**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp Date: 05/2021)**

# TITLE OF INFORMATION COLLECTION:

Office of Intramural Training & Education (OITE) – The Mental Health and Well-Being of Biomedical Researchers – Feedback

# PURPOSE:

The National Institutes of Health (NIH) carries out and funds biomedical research in an effort to prevent and cure common and rare diseases. We also train the next generation of doctors, researchers, and medical support staff who will improve human health in the future, both across the country and around the world. Navigating school, the career exploration process, research environments, and the stress of national/international news can seem overwhelming and lead us to doubt ourselves just when we need confidence the most. Through workshops and group discussions, the OITE will sponsor a series of monthly virtual programs focused on the health and well-being of biomedical research workforce. Each session will include a lecture, question & answer session, and optional small group discussions facilitated by mental health practitioners.

Fall 2020 through Spring 2021 Workshop Series

1. Suicide Awareness & Prevention
2. Mental health and wellness through a cultural lens
3. Addictive behaviors
4. Wellness and wellness assessments
5. Anxiety and anxiety disorders
6. Depression and depressive disorders
7. Executive function
8. Psychology of career decision-making
9. Trauma (individual and group)
10. Autism spectrum

# DESCRIPTION OF RESPONDENTS:

# Participants of the Mental Health and Well-Being of Biomedical Researchers seminar series represent all educational levels, administrative staff, faculty, and other research supervisors at the NIH, universities, and other research institutions. Participants are asked to anonymously complete and submit a feedback form which the OITE will use to make improvements to future presentations and services. The OITE anticipates each session will have approximately 500 registrations. However, the response rate from the participants is estimated to be 50% or less. The numbers presented below are for a 50% response rate of the event attendees.

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

[ ] Customer Comment Card/Complaint Form [X] Customer Satisfaction Survey [ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[ ] Focus 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: Patricia Wagner, PhD; wagnerpa@od.nih.gov; 240-476-3619 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 [ ] 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 [X] No

# ESTIMATED BURDEN HOURS and COSTS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category of Respondent** | **Number of Respondents** | **Number of Responses Per Respondent** | **Time per Response**  **(in hours)** | **Total Burden Hours** |
| Individuals / Households | 2500 | 1 | 20 / 60 | 833 |
| **Totals** |  | **2500** |  | **833** |

**COST TO RESPONDENT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **Total Burden**  **Hours** | **Wage Rate** | **Total Burden**  **Cost** |
| Individuals / Households | 2500 | $22.00 | $18,326 |
| **Totals** |  |  | **$18,326** |

<https://www.bls.gov/oes/current/oes_47900.htm#00-0000>

**FEDERAL COST:** The estimated annual cost to the Federal government is $1125.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary** | **% of Effort** | **Fringe (if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight** |  |  |  |  |  |
| OITE Deputy Director | Title 42 | $182,000.00 | 0.05% | ~ | $91.00 |
| OITE Program Manager | G13-S03 | $103,435.00 | 1.00% | ~ | $1034.00 |
| **Contractor Cost** | ~ | ~ | ~ | ~ | ~ |
| Travel | ~ | ~ | ~ | ~ | ~ |
| Other Cost | ~ | ~ | ~ | ~ | ~ |
| **Total** | **~** | **~** | **~** | **~** | **$1125.00** |

The estimated hourly wage is based on the projected highest degree awarded for each participant based on the GS salary table for the Washington, DC area: https://[www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/DCB.pdf.](http://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/DCB.pdf)

# 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 OITE will ask all participants, those that participated in the live session and those watching the posted video, to provide feedback on the seminar series. The response rate from the participants is estimated to be 50% or less. The submitted information will be used to make improvements to future events.

# Administration of the Instrument

1. How will you collect the information? (Check all that apply)

[X] Web-based or other forms of Social Media

[ ] Telephone

[ ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [X] No