**GenIC Clearance for CDC/ATSDR**

**Formative Research and Tool Development**

**In-depth Interviews with Hispanic or Latina Women on the Topic of Climate Change and Infectious Diseases**

OMB Control No. 0920-1154

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**Supporting Statement A**

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| * **Goals of the project:** The purpose of this project is to understand the reasons for and sources of Hispanic or Latina women’s relatively greater concern (according to previous research) about the impact of climate change and infectious diseases. * **Intended use of the resulting data:** To improve targeted messaging strategies on the nexus of these topics from CDC NCEZID. * **Methods to be used to collect data:** In-depth interviews. * **The subpopulation to be studied:** Hispanic or Latina women in lower-income brackets across different age groups and U.S. regions who express moderate or high concern about the impact of climate change and the risks of infectious diseases. * **How data will be analyzed:** Descriptive and thematic analyses of qualitative data. |

# Circumstances Making the Collection of Information Necessary

The Centers for Disease Control and Prevention (CDC) is requesting approval for a new generic information collection (gen-IC), “In-Depth Interviews with Hispanic or Latina Women on the Topic of Climate Change and Infectious Diseases.” In this project, Hispanic or Latina women who are concerned about climate change and infectious diseases will be interviewed to understand the sources of these concerns, knowledge levels and information sources, behaviors taken or considered as a result of concern, and information needs.

Recent research from CDC and others in academia has suggested that Hispanic and Latinx individuals in the United States are deeply concerned about the impact of climate change on their lives, and in some cases they are more concerned about that impact than those who are not Hispanic or Latinx.[[1]](#footnote-2) According to the Fall 2022 Styles Survey, members of Hispanic and Latinx communities are particularly concerned about the impact of climate change on health, including the impact of infectious diseases.[[2]](#footnote-3) For example, they are more widely concerned about animals and diseases spreading to new areas, new diseases arriving in the US, and more health problems resulting in the community. At the same time, one study found that “Hispanics—more so than the next two largest racial groups—believe that they care more and feel that there is more that they can do to make a difference regarding climate change mitigation.”[[3]](#footnote-4)

Likewise, women are generally more concerned about these topics, according to the Styles Survey data.2 However, this concern about climate change does not necessarily translate into concern over infectious disease outbreaks, as the correlation between the two may not be clear. As a result, further formative assessment among Hispanic or Latina women may be helpful to learn more about the perceptions, attitudes, and information needs of this population as it relates to the increase of infectious diseases due to climate change. This data will allow CDC to better target communication messaging to this priority group, potentially increasing uptake in infectious disease prevention and protective behaviors before or during outbreaks. Such an initiative also advances CDC’s goal of focusing on health equity throughout its activities.

# 2. Purpose and Use of Information Collection

Previous research has shown that Hispanic or Latina women are more concerned about climate change and infectious diseases than other populations. The goals of this evaluation are to assess: (1) knowledge and information sources about climate change, infectious diseases, and the link between the two, (2) reasons for heightened concerns about climate change and infectious diseases; (3) what actions participants are taking, would take, or feel equipped to take related to prevention of such diseases; (4) what barriers exist to taking action or feeling equipped to prevent infections; and (5) what information or other resources participants need to protect against infections. The results will be used to develop targeted messaging strategies for CDC communications with this audience, and to inform decisions about more robust audience assessments in the future.

KRC Research, a contracted research firm, will conduct all data collection related to the proposed formative research project, under the supervision of NCEZID. KRC’s data collection will include recruiting and screening participants into the project, and conducting nine 60-minute long online in-depth interviews with Hispanic or Latina women in the U.S.

*Audience Rationale*

Because prior surveys have indicated that Hispanic or Latina women are more often concerned about climate change and infectious diseases, and because they may be more likely to feel they can “make a difference,” this assessment targets “more concerned” individuals in this population to learn about the concern, including its sources and implications. Given the pivotal roles Hispanic or Latina women frequently occupy within their communities, from family decision-making to shaping peer perspectives, delving into their concerns and informational needs is expected to yield insights with broader ramifications for the collective community's knowledge and actions related to climate change and associated infectious diseases.

Other audience screening criteria will ensure participants are located in geographic areas with higher incidences of different infectious diseases (giving us the ability to tailor the discussion to priority diseases) and are generally less resourced than most of the population.

The insights will be used to inform targeted messaging strategies that deliver desired or needed information, drive behaviors among a motivated audience, and potentially inspire this audience to act as messengers to share key information with others. This will also help CDC to reach an audience that has specific needs (i.e., language, cultural) during outbreaks more effectively.

To this end, the interview guide includes questions designed to elicit, among other topics:

* Degree to which concern is for oneself or others (individuals, communities, or broader)
* Degree to which concerns are based on specific knowledge or lack of knowledge
* Degree to which concern about infectious diseases is about likelihood of exposure, vulnerability to serious infection, or access or quality of care
* Current sources of information, and trusted sources if different
* Behaviors planned or taken to protect or prevent in light of concern
* Information or resources needed, and extent to which lack thereof contributes to concern

# Use of Improved Information Technology and Burden Reduction

Data will be collected via online interviews through a web-based platform, meaning that participants will not have to download anything to their personal devices (participants need only to have an internet connection). All interviews will be conducted by professional moderators from KRC Research, a contracted company. All interviews will be audio and video recorded to ensure participant responses are captured accurately and transcribed. Questions included on the interview moderator guide have been limited to only those relevant to the target audience to reduce burden on respondents.

# Efforts to Identify Duplication and Use of Similar Information

To date, there has been little formative qualitative evaluation exploring the perceptions, attitudes, and information needs of Hispanic or Latina women as it relates to the increase of infectious diseases due to climate change. This topic is a new area of inquiry for NCEZID; it builds upon purely descriptive insights from a survey conducted in late 2022.[[4]](#footnote-5)

# Impact on Small Businesses or Other Small Entities

No small businesses will be involved in this data collection.

# Consequences of Collecting the Information Less Frequently

The screener and the interview are both one-time information collections.

# Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

There are no special circumstances with this information collection package. This request fully complies with the guidelines in 5 CFR 1320.5 and will be voluntary.

# Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

A. This information collection request does not require publication of a 60-day notice in the *Federal Register*.

B. KRC Research, a contracted research firm, has been consulted in the development of the research plan, sampling parameters, and interview guide. Under the supervision of NCEZID, KRC will ultimately conduct all data collection related to the proposed evaluation. Data collection will include recruiting and screening participants into the formative research, and conducting nine 60-minute long in-person interviews with Hispanic or Latina women in the U.S.

# Explanation of Any Payment or Gift to Respondents

Interview participants will receive a monetary incentive of $75 for their participation. Such an incentive is a standard practice in the market research industry and helps to ensure efficient recruitment and ultimate participation among the qualified and scheduled participants. The amount is also standard for a general public audience participating in a 60-minute interview. The incentive is also intended to offset the cost of personal or professional time taken to participate.

# Protection of the Privacy and Confidentiality of Information Provided by Respondents

NCEZID has determined that the Privacy Act does not apply to this information collection. KRC Research, a contracted firm, will manage recruitment and interviewing for this initiative, and PII will not be transmitted to NCEZID or CDC.

The screening instrument for this evaluation is provided in Attachment 1. This screening instrument will be used to evaluate the qualification of potential interview participants. The screening instrument includes information about privacy and confidentiality; only those individuals who agree to these terms will qualify for participation in interviews. After an individual agrees to the terms and has qualified for interview scheduling, they will be given a separate consent form that reiterates privacy and confidentiality policies. The participant will be required to sign the form (electronic submission is allowed) and deliver a copy to the recruiting and interviewing team. The participant will be reminded that participation is entirely voluntary.

After the consent form is signed, participants will confirm their interview slots. During the introduction to each interview, the trained interviewer will review key parts of the privacy and confidentiality agreement:

1. This discussion is completely voluntary. Participants may choose to leave the interview and/or not answer a question at any time for any reason.
2. The evaluation team will take every precaution to protect participant identity and ensure privacy unless otherwise determined by law. This includes keeping names and answers to questions private and keeping contact information separate from any interview responses.
3. Results of the interviews will be presented in aggregate, and names will not be used in any reports.
4. Discussions will be audio-recorded and notes will be taken during the discussion. All information, notes, and audiotapes locked in a file cabinet or a secure computer file. Only evaluation staff will be able to access the information.

No participants’ personally identifiable information will be shared or made available to NCEZID. No recordings will be shared (audio or video), and shared transcripts will have names and any other identifiable information redacted. All findings will be reported in aggregate only.

# Institutional Review Board (IRB) and Justification for Sensitive Questions

Institutional Review Board (IRB)

This project was reviewed by NCEZID’s human subjects advisor and determined to not meet the definition of research under 45 CFR 46. IRB review is not required (Attachment 4).

Justification for Sensitive Questions

All of the questions asked in the interviews will be non-sensitive in nature and focus on knowledge, attitudes, and beliefs around climate change and infectious diseases. All participants will be informed that they need not answer any question that makes them feel uncomfortable or that they simply do not wish to answer.

# Estimates of Annualized Burden Hours and Costs

The total estimated burden is 17.25 hours. Table 1 below describes the burden associated with the information collection.

The burden table assumes that 10 respondents will be screened for every one successfully recruited and scheduled for an interview. (This one in ten rate is relatively high because sampling is conducted from within a panel of individuals already opted in surveys, focus groups, and interviews. Each individual also has a preexisting demographic profile that makes targeting recruitment much more efficient.) The burden table assumes screening will take 5 minutes per person, and the consent form will take an additional 5 minutes for those nine individuals who are successfully recruited. Interviews last 60 minutes.

*Table 1. Annualized Burden*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type of Respondent** | **Form Name** | **No. of Respondents** | **No. of Responses per Respondent** | **Average Burden Per Response (hours)** | **Total Burden Hours** |
| General public Hispanic/Latina women | Screener | 90 | 1 | 5/60 | 8 |
| Consent Form | 9 | 1 | 5/60 | 1 |
| Interview Guide | 9 | 1 | 1 | 9 |
| Total |  | | | | 18 |

According to the U.S. Bureau of Labor Statistics (BLS) May 2022 National Occupational Employment and Wage Estimates, the average hourly wage for all occupations is $29.76. This amount has been used to calculate cost of participation for the general public audience. The total estimated cost burden is $535.68.

*Table 2. Cost burden associated with information collection*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of Respondent** | **Form Name** | **Total Burden Hours** | **Hourly Wage Rate** | **Total Respondent Costs** |
| General public | Screener | 8 | $29.76 | $238.08 |
| Consent form | 1 | $29.76 | $29.76 |
| Interview Guide | 9 | $29.76 | $267.84 |
| **Total** |  | | | $535.68 |

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# Estimates of Other Total Annual Cost Burden to Respondents or Record Keepers

There will be no direct costs to the respondents other than their time to participate in each information collection.

# Annualized Cost to the Government

The annualized cost to the Federal Government to collect this information is $23,663.88. Table 3 below describes the cost in more detail.

Recruiting and interviewing will be conducted by KRC Research, a contracted firm. KRC’s work includes recruitment, screening, scheduling, management of consent forms, conducting interviews, transcription and data cleaning, reporting, and presentation. Contractor costs cover the work of an existing team working with NCEZID on this and other communications initiatives and include 12 hours of labor for a KRC Senior Vice President, 32 hours for a Vice President, 37 hours for an Analyst, and 8 hours for a Field Vice President (recruitment management tasks). Hours are tabulated based on existing contractor hourly rates. Contractor expenses are based on competitively bid prices for panel recruitment / screening and transcription, plus cost of incentives.

Oversight and review of all materials and reports will be conducted by two federal government employees who are co-leading the project. Both are GS-14 health communication specialists. Their work will include providing oversight to KRC Research on the purpose and objectives of the project; guidance and feedback on recruitment, screening, and interview guide materials; entering the project materials into CDC’s STARS system for project determination; meeting regularly with KRC Research staff to discuss the project’s progress and answer any questions; reviewing the transcripts and reports; and sharing topline findings with NCEZID staff so they can use the findings to strengthen communication messages. The estimate includes 20 hours for Health communication specialist 1 and 24 hours for Health Communication Specialist 2.

Estimated federal employee cost is tabulated based on these two employees’ current hourly wages (locality-adjusted GS pay table for Atlanta-area workers):

* Health Communication Specialist 1: 20 hours @ $76.56/hour = $1,531.20
* Health Communication Specialist 2: 24 hours @ $62.82/hour = $1,507.68
* Total = $3,038.88

*Table 3. Estimated Annualized Cost to the Government per Activity*

|  |  |
| --- | --- |
| **Cost Category** | **Estimated Annualized Cost** |
| Contractor personnel costs: costs to oversee recruit, conduct interviews | $8,000.00 |
| Contractor personnel costs: costs to report on results | $7,000.00 |
| Contractor expenses: recruitment panel, transcription, incentives | $5,625.00 |
| Federal government personnel costs: oversight, report review | $3,038.88 |
| Total | $23,663.88 |

# Explanation for Program Changes or Adjustments

This is a new information collection.

# Plans for Tabulation and Publication and Project Time Schedule

This initiative is expected to take six weeks from start to finish. Three weeks will be spent recruiting and interviewing, and three weeks will be spent in analysis and reporting. A timeline is in Table 4.

*Table 4. Project Time Schedule*

|  |  |
| --- | --- |
| **Activity** | **Time Schedule** |
| Recruit interview participants | 2 weeks, beginning immediately after gen-IC approved (August 2023) |
| Conduct interviews | 2 weeks, overlapping with recruitment (3 total) |
| Transcription, data processing, and analysis | 1 week after interviews end |
| Report development | 2 weeks after complete analyses |
| Disseminate results/reports | As soon as summary report is complete |

Interviews will be audio and video recorded for aid in reporting and analysis. Audio files will be transcribed verbatim in Microsoft Word and used for reporting. (Deidentified transcripts will be delivered to NCEZID.) Results will be used to develop a written report with an assessment of findings, recommendations for targeted messaging strategies for CDC communications with this audience, and considerations for further robust information collections among this audience in the future.

# Reason(s) Display of OMB Expiration Date is Inappropriate

The expiration date of OMB approval will be displayed on all information collection instruments.

# Exceptions to the Certification for Paperwork Reduction Act Submissions

There are no exceptions to the certification. These activities comply with the requirements in 5 CFR 1320.

**List of Attachments**

1. Screener
2. Consent Form
3. Interview Guide
4. Human Subjects Determination

1. Akerlof, K. L., et al., Vulnerable populations perceive their health as at risk from climate change. International Journal of Environmental Research and Public Health, 2015. 12: p. 15419-33. [↑](#footnote-ref-2)
2. Porter Novelli. Fall Styles Survey. 2022. (CLIM1—CLIM7 on survey) [↑](#footnote-ref-3)
3. Elias, T., et al., Understanding climate change perceptions and attitudes across racial/ethnic groups. Howard Journal of Communications, 2019. 30:1 p. 38-56. [↑](#footnote-ref-4)
4. Porter Novelli. Fall Styles Survey. 2022. (CLIM1—CLIM7 on survey) [↑](#footnote-ref-5)