

Jones, Jo (CDC/OPHSS/NCHS)

From: Buie, Verita (CDC/OPHSS/NCHS)
Sent: Thursday, November 06, 2014 11:27 AM
To: Chandra, Anjani (CDC/OPHSS/NCHS); Jones, Jo (CDC/OPHSS/NCHS)
Subject: FW: PUBLIC comment ON FEDERAL REGISTER

Hello Ladies,

The 60-day FRN for NSFG was published on 11/04/14. Noted below please find one comment that has been submitted to far. As you may already know, you will need to incorporate this comment in your final package as an attachment and will document in supporting statement A Section 8 that you received a comment. Meanwhile, please let me know if you have any questions.

Verita

From: Burroughs, Kennya L. (CDC/OD/OADS) **On Behalf Of** OMB-Comments (CDC)
Sent: Thursday, November 06, 2014 10:54 AM
To: Buie, Verita (CDC/OPHSS/NCHS)
Subject: FW: PUBLIC comment ON FEDERAL REGISTER

One non-substantive comment received. CDC's standard response was sent.

From: bk1492@aol.com [<mailto:bk1492@aol.com>]
Sent: Wednesday, November 05, 2014 4:24 PM
To: OMB-Comments (CDC); AMERICANVOICES@MAIL.HOUSE.GOV; VICEPRESIDENT@WHITEHOUSE.GOV;
INFO@TAXPAYER.NET; MEDIA@CAGW.ORG; RUSH.HOLT@MAIL.HOUSE.GOV
Subject: Fwd: PUBLIC comment ON FEDERAL REGISTER

NOBODY NEEDS THIS INTRUSIVE SURVEY. NOBODY READS THIS INTRUSIVE STUDY. YOU JUST WANT TO PUT OUT A PRESS RELEASE. THAT IS ALL THAT HAPPENS FROM THIS FOLDEROL DONE ON TAXPAYERS GOUGING. ITS TIME TO CUT THE OUT OF CONTROL SPENDING ON USELESS INFORMATION. YOU HAVE ALOT OF THIS INFORMATION IN THE US DICENNIAL CENSUS WHICH WAS DONE IN 2010 AND IS NOT THAT OLD. TAXPAYERS ARE SICK OF DIFFERENT AGENCIES WANTING TO DO THEIR OWN SURVEYS WHEN THEY CAN USE THE VERY VERY EXPENSIVE STUDY DONE BY THE US CENSUS FOR SOME OF THIS INFORMATION -AND THAT IS ENOUGH INFORMATION FOR YOU TO WORK WITH.

WE HAVE A CORRUPT WASHINGTON WHERE ALL THEY DO ALL DAY EVERY DAY IS TAKE SURVEYS.NOTHING EVER RESULTS TO HELP AMERICA BUT THEY PUT OUT A PRESSS RELEASE TO THE PRESS AND THINK THAT IS SOMETHING AMERICAN NEEDS OR WANTS WHEN IT IS JUST PLAYING AROUND. NOBODY NEEDS THIS INFORMATION.N OBODY NEEDS THE REPORT. THUT IT DOWN. STOP OVERSPENDING LIKE YOU DO. WE HAVE EPIDEMICS GOING ON LIKE AUTISM AND YOUW ANT TO GOUGE AMERICANS WHEN THE AUTISTIC CHILDREN NEED HELP AND COST \$3 MILLION DOLLARS TO RAISE ON ECHILD.

WHAT IS WRONG WITH THE FOCUS OF OUR NATIONAL AGENCIES. THIS ONE DESERVES AN F MINUS FOR ITS TOWK. THE BUDGET FOR HTIS PROJECT SHOULD BE ZERO. THIS COMMENT IS FOR THE PUBLIC RECORD. PLEASE REECEIPT.

[Federal Register Volume 79, Number 213 (Tuesday, November 4, 2014)]
[Notices]
[Pages 65398-65399]

From the Federal Register Online via the Government Printing Office [www.gpo.gov]
[FR Doc No: 2014-26084]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-15-0314]

Proposed Data Collections Submitted for Public Comment and Recommendations

The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. To request more information on the below proposed project or to obtain a copy of the information collection plan and instruments, call 404-639-7570 or send comments to Leroy A. Richardson, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an email to omb@cdc.gov.

Comments submitted in response to this notice will be summarized and/or included in the request for Office of Management and Budget (OMB) approval. 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; (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; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information; and to transmit or otherwise disclose the information. Written comments should be received within 60 days of this notice.

Proposed Project

The National Survey of Family Growth (NSFG)--(0920-0314, expires 04/30/2015)--Revision--National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 306 of the Public Health Service (PHS) Act (42 U.S.C. 242k), as amended, authorizes that the Secretary of Health and Human Services (DHHS), acting through NCHS, shall collect statistics on ``family formation, growth, and dissolution,'' as well as ``determinants of health'' and ``utilization of health care'' in the United States. This three-year clearance request includes the data collection in 2015-2017 for the continuous NSFG.

The National Survey of Family Growth (NSFG) was conducted periodically between 1973 and 2002, continuously in 2006-2010, and continuously starting in Fall 2011, by the National Center for Health Statistics, CDC. Each year, about 14,000 households are screened, with about 5,000 participants interviewed annually. Participation in the NSFG is completely voluntary and confidential. Interviews average 60 minutes for males and 80 minutes for females. The response rate since 2006 has been about 77 percent for both males and females.

The NSFG program produces descriptive statistics which document factors associated with birth and pregnancy rates, including contraception, infertility, marriage, divorce, and sexual activity, in the U.S. household population 15-44 years; and behaviors that affect the risk of sexually transmitted diseases (STD), including HIV, and the medical care associated with contraception, infertility, and pregnancy and childbirth. Beginning in 2015, the NSFG will expand its age range to represent the U.S. household population 15-49 years.

NSFG data users include the DHHS programs that fund it, including CDC/NCHS and ten others (The Eunice Kennedy Shriver National Institute for Child Health and Human Development (NIH/NICHHD); the Office of Population Affairs (DHHS/OPA); the Office of the Assistant Secretary for Planning and Evaluation (DHHS/OASPE); the Children's Bureau (DHHS/ACF/CB); the ACF's Office of Planning, Research, and Evaluation; the CDC's Division of HIV/AIDS Prevention (CDC/DHAP); the CDC's Division of STD Prevention (CDC/DSTD); the CDC's Division of Reproductive Health (CDC/DRH); the CDC's Division of Cancer Prevention and Control (CDC/DCPC); and the CDC's Division of Birth Defects and Developmental Disabilities (DBDDD)). The NSFG is also used by state and local governments; private research and action organizations focused on men's and women's health, child well-being, and marriage and the family; academic researchers in the social and public health sciences; journalists, and many others.

This submission requests approval for three years. Questionnaire revisions are requested for fieldwork starting in September 2015. A small set of additional changes may be requested in the future, to be responsive to emerging public policy issues. There is no cost to respondents other than their time.

Estimated Annualized Burden Hours

				Number of	Number	Ave
				respondents	responses	hou
of	burden per	Total burden	Type of respondents	respondents	respondent	rs)
per	response (in	hours				

1. Screener						
Respondents.....		14,000		1		3/60
700						

2. Interview			
Females.....	2,750	1	1.5
4,125			
3. Interview			
Males.....	2,250	1	1.0
2,250			
4. Verification			
Questions.....	1,400	1	5/60
117			
5. Testing			
Questions.....	250	1	1
250			

Total.....			
.....	7,442		

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Leroy A. Richardson,
 Chief, Information Collection Review Office, Office of Scientific
 Integrity, Office of the Associate Director for Science, Office of the
 Director, Centers for Disease Control and Prevention.
 [FR Doc. 2014-26084 Filed 11-3-14; 8:45 am]
 BILLING CODE 4163-18-P