

**Non-substantive Change Request**  
**OMB Control Number 0920-1154**  
**Building resilience for State and Local Health Department Staff responding to public health emergencies**  
**Date Submitted: 02/24/2025**

**Summary of request:** CDC/ORR is requesting a change request to revise questions to align with EO 14168 *Defending Women From Gender Ideology Extremism and Restoring Biological Truth to the Federal Government*.

**Description of Changes Requested:** This request updates sex questions used in *Building resilience for State and Local Health Department Staff responding to public health emergencies* to be in accordance with EO 14168. Please check the boxes below if your request includes:

- x Revision of an existing question(s)
- x Deletion of an existing question(s)

If revising an existing question, CDC is advised to use one of the two versions below and can state that CDC will be changing the current Gender/Sex question to:

What is your Sex?

- Male
- Female

OR

What is your Sex?

- Male
- Female
- Undetermined
- Missing Value [Null]

If removing an existing question, the question to be removed can be included here.

Description of these actions could also be included in the Table at the bottom of this document.

**Description of Changes to Burden (if applicable):**

Description of Changes to Burden (if applicable): Form	Approved Burden	Requested Burden
Form 1  (Att A)	TOTAL TIME: 200  Time per response: 10 minutes pre-intervention + 20 minutes post-intervention	TOTAL TIME: 250  Time per response: 10 minutes pre-intervention + 20 minutes post-intervention

	# respondents: 400	# respondents: 500
Form 2 (Att B)	TOTAL TIME: 24  Time per response: 60 # respondents: 24	TOTAL TIME: 24  Time per response: 60 # respondents: 24
Form 3 (Att C)	TOTAL TIME: 60  Time per response: 60 # respondents: 60	TOTAL TIME: 60  Time per response: 60 # respondents:
Total	TOTAL TIME - 284	TOTAL TIME - 334

**\*\* If changes are only made to Gender/Sex question these are expected to result in no change in Burden Hours. Program can state: “There is no change in Burden Hours associated with the modifications made to comply with EO 14168” \*\***

**Other Considerations (optional):** CDC can include other aspects associated with the submission of this Non-Substantive Change Request here (*e.g., timing sensitivities, implementation requirements, etc.,*).

<b>Table A: Description of Changes (optional, helpful if multiple changes to multiple forms):</b>	Type of Change	Question/Item	Requested Change
Form 1	Question Revision		
Form 2	Question Deletion		