

**Request for Approval under the “Generic Clearance for Improving Customer Experience:  
OMB Circular A-11, Section 280 Implementation”  
(OMB Control Number: 0412-0609)**

**TITLE OF INFORMATION COLLECTION:** Digital Ecosystem Framework Feedback

**PURPOSE OF COLLECTION:**

We hope to use this feedback to understand how partners, USAID staff, and other stakeholders are using the Digital Ecosystem Framework including both the enabling and constraining factors in its application. Because of the novelty of the Digital Ecosystem Framework, open-ended questions are employed since the range of responses are unknown so far. Data will be used for learning and adaptation purposes.

**TYPE OF ACTIVITY:** (Check one)

- ☐ Customer Research (Interview, Focus Groups)
- ☐ Customer Feedback Survey
- ☒ User Testing

**ACTIVITY DETAILS**

1. How will you collect the information? (Check all that apply)

- ☒ Web-based or other forms of Social Media
- ☐ Telephone
- ☐ In-person
- ☐ Mail
- ☐ Other, Explain

2. Who will you collect the information from?

Readers and users of the Digital Ecosystem Framework will be given the opportunity to comment on the framework. We will primarily employ convenience sampling for this data gathering activity and at no time will comments be mandatory. We will also share the feedback form when presenting the Digital Ecosystem Framework.

3. How will you ask a respondent to provide this information?

Respondents are given an opportunity to comment on the Digital Ecosystem Framework when they read the framework and interact with USAID’s website.

Respondents may be offered the opportunity to react to the Framework when presented with the Framework in presentations.

4. What will the activity look like?

Participants will have the option to fill out a Google Form and submit it based on their reactions to the Digital Ecosystem Framework. All responses are optional. An optional email address is

asked for at the end of the form in case someone would like to elaborate their reflections on the Digital Ecosystem Framework. The reason it would be useful to have this information is to follow up with individuals if we have questions for them based on the answers they submit. Additionally, having this information for those who volunteer it would be helpful in developing new connections with organizations that want to substantially contribute to the Digital Ecosystem Framework, or who would like to be more involved in how the Digital Ecosystem Framework is shaped in the future. There is little risk of respondents not being truthful in submitting their responses, as the contact information is completely optional and the nature of this database is not one in which there will be a risk of someone submitting inaccurate or untruthful information.

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

Please see attached.

5. When will the activity happen?

The activity will take place on an ongoing basis.

6. Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?

☐ Yes ☒ No

If Yes, describe:

N/A

## **BURDEN HOURS**

| <b>Category of Respondent</b> | <b>No. of Respondents</b> | <b>Participation Time</b> | <b>Burden Hours</b> |
|-------------------------------|---------------------------|---------------------------|---------------------|
| Individual                    | 100                       | 10 minutes                | 16.7                |
|                               |                           |                           |                     |
| <b>Totals</b>                 | <b>100</b>                | <b>10 minutes</b>         | <b>16.7</b>         |

## **CERTIFICATION:**

I certify the following to be true:

1. The collections are voluntary;
2. The collections are low-burden for respondents (based on considerations of total burden hours or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
3. The collections are non-controversial and do not raise issues of concern to other Federal agencies;
4. Any collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the near future;

5. Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
6. Information gathered is intended to be used for general service improvement and program management purposes
7. Upon agreement between OMB and the agency aggregated data may be released as part of A-11, Section 280 requirements only on performance.gov. Summaries of customer research and user testing activities may be included in public-facing customer journey maps.
8. Additional release of data will be coordinated with OMB.

Name: Eric Keys

**All instruments used to collect information must include:**  
**OMB Control No. 0412-0609**  
**Expiration Date: 04/30/2024**

**HELP SHEET**  
**(OMB Control Number: 0412-0609)**

**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

**PURPOSE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

**TYPE OF COLLECTION:** Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

**BURDEN HOURS:**

**Category of Respondents:** Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

**No. of Respondents:** Provide an estimate of the Number of respondents.

**Participation Time:** Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

**Burden:** Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.