

**Request for Approval under the “Conference, Meeting, Workshop, and Poster  
Session Registration Generic Clearance (OD)”  
(OMB#: 0925-0740 Exp Date: 07/2022)**

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**TITLE OF INFORMATION COLLECTION:**

NIMH Human Mobility and HIV: Global Patterns, New Research Methodologies, and Implications for Interventions and Communities Workshop Registration

**PURPOSE:**

Collect preliminary information from participants in the NIMH Human Mobility and HIV: Global Patterns, New Research Methodologies, and Implications for Interventions and Communities Workshop.

**DESCRIPTION OF RESPONDENTS:**

The workshop aims to bring together academic and federal researchers, healthcare providers, advocates, and members of the public interested in understanding, preventing, and treating HIV in mobile communities.

**TYPE OF COLLECTION:** (Check *all that applies*)

Abstract  
 Registration Form

Application  
 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.

Name: Holly Campbell-Rosen, NIMH

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

**Gifts or Payments:**

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

Amount: \_\_\_\_\_

Explanation for incentive: (include number of visits, etc.)

### ESTIMATED BURDEN HOURS and COSTS

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals/Households	200	1	1/60	3
<b>Totals</b>		<b>200</b>		<b>3</b>

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals/Households	3	\$44.31/hr	\$133
<b>Totals</b>			<b>\$133</b>

\* Private sector and government respondent wage rate data is from the Life Scientists, All Other (19-1099) category at [http://www.bls.gov/oes/current/oes\\_nat.htm#00-0000](http://www.bls.gov/oes/current/oes_nat.htm#00-0000).

**FEDERAL COST:** The estimated annual cost to the Federal government is \$364

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Health Science Administrator (Program Officer)	GS-14/S 5	\$138,866	0.1%		<b>\$139</b>
<b>Contractor Cost</b>		\$75,000	0.3%		<b>\$225</b>
Travel					
Other Cost					
<b>Total</b>					<b>\$364</b>

\*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2021/DCB.pdf>.

### The selection of 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?  
 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?

We will send an email announcement about the conference (with registration link) to NIMH listservs of employees and public partners, and encourage them to forward as well. The workshop is open to the public so anyone who completes the registration form will be able to attend and view the workshop via webcast.

**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

Survey form

Chart Abstraction

Other, Explain

2. Will interviewers, facilitators, or research coordinators be used?  Yes  No

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