

**Non-substantive Change Request  
OMB Control Number 0920-1431**

**Rape Prevention and Education (RPE) Program**

**Date Submitted: 07/22/2025**

**Summary of request:** CDC/NCIPC 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* and EO 14151 *Ending Radical and Wasteful government DEI Programs and Preferencing*.

**Description of Changes Requested:** This request updates questions used in OMB 0920-1431 Rape Prevention and Education (RPE) Program to be in accordance with EO 14168 & EO 14151.

The table below crosswalks the changes made to all documents. Changes include both text revision and deletions.

<b>Table A: Description of Changes (optional, helpful if multiple changes to multiple forms):</b>	<b>Type of Change</b>	<b>Question/Item</b>	<b>Requested Change</b>
SSA page 4	Text Revision	and approaches focused mainly on <b>health equity</b> ;	and approaches focused mainly on <b>health for all and especially for those at greatest risk</b> ;
SSA page 4	Text Revision	implementation of SV prevention strategies and promote <b>health equity</b> ?	implementation of SV prevention strategies and promote <b>health for all and especially for those at greatest risk</b> ?
SSA page 5	Text Revision	strategies that increase <b>health equity</b> at the community	strategies that increase <b>health for all and especially for those at risk</b> at the community
SSA page 6	Text Revision	promoted <b>health equity</b> in their program strategies	promoted health for all and especially for those at greatest risk in their program strategies
SSA page 9	Text Revision	eliminating <b>health</b> inequities and promoting <b>health equity</b> to prevent	eliminating inequities and promoting <b>health for all and especially for those at</b>

		sexual violence.	greatest risk to prevent sexual violence.
SSB page 3	Text Revision	promoted <b>health equity</b> in their program strategies	promoted <b>health for all and especially for those at greatest risk</b> in their program strategies
Att 3, page 1	Text Revision	<b>February 1, 2024 – August 1, 2024</b>	<b>August 1, 2024 – July 31, 2025</b>
Att 3, page 1	Text Revision	Objective 1A. Build internal program capacity to facilitate and monitor the implementation of prevention programs/policies	Objective 1A. <b>Continue to</b> build internal program capacity to facilitate and monitor the implementation of prevention programs/policies <b>by acquiring, training, and retaining staff.</b>
Att 3, page 1	Text Revision	Partner organizations to promote <b>health equity</b> .	Partner organizations to promote <b>optimal level of</b> health for all, and especially for those at greatest risk.
Att 3, page 1	Text Revision	assessment with a focus on <b>health equity</b> .	assessment with a focus on <b>optimal level of</b> health for all, and especially for those at greatest risk.
Att 3, page 1	Text Addition		<b>Objective 1D. participate in CDC sponsored programs and activities</b>
Att 3, page 1	Text Addition		<b>Objective 2B. Leverage multi-sector partners and resources toward SV prevention.</b>
Att 3, page 2	Text Revision	prevention strategies that <b>increase health equity</b> .	prevention strategies that <b>focus on reducing differences in health outcomes across population groups, with a focus on community and</b>

			societal level implementations.
Att 3, page 3	Text Revision	Track disparities in targeted SDOH and rates of SV in priority population	Track differences in health outcomes across population groups and conditions that put people at risk, including rates of SV in priority populations.
Att 3, page 3	Text Addition		Objective 4B. Utilize state and community-level data to identify and select SV prevention strategies for populations and communities with disproportionately high rates of SV.
Att 3, page 3	Text Deletion	Objective 4B. Develop and implement an equity focused evaluation plan	Objective 4C. Develop and implement an evaluation plan
Att 3, page 4	Text Revision	February 1, 2025 – Jan 31, 2026	February 2, 2026 – January 31, 2027
Att 3, page 5	Text Revision	Health Equity	Assures optimal level of health for all, and especially for those at greatest risk.
Att 3, page 11	Text Revision	educational activities related to health equity and community	educational activities related to promoting optimal level of health for all, and especially for those at greatest risk and community
Att 3, page 11	Text Revision	February 2, 2024 – August 2, 2024	August 1, 2024 – July 31, 2025
Att 3, page 12	Text Deletion	Health Equity	Assures optimal level of health for all, and especially for those at greatest risk.
Att 3, page 13	Text Revision	February 1, 2025 – January 31, 2026	February 1, 2026 – January 31, 2027
Att 3, page 16	Text Revision	February 1, 2024 – August 31, 2024	August 1, 2024 – July 31, 2025
Att 3, page 16	Text Addition		Added SEM Levels
Att 3, page 22	Text Revision	To address racial	To address inequities

		inequity	
Att 3, page 23	Text Addition	If your program is focusing on a specific population, please select all that are applicable from below. <b>Only select other if your answer does not fall within the existing options.</b>	If your program is focusing on a specific population, please select all that are applicable from below. <b>Only select populations that your implementation effort is specifically focusing on, not all population groups that are being reached. For example, if you are implementing a program in a school that has people with disabilities, but the program is not specifically focused on reaching that group, you should not select those populations below</b>
Att 3, page 23	Test Revision	Racial/ethnic groups [select all that apply] <ul style="list-style-type: none"> <li>• Black/African American</li> <li>• Asian</li> <li>• <b>Arabic</b>/North African</li> <li>• Pacific Islander</li> <li>• American Indian/<b>Alaskan native Peoples</b></li> <li>• Hispanic/<b>Latinx</b></li> <li>• White</li> <li>• <b>Mixed race persons</b></li> <li>• <b>Other: please specify</b></li> </ul>	Racial/ethnic groups [select all that apply] <ul style="list-style-type: none"> <li>• Black/African American</li> <li>• Asian</li> <li>• <b>Middle Eastern</b>/North African</li> <li>• <b>Native Hawaiian</b>/Pacific Islander</li> <li>• American Indian/<b>Alaska Native</b></li> <li>• Hispanic/<b>Latino</b></li> <li>• White</li> </ul>
Att 3, page 23	Text Deletion	Non-citizen groups: [select all that apply] <ul style="list-style-type: none"> <li>• Immigrants</li> <li>• Migrant workers</li> <li>• Refugees</li> <li>• Asylum seekers</li> <li>• <b>Undocumented status</b></li> </ul>	Non-citizen groups: [select all that apply] <ul style="list-style-type: none"> <li>• Immigrants</li> <li>• Migrant workers</li> <li>• Refugees</li> <li>• Asylum seekers</li> </ul>
Att 3, page 25	Text Deletion	Gender groups: [Select all that apply]	Delete Question

		<ul style="list-style-type: none"> <li>• Men</li> <li>• Women</li> <li>• Non-binary</li> <li>• Transgender</li> </ul> Other: Please Specify	
Att 3, page 28	Text Revision	February 1, 2024 – August 1, 2024	August 1, 2024 – July 31, 2025
Att 3, page 29	Text Revision	and promote health equity?	and promote optimal health for all, and especially for those at greatest risk?
Att 3, page 29	Text Revision	that increase health equity at the community	that increase optimal health for all, and especially for those at greatest risk at the community
Att 3, page 29	Text Revision	February 1, 2025 – January 31, 2026	February 2, 2026 – January 31, 2027
Att 4, Section 2 Q6	Text Revision	Which partners have you identified as missing from your work to advance health equity?	Which partners have you identified as missing from your work to advance health for all and especially for those at greatest risk?
Att 4, Section 3 Q11	Text Revision	In what ways has your organization been able to assess your capacity to enhance and expand primary prevention and health equity?	In what ways has your organization been able to assess your capacity to enhance and expand primary prevention and health for all and especially for those at greatest risk?
Att 4, Section 3 Q12	Text Revision	prevention strategies and promote health equity increased since the start of the NOFO?	prevention strategies and promote health for all and especially for those at greatest risk increased since the start of the NOFO?
Att 4, Section 3 Q14	Text Revision	prevention strategies and promote health equity?	prevention strategies and promote health for all and especially for those at greatest risk?

Att 4, Section 3 Q15	Text Revision	prevention strategies and promote <b>health equity</b> ?	prevention strategies and <b>promote health for all and especially for those at greatest risk</b> ?
Att 4, Section 3 Q16	Text Revision	prevention and promoting <b>health equity</b> ?	prevention and promoting <b>health for all and especially for those at greatest risk</b> ?
Att 4, Section 3 Q17	Text Revision	prevention and promoting <b>health equity</b> ?	prevention and promoting <b>health for all and especially for those at greatest risk</b> ?
Att 4, Section 4 Q21	Text Deletion	available to participants regardless of age, race/ethnicity, sexual orientation, <b>gender identity</b> , sex, ability, or socioeconomic status?	available to participants regardless of age, race/ethnicity, sexual orientation, sex, ability, or socioeconomic status?
Att 4, Section 4 Q24	Text Revision	prevention and <b>health equity</b> promotion?	prevention and <b>health for all and especially for those at greatest risk</b> promotion?
Att 4, Section 4 Q25	Text Revision	prevention and <b>health equity</b> ?	prevention and <b>health for all and especially for those at greatest risk</b> ?
Att 4, Section 5 Q26	Text Revision	prevention and <b>health equity</b> promotion.	prevention and <b>health for all and especially for those at greatest risk</b> promotion.
Att 4, Section 8	Text Revision	<b>HEALTH EQUITY</b>	<b>HEALTH FOR ALL</b>
. Att 4, Section 8 Q32	Text Revision	prevention strategies to increase <b>health equity</b> ?	prevention strategies to increase <b>health for all and especially for those at greatest risk</b> ?
Att 4, Section 8 Q33	Text Revision	incorporating <b>health equity</b> into SV prevention efforts?	incorporating <b>health for all and especially for those at greatest risk</b> into SV prevention efforts?
Att 4, Section 8 Q36	Text Revision	to better align <b>with health equity</b> goals?	to better align with <b>health for all and especially for those at greatest risk</b> goals?
Att 4, Section 8 Q37	Text deletion	What lessons learned about addressing <b>health</b> inequities would you share with other programs?	What lessons learned about addressing inequities would you share with other programs?

Att 5, page 1	Text Revision	Conduct or leverage a primary prevention capacity assessment with a <b>health equity</b> focus.	Conduct or leverage a primary prevention capacity assessment with a focus <b>on health for all and especially for those at greatest risk.</b>
Att 5, page 2	Text Revision	Develop and implement an <b>equity</b> focused evaluation plan	Develop and implement an evaluation plan focused on <b>the health for all and especially for those at greatest risk.</b>
Att 5, page 2	Text Revision	Increased capacity to promote and incorporate <b>health equity</b> program activities relevant to SV prevention among partner organizations	Increased capacity to promote and incorporate <b>health for all and especially for those at greatest risk</b> program activities relevant to SV prevention among partner organizations
Att 5, page 4	Text Revision	Increase in number of community- and societal- level strategies that promote <b>health equity</b> and reduce inequities in SV by addressing social and structural determinants of health	Increase in number of community- and societal- level strategies that promote <b>health for all and especially for those at greatest risk</b> and reduce inequities in SV by addressing social and structural determinants of health

There is no change in Burden Hours associated with the modifications made to comply with EO 14168 & EO 14151.

**Attached are two copies of each document, one with tracked changes and one clean copy.**