

www.cdc.gov/niosh/nora/councils/wrt/agenda.html.

FOR FURTHER INFORMATION CONTACT:

Emily Novicki, M.A., M.P.H.,
(NORACoordinator@cdc.gov), National
Institute for Occupational Safety and
Health, Centers for Disease Control and
Prevention, Mailstop E-20, 1600 Clifton
Road NE, Atlanta, GA 30329, phone
(404) 498-2581 (not a toll free number).

SUPPLEMENTARY INFORMATION: On April
24, 2018, NIOSH published a request for
public review in the **Federal Register**
[83 FR 17283] of the draft version of the
*National Occupational Research
Agenda for Wholesale and Retail Trade*.
No comments were received.

Dated: August 20, 2018.

Frank J. Hearl,

*Chief of Staff, National Institute for
Occupational Safety and Health, Centers for
Disease Control and Prevention.*

[FR Doc. 2018-18168 Filed 8-22-18; 8:45 am]

BILLING CODE 4163-19-P

**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

**Centers for Disease Control and
Prevention**

**Advisory Committee on Breast Cancer
in Young Women (ACBCYW);
Cancellation of Meeting**

Notice is hereby given of a change in
the meeting of the Advisory Committee
on Breast Cancer in Young Women
(ACBCYW); August 6, 2018, 1:00 p.m. to
5:00 p.m., Eastern.

The teleconference which was
published in the **Federal Register** on
June 18, 2018, Volume 83, Number 117,
pages 28231-28232.

This meeting is being canceled in its
entirety.

For Further Information Contact:
Temeika L. Fairley, Ph.D., Designated
Federal Officer, National Center for
Chronic Disease Prevention and Health
Promotion, CDC, 4770 Buford Hwy. NE,
Mailstop K52, Atlanta, Georgia 30341,
Telephone (770) 488-4518, Fax (770)
488-4760. Email: acbcyw@cdc.gov.

The Director, Management Analysis
and Services Office, has been delegated
the authority to sign **Federal Register**
notices pertaining to announcements of
meetings and other committee
management activities, for both the
Centers for Disease Control and

Prevention and the Agency for Toxic
Substances and Disease Registry.

Sherri Berger,

*Chief Operating Officer, Centers for Disease
Control and Prevention.*

[FR Doc. 2018-18186 Filed 8-22-18; 8:45 am]

BILLING CODE 4163-18-P

**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

**Centers for Disease Control and
Prevention**

**[60Day-FY-2018; Docket No. CDC-2018-
0063]**

**Proposed Data Collection Submitted
for Public Comment and
Recommendations**

AGENCY: Centers for Disease Control and
Prevention (CDC), Department of Health
and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease
Control and Prevention (CDC), as part of
its continuing effort to reduce public
burden and maximize the utility of
government information, invites the
general public and other Federal
agencies the opportunity to comment on
a proposed and/or continuing
information collection, as required by
the Paperwork Reduction Act of 1995.
This notice invites comment on a
proposed information collection project
titled "HIV prevention among Latina
transgender women: Evaluation of a
locally developed intervention". The
collection is part of a research study
designed to evaluate the efficacy of a
locally developed and culturally
congruent two-session Spanish-language
small-group intervention, ChiCAS
(Chicas Creando Acceso a la Salud
[Chicas: Girls Creating Access to
Health]), which provides combination
HIV prevention services to adult
Hispanic/Latina transgender women at
high risk for HIV infection.

DATES: CDC must receive written
comments on or before October 22,
2018.

ADDRESSES: You may submit comments,
identified by Docket No. CDC-2018-
0063 by any of the following methods:

- *Federal eRulemaking Portal:*
Regulations.gov. Follow the instructions
for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information
Collection Review Office, Centers for
Disease Control and Prevention, 1600
Clifton Road NE, MS-D74, Atlanta,
Georgia 30329.

Instructions: All submissions received
must include the agency name and

Docket Number. CDC will post, without
change, all relevant comments to
Regulations.gov.

*Please note: Submit all comments
through the Federal eRulemaking portal
(regulations.gov) or by U.S. mail to the
address listed above.*

FOR FURTHER INFORMATION CONTACT: To
request more information on the
proposed project or to obtain a copy of
the information collection plan and
instruments, contact Leroy A.
Richardson, Information Collection
Review Office, Centers for Disease
Control and Prevention, 1600 Clifton
Road NE, MS-D74, Atlanta, Georgia
30329; phone: 404-639-7570; Email:
omb@cdc.gov.

SUPPLEMENTARY INFORMATION: Under the
Paperwork Reduction Act of 1995 (PRA)
(44 U.S.C. 3501-3520), Federal agencies
must obtain approval from the Office of
Management and Budget (OMB) for each
collection of information they conduct
or sponsor. In addition, the PRA also
requires Federal agencies to provide a
60-day notice in the **Federal Register**
concerning each proposed collection of
information, including each new
proposed collection, each proposed
extension of existing collection of
information, and each reinstatement of
previously approved information
collection before submitting the
collection to the OMB for approval. To
comply with this requirement, we are
publishing this notice of a proposed
data collection as described below.

The OMB is particularly interested in
comments that will help:

1. Evaluate whether the proposed
collection of information is necessary
for the proper performance of the
functions of the agency, including
whether the information will have
practical utility;
2. Evaluate 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. Enhance the quality, utility, and
clarity of the information to be
collected; and
4. Minimize the burden of the
collection of information on those who
are to respond, including through the
use of appropriate automated,
electronic, mechanical, or other
technological collection techniques or
other forms of information technology,
e.g., permitting electronic submissions
of responses.
5. Assess information collection costs.

Proposed Project

HIV prevention among Latina
transgender women: Evaluation of a

locally developed intervention—New—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC)

Background and Brief Description

The National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention is requesting approval for 20-months of data collection entitled, “HIV prevention among Latina transgender women: Evaluation of a locally developed intervention.” The goal of this study is to evaluate the efficacy of ChiCAS (Chicas Creando Acceso a la Salud [Chicas: Girls Creating Access to Health]), a locally developed and culturally congruent two-session Spanish-language small-group combination intervention designed to promote consistent condom use, and access to and participation in pre-exposure prophylaxis (PrEP) and medically supervised hormone therapy by HIV seronegative Hispanic/Latina transgender women who have sex with men.

The information collected through this study will be used to evaluate whether the ChiCAS intervention is an effective HIV-prevention strategy by assessing whether exposure to the intervention results in improvements in participants’ health and HIV prevention behaviors. The study will compare pre-(baseline) and post-intervention (six-month) levels of HIV risk among participants who have received the intervention and participants who have

not yet received the intervention (delayed-intervention group).

This study will be carried out in five metropolitan areas in North Carolina: Asheville, NC; Charlotte, NC; Research Triangle (metropolitan area of Greensboro, Winston-Salem and High Point NC); Raleigh, NC; and Wilmington, NC. The study population will include 140 HIV-negative Spanish-speaking transgender women. Participants will be adults, at least 18 years of age, self-identify as male-to-female transgender or report having been born male and identifying as female, and report having sex with at least one man in the past six months.

We anticipate participants will be comprised mainly of racial/ethnic minority participants under 35 years of age, consistent with the epidemiology of HIV infection among transgender women.

Intervention participants will be recruited to the study through a combination of approaches, including traditional print advertisement, referral, in-person outreach, and through word of mouth. A quantitative assessment will be used to collect information for this study, which will be delivered at the time of study enrollment and again at six-month follow up. The assessment will be used to measure differences in sexual risk knowledge, perceptions and behaviors including condom use, PrEP use and use of medically supervised hormone therapy.

Intervention mediators, including healthcare provider trust and communication skills, self-reported

health status and healthcare access, community attachment and social support will also be measured. All participants will complete the assessment at baseline and again at six-month follow-up after enrolling in the study. The intervention group will participate in ChiCAS after completing the baseline assessment and the delayed intervention group will participate in ChiCAS after completing the six-month follow up assessment.

We will also examine intervention experiences through in-depth interviews with 30 intervention group participants. The interviews will capture participants’ general experiences with the ChiCAS intervention, as well as their experiences and perceptions specific to the main study outcomes: PrEP knowledge, awareness, interest and use; condom skills and use; and hormone therapy knowledge, awareness, interest and use.

It is expected that 50% of transgender women screened will meet study eligibility. We expect the initial screening to take approximately four minutes to complete. The assessment will take 60 minutes (one hour) to complete and will be administered to 140 participants a total of two times. The interview will take 90 minutes (one and one-half hours) to complete and will be administered to 30 participants from the intervention group one time.

There are no costs to the respondents other than their time. The total estimated annualized burden hours is 172.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
General Public—Adults	Eligibility Screener	140	1	3/60	7
General Public—Adults	Contact Information	70	1	1/60	2
General Public—Adults	Assessment	70	2	1.0	140
General Public—Adults	Interview	15	1	1.5	23
Total	172

Jeffrey M. Zirger,

Acting 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. 2018–18180 Filed 8–22–18; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the

provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended, and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which