use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.,* permitting electronic submissions of responses; and

5. Assess information collection costs.

Proposed Project

The National Survey of Family Growth (NSFG) (OMB Control No. 0920–0314, Exp. 9/30/2026)—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 the National Center of Health Statistics (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 clearance request is for continued National Survey of Family Growth (NSFG) data collection over the next three years (2026–2029).

The NSFG was conducted six times between 1973 and 2002, and in 2006 moved from a periodically conducted design to a continuous data collection design using in-person interviewing with a self-administered component at the end. This continuous design was used for 2006–2010 and 2011–2019, with breaks as needed to award new contracts for sample design, data collection, and public-use file production. Beginning in 2022, the NSFG moved to a multimode design including both web and in-person data collection. Within the 8-year span (2022–2029), approximately 13,000 households will be screened, with about 5,000 participants surveyed annually. Participation in the NSFG is completely voluntary and confidential. The household screening survey is expected to take five minutes on average. Main surveys with one selected respondent from each household are expected to average 50 minutes for males and 75 minutes for females.

The NSFG program produces descriptive statistics which document factors associated with birth and pregnancy rates, including contraception, infertility, marriage, cohabitation, and sexual activity, in the U.S. household population 15–49 years (15–44 prior to 2015), as well as behaviors that affect the risk of HIV and other sexually transmitted diseases (STD). The survey also disseminates statistics on the medical care associated with contraception, infertility, pregnancy, and related health conditions.

NSFG data users include CDC/NCHS and other programs within CDC and elsewhere in DHHS. The NSFG is also used by state and local governments (primarily for benchmarking to national data); 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 a Revision to NSFG data collection for the next three years. The revision request includes the continued use of survey questionnaires as have been used since January 2026, per the most recent OMB non-substantive change request approved in September 2025, as well as permission to conduct a small set of methodological studies designed to improve the efficiency and validity of NSFG data collection for the purposes described above.

CDC requests OMB approval for an estimated 6,471 annual hours. There is no cost to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Form	Number of responses	Responses per respondent	Average burden/ response (in hours)	Total burden hours
Household member	Household Screener Survey	13,000	1	5/60	1,083
Household Female 15–49 years of age	Female Main Survey	2,750	1	75/60	3,438
Household Male 15–49 years of age	Male Main Survey	2,250	1	50/60	1,875
Household Member	Screener Verification	411	1	2/60	14
Household Individual 15–49 years of age	Main Verification	736	1	5/60	61
Total					6,471

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

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BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–26–1083; Docket No. CDC–2026–0628]

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 continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on an existing information collection project titled Extended Evaluation of the National Tobacco Prevention and Control Public Education Campaign. The primary objectives of the *Tips From Former Smokers® (Tips®) campaign,* are to encourage smokers to quit smoking and to encourage nonsmokers to communicate with smokers about the dangers of smoking.

DATES: CDC must receive written comments on or before June 22, 2026.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2026–0628 by either of the following methods:

☐ *Federal eRulemaking Portal: www.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 H21–8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *www.regulations.gov.*

Please note: Submit all comments through the Federal eRulemaking portal (*www.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 Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, 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;

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; and

5. Assess information collection costs.

Proposed Project

Extended Evaluation of the National Tobacco Prevention and Control Public Education Campaign (OMB Control No. 0920–1083)—Reinstatement—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In 2012, HHS/CDC launched the National Tobacco Prevention and Control Public Education Campaign, *Tips From Former Smokers (Tips) campaign.* The primary objectives of the *Tips campaign* are to encourage smokers to quit smoking and to encourage nonsmokers to communicate with smokers about the dangers of smoking. *Tips* airs annually in all U.S. media markets on broadcast and national cable TV as well as other media channels including digital video, online display and banners, radio, billboards, and other formats. *Tips* ads rely on evidence-based paid media advertising that highlights the negative health consequences of smoking. *Tips* primary target audience is adult smokers; adult nonsmokers constitute the secondary audience. *Tips* paid advertisements are aimed at providing motivation and support to smokers to quit, with information and other resources to increase smokers' chances of success in their attempts to quit smoking. A key objective for the nonsmoker audience is to encourage nonsmokers to communicate with smokers they may know (including family and friends) about the dangers of smoking and to encourage them to quit. *Tips* ads also focus on increasing audience's knowledge of smoking-related diseases, intentions to quit, and other related outcomes.

The goal of the information collection is to evaluate the reach of the *Tips campaign* among intended audiences and to examine the effectiveness of these efforts in impacting specific outcomes that are targeted by *Tips*, including quit attempts and intentions to quit among smokers, nonsmokers' communications about the dangers of smoking, and knowledge of smoking-related diseases among both audiences. This will require customized surveys that will capture all unique messages and components of *Tips.* Information will be collected through web surveys to be self-administered by adults 18 and over on computers in the respondent's home or in another convenient location. Evaluating the impact of the *Tips* campaign on behavioral outcomes is necessary to determine campaign cost effectiveness and to allow program planning for the most effective campaign outcomes. Because *Tips* content changes, it is necessary to evaluate each yearly implementation of the *Tips* campaign.

The information collection includes three survey collections per year (nine surveys in total) generally conducted before, during, and after the *Tips* campaign in each year. Using the same methods outlined in the currently-approved information collection (OMB Control No. 0920–1083, Exp. 3/31/2026), participants will be recruited from two sources: (1) an online longitudinal cohort of adult smokers and nonsmokers, sampled randomly from postal mailing addresses in the United States (address-based sample, or ABS); and (2) an existing established online KnowledgePanel, of U.S. adults. All online surveys, will be self-administered.

Information will be collected about smokers' and nonsmokers' awareness of and exposure to specific *Tips* advertisements; knowledge, attitudes, beliefs related to smoking and secondhand smoke; and other marketing exposure. The surveys will also measure behaviors related to smoking cessation (among the smokers in the sample) and behaviors related to nonsmokers' encouragement of smokers to quit smoking, recommendations of cessation services, and attitudes about other tobacco and nicotine products. It is important to evaluate the *Tips* campaign in a context that assesses the dynamic nature of tobacco product marketing and uptake of various tobacco products, particularly since these may affect successful cessation rates. Survey instruments may be updated to include new or revised items on relevant topics, including cigars, noncombustible tobacco products, and other emerging trends in tobacco use.

CDC requests OMB approval for an estimated 9,308 annual burden hours. OMB approval is requested for three years. Participation is voluntary and there are no costs to respondents other than their time to participate.

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 Population	Screening & Consent	16,667	1	5/60	1,389
Adult Smokers, ages 18–54, in the United States.	Smoker Survey Wave A	2,668	1	20/60	889
	Smoker Survey Wave B	1,667	1	20/60	556
	Smoker Survey Wave C	1,667	1	20/60	556
	Smoker Survey Wave D	1,667	1	20/60	556
	Smoker Survey Wave E	1,667	1	20/60	556
	Smoker Survey Wave F	1,667	1	20/60	556
	Smoker Survey Wave G	1,667	1	20/60	556
	Smoker Survey Wave H	1,667	1	20/60	556
	Smoker Survey Wave I	1,667	1	20/60	556
Adult Nonsmokers, ages 18–54, in the United States.	Nonsmoker Survey Wave A	1,100	1	20/60	366
	Nonsmoker Survey Wave B	835	1	20/60	277
	Nonsmoker Survey Wave C	835	1	20/60	277
	Nonsmoker Survey Wave D	835	1	20/60	277
	Nonsmoker Survey Wave E	835	1	20/60	277
	Nonsmoker Survey Wave F	835	1	20/60	277
	Nonsmoker Survey Wave G	835	1	20/60	277
	Nonsmoker Survey Wave H	835	1	20/60	277
	Nonsmoker Survey Wave I	835	1	20/60	277
Total					9,308

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2026–07761 Filed 4–20–26; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–26–0856; Docket No. CDC–2026–0663]

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 continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on an information collection project titled National Quitline Data Warehouse. The National Quitline Data Warehouse (NQDW) collects a core set of information from all U.S. states, the District of Columbia, Guam, Puerto Rico, and the Asian Smoker's Quitline regarding what services telephone quitlines offer to tobacco users, as well as the number and type of tobacco users who receive services from telephone quitlines.

DATES: CDC must receive written comments on or before June 22, 2026.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2026–0663 by either of the following methods:

☐ *Federal eRulemaking Portal: www.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 H21–8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *www.regulations.gov.*

Please note: Submit all comments through the Federal eRulemaking portal (*www.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 Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329; Telephone: 404–639–7118; 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;