

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State Oral Health Programs .....	21	2	11

Dated: February 17, 2010.  
**Maryam I. Daneshvar,**  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-10-09CH]

**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](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

A Controlled Evaluation of Expect Respect Support Groups (ERSG): Preventing and Interrupting Teen Dating Violence among At-Risk Middle and High School Students—New—National Center for Injury Prevention and Control (NCIPC), Division of Violence

Prevention (DVP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The prevalence and consequences of teen dating violence make it a public health concern that requires early and effective prevention. To date, only three prevention strategies—Safe Dates, the Youth Relationships Project, and 4th R—have demonstrated reductions in dating violence behaviors in rigorous, controlled evaluations, and only one of these (Safe Dates) has effectively prevented sexual violence. In order to protect young people and build the evidence for effective prevention strategies, evaluations of additional programs are needed, including those programs currently in the field. Expect Respect Support Groups (provided by Safe Place) are currently in use in the Austin Independent School District and demonstrates promising results in an uncontrolled program evaluation, which strongly suggests a controlled evaluation is warranted to more rigorously examine program effects.

The proposed study has two primary goals and two exploratory aims. The primary goals are: (1) To evaluate the effectiveness of Expect Respect Support Groups (ERSG) in preventing and reducing teen dating violence and (2) Comparing whether there is increased healthy conflict resolution skills reported by at-risk male and female middle and high school students supported by ERSG, compared to at-risk students in control schools who do not receive ERSG.

The exploratory aims are: (1) To evaluate whether or not the

effectiveness of ERSG is enhanced by the presence of universal, school-wide prevention programs, and (2) To examine whether participants with different characteristics respond differently to the intervention. For example, we will determine whether outcome for boys or girls are the same.

The proposed evaluation will use a quasi-experimental/non-randomized design in which a convenience sample of participants in schools receiving universal and/or targeted prevention services are compared to students in control schools in which no dating violence prevention services are available. Based on past experience with an uncontrolled program evaluation of Expect Respect Support groups, we anticipate that in the Austin Independent School District, 800 students will undergo an Intake Assessment. From that number, 600 respondents from the intervention and control groups will be eligible for the Baseline Survey, and from that number, 400 will complete the Completion Survey.

Therefore, over three years we will recruit 1800 students (300 per year from intervention schools and 300 per year from control schools), of whom we anticipate 1200 will have complete data.

Control schools will be selected that have characteristics (e.g., risk status, socio-economic status) similar to the Austin Independent School District intervention schools.

There is no cost to respondents. The total estimated annual burden hours are 2000.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Control Schools (School districts surrounding Austin Independent School District).	Intake assessment .....	400	1	15/60
	Baseline Survey .....	300	1	1
	Completion Survey .....	200	1	1
	Follow-up Survey 1 .....	200	1	1
	Follow-up Survey 2 .....	200	1	1
Intervention Schools (Austin Independent School District) .....	Intake assessment .....	400	1	15/60
	Baseline Survey .....	300	1	1
	Completion Survey .....	200	1	1
	Follow-up Survey 1 .....	200	1	1

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
	Follow-up Survey 2 .....	200	1	1

Dated: February 12, 2010.  
**Maryam I. Daneshvar,**  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-10-0735]

**Agency Forms Undergoing Paperwork Reduction Act Review**

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**Proposed Project**

CDC Web site and Communication Channels Usability Evaluation, (OMB no. 0925-0735, exp. 3/31/2010)—Revision—National Center for Health Marketing (NCHM), Centers for Disease Control and Prevention, (CDC).

*Background and Brief Description*

Executive Order 12862 directs Federal agencies that provide significant services directly to the public to survey customers to determine the kind and quality of services they need and their level of satisfaction with existing services. The Centers for Disease Control and Prevention (CDC) seeks approval to conduct usability surveys on CDC Web sites, social media, mobile-based or other electronic communication channels hosting CDC content on an ongoing basis.

It is important for CDC to ensure that health information, interventions, and programs at CDC are based on sound science, objectivity, and continuous customer input. The CDC Web sites, social media, mobile-based or other electronic communication channels hosting CDC content must be designed to be easy to use, easy to access, and

effective providers of health information and resources to our target audiences.

CDC is requesting renewal of our existing 3-year generic clearance, with revisions, in order to carry out its mission. Generic clearance is needed to ensure that CDC can continuously improve its Web sites, social media, mobile-based or other electronic communication channels hosting CDC content though regular surveys developed from these pre-defined questions.

Surveying the CDC Web site, social media, mobile-based or other electronic communication channels hosting CDC content on a regular, ongoing basis will help ensure that users have an effective, efficient, and satisfying experience on any of our Web sites or communication channels, maximizing the health impact of the information and resulting in optimum benefit for public health. The surveys will ensure that all CDC Web sites and electronic communication channels meet customer and partner priorities, build CDC's brand, and contribute to CDC health impact goals.

There is no cost to respondents other than their time. The total estimated annualized burden hours are 41,500.

ESTIMATED ANNUALIZED BURDEN HOURS

Survey type	Number of respondents	Number of responses per respondent	Average burden per response (hrs.)
In Person Surveys .....	8,000	1	1
Remote Surveys .....	67,000	1	30/60

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**Maryam I. Daneshvar,**  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* State Self-Assessment Review and Report.

*OMB No.:* 0970-0223.

*Description:* Section 454(15)(A) of the Social Security Act, as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996,

requires each State to annually assess the performance of its child support enforcement program in accordance with standards specified by the Secretary of the Department of Health and Human Services, and to provide a report of the findings to the Secretary. This information is required to determine if States are complying with Federal child support mandates and providing the best services possible. The report is also intended to be used as a management tool to help States evaluate their programs and assess performance.