

Human Development (NICHD), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

*Proposed Collection:*

*Title:* NEXT Generation Health Study.

*Type of Information Collection*

*Request:* Reinstatement.

*Need and Use of Information Collection:*

The goal of this research is to continue to obtain data on adolescent health and health behaviors annually for seven years beginning in the 2009–2010 school year from a national probability sample of adolescents. The transition from high school to post high school years is a critical period for changes in adolescent health risk behaviors. This information will enable the improvement of health services and programs for youth. The study will provide needed information about the

health of U.S. adolescents and influences on their health.

The study has collected information on adolescent health behaviors and social and environmental contexts for these behaviors annually for three years beginning in the 2009–2010 school year. This study will continue to collect this information for an additional four years beginning in 2013. Self-report of health status, health behaviors, and health attitudes will be collected by online surveys.

TABLE 1—ANNUAL BURDEN FOR AFFECTED PUBLIC: SCHOOL-AGE CHILDREN, PARENTS AND SCHOOL ADMINISTRATORS

Type of respondents	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total annual burden hours requested
Adolescents .....	2,600	1	1.0	2,600

The estimated annualized cost to respondents is \$22,807 (Table 2). These costs were estimated for the 2013 survey year only, not the entire duration of the project. These estimates were calculated

using 2008 Department of Labor figures for wages of average wage and salaried employees and assuming an annual increase of 1.25%, 50-week contract, and 40-hour week and that 60% of the

cohort will be attending school or unemployed during the first year after high school, thereby reducing the average hourly earnings from \$21.93 to \$8.77.

TABLE 2—ANNUAL COST TO RESPONDENTS—2013 SURVEY YEAR ONLY

Type of respondents	Estimated total annual burden hours requested	Estimated annual earnings during survey	Average hourly earnings (with rounding)	Estimated cost during survey year
Adolescents .....	2,600	\$16,908	\$8.77	\$22,807

There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

No direct costs to the respondents themselves or to participating schools are anticipated.

*Request for Comments:* Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of

the data collection plans and instruments, contact Dr. Ronald Iannotti, Prevention Research Branch, Division of Epidemiology, Statistics, and Prevention Research, Eunice Kennedy Shriver National Institute of Child Health and Human Development, Building 6100, 7B05, 9000 Rockville Pike, Bethesda, Maryland, 20892–7510, or call non-toll free number (301) 435–6951 or Email your request, including your address to <ri25j@nih.gov>.

*Comments Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: February 15, 2012.

**Sarah Glavin,**

*Deputy Director, Office of Science Policy, Analysis and Communications, National Institute of Child Health and Human Development.*

[FR Doc. 2012–4222 Filed 2–22–12; 8:45 am]

**BILLING CODE 4140–01–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD); Notice of Meeting**

Pursuant to the NIH Reform Act of 2006 (42 U.S.C. Sec. 281 (d)(4)), notice is hereby given that the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) will host a meeting to enable public discussion of the Institute's proposal to reorganize its extramural program. The proposal seeks to capitalize on emerging scientific opportunities, while reducing barriers to scientific and interdisciplinary collaboration.

This public meeting will take place on March 7, 2012. Information is available on the Institute's Web site, <http://www.nichd.nih.gov/about/meetings/2012/030712.cfm>, where an agenda and any additional information for the meeting will be posted when available.

*Organizing Institute:* Eunice Kennedy Shriver National Institute of Child Health and Human Development.

*Dates and Times:* March 7, 2012, at 3 p.m.

*Place:* American Psychological Association, 750 First Street NE., 6th Floor Conference Room, Washington, DC 20002.

*Agenda:* A public discussion on the proposed reorganization plans for NICHD.

*Contact Person:* Lisa Kaeser, J.D., Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, Office of Program and Public Liaison, 31 Center Drive, MSC 2425, Building 31, Room 2A03, Bethesda, MD 20892, 301-496-0536, [kaeserl@mail.nih.gov](mailto:kaeserl@mail.nih.gov).

Members of the public wishing to attend must RSVP to the contact person on this notice by March 5, 2012 and bring a photo ID to facilitate security check-in at the building entrance.

Any interested person may file written comments by sending an email to [NICHDDirectorsOffice@mail.nih.gov](mailto:NICHDDirectorsOffice@mail.nih.gov), by March 16, 2012. The statement should include the individual's name and, when applicable, professional affiliation.

Dated: February 14, 2012.

**Alan E. Guttmacher,**

*Director, Eunice Kennedy Shriver National Institute of Child Health and Human Development, National Institutes of Health.*

[FR Doc. 2012-4224 Filed 2-22-12; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Chairpersons, Boards of Scientific Counselors for Institutes and Centers at the National Institutes of Health, Notice of Meeting

Notice is hereby given of a meeting scheduled by the Deputy Director for Intramural Research at the National Institutes of Health (NIH) with the Chairpersons of the Boards of Scientific Counselors. The Boards of Scientific Counselors are advisory groups to the Scientific Directors of the Intramural Research Programs at the NIH. This meeting will take place on March 2, 2012, from 10 am to 2 pm, at the NIH, 1 Center Drive, Bethesda, MD, Building 1, Room 151. The meeting will include a discussion of policies and procedures that apply to the regular review of NIH intramural scientists and their work.

The meeting will be open to the public, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should contact Mr. Joe Kleinman at the Office

of Intramural Research, NIH, Building 1, Room 160, Tel. (301) 496-1921, Fax (301) 402-4273, or email [kleinmanj@mail.nih.gov](mailto:kleinmanj@mail.nih.gov) in advance of the meeting.

Dated: February 16, 2012.

**Lawrence Tabak,**

*Deputy Director, NIH.*

[FR Doc. 2012-4210 Filed 2-22-12; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Request for Information (RFI): Input Into the Deliberations of the Council of Councils Working Group on the Use of Chimpanzees in NIH-Supported Research

**SUMMARY:** The National Institutes of Health Council of Councils has established a working group to provide recommendations to the Council on: (1) Implementing the guiding principles and criteria contained within the Institute of Medicine report, "Chimpanzees in Biomedical and Behavioral Research: Assessing the Necessity", and (2) the size and placement of the research active and inactive populations of NIH-owned or -supported chimpanzees. See [http://dpcpsi.nih.gov/council/working\\_group.aspx](http://dpcpsi.nih.gov/council/working_group.aspx) for the working group's charge and roster. The NIH is seeking public input to inform the working group's deliberations.

**Background:** The use of animals in research has enabled scientists to identify new ways to treat illness, extend life, and improve health and well-being. Chimpanzees are our closest relatives in the animal kingdom, providing exceptional insights into human biology and the need for special consideration and respect. While used very selectively and in limited numbers for medical research, chimpanzees have served an important role in advancing human health in the past. However, new methods and technologies developed by the biomedical community have provided alternatives to the use of chimpanzees in several areas of research.

In December 2010, the National Institutes of Health commissioned a study by the Institute of Medicine (IOM) to assess whether chimpanzees are or will be necessary for biomedical and behavioral research. The IOM issued its findings on December 15, 2011, with a primary recommendation that the use of chimpanzees in research be guided by a set of principles and criteria. The

committee proposed three principles which must all be applied to analyze current and potential future research using chimpanzees.

1. That the knowledge gained must be necessary to advance the public's health;

2. There must be no other research model by which the knowledge could be obtained, and the research cannot be ethically performed on human subjects; and

3. The animals used in the proposed research must be maintained either in ethologically appropriate physical and social environments (i.e., as would occur in their natural environment) or in natural habitats.

Based on its deliberations, the IOM committee concluded that "while the chimpanzee has been a valuable animal model in past research, most current use of chimpanzees for biomedical research is unnecessary." The committee also concluded, however, that the following areas may continue to require the use of chimpanzees: a limited number of ongoing studies on monoclonal antibody therapies, research on comparative genomics, and non-invasive studies of social and behavioral factors that affect the development, prevention, or treatment of disease. The committee was unable to reach consensus on the necessity of the chimpanzee for the development of prophylactic hepatitis C virus vaccine. While the committee encouraged NIH to continue development of non-chimpanzee models and technologies, it acknowledged that new, emerging, or re-emerging diseases may present challenges that may require the use of chimpanzees.

The Working Group is gathering input from various sources, including researchers, academic institutions, foundations, scientific societies, government and regulatory agencies, industry, and the public, to help inform the development of its recommendations to the Council of Councils on actions the NIH can take to implement the IOM recommendations and to consider the size and placement of the active and inactive populations of NIH-owned or -supported chimpanzees. The following are areas of their charge and examples of questions within each which might need to be considered when developing recommendations.

- Developing a plan for implementation of the IOM's guiding principles and criteria.
- Factors to consider in reviewing currently active NIH-supported research using chimpanzees to advise on which studies currently meet the principles and criteria defined by the IOM report