## Request for Approval under the Generic Clearance “CDC I-Catalyst Program”

## (OMB Control Number: 0920-1158)

**TITLE OF INFORMATION COLLECTION:** TRAVELERS HEALTH – individual Travelres

**PURPOSE:** All CDC Travelers’ Health (TH) content published to our website is in the public domain, and as such, any individual traveler or third party is able to access, copy and repurpose/republish this content. In fact, some commercial travel health information and international health and safety update providers are already engaging in this activity. This can be seen as a way to amplify CDC’s messaging, as external information providers may have a larger audience than the CDC website, and may be able to reach audience members who would otherwise be unaware of CDC information. However, currently CDC has no way of ensuring that third party users are providing the most accurate and up-to-date information to their audience, because each provider is responsible for copying and then maintaining CDC Travel Health content. CDC also cannot know if the currently available content provided on our website is attractive to individuals and third party users as a resource to meet their travel health information needs. Further, CDC has no way of tracking the ultimate reach of messaging when and if provided to customers by a third party. We would like to clarify these knowledge gaps, as well as appeal to a wider variety of individual travelers and third party content providers.

Travelers Health team desire feedback from these stakeholders about how best to optimize CDC travel health content and mechanisms by which they would prefer to receive and engage with CDC content. These stakeholders may include: travelers themselves; travel writers and bloggers; any individuals involved in developing and promoting travel-related website or apps; travel agents; and other groups in the international travel industry. The project team seeks to discover current practices for travel health content generation and delivery, and understand what their priorities and challenges are for accessing, utilizing and packaging of travel health content. We also want to find out from these stakeholders if they are currently consuming and using Travel Health content to inform during the travel planning process, and if so, how and what ways that CDC can reach more people and make our content more useful to users. We hope to gain insights into best practices for delivering timely, accurate information to travelers and third party users on travel health information.

**DESCRIPTION OF RESPONDENTS**:

Populations and customers to be interviewed include Travelers (individuals – international travelers).

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [ ] Customer Satisfaction Survey

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

[ ] Focus Group **[x] Other: one-on-one interviews**

**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 not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential 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.

Name: Juliana K. Cyril; Director -Office of Technology and Innovation – OADS CDC

Team Lead – Robert Lash, NCEZID

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.)** |
|  |
| Individual Travelers | Interview Guide | 50 | 1 | 30/60 | 25 |
| Total |  | 25 |