

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” HHS Communications (OMB Control Number: 0990-0459)

TITLE OF INFORMATION COLLECTION:

Tailor Health Messaging to Address Racial and Ethnic Disparities in Adult Immunization

PURPOSE:

The Office of the Assistant Secretary for Health, Region 7 seeks to address the disparities in vaccine coverage for non-Hispanic African Americans by enhancing health messages around adult immunization, specific to pneumococcal and herpes zoster vaccination, to increase community demand for these vaccination in an effort to decrease racial and ethnic disparities as it relates to vaccination throughout the country.

This project is designed to increase community demand for pneumococcal and herpes zoster vaccination by utilizing the Health Belief Model (HBM) to enhance targeted health messages based feedback from non-Hispanic African American Community Health Workers (CHWs) over the age of 50. This purpose aligns with the National Adult Immunization Plan, goal three, to “increase community demand adult immunization”.

According to the Center for Disease Control and Prevention, vaccination rates for adults are low, and disparities persist among racial and ethnic minority populations. Disparities in vaccine coverage for non-Hispanic African Americans have widened with pneumococcal and herpes zoster vaccination. Rates for pneumococcal vaccination among African Americans were lower compared to Whites (55.5% vs 71%, respectively). Moreover, rates for herpes zoster vaccination was also lower for African Americans compared to Whites (15.7% vs 37.7%, respectively).

DESCRIPTION OF RESPONDENTS:

Virtual focus group participants are Non-Hispanic African American Community Health Workers over the age of 50 that reside in two major metropolitan areas located within Region 7 - Omaha, NE and Kansas City, MO. Targeted populations were selected based on supporting data from CMS Mapping Medicare Disparities Tool.

Participants will be recruited through OASH Region 7 partnering agencies via emails and telephone invites. Email invitation and telephone script are attached. For Black/ African American CHWs in Omaha, NE, participants were recruited through the Moriah Heritage Center, a faith-based community organization which serve intergenerational families. For Kansas City, MO, participants will be recruited via email and telephone invite to community-based groups to include adult learning centers, and faith-based networks.

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
- Other: _____

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: _____ Sharon Carothers _____

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

Personally Identifiable Information:

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

Gifts or Payments:

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

Participants will be provided an incentive of \$75 for participation in the focus group. In an effort to engage participants who fit within this demographic (over 50 years old), an incentive is recommended. Participants are older and will travel to specific sites to participate in the focus group. The incentive will provide monetary aid for the burden of participation.

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden hour
1) Individuals (African American Community Health Workers over the age of 50) – Focus Groups	30	1	30
Totals	30		30

FEDERAL COST: The estimated annual cost to the Federal government is \$200,000

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

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?
[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 Office of the Assistant Secretary for Health, Region 7 intends to engage African American Community Health Workers over the age of 50 from partnering agencies within Region 7 for this project. Participants will be selected utilizing a “snowball sampling”. African American Community Health Workers over 50 will be invited via email and/or telephone to participate in the focus group. Participants will also identify other potential participants with similar demographics to participate. A request for participants will be sent to partnering agencies via email and telephone invite within Kansas City, MO and Omaha, NE. Participation is voluntary.

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
[X] Other, Explain
Video conferencing system.
2. Will interviewers or facilitators be used? [X] Yes [] No
Yes, an interviewer will be used for the virtual one-on-one focus group testing session.

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

Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or

groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households;(2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected.

No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

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