SUPPLEMENTARY INFORMATION:

Background: In 2010, the *Deepwater Horizon* oil spill caused extensive damage to the Gulf Coast's natural resources, devastating the economies and communities that rely on it. In an effort to help the region rebuild in the wake of the spill, Congress passed and the President signed the RESTORE Act, Public Law 112–141, §§ 1601–1608, 126 Stat. 588 (Jul. 6, 2012). The Act created the Gulf Coast Ecosystem Restoration Trust Fund (Trust Fund) and dedicates eighty percent (80%) of any civil and administrative penalties paid by parties responsible for the *Deepwater Horizon* oil spill under the Clean Water Act, after the date of enactment, to the Trust Fund. The ultimate amount of administrative and civil penalties potentially available to the Trust Fund is currently not certain. On January 3, 2013, the United States announced that Transocean Deepwater Inc. and related entities agreed to pay $1 billion in civil penalties for violating the Clean Water Act in relation to their conduct in the *Deepwater Horizon* oil spill. The settlement was approved by the court in February 2013, and pursuant to the Act approximately $816 million (including interest) has been paid into the Trust Fund.

In addition to creating the Trust Fund, the Act established the Council, which is chaired by the Secretary of Commerce and includes the Governors of Alabama, Florida, Louisiana, Mississippi, and Texas, and the Secretaries of the U.S. Departments of Agriculture, the Army, Homeland Security, and the Interior, and the Administrator of the U.S. Environmental Protection Agency.

Under the Act, the Council will administer a portion of the Trust Fund known as the Council-Selected Restoration Component in order to ''undertake projects and programs, using the best available science, that would restore and protect the natural resources, ecosystems, fisheries, marine and wildlife habitats, beaches, coastal wetlands, and economy of the Gulf Coast.'' In August 2013 the Council approved an Initial Comprehensive Plan (Initial Plan) (*please see http://www.restorethegulf.gov/sites/default/files/GCERCCompPlanFactSheet_0.pdf* and *http://www.restorethegulf.gov/sites/default/files/FinalInitialComprehensivePlan.pdf)* that outlines an overarching vision for Gulf restoration and includes the following five goals: (1) Restore and conserve habitat; (2) restore water quality; (3) replenish and protect living coastal and marine resources; (4) enhance community resilience; and (5) restore and revitalize the gulf economy.

As a supplement to the Initial Plan and pursuant to the requirement in the Restore Act to draft a ''prioritized list of specific projects and programs to be funded,'' the Council is now publishing a draft FPL that proposes the activities which the Council intends to prioritize for funding and further consideration. The Council will carefully review public and tribal comments, make appropriate changes, and then finalize the FPL with appropriate notice in the **Federal Register**. Once finalized, the FPL will serve as the basis for allocating funds under the Council-Selected Restoration Component.

The Council seeks public and tribal comment on all aspects of the draft FPL, including comments related to the process used to develop the draft FPL, the projects and programs contained therein, and the associated environmental compliance documentation.

Summary: The Gulf Coast region is vital to our nation and our economy, providing valuable energy resources, abundant seafood, extraordinary beaches and recreational activities, and a rich natural and cultural heritage. Its waters and coasts are home to one of the most diverse natural environments in the world—including over 15,000 species of sea life and millions of migratory birds. The Gulf has endured catastrophes, including major hurricanes such as Katrina, Rita, Gustav and Ike in the last ten years alone. The region has also experienced the loss of critical wetland habitats, erosion of barrier islands, imperiled fisheries, water quality degradation and significant coastal land loss. More recently, the health of the region's ecosystem was significantly affected by the *Deepwater Horizon* oil spill. As a result of the oil spill, the Council has been given the great responsibility of helping to address ecological challenges across the Gulf.

The members of the Council collaborated in creating a draft FPL that responds to ecological needs regardless of jurisdictional boundaries. With the draft FPL, the Council seeks to provide near-term ''on-the-ground'' ecosystem benefits, while also building a planning and science foundation for future success. In the draft FPL, the Council proposes to focus on ten key watersheds across the Gulf in order to concentrate and leverage available funds in addressing critical ecological needs in high-priority locations. The draft FPL focuses on habitat and water quality, and includes restoration and conservation activities that can be implemented in the near term. It also supports project-specific planning efforts necessary to advance large-scale restoration. The comprehensive planning and monitoring efforts proposed in the draft FPL would provide Gulf-wide benefits into the future.

The Council intends to play a key role in helping to ensure that the Gulf's natural resources are sustainable and available for future generations. Currently available Gulf restoration funds and those that may become available in the future represent a great responsibility. The ongoing involvement of the people who live, work and play in the Gulf region is critical to ensuring that these monies are used wisely and effectively. The Council thanks all those who have participated in the process thus far, and offers thanks in advance to those who will take the time to again offer thoughts on how we can collectively help restore the Gulf.

Document Availability: Copies of the draft FPL are available at the following office during regular business hours: Gulf Coast Ecosystem Restoration Council, Hale Boggs Federal Building, 500 Poydras Street, Suite 1117, New Orleans, LA 70130.

Electronic versions of the draft FPL can be viewed and downloaded at *www.restorethegulf.gov.*

Legal Authority: The statutory program authority for the draft FPL is found at 33 U.S.C. 1321(t)(2).

Dated: August 13, 2015.

Will D. Spoon,

Program Analyst, Gulf Coast Ecosystem Restoration Council.

[FR Doc. 2015–19881 Filed 8–12–15; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–15–15BBU]; [Docket No. CDC–2015–0069]

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 and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection request entitled ''*Efficacy Study of a Mobile Application to Provide Comprehensive and Medically Accurate Sexual Health Information for Adolescent Girls''*. The study will examine the efficacy of the mobile application in achieving two behavioral outcomes: Use of effective contraception and clinic utilization.

DATES: Written comments must be received on or before October 13, 2015.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2015–0069 by any of the following methods:

Federal eRulemaking Portal: Regulation.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: *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 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 a collection of information, to search data sources, to complete and review the collection of information; and to transmit or otherwise disclose the information.

Proposed Project

Efficacy Study of a Mobile Application to Provide Comprehensive and Medically Accurate Sexual Health Information for Adolescent Girls—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Despite drastic reductions in teen births across all racial and ethnic groups, Black and Latino girls continue to have disproportionately high rates of teen births. Increasing girls' access to medically accurate and comprehensive sexual health information is the first step in sustaining momentum in teen pregnancy reduction among all racial and ethnic groups, and in promoting healthy sexual behaviors, especially among minority girls.

CDC plans to collect the information needed to test the efficacy of a comprehensive and medically accurate mobile application, titled Crush, in increasing adolescent girls' contraception use and clinic visitation for sexual and reproductive health services. The information disseminated via Crush is similar to the sexual health information youth can access via other Web sites, sexual health promotion educational materials or in clinics.

The study will randomize a sample of 1,200 girls, ages 14–18, into two groups: The intervention group and the control group. The intervention group will have access to Crush and will receive weekly sexual health information via text to the phones for six months. The control group will have access to a fitness mobile application (''app'') and will receive general health information via text to their phones for six months. Participants are expected to access either app frequently throughout a six month period. As part of the analysis, sexual behavior and key psychosocial factors will be assessed three points in time: At baseline, and at three- and six-month follow-ups.

Efficacy testing will respond to the following research questions: Research Question #1 is: Does exposure to Crush increase consistent contraception use among participants? We hypothesize that participants in the intervention group will report increased intent to use effective contraception at three and six months post-intervention. Research Question #2 is: Does exposure to Crush increase clinic utilization rate among participants? We hypothesize that participants in the intervention group will report higher rates of intent to utilize clinic services at three and six months post intervention.

The study will also include a usability testing component to identify the content and features of Crush that are most attractive to participants, the frequency in which Crush was used, and the navigation patterns within Crush. Participants will create an account in the Enrollment Database. This database will host participants' enrollment information, basic demographic information, and will also track their navigation pattern to monitor Crush visitation frequency and visit duration. Navigation data will be used to assess intervention exposure and dosage to specific content areas of Crush. To test real-world utilization of Crush, control group participants will gain access to Crush six months after enrolling into the study, but will not receive weekly text messages. The study will track visitation frequency and duration of each visit. Usability testing will respond to Research Question #3*:* Is media content more attractive to participants? We hypothesize that participants in the intervention group

will spend more time using media features than text-based content.

All information will be collected electronically. This study will collect data through two mechanisms: (1) Self-administered online surveys, and (2) the Crush enrollment database. Participants will complete a total of three self-administered online surveys at baseline, three and six month follow-up. Survey questions will assess behavior, attitudes, social norms about sexual behavior, contraception and clinic utilization, and satisfaction with Crush.

The mobile response surveys will be sent to participants via text message which they can complete on a smartphone. The estimated burden per response is 13–20 minutes. Survey responses will be matched by each participant's unique identifying number. Each participant will receive up to two survey reminders starting one week after the initial survey link is sent, for two consecutive weeks. There are minor differences in survey content for the control and intervention groups.

Each participant will create a profile in the database upon enrollment. This database will collect initial demographic and contact information, informed consent signatures, and information about the participant's navigation pattern through Crush. Any information entered directly into Crush interactive features will not be stored in the system. The database only collects web analytics data about page visited and duration of each visit by User ID and IP address. Web analytics are generated for any Web site and are a standard evaluation mechanism for assessing the traffic patterns on Web pages. This technology permits development of an objective and quantifiable measure that tracks and records participants' exposure to Crush. This study component does not entail any response burden to participants.

Findings will be used to inform the development and delivery of effective health communications.

OMB approval is requested for one year. Participation is voluntary and there are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden (in hrs.)
Girls Ages 14–18 Years	Enrollment	1,200	1	5/60	100
	Consent	1,200	1	5/60	100
Control Group	Baseline Survey	600	1	13/60	130
	3-Month Follow-up Survey	600	1	20/60	200
	6-Month Follow-up Survey	600	1	20/60	200
Intervention Group	Baseline Survey	600	1	13	130
	3-Month Follow-up Survey	600	1	20	200
	6-Month Follow-up Survey	600	1	20	200
Total					1,260

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. 2015–19860 Filed 8–12–15; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Youth Education and Relationship Services (YEARS) Descriptive Study.

OMB No.: New Collection,

Description: Since 2006, Congress has authorized dedicated funding (currently at the level of $75 million annually) to support programs providing healthy marriage and relationship education (HMRE). In order to better understand the services that federally-funded HMRE programs are providing to youth and the populations the programs are reaching, The Office of Planning, Research and Evaluation (OPRE), within ACF/HHS, is proposing data collection activity as part of the Youth Education and Relationship Services (YEARS) descriptive study. The data that ACF proposes to collect includes information on funding spent serving youth, the number of youth being served, youth demographic characteristics, characteristics of the organizations or programs serving youth, information on program curricula and contents, and program implementation information. This data is to be collected through a web-based survey that is to be completed by HMRE grantee program staff. This information will be critical to inform future efforts to improve HMRE programs serving youth.

Respondents: Healthy marriage and relationship education (HMRE) grantee program staff.

Note: To fully address the objectives outlined for this project, it was determined that additional information collection beyond what was proposed in the 60 day **Federal Register** notice is necessary. Therefore, the proposed semi-structured interviews submitted with this request (including the site visit screener and semi structured interviews with Program directors/Administrators, Facilitators, and Partner organizations/providers) require additional burden beyond that originally estimated in the 60 day **Federal Register** notice.

ANNUAL BURDEN ESTIMATES

Instrument	Total/annual number of respondents	Number of responses per respondent	Average burden hours per response	Annual burden hours
YEARS Web-based staff survey (Program director/Administrator)	44	1	0.5	22
YEARS Web-based staff survey (Facilitator)	44	1	0.5	22
Site visit screener (Program director/Administrator)	12	1	0.083	1