

Research Protocol and Consent Forms
Supported Employment COVID-19 Rapid Testing for PWID
ID: STUDY00000657
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Statistical Analysis Plan

Before modeling the study outcomes, we summarized the sample, program participation, and attrition. The normality assumption for well-being, health communication self-efficacy, and peer-support self-efficacy was evaluated by inspecting measures of skewness and kurtosis, as well as examining plots (e.g., normal Q-Q plots). The outcomes were screened for extreme outliers, defined as standard scores that were ± 3.0 standard deviations.

We used mixed-effects linear growth models estimated with restricted maximum likelihood to evaluate changes in well-being, health communication self-efficacy, and peer-support self-efficacy, as implemented in PROC MIXED from the Statistical Analysis System (SAS, Version 9.4). The initial model to evaluate slope included the fixed effect of time, with the baseline measure defined as the random intercept. The knowledge and risk behaviors are count variables and were estimated using generalized linear fixed-effect models with restricted maximum likelihood, as implemented in SAS PROC GLIMMIX. These models specified a log-logit function and a negative binomial response distribution to account for extra variation, including zero inflation in the data. Maximum likelihood was used to account for missing outcome data.