

8 July 2025

Department of Health and Human Services  
Centers for Disease Control and Prevention  
Agency Forms Undergoing Paperwork Reduction Review  
[30Day-25-1255]

CDC Desk Officer  
Office of Management and Budget  
725 17<sup>th</sup> Street NW, Washington DC  
20503

## **CLIA COMMENTS ON EMERGENCY CRUISE SHIP OUTBREAK INVESTIGATIONS (CSOIs)**

Cruise Lines International Association (CLIA) is the world's largest cruise industry trade association, providing a unified voice and leading authority of the global cruise community. The association has 15 offices globally with representation in North and South America, Europe, Asia, and Australasia. CLIA supports policies and practices that foster a safe, secure, healthy, and sustainable cruise ship environment for 31.7 million passengers who cruise annually and is dedicated to promoting the cruise travel experience. The CLIA Community is comprised of the world's most prestigious ocean, river, and specialty cruise lines; a highly trained and certified travel agent community; and cruise line suppliers and partners, including ports & destinations, ship development, suppliers, and business services. The organization's mission is to be the unified global organization that helps its members succeed by advocating, educating, and promoting for the common interests of the cruise community.

Thank you for the opportunity to provide comments on the Centers for Disease Control and Prevention's (CDC) information collection request titled "Emergency Cruise Ship Outbreak Investigations (CSOIs)." These comments are submitted in response to the November 25, 2024, request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995.

### **CLIA's Comments**

- (a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility.

The information is essential for the CDC to fulfill its oversight role during outbreaks, particularly in situations where the cruise line lacks the capacity to carry out a comprehensive epidemiologic investigation independently. However, in most instances, both the CDC and the cruise line conduct parallel investigations, leading to unnecessary duplication of effort. The CDC's involvement would be more effective if focused on supporting the cruise line's investigation rather than conducting a separate, parallel effort.

By the time the cruise line receives the CDC's final report, often weeks later, the findings may no longer reflect the most current circumstances, limiting their usefulness for timely decision-making.

- (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used.

For smaller outbreaks, the estimated time burden may be reasonable. However, during larger outbreaks, the capacity of onboard medical teams may be compromised due to the high volume of patients. During response efforts, onboard medical teams must rightly devote their full attention to guest care. Redirecting their focus to administrative tasks such as transmitting documents to the CDC can dilute that attention, particularly slowing response efforts and affecting both the quality of care and the accuracy of clinical documentation.

- (c) Enhance the quality, utility, and clarity of the information to be collected.

The current food history questionnaire lacks clarity, is poorly structured, and poses practical challenges for ill individuals, who are often too unwell to recall and accurately complete the form. These limitations contribute to significant gaps in data quality and completeness. Transitioning to a thoughtfully designed electronic questionnaire, with a user-friendly layout and integrated links to venue-specific menus – would significantly improve both the clarity and utility of the data collected. Enabling passengers to complete the form via their mobile devices from the comfort of their cabins would likely increase participation and accuracy. Furthermore, by feeding responses directly into a centralized dashboard, the platform could automate data collation and analysis, dramatically reducing manual workload and improving the timeliness and usefulness of the information for public health decision-making.

- (d) Minimize the burden of the collection of information on those who are to respond, including, through the use of appropriate automated, electronic, mechanical, or other technological collection techniques other forms of information technology.

As outlined above, there is a clear need to transition the food history questionnaires to an electronic format.

- (e) Assess information collection costs.

For an electronic app, minimal cost for end user security cards (\$15/person/ship) for shipboard personnel, while guest access is free.

CLIA and its member cruise lines are grateful for the CDC's role as the leading public health agency for the United States and the longstanding, collaborative partnership with the industry on public health, illness reporting and vessel sanitation.

CLIA is available to discuss these comments with you should you have any questions. The CLIA point of contact is Maureen Hayes, Director, Maritime Policy. Phone (610)-613-4168. Email: [mhayes@cruising.org](mailto:mhayes@cruising.org).

Sincerely,



Maureen Hayes  
Director, Maritime Policy  
Cruise Lines International Association