Request for Approval under the "Generic Clearance for Citizen Science and Crowdsourcing Projects" (OMB Control Number: 2080-0083)

TITLE OF INFORMATION COLLECTION: Using Citizen Science to Improve Drinking Water Epidemiology Studies

PURPOSE: This project showcases the simplicity of an innovative saliva test and improves the way epidemiology studies are designed using citizen science. Families with school age children will report incidences of gastrointestinal disease to school nurses and/or science teachers to facilitate follow-up stool and saliva tests by EPA in impacted school districts. Drinking water, stool and saliva samples will be collected by researchers and analyzed by Interamerican University, EPA Office of Research and Development (ORD) and Region 2 scientists. The project will allow citizens to investigate the incidence and type of gastrointestinal illness in rural communities in Puerto Rico without municipal (PRASA) drinking water treatment plants. This will better characterize and inform public health concerns related to drinking water treatment processes.

NEED AND AUTHORITY FOR COLLECTION: InterAmerican University received an Institutional Review Board (IRB) for Protection of Human Subjects in Research on January 26, 2018. On April 5, 2018 this project received approval from EPA's Human Subjects Research Review Office for use of Human Subjects Research according to the requirements of EPA Order 1000.17 Change A1 (Policy and Procedures on Protection of Human Research Subjects) and can confirm that this study complies with EPA Regulation 40 CFR 26 (Protection of Human Subjects).

USES OF RESULTING DATA: Results from all aspects of the epidemiology study will be compiled and interpreted for publication in peer-reviewed journal articles. The resulting data may provide a direct link between community health and drinking water treatment using citizen science in underserved communities in rural Puerto Rico.

DATA COLLECTION METHODS: School nurses, science teachers, and/or researchers from EPA Region 2 and InterAmerican University will recruit and enroll local families with at least one child in the 4th to 6th grade. An adult family member or guardian will complete one baseline survey to gather limited demographic data and information about risks related to waterborne illness (*i.e.* water usage and sanitation). At approximately one-month intervals, for a total of 3 months, an adult family member or guardian will complete a health survey on symptoms experienced by the child participant. Completed surveys will be returned to school nurses and science teachers by the child participant or family member. Study staff from InterAmerican University will collect and compile surveys from schools. EPA and InterAmerican University will analyze stool, saliva and drinking water samples. Compiled survey information and analytical results will be interpreted to prepare a summary report that includes all aspects of the epidemiology study.

PARTICIPANT UNIVERSE:

Category of	No. of Respondents	Number of	Participation Time	Burden Hours
Respondent		responses per	per response	
		respondent		
Family members	500	4 (1 baseline + 3	15 minutes	500 hours
		health surveys)		
Totals	500			500 hours

AGENCY COST: The estimated cost to the Federal government is \$70,000 for project design and implementation. \$30,000 of sampling supplies will be purchased by EPA (\$15,000/year). Four EPA employees are collaborating on this project. It is estimated that each spends about 20% of their time (0.20 FTEs each) on this citizen science project.

STATISTICAL ANALYSIS:

The objective of statistical analysis is to assess and compare associations between water quality and infections with specific potentially waterborne pathogens. Anticipated survey results will satisfy the survey objectives.

Two approaches to statistical analysis of assay data will be used. For acute infections which have a relatively short incubation period and produce short-term immunity, such as noroviruses, *Campylobacter spp.* and *Cryptosporidium spp.*, immunoconversion will be used as an indicator of incident infection as described previously (Griffin et al., 2015). Immunoconversion will be defined as at least four-fold increase in salivary antibody response between consecutive samples. Additional criteria may be used to improve the specificity of the immunoconversion tests, such as age-specific cut-off values derived from regressing antibody data on age using penalized splines as described previously (Egorov et al., 2010), and at least three-fold increase in third sample (S3, collected 2 months after baseline) compared to baseline (S1) sample (Wade et al., manuscript in review). For chronic infections, *H. pylori* and *T. gondii*, analysis will focus on identifying chronically infected individuals. DNA-based molecular methods will aso be conducted to determine the bacterial diversity and the presence of waterborne pathogens in the stool samples.

Analysis of associations between water quality and acute infections will be conducted using logistic regression models. Analysis will be repeated for asymptomatic infections (immunoconversion, no symptoms) and symptomatic infections (immunoconversion with symptoms).

For chronic infections, demographic, socioeconomic and behavioral risk factors for infections will be explored. In addition, potential impacts of chronic infections on antibody responses to incident acute infections will be explored.

DATA QUALITY ASSESSMENT PROCEDURES:

All samples from the same individual will be assayed at the same time to minimize assay variability. Samples from at least 20% of study participants will be assayed in duplicate. Controls (human samples positive to pathogens included in this study) as well as negative controls (blanks) will be assayed on each 96 well microplate. All analytical errors, such as insufficient number of Luminex beads (less than 50 beads of each type) acquired by the Luminex device, will be documented. All samples associated with errors as well as all other samples from the same individuals will be re-analyzed on a new plate. Plates with unusually high antibody responses to controls (GST or total IgG) will be identified using analysis of distributions of plate-specific responses at the end of the study. Plates with antibody responses to internal control antigens above the mean plus two standard deviations (outliers) will be re-analyzed.

DNA extractions will be conducted using established protocol and following manufacturer's instructions. Sequencing of the 16S rRNA will be used following the procedures outlined in Caporaso et al (2011) and as modified by Kapoor et al (2016). qPCR assays will follow the steps described in Kapoor et al (2015). Standards (dsDNA) will be used for quantifying gene copies and no template controls will be used to determine the presence of cross-contamination.

ADMINISTRATION OF THE INSTRUMENT: (Check all that apply)

[X] Web-based or Social Media [X] In-person

[X] Telephone [X] Mail

1	Other,	Exp	lain

INSTRUMENT: Instrument script is attached below. Final online product will include mandatory OMB control number, expiration date, and burden statement.

CONTACT NAME: <u>Craig Patterson</u> EMAIL: <u>patterson.craig@epa.gov</u>

REFERENCES:

- Caporaso JG, Lauber CL, Walters WA, Berg-Lyons D, Lozupone CA, Turnbaugh PJ, Fierer N, Knight R (2011) Global patterns of 16S rRNA diversity at a depth of millions of sequences per sample. Proc Natl Acad Sci USA 108:4516-4522
- Egorov, A.I., T.L.M. Montouri, L. Ascolillo, H.D. Ward, D.A. Levy, R.D. Morris, E.N. Naumova, J.K. Griffiths. 2010. Recent diarrhea is associated with elevated salivary IgG responses to Cryptosporidium in residents of an eastern Massachusetts community. Infect., 38(2): 117-23.
- Griffin, S.M., R.R. Converse, J.S. Leon, T.J. Wade, X. Jiang, C.L. Moe, A.I. Egorov. 2015. Application of salivary antibody immunoassays for the detection of incident infections with Norwalk virus in a group of volunteers. J. Immunol. Methods, 424: 53-63.
- Kapoor, V., Elk M., Li X., Impellitteri C.A., Santo Domingo J.W. 2016. Effects of Cr (III) and Cr (VI) on nitrification inhibition as determined by SOUR, function-specific gene expression and 16S rRNA sequence analysis of wastewater nitrifying enrichments. Chemosphere 147:361-367.
- Kapoor , V., Ryu H, Pitkanen T, Wendell D, and Santo Domingo JW. 2015. Distribution of human-specific Bacteroidales and fecal indicators in an urban watershed impacted by sewage pollution using RNA and DNA based quantitative PCR assays. Applied and Environmental Microbiology. 81:91-99.
- Wade, T.J., S.A.J. Augustine, S.M. Griffin, E.A. Sams, K.H. Oshima, A.I. Egorov, A.P. Dufour. 2017. Asymptomatic norovirus infection associated with swimming at a tropical beach. PLOS ONE, submitted.

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Self-Report Health Questionnaire &

Risk Factor Survey

Complete one per student

Date of Interview:	
Place of Interview:	
Name of Interviewee:	
Home Address:	
1. Age: 2. Sex: 1- Male 2- Female	IAUPR-IRB CENTRAL OFFICE VALID FROM THRU
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Please complete the following table for each person that lives at this address:

Name	Relation to the Head of the Household	Age	Sex	Occupation/Student
		-		
		-		

	ion of the head of the household? educational degree achieved?	
□ No School □ High School	☐Elementary or Less ☐University	☐ Middle School ☐ Post Graduate
. How long has your far	nily lived at this location?	
a. If less than	a 10 years, where did you move from	? (address)
How many bedroom	s are there in the house?	
5. Do you own the hou	use?	
5. Do you own the hou		☐ No, the home is rented
	1	☐ No, the home is rented☐ Living with family
☐ Yes ☐ Living with friends	1	Living with family
☐ Yes ☐ Living with friends	1	Living with family
☐ Yes ☐ Living with friends ☐ Other (explain) Water usage	1	Living with family
☐ Yes ☐ Living with friends ☐ Other (explain) Water usage	rink from the tap without boiling the	Living with family
☐ Yes ☐ Living with friends ☐ Other (explain) Water usage 6. How often do you d	rink from the tap without boiling the	Living with family water?
☐ Yes ☐ Living with friends ☐ Other (explain) Water usage 6. How often do you d ☐ Always ☐ Sometimes 7. Do you treat the wa	rink from the tap without boiling the	Living with family water?
☐ Yes ☐ Living with friends ☐ Other (explain) Water usage 6. How often do you d ☐ Always ☐ Sometimes 7. Do you treat the wa	rink from the tap without boiling the Mo Nev Ster before drinking it? Yes Ster begins on the second of t	Living with family water? st of the time

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Do you have any p	roblems with your drinking w	ater? 🗆 Yes	□ No		
	following happened?				
	tollowing happened				
☐ bad odor ☐ cloudy		☐ bad taste ☐ color			
other (explain)_					
9. Do you drink wate	r at school? Yes No				
	racscribbir Li tes Li No				
If yes, which?					
☐ drinking fountai	n	☐ bottled was	ter		
☐ tap water		□ other			
10. Do you drink water	from other sources? Yes	□ No			
If yes, which?					
☐ bottled water		☐ river water	r		
☐ rain water		□ other			
Sanitation					
Samtation					
11. Does your home h	ave access to any of the follow	wing?			
☐ toilet discharging	into a sewage system	☐ toilet disch	arging into a septi	c tank	
☐ latrine		☐ toilet disch	arging into a river	or land	
other (explain)				-	
12 If you have sentice	tank, how often is emptied?				
_	and now often is emptied?	_		ICE 19	0
never		once a year	r or less	FF T	
☐ more than once	a year			THRU -P	
				TRA	0
13. Are there problem	s with your septic tank? Y	es 🗆 No		CEN	00
☐ leaks		☐ bad odor		RB	- ^
☐ other (explain) _				PR-IRB	
14. Do you own any of	these pets or farm animals?			IAUPR-IRB CENTRAL OFFICE VALID FROM THRU 26 -01- 18 - 26 -01- 19	Y A
□dogs	□cats		□pigs		
□chickens	□ducks		□cows		

Daily Report Card	Card								Study I	Study ID Number	ber						
Participant: First Name									Date	Г	Month		Year				
Last Name															_		
Please note any symptoms experienced during trips you made for each day of the week.	ny sy.	mpt	tom	s e)	cbe	rier	50	d dt	uring tr	ips you	made for	each o	lay of the	week.			
										Hã	Had any symptoms?	ympt	:oms				
700						202	Vomiting	6	Stomach	Naucea		Fevor	Cough, nasal	1	We	Were you traveling?	on 18?
ý a	Diarrhea	ea	ĭ	Diarrhea w/ blood	po	3 3	(feeling sick)	9 90	ache/pain or cramping		Headache		sore throat, or throat infection	No	Abroad (outside the US)	Sn	Did not travel
Monday	1 2 3+ 1 2 3+ 1 2	3+	1	2	3+	1	_	#									
Tuesday																	
Wednesday																	
Thursday																	
Friday																	
Saturday																	
Sunday							_										

If you experience diarrhea or vomiting this week, please complete questions 1 through 12 of the **Extended Daily Record**

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comprehensive report card		study ID	nuper	
Participant:		Date	Month Ye	Year
First Name				
Last Name				
Please note if you experienced vomiting or diarrhea during the week, before completing this questionnaire.	before complet	ing this questic	onnaire.	
As a result of the symptoms listed on the daily report card	No Yes		What do you think caused the disease?	the disease?
1. Did you visit the doctor?			Please mark one box below	
2. Have you contacted a doctor in another manner?			Medicine (i.e. antibiotic, steroids)	roids)
3. Did you consult with a nurse or a doctor?			Person to person contact (transmission)	ransmission)
4. Did you call a 24-hour medical care facility (Urgent Care)?			Alcohol	
5. Did you go to the Health Services Center?			Food Poisoning	
6. Did you go to an Emergency Room?			Drinking water at the house	
7. Were you hospitalized for this condition?				
a. How many days did you spend?			Contact with water or cons	Contact with water or consumed from another location
8. Were you hospitalized during the night?			Pregnancy or Menstruation	
9. Was a stool sample taken?		L		
a. What were the results of the analysis?			Contact with Animals	
10. Did you take any medication for the symptoms?		L		
 a. □ over the counter □ with prescription 			Chemotherapy or Radiation	
b. What was the name of the medicine?				
11. Are you taking any antibiotic medications?		L		al surgery
12. Are you taking problotic supplements or eating problotic foods prepared by bacterial fermentation like vocurt?	-	L	Intestinal Disorder	
Control of the form the state of the state o	+	_	Indianasa info	ENTRA
13. Do you surrer from chronic disease (lasting > 0 months)?			Unknown Intection	VALID FROM THRU
14. Do these symptoms require that a family member miss work or attend school?			Other (Explain)	26 -01- 18 - 26 -01- 19
a. Total days of work missed due to				
Symptoms b. Total days of school missed due to			Unknown	APPROVED

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(home / survey number)

Consent Form

If you want to be part of the health study, please print your name and school name and then sign and date in the boxes shown below. Parents or guardians must sign on behalf of children under the age of twelve (12). If you are under 21 years of age, please sign the document and have your parent or guardian sign the document as a witness to your signature. If you (or a family member or friend) would like more information about this study, please do not hesitate to contact Graciela Ramirez Toro at 787-264-1912 ext. 7630, 7631.

I confirm that I read the information sheet on this study and I have the opportunity to ask questions. I agree to take part in the health study.

Name of Student Participant	Signature	Date	School Name
	×		
Name of Student Participant's Parent (If student is less than 21 years old)	Signature	Date	
	×		

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