ProgramName} program?

- ☐ No
- ☐ Yes

Who can we contact about the \${e://Field/ProgramName} Program (please provide a name and email address)?

Has \${e://Field/ProgramName} program updated since the original posting of
\${e://Field/PostedYear}?

\${e://Field/ProgramDetailsURL}

- ☐ Yes
- ☐ No
- ☐ Maybe

Do you believe these updates should be reflected on your EBCCP program summary page?

- ☐ Yes
- ☐ No
- ☐ Maybe

What year(s) did your program updates occur?

Would you like to update any website links \${e://Field/ProgramDetailsURL} for the \${e://Field/ProgramName} program?

- ☐ Yes
- ☐ No

Please write which website links need updating and the updated website link.

Have you developed new program materials or added program components for the \${e://Field/ProgramName} program?

- ☐ Yes
- ☐ Maybe
- ☐ No

Please briefly describe the newly developed materials and components.

Have you evaluated/tested the new materials in a research study?

- ☐ Yes
- ☐ Maybe
- ☐ No

Did the new materials produce one or more positive behavioral and/or psychosocial outcomes ($p \leq .05$) among individuals, communities, or populations?

- ☐ Yes
- ☐ Maybe

☐ No

Please provide a citation for each new study that produced a positive outcome.

Have you conducted any dissemination and implementation studies?

- ☐ Yes
- ☐ No
- ☐ Maybe

Did the dissemination and implementation studies produce one or more positive behavioral and/or psychosocial outcomes ($p \leq .05$) among individuals, communities, or populations?

- ☐ Yes
- ☐ No
- ☐ Not sure

Please provide citations for your dissemination and implementation studies.

Has the \${e://Field/ProgramName} program been implemented or used by others since your main outcomes publication?

- ☐ Yes
- ☐ No

☐ Maybe

Please list the contact information for all known implementers. The EBCCP website hopes to feature more implementation case studies.

Has your program been assessed in any way to improve accessibility for those with disabilities (mental or physical)?

- ☐ Yes
- ☐ No
- ☐ Unsure

Please provide a description of accessibility assessments or adaptations and include new citations if available.

Would you like to provide any additional information?

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