the health of members of this class. SDRR was established to aid the Advisory Board in carrying out its duty to advise the Secretary, HHS, on dose reconstruction.

Matters To Be Considered: The agenda will include discussions on the following dose reconstruction program quality management and assurance activities: Dose reconstruction cases under review from Sets 19—24, including Iowa Ordinance Plant, Nevada Test Site, Los Alamos National Laboratory, Feeds Material Production Center (Fernald), Pantex Plant, Rocky Flats Plant, W.R. Grace, Hanford, Savannah River Site, Fernald, GE Evendale, Texas City Chemicals, Canoga Avenue Facility, De Soto Avenue Facility, Pacific Northwest National Laboratory, Amchitka Island Nuclear Explosion Site, Oak Ridge facilities, Paducah Gaseous Diffusion Plant, and potentially other Department of Energy and Atomic Weapons Employers facilities.

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.

Elaine Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 2018–12149 Filed 6–5–18; 8:45 am]

BILLING CODE 4163–19–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–18–0920; Docket No. CDC–2018–0053]

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 *Data Collection Through Web Based Surveys for Evaluating Act Against AIDS Social Marketing Campaign Phases Targeting Consumers* which includes web surveys to test campaign messaging.

DATES: CDC must receive written comments on or before August 6, 2018.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2018–0053 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

Data Collection Through Web Based Surveys for Evaluating Act Against AIDS Social Marketing Campaign Phases Targeting Consumers—Extension—National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention (NCHHSTP, Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In response to the continued HIV epidemic in our country, CDC launched Act Against AIDS (AAA), a multifaceted communication campaign to reduce HIV incidence in the United States in 2009. CDC has released the campaign in phases, with some of the phases running concurrently. Each phase of the campaign uses mass media and direct-to-consumer channels to deliver messages. Some campaigns provide basic education and increase awareness of HIV/AIDS among the general public whereas others emphasize HIV prevention and testing among specific subgroups or communities at greatest risk of infection. CDC will also develop new messages to address changes in prevention science and subpopulations affected by HIV. The proposed study will assess the effectiveness of these social marketing messages aimed at increasing HIV/AIDS awareness, increasing prevention behaviors, and improving HIV testing rates among consumers.

This extension of an ongoing study will allow for continued evaluation of the effectiveness of AAA social marketing campaign through surveys with consumers. A total of 10,750 respondents were approved for the previously renewed generic ICR (0920–0920) and since the approval date, 4,305 respondents were surveyed under the GenIC, ''Development of Messages for

the Act Against AIDS National Testing''. The information collected from these data collections was used to evaluate a specific AAA campaign phase. We are requesting the same amount of time to continue surveying AAA target audiences as new phases are developed.

Through this extension, we plan to reach the remaining approved 6,445 respondents. To obtain the remaining respondents, we anticipate screening approximately 32,220 individuals. Depending on the target audience for the campaign phase, the study screener will vary. The study screener may address one or more of the following items: Race/ethnicity, sexual behavior, sexual orientation, gender identity, HIV testing history, HIV status, and injection drug use. Each survey will have a core set of items asked in all rounds, as well as a module of questions relating to specific AAA phases and activities.

Respondents will be recruited through national opt-in email lists, the internet, and external partnerships with community-based and membership organizations that work with or represent individuals from targeted populations (*e.g.,* National Urban League, the National Medical Association). Respondents will self-administer the survey at home on personal computers. There is no cost to the respondents other than their time.

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)
Individuals (male and female) aged 18 years and older.	Study Screener	10,740	1	2/60	358
	Survey	2,148	1	30/60	1,074
Total					1,432

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. 2018–12082 Filed 6–5–18; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Criteria for Evidence of Effectiveness To Be Applied to Projects Identified for Inclusion in the What Works Clearinghouse of Proven and Promising Projects To Move Welfare Recipients Into Work

AGENCY: Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS).

ACTION: Request for public comment.

SUMMARY: The Administration for Children and Families, HHS, solicits comments by August 5, 2018 on the criteria for evidence of effectiveness for the What Works Clearinghouse of Proven and Promising Projects to Move Welfare Recipients into Work. Final criteria for evidence of effectiveness will be used to develop the clearinghouse.

SUPPLEMENTARY INFORMATION:

Invitation to Comment: HHS invites comments regarding this notice on the proposed criteria for HHS's systematic review of the evidence. To ensure that your comments are clearly stated, please identify the specific criterion or other section of this notice that your comments address.

1.0 Background

1.1 Legislative Context

The Consolidated Appropriations Act of 2017 (Pub. L. 115–31 (*https://www.congress.gov/115/plaws/publ31/PLAW-115publ31.pdf*)) directs the U.S. Department of Health and Human Services (HHS) to create a database of projects that have used a proven or promising approach to move welfare recipients into work, based on independent, rigorous evaluations of the projects, and to create a What Works Clearinghouse of Proven and Promising Projects to Move Welfare Recipients into Work. As stated in the statute, the database shall additionally ''include a separate listing of projects that used a developmental approach in delivering services and a further separate listing of the projects with no or negative effects.'' The statute requires HHS to establish criteria for evidence of effectiveness.

1.2 The Legislation's Direction for Establishing the Criteria for Evidence of Effectiveness

Section 413(g)(2) of Public Law 115–31 charges the Secretary of Health and Human Services with establishing the criteria of effectiveness. The statute further stipulated that the (B) process for establishing the criteria—

(i) is transparent;

(ii) is consistent across agencies;

(iii) provides opportunity for public comment; and

(iv) takes into account efforts of Federal agencies to identify and publicize effective interventions, including efforts at the Department of Health and Human Services, the Department of Education, and the Department of Justice.

1.3 The Employment Strategies for Low-Income Adults Evidence Review

Prior to the enactment of Public Law 115–31, the Office of Planning, Research, and Evaluation (OPRE) at the Administration for Children and Families (ACF) at HHS had developed the Employment Strategies for Low-Income Adults Evidence Review (ESER). The new statute aligns with and extends the work of ESER. HHS proposes building on this existing work to develop the new Clearinghouse.

The Employment Strategies for Low-Income Adults Evidence Review (ESER) is a systematic review of the evaluation research published between 1990 and 2014 on employment and training programs for low-income adults. It culminated in a searchable, public database (*https://employmentstrategies.acf.hhs.gov/*). The review was supplemented with briefs synthesizing the results of the review and highlighting strategies that appeared to be promising, as identified by the review. To identify the programs and strategies—or interventions— that appear to be most effective in helping low-income adults gain and retain employment, ESER systematically identified, assessed, and synthesized evidence from the existing evaluation research literature. A core component of ESER's review, as with other federal evidence reviews, involved assessing the quality of the research evidence on different interventions.

To assess the quality of the evidence, ESER reviewed each study's methods to