

females in the following age groups: 15–17 years who attend school; 15–17 years who do not attend school; 18–25 years who are employed; and 18–25 years who attend school full-time. Focus groups will be conducted at local pre-determined focus group facilities, and surveys will be conducted online and in malls. Women ages 18–25 years, both

employed and working full-time, will be recruited by phone through professional recruitment vendors for focus groups; and in malls and on social networking sites for surveys. Girls ages 15–17 years, who do and do not attend school full-time, will be recruited by phone through professional recruitment vendors for focus groups, once parental consent is

obtained; and in malls and through social networking sites (without parental consent) for surveys. The Academy for Educational Development (contractor to which this task order, #200–2006–F–19070, was awarded) will be conducting the research.

There are no costs to the respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Number of respondents	Responses per respondent	Average burden per response (in hours)	Total burden hours
Screener (15–17 yr old)	54	1	5/60	5
Screener (18–25 yr old)	126	1	5/60	11
Screener (parent of 15–17 yr old)	54	1	5/60	5
Focus groups	180	1	2	360
Mall intercept screener & moderators guide	200	1	10/60	33
Online screener & surveys	500	1	8/60	67
Total	1,114			481

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Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–08–08AP]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 and send comments to Maryam I. Daneshvar, CDC Acting Reports Clearance Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to omb@cdc.gov.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including

whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Youth Advice & Feedback to Inform Choose Respect Implementation (New)—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

NCIPC seeks to obtain, over a five year period, advice and feedback from tweens/teens (aged 11–14) regarding message development/placement, creative executions, appropriate partners, and other similar issues, to inform ongoing implementation and evaluation of the Choose Respect campaign (OMB#0920–0687), an initiative intended to promote youth awareness of and participation in healthy peer relationships.

Communication research indicates that campaign planning implementation must employ a consumer-oriented approach to ensure that program

messages/materials, and their placement, can successfully gain the attention of and resonate with the intended audience. To that end, the NCIPC proposes conducting further planning, implementation, and evaluation research that enlists the involvement and support of youth, parents and other influencers and measures the effect of the campaign on the target audiences. The evaluation will provide interim and ongoing feedback to campaign planners regarding the implementation and progress of the campaign.

The proposed data collection will enlist geographically, culturally/ racially/ethnically, and socio-economically diverse groups of young people to complete: (1) Ten-minute online surveys, with 200 respondents, four times per year; and (2) 12 in-person focus groups, with 12 participants each, twice per year. Online surveys will reduce the potential burden for young people as web-based formats are convenient and consistent with the way they communicate and spend their leisure time. Online surveys—Each web-based survey will involve a different group of 200 tweens/teens. In-person focus groups—First and second focus groups will involve different groups of young people. The following focus groups will be segmented by age and gender, as indicated. The total annualized estimated burden hours are 1,354.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Parents of boys and girls, ages 11 to 14 AND youth ages 11 to 14.	Focus Group Screening Instrument for Parents and Youth (Attachment M).	576	2	5/60
Youths ages 11 to 14	Focus Group Survey (Attachment N)	288	2	5/60
Youths ages 11 to 14	Focus Group Moderator's Guide (Attachment D).	288	2	1.5
Parents of boys and girls, ages 11 to 14	Online Survey E-mail Invitation AND Online Survey Screening Instrument for Parents (Attachments E and F).	400	4	5/60
Youths ages 11 to 14	Online Survey Screening Instrument for Youth (Attachment H).	400	4	3/60
Youths ages 11 to 14	Online Survey (Attachment C)	200	4	10/60

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Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-09-08BS]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Testing and Development of Materials Promoting Prevention and Control of Traumatic Brain Injury in Schools—New—Division of Injury Response (DIR), National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Each year, an estimated 1.4 million Americans sustain a traumatic brain injury (TBI). A TBI is caused by a bump, blow, or jolt to the head or a penetrating head injury that disrupts the normal function of the brain.

Children ages 0 to 4 years and adolescents ages 15-19 are at the greatest risk of sustaining a TBI, as they often sustain TBIs from a host of mechanisms including falls (down stairs or from heights such as counter tops or beds), direct impacts (e.g., getting hit in the head with a ball), and motor vehicle crashes.

In order to address this important public health problem among young children and adolescents, CDC plans to conduct a national TBI educational initiative aimed at school nurses, school counselors, school psychologists, and school administrators. These interviews will be targeted because they are well positioned to address short- and long-

term issues related to TBI. CDC will develop educational materials and messages for these audiences, as well as tools for partners, to help improve the prevention, recognition, and management of TBI among school-aged children and adolescents. This audience can also work with schools to institute TBI specific back-to-school and return-to-play plans.

As part of this research, school nurses, counselors, psychologists, and administrators will participate in professionally moderated individual in-depth interviews. Information will be collected concerning respondents' knowledge, attitudes, and beliefs about traumatic brain injury and where and how they get health information.

A total of 96 potential respondents will be screened. From this number, 30 school professionals and 15 school administrators will be interviewed.

The goal of these interviews is to understand needs of school professionals in the targeted audience for materials or tools related to TBI. The materials will provide guidance on how to prevent and recognize TBI in students. The content discussed in these interviews will be used to refine materials and develop future materials.

There are no costs to respondents other than their time. The total estimated annual burden hours are 61.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
School nurses, counselors, psychologists, and school administrators.	Screening Instrument for Nurses, Counselors, Psychologists, and Administrators.	96	1	10/60
School nurses, counselors, and psychologists	Interview Guide: Concept Testing for TBI Education Materials (Interviews with School Health Professionals).	30	1	1
School administrators	Moderator's Guide for In-Depth Interviews for Administrators.	15	1	1