## Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0920-1026)

**TITLE OF INFORMATION COLLECTION:** Influenza Capacity Platforms during Ebola Response Efforts in Africa

**PURPOSE:** Since 2006, CDC has provided funding and support for pandemic influenza preparedness and response and capacity building for influenza laboratory and epidemiology to countries in Africa. CDC assisted with the set-up of sentinel surveillance sites for monitoring severe illness and circulating influenza viruses, as well as facilitated the development of laboratory capacity for diagnosis of influenza, through support for equipment, reagents and training. CDC collaborated with the World Health Organization (WHO) to support rapid response training for teams to prepare response to novel influenza viruses and potential pandemics. This capacity building was instrumental in response to the H1N1 pandemic in 2009.

CDC has learned that some countries have successfully used CDC influenza capacity building efforts as a platform to assist with the detection and response to other diseases and pathogens. Uganda, for example, used the influenza capacity building for laboratory, sentinel sites and rapid response in the 2007 response to Ebola. CDC has also learned anecdotally that the PPE purchased for H5N1 and supplied to countries in Africa is now being used widely for the current Ebola response and that the PCR capacity set up for influenza has been instrumental in laboratory capacity to test for Ebola.

CDC is seeking feedback from African partners about how on-going influenza capacity-strengthening has, if at all, contributed to regional surveillance & response specific to Ebola. This feedback will assist CDC in identifying and focusing attention on areas where CDC can improve services currently provided and if these services can be broadened to support capacity for Ebola.

**DESCRIPTION OF RESPONDENTS**: As identified below, there are 27 respondents total with one respondent per country. The respondent is identified as either (1) the principal point of contact in cooperative agreement partner countries for Influenza Surveillance and Response with Ministries of Health in Africa or (2) the principal point of contact in Ministries of Health for partner countries who receive technical assistance for capacity building for influenza laboratory, epidemiology and response through training, provision of reagents, site visits and assessments. The total time to complete the voluntary survey is 5 minutes.

| Cooperative Agreement Partner Countries | Partner Countries |
|---|-------------------|
| Nigeria                                 | Burkina Faso      |
| Ethiopia                                | Togo              |
| Tanzania                                | Niger             |
| Uganda                                  | Sierra Leone      |
| Rwanda                                  | Mauritania        |

| Ghana         | Cameroon                 |  |
|---------------|--------------------------|--|
| Mali          | Chad                     |  |
| Cote d'Ivoire | Burundi                  |  |
| Senegal       | Seychelles               |  |
| Madagascar    | Comoros                  |  |
| Mozambique    | Reunion                  |  |
| Zambia        | Mauritius                |  |
| South Africa  | Republic of Congo        |  |
|               | Central African Republic |  |

| TYPE OF COLLECTION: (Check one)   |  |
|---|--|
| [ ] Customer Comment Card/Complaint Form<br>[ ] Usability Testing (e.g., Website or Software<br>[ ] Focus Group   |  |
| CERTIFICATION:  |  |
| I certify the following to be true: 1. The collection is voluntary. 2. The collection is low-burden for respondents                                     | s and low-cost for the Federal Government      |
| <ol> <li>The collection is low-builden for respondents</li> <li>The collection is non-controversial and does agencies.</li> </ol>                       |  |
| <ul><li>4. The results are <u>not</u> intended to be disseminated.</li><li>5. Information gathered will not be used for the policy decisions.</li></ul> |  |
| 6. The collection is targeted to the solicitation of experience with the program or may have ex   | <u>.</u>                                       |
| Name:Ann Moenalc3@cdc.gov   |  |
| To assist review, please provide answers to the f   | ollowing question:                             |
| Personally Identifiable Information:  |  |
| <ol> <li>Is personally identifiable information (PII) co</li> <li>If Yes, is the information that will be collected</li> </ol>                          |  |
| Privacy Act of 1974? [ ] Yes [ x ] No   | ·  |
| 3. If Applicable, has a System or Records Notice  | ce been published? [ ] Yes [ ] No              |
| Gifts or Payments:  |  |
| Is an incentive (e.g., money or reimbursement of participants? [ ] Yes [X ] No  | f expenses, token of appreciation) provided to |

## **BURDEN HOURS**

| Category of Respondent | No. of      | Participation | Burden  |
|------------------------|-------------|---------------|---------|
|                        | Respondents | Time          |         |
| Individual             | 27          | 5/60 hours    | 2 hours |
|                        |             |               |         |
| Totals                 |             |               | 2 hours |

**FEDERAL COST:** The estimated cost to the Federal government is \$250.00

| If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:   |
|--|
| <ul><li>The selection of your targeted respondents</li><li>1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?         <ul><li>[ x] Yes</li><li>[] No</li></ul></li></ul>   |
| If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them? The respondent is identified as either (1) the principal point of contact in cooperative agreement partner countries for Influenza Surveillance and Response with Ministries of Health in Africa or (2) the principal point of contact in Ministries of Health for partner countries who receive technical assistance for capacity building for influenza laboratory, epidemiology and response through training, provision of reagents, site visits and assessments. Because the respondent pool is already identified and no other person will respond on behalf of the target country, a sampling plan is not applicable to this data collection. |
| Administration of the Instrument  1. How will you collect the information? (Check all that apply)  [ X] Web-based or other forms of Social Media  [ ] Telephone  [ ] In-person  [ ] Mail  [ ] Other, Explain  2. Will interviewers or facilitators be used? [ ] Yes [X ] No  |
| List of attachments: Attachment A: Influenza Capacity Platforms during Ebola Response Efforts in Africa_Survey Attachment B: Email Invitation Attachment C: Email Follow-up  |