TITLE OF INFORMATION COLLECTION: CSELS BEHAVIORAL HEALTH DATA FOR RESPONSE EFFORTS: INTERVIEWS WITH NON-GOVERNMENTAL ORGANIZATIONS

PURPOSE: Currently, CDC is not maximizing use of its behavioral science expertise to conduct needed behavioral assessments that inform an evidence-based infectious disease outbreak response plan. As a result, CDC makes behavioral recommendations for infectious disease prevention and control that may not be culturally appropriate, relevant, understood, or acted upon by participants, resulting in ineffective or inefficient outbreak or emergency response efforts. CDC rolls out strategies that are based on epidemiologic assessments only, rather than taking into account a population's knowledge, attitudes, and beliefs (KABs) and cultural practices/ understandings. Until we can reconcile both, our interventions will be met with uptake challenges or community resistance. CDC response teams need a quick/efficient way to deploy behavioral assessments simultaneously w/epi assessments at outset of an outbreak.

In times of emergency response, it is critical for CDC to quickly provide behavioral recommendations that are culturally acceptable, effective and actionable for at-risk populations. The project will explore opportunities to help outbreak response teams come up with the best recommendations, including interventions based on both epidemiological and behavioral evidence that communities at risk of infection will be most likely to understand, accept and act on. A possible solution is to explore whether rapid audience/user input tools or templates, based on free and widely available tools (e.g., Epi-Info), could be used to help public health authorities understand the behavioral drivers of people in communities at risk during an outbreak response. Findings could then be applied to the development of more culturally appropriate and effective messages and interventions.

DESCRIPTION OF RESPONDENTS:

Populations and customers to be interviewed include staff from not-for-profit organizations engaged in and performing emergency response activities in affected areas.

TYPE OF COLLECTION: (Check one)

[] Customer Comment Card/Complaint Form

[] Usability Testing (e.g., Website or Software

[] Focus Group

[] Customer Satisfaction Survey
[] Small Discussion Group
[x] Other: <u>one-on-one interviews</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.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> policy decisions.
- 6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

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

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? [] Yes [X] No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes **[X] No**
- 3. If Applicable, has a System or Records Notice been published? [] Yes [] No [X] N/A

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes **[X] No**

BURDEN HOURS

Type of Respondents	Form Name	No. of Respondents	No. of Responses per Respondent	Avg. Burden per Response (in hrs.)	Total Burden (in hrs.)
		1			
Public Health	Interview	50	1	30/60	25
Emergency	Guide				
response					
managers and					
team leads					
Total					25