Request for Approval under the "Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)" (OMB#: 0925-0740 Exp Date: 05/2019)

TITLE OF INFORMATION COLLECTION:

Demographic Information Survey on NIH Trainees/Fellows

PURPOSE:

The purpose of this survey is to collect voluntary demographic data on the race, ethnicity, sex, and disability status of individuals who serve in the capacity of fellows and/or trainees at the National Institutes of Health (NIH). This demographic information is needed to determine whether the NIH is training a diverse group individuals who in many cases will be a part of the pool of future biomedical and behavioral scientists. Additionally, this information will equip the agency with information needed to target existing outreach efforts to underrepresented populations.

NIH Institutes and Centers request aggregate information on the demographics of their training populations from the NIH Office of Equity, Diversity and Inclusion (EDI) as they assess their diversity and inclusion strategies, and attempt to respond to external governmental requests for information. However, EDI is unable to provide this information. Hence, we are requesting approval to collect this data.

DESCRIPTION OF RESPONDENTS:

This group of individuals are not full-time equivalent federal employees. They are trainees and fellows in the NIH Institutes and Centers.

TYPE OF COLLECTION: (Check one)

[] Abstract	[] Application
[] Registration Form	[X] Other: <u>Demographic Survey</u>

CERTIFICATION:

I certify the following to be true:

- 1. The collection is voluntary.
- 2. The collection is low-burden for respondents and low-cost for the Federal Government.
- 3. The collection is non-controversial and does <u>not</u> raise issues of concern to other federal agencies.

Name: Shelma M. Little, Ph.D.

To assist review, please provide answers to the following question:

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? [X] Yes [] No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? **[X]** Yes **[**] No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No Amount: ______ Explanation for incentive: (include number of visits, etc.)

ESTIMATED BURDEN HOURS and COSTS

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
NIH Trainee/Fellow	2498	1	5/60	208
Totals	2498	1	5/60	208

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
NIH Trainee/Fellow	208	\$15.67	\$3,261.97
Totals	208	\$15.67	\$3,261.97

*Cite source per bls.gov if applicable: NIH Office of Intramural Research & Education Training website <u>https://www.training.nih.gov/postbac_irta_stipend_levels</u>

FEDERAL COST: The estimated annual cost to the Federal government is _____

			% of	Fringe (if applicable)	Total Cost to Gov't
Staff	Grade/Step	Salary	Effort		
Federal Oversight					
Management Analyst	13/1	\$94,796	.50		\$473.98
Contractor Cost					
Travel					
Other Cost					
Total					\$473.98

The selection of targeted respondents

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?
 [X] Yes
 [] No

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 survey will be sent electronically to all trainees/fellows onboard at NIH, and will be given to new trainees as they come onboard. The complete list of trainees/fellows onboard is maintained in the Fellowship Payment System.

Administration of the Instrument

- 1. How will you collect the information? (Check all that apply)
 - [] Web-based or other forms of Social Media
 - [] Telephone
 - [] In-person
 - [] Mail
 - [] Survey form
 - [] Chart Abstraction
 - [X] Other, Explain: via electronic survey
- 2. Will interviewers, facilitators, or research coordinators be used? [] Yes [X] No

Please make sure that all instruments, instructions, and scripts are submitted with the request.