integrated approach, its end goal is not only the lack of disease or injury, but also a culture of safety and health and an enhancement of overall well-being (NIOSH, 2016). Measuring worker well-being is the first step towards improving workplace policies, programs, and practices to promote prevention of disease and injury.

The TWH Program’s interest in the concept of worker well-being is consistent with other efforts across the nation. Well-being is now a common feature across the public health literature, as it reflects the expanded goals to create the conditions for health and foster a culture of health rather than to simply treat injury and illness (EASHW, 2013; City of Santa Monica, 2016; OECD, 2016). However, while the concept of well-being has been considered by many disciplines throughout history, there has been no consistent definition or consensus around measurement and application. The ambiguity around this very broad concept creates challenges for any program or initiative that aims to advance the well-being of individual workers or workplaces. Through a comprehensive and multidisciplinary literature review, this project developed a conceptual framework of worker well-being that provided the basis for development of a worker well-being survey instrument.

For this study, data is being collected from a nationwide online panel of employed adults. The survey includes questions on five domains of worker well-being including: Worker evaluation and experiences with work, workplace physical environment and safety climate, organizational policies and culture, worker health status, and experiences outside of work (external context). The instrument will be programmed into a web-based survey that will be administrated to an existing nationwide survey panel (KnowledgePanel®) hosted by our vendor, GfK. The field period for data collection will be about 3 weeks. The provided instrument is intended to offer a comprehensive assessment and measurement of worker well-being across multiple domains; however, the instrument itself has not yet been rigorously tested on its psychometric properties. Such work is necessary to ensure that the survey is considered a validated instrument that can be used to collect accurate and reliable data on worker well-being.

The total estimated burden hours is 342. There are no costs to the respondent other than their time.

### Estimated Annualized Burden Hours

<table>
<thead>
<tr>
<th>Type of respondents</th>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden per response (in hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GfK Panel Members</td>
<td>Worker Well-Being</td>
<td>1,025</td>
<td>1</td>
<td>20/60</td>
</tr>
</tbody>
</table>

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. 2017–07959 Filed 4–19–17; 8:45 am]
BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
[30Day—17–17FB]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (a) 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; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) 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 submission of responses; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570 or send an email to omb@cdc.gov. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20563 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Understanding Relationship Dynamics and Conflict Survey—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Intimate partner violence (IPV) is a substantial public health problem in the United States. Over a third of women and over a quarter of men have experienced rape, physical violence, and/or stalking by an intimate partner (Black, et al., 2011). Recognition of the importance and prevalence of this issue has fueled research to examine the causes, correlates, and outcomes of IPV over the past several decades.

The proposed data collection will be used to identify classes of IPV perpetrators based on shared characteristics such as their personal attributes, risk factors, relationship characteristics, and characteristics of the violence they commit. The study will collect information to ascertain which factors or groups of factors may influence violence perpetration that occurs within adult intimate partner relationships.

Data will be collected through an online screener of up to 8,600 respondents and survey of 2,000 Mechanical Turk (MT) workers and an
in-person survey of 210 incarcerated individuals. A purposive sample of participants will be chosen from each group. Gay and lesbian individuals will be oversampled in the MT group. The incarcerated group will be equally stratified if individuals are intimate partner violence (IPV) offenders or not.

Data analysis will include a combination of Factor Analysis and Latent Profile Analysis.

OMB approval is requested for two years for this new collection. Findings from this data collection will be used to understand and identify classes of intimate partner violence (IPV) perpetrators based on shared characteristics such as their personal attributes, risk factors, relationship characteristics, and characteristics of the violence they commit.

The estimated annual burden hours are 1,322. There are no costs to respondents.

**ESTIMATED ANNUALIZED BURDEN HOURS**

<table>
<thead>
<tr>
<th>Type of respondents</th>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden per response (in hours)</th>
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</thead>
<tbody>
<tr>
<td>Mechanical Turk Survey Respondents</td>
<td>Screener Survey</td>
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<td>Mechanical Turk Survey Respondents</td>
<td>Understanding Relationship Dynamics and Conflict Survey</td>
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<td>50/60</td>
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<tr>
<td>Incarcerated Survey Respondents</td>
<td>Understanding Relationship Dynamics and Conflict Survey</td>
<td>105</td>
<td>1</td>
<td>1.25</td>
</tr>
</tbody>
</table>

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.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Centers for Disease Control and Prevention  
[60Day–17–17ABE; Docket No. CDC–2017–0034]

**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 efforts to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on proposed, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection plan titled “Developmental Projects to Improve the National Health and Nutrition Examination Survey and Related Programs Generic.” This generic clearance request covers projects that will help evaluate and improve upon issues such as survey design and operations, as well as examine the feasibility and challenges that may arise with developing future content for the National Health and Nutrition Examination Survey (NHANES) (OMB# 0920–0950, expires December 31, 2019) or similar studies.

**DATES:** Written comments must be received on or before June 19, 2017.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC–2017–0034 by any of the following methods:  
- Federal eRulemaking Portal: Regulations.gov. Follow the instructions for submitting comments.  
- Mail: Leroy A. Richardson, 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. All relevant comments received will be posted without change to Regulations.gov, including any personal information provided. For access to the docket to read background documents or comments received, go to Regulations.gov.  

**Please note:** All public comment should be submitted 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 the Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS–D74, Atlanta, Georgia 30329; phone: 404–639–7570; Email: onb@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 OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

**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