

Non-substantive Change Request
OMB Control Number 0920-1154
OneLab REACH (Rapid Education And Capacity-Building Hub)
Date Submitted: 03/18/2025

Summary of request: CDC/OD/OLSR/DLS 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 CDC/ATSDR Formative Research and Tool Development to be in accordance with EO 14168. Please check the boxes below if your request includes:

X Revision of an existing question(s)

Deletion of an existing question(s)

Original Question to be Revised:

What is your sexual orientation/gender identity?

- Male
- Female
- Transgender Man
- Transgender Woman
- Non-binary
- Gender non-conforming
- Gender Queer
- Other
- I prefer not to respond

CDC will be changing the current Gender/Sex question to:

What is your Sex?

- Male
- Female

The updated question can be found on Page 9 of Attachment 1 Survey Instrument file (Question 3).

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

We are not removing an existing question and will be revising the gender/sex question as shown above with two options, male or female. There is no change in Burden Hours associated with the modifications made to comply with EO 14168. There are also no additional considerations.

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

Description of Changes to Burden (if applicable):

Description of Changes to Burden (if applicable): Form	Approved Burden	Requested Burden
Form 1	TOTAL TIME TIME per response # respondents	TOTAL TIME TIME per response # respondents
Form 2	TOTAL TIME TIME per response # respondents	TOTAL TIME TIME per response # respondents
Total	TOTAL TIME	TOTAL TIME

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.,*).

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