

Maternal and Child Health Zika Capacity Assessment

OSTLTS Generic Data collection Request

OMB No. 0920-0879

Supporting Statement – Section B

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Section B – Data collection Procedures

1. Respondent Universe and Sampling Methods

All LHDs in 10 high priority jurisdiction states for Zika virus response will be invited to participate in this data collection. The 10 high priority states were selected based on their designation as high priority jurisdictions by the CDC, during the Zika Response activities. This designation is based on the presence of the *Aedes aegypti* and *Aedes albopictus* mosquitoes. These mosquitoes live in tropical, subtropical, and in some temperate climates which have disproportionately infected South America, Central America, and the Southern United States. The identified high priority states are identified in NACCHO's *Mosquito Surveillance and Control Assessment in Zika Virus Priority States* publication.¹ Also, states were included in the sampling universe if they had reported Zika virus in the community (travel-related, sexual transmission, or local Zika virus transmission).²

In total, 690 LHDs have been identified and will receive the assessment. The identified LHDs are located in the following high priority jurisdictions (states): Alabama (67), Arizona (16), California (64), Florida (67), Georgia (158), Hawaii (5), Louisiana (63), Mississippi (81), New York (58), and Texas (111) (see **Attachment A – Respondent Breakdown**). Respondents includes local health officials who serve as local Zika response leaders/coordinators (e.g., MCH leader, agency leadership, epidemiology/surveillance leader, or infectious/communicable diseases leader) at the LHD. CDC, with support from NACCHO, will engage identified LHDs via an initial email (see **Attachment D – Notification Email**) for participation in the assessment. LHDs that do not respond to the request within two (2) weeks will receive a second follow-up email (see **Attachment E – Reminder Email**) to encourage participation in the assessment. If needed, NACCHO will extend the response time to the assessment and notify those that haven't responded via email (see **Attachment F – Extension Email**).

LHDs and local Zika response leaders/coordinator in the 10 high priority jurisdictions for the Zika virus response were identified using NACCHO's current membership database and registry of LHDs. LHDs and local Zika response leaders/coordinators were also verified through coordination with the Association of State and Territorial Health Officials (ASTHO) and

Association of Maternal and Child Health Programs (AMCHP) to ensure all relevant respondents are identified.

2. Procedures for the Collection of Information

Data will be collected via an electronic, web-based assessment tool and respondents will be recruited through a notification email (see **Attachment C – Notification Email**) sent to the 690 LHDs in the 10 high priority jurisdictions for Zika virus response. The notification email will explain:

- The purpose of the data collection, and why their participation is important
- Instructions for participating
- Method to safeguard their responses
- That participation is voluntary
- The expected time to complete the instrument
- Contact information for the project team

The email will also provide instructions for participation and a unique link to the online assessment. Qualtrics, an online data collection tool, will be used to develop the assessment instrument, disseminate the assessment to respondents, and collect data from the assessment. Using a web-based tool will reduce the burden on respondents by allowing them to take the assessment at their own convenience and by allowing them to skip irrelevant questions. The assessment was designed to collect the minimum information necessary for the purposes of this project.

Respondents will be asked for their response to the instrument within a three (3) week period to allow ample time for respondents to complete the assessment. Respondents may complete the assessment in multiple sessions, if necessary. If needed, NACCHO will extend the assessment period by two (2) weeks to obtain additional responses. Reminders will be sent to non-respondents at the end of the second week to urge them to complete the assessment (see **Attachment E – Reminder Email**). If needed, NACCHO will extend the time to complete the survey by two (2) weeks. NACCHO will notify respondents via email (see **Attachment F – Extension Email**). Those who do not respond within two (2) weeks of the extension reminder email will be considered non-respondents.

Upon completion of the data collection period, data will be downloaded, cleaned, de-identified, and coded using STATA and excel. Data analysis, for descriptive statistics, cross tabulations and subgroup analysis, will also be performed using STATA and Microsoft Excel. CDC and NACCHO will develop a final report which will be shared with CDC senior leadership, as well as NACCHO members through various media and dissemination channels. Although NACCHO will collect some individually identifiable information (IIF) related to the official roles of respondents, including the respondent's name and official role at the LHD, all information will be kept on secure, password protected servers accessible only to NACCHO project team members, CDC will not have access to any collected IIF. Data collected during the assessment will be shared with CDC only in aggregate form. CDC and NACCHO will also only report findings from this assessment in aggregate form, therefore no IIF will be distributed.

3. Methods to Maximize Response Rates Deal with Nonresponse

Although participation in the data collection is voluntary, the project team will make every effort to maximize the rate of response. The data collection instrument was designed with particular focus on streamlining questions to allow for skipping questions based on responses to previous questions, thereby minimizing response burden.

Following the distribution of the invitation to participate in the data collection, (see **Attachment D—Notification Email**), respondents will have three (3) weeks to complete the instrument. Those who do not respond within three (3) weeks will receive a reminder via email (see **Attachment E – Reminder Email**) urging them to complete the instrument. If needed, NACCHO will extend the time to complete the survey by two (2) weeks. NACCHO will notify respondents via email (see **Attachment F – Extension Email**). Those who do not respond within two (2) weeks from the extension email will be considered non-responders.

4. Test of Procedures or Methods to be Undertaken

The estimate for burden hours is based on a pilot test of the data collection instrument by 7 public health professionals. In the pilot test, the average time to complete the instrument including time for reviewing instructions, gathering needed information and completing the

instrument, was approximately 5 minutes 30 seconds (range: 4 to 9 minutes). For the purposes of estimating burden hours, the upper limit of this range (i.e., 9 minutes) is used.

5. Individuals Consulted on Statistical Aspects and Individuals Collecting and/or Analyzing Data

CDC and NACCHO staff were consulted on statistical aspects of the assessment and those responsible for collecting and/or analyzing data. NACCHO will be responsible for collecting, cleaning, and analyzing the assessment data. The following individuals were consulted:

Centers for Disease Control and Prevention

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- Nicole Fehrenbach, MPP, Deputy for Management and Operations, National Center on Birth Defects and Developmental Disabilities, ekk5@cdc.gov, 404-316-7961
- Mary Noe, MPH, CCLS, ORISE Fellow, Pregnancy and Birth Defects Task Force, CDC Zika Virus Response Team, nmb0@cdc.gov, 706-818-1084

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- Kara Suvada, Intern, Safe and Healthy Families, ksuvada@naccho.org

LIST OF ATTACHMENTS – Section B

Attachment D – Notification Email

Attachment E – Reminder Email

Attachment F – Extension Email

REFERENCE LIST

1. National Association of County and City Health Officials (NACCHO). "Mosquito Surveillance and Control Assessment in Zika Virus Priority States." Available at <http://www.naccho.org/uploads/downloadable-resources/VectorAssessmentDec2016NACCHO.pdf>
2. Centers for Disease Control and Prevention. Key Messages- Zika Virus Disease, 2017a. Retrieved from: <https://www.cdc.gov/zika/pdfs/zika-key-messages.pdf>