Request for Approval of a Non-Substantive Change:

NATIONAL SURVEY OF FAMILY GROWTH, 2009-2012

OMB No. 0920-0314

(expires May 31, 2012)

Contact Information:

William D. Mosher, Ph.D., Statistician Project Officer, National Survey of Family Growth National Center for Health Statistics/CDC 3311 Toledo Road, Room 7318 Hyattsville, MD. 20782 301-458-4385 301-458-4034 (fax) wmosher@cdc.gov

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A1. Circumstances Making the Information Collection Necessary

This request is for a nonsubstantive change to an approved data collection (OMB No. 0920-0314, expires May 31, 2012), the National Survey of Family Growth (NSFG) conducted by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC). On May 15, 2009, the NSFG was approved to collect data for the 3 years from June 2009 through May 2012. That request for clearance stated that:

"No changes in the questionnaires are expected in 2009 or 2010. In 2011, with the beginning of a new NSFG contract, NCHS expects to implement a limited number of non-substantive changes for which clearance will be sought."

This request specifies those non-substantive changes. In a few months, a full new clearance request will be submitted to continue interviewing for the period June 2012-May 2015. The NSFG web site is at <u>http://www.cdc.gov/nchs/nsfg.htm</u>.

Changes

This change request seeks approval for changes to the questionnaires for NSFG interviewing from September 2011 – May 2012, to address the interests of existing funding agencies and three new funding agencies (all in DHHS). These changes are discussed in Section A.2. In addition, detailed information is provided in Attachment 4 documenting how the new questions are consistent with questions in the prior information collection approval. Burden is still within the approved averages of 60 minutes for males and 80 minutes for females.

A2. Purpose and Use of Information Collection

The National Survey of Family Growth responds to the congressional mandate for NCHS to collect and publish reliable national statistics on "family formation, growth, and dissolution" (Sec. 306(b), paragraph 1(H) of the Public Health Service Act), as well as vital statistics on births and deaths, and a number of aspects of health status and health care. In addition, the NSFG collects data for ten Department of Health and Human Services (DHHS) programs and agencies. Of these, three are new co-sponsors, and questions to address their data needs are being added:

1) Questions on reproductive cancer screening, and cancer experience for the <u>CDC's</u> <u>Division of Cancer Prevention and Control (DCPC)</u>. (Attachment 1, Sections F and H.) These questions respond to the EARLY Act (Section 10413 of the Affordable Care Act), which requires CDC to promote breast cancer education and prevention activities in younger women. The DCPC is also responding to recent controversy concerning cancer screening for reproductive cancers. The NSFG is an ideal vehicle to collect these data because the screening and attitudinal data can be related to the detailed reproductive, contraceptive, marital, and pregnancy histories in the NSFG.

2) Questions on use of alcohol (in the self-administered Audio-CASI section) for the <u>CDC's Division of Birth Defects and Developmental Disabilities</u>, Fetal Alcohol Team. (Attachment 1, Section J.) These will help this unit of CDC estimate the size and characteristics of the population of women at risk of an alcohol-exposed pregnancy. Having these data on both men and women will help to estimate characteristics of men and women for whom alcohol consumption is associated with risky sexual behavior.

3) The Administration for Children and Families' Office of Planning, Research, and Evaluation (OPRE) did not request new questions but wanted to ensure adequate sample sizes for both males and females for policy analyses.

For both males and females (Attachment 1), we are including:

- questions on disability that are being used in the American Community Survey and the National Health Interview Survey (Attachment 1, Section H, questions HD-11 to 16),
- a standard item on Primary language as required by DHHS for implementation of the Affordable Care Act (Attachment 1, question AC-6).
- Items on sex education on 3 new topics: how to use a condom, where to obtain birth control, and waiting to have sex until marriage (Attachment 1, CF-8, 11, and 20).
- a question on when the respondent intends or expects to have his/her next child is being restored, as an important factor affecting contraceptive use (question GB-6).
- The age at the first same-sex experience is being added to the self-administered ACASI questionnaire. (question JG-4).

For females only (Attachment 1):

- interviewer instructions to the respondent on reporting periods of contraceptive use are being tailored to each method. The actual questions are not affected. (Section E)
- A new series is added on factors affecting contraceptive choice (Section E)
- The principal other change to the female questionnaire is the previously-mentioned series on pap tests, pelvic exams, HPV testing, and cancer experience and attitudes.

For males only (Attachment 2):

- Questions on fatherhood involvement were revised to focus on 1 or 2 particular children, and a few questions on aspects of parenting other than daily caregiving (affection, discipline, etc) were added.
- In the ACASI section, the computer asks respondents who have already indicated that they have spent time in prison or jail to report (in 4 broad categories) how long they were in prison or jail.
- Also in the ACASI section, the computer asks respondents questions about medical screening for sexually transmitted diseases. In addition, the small proportion of men who have sex with other men (6%) are asked some questions about their recent sexual behavior, including condom use to prevent sexually transmitted diseases.

In addition, several outdated and lower-priority questions were dropped (Attachment 3).

A8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

In addition to consulting with our new co-sponsoring agencies and programs, we obtained feedback from data users at an NSFG Research Conference held at NCHS in late 2008; at an expert workshop in November 2008; and at professional meetings in 2008-2011. In addition, we have held at least annual meetings with current funding agencies. These consultations and our own analyses of the data (for NCHS reports and in data processing) led to the changes described above. Contact information is given here for representatives of the new co-sponsoring programs and agencies (all in DHHS):

Patricia P. Green, MSPH Fetal Alcohol Syndrome Prevention Team Division of Birth Defects and Developmental Disabilities Centers for Disease Control and Prevention 1825 Century Center, Atlanta, GA. 30329 <u>Pap5@cdc.gov</u> 404-498-3953

Mona Saraiya, MD. Division of Cancer Prevention and Control, CDC David Building, Room 3089 Atlanta, GA 30341 770-488-4293 <u>MSaraiya@cdc.gov</u>

Katrina Trivers Division of Cancer Prevention and Control, CDC David Building, Room 3079 Atlanta, GA. 30341 770-488-1086 <u>Ktrivers@cdc.gov</u>

Seth Chamberlain Office of Planning, Research, & Evaluation, ACF, DHHS 370 L'Enfant Promenade, SW 7th Floor West Washington, DC 20447 202-260-2242 <u>Seth.chamberlain@acf.hhs.gov</u>

Naomi Goldstein Director, Office of Planning, Research, & Evaluation, Administration for Children and Families, DHHS 370 L'Enfant Promenade, SW 7th Floor West

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Washington, DC 20447 202-401-9220 <u>Naomi.goldstein@acf.hhs.gov</u>

Attachments

- 1. New Questions in the Female Questionnaire, NSFG 2011-12
- 2. New Questions in the Male Questionnaire, NSFG 2011-12
- 3. Questions cut from the NSFG Questionnaires
- 4. Discussion of Consistency Between Current and New Questions