In response, CDC has contracted with the Academy for Educational Development (AED) to conduct focus groups to identify key audience concepts around food choices and to develop and test concepts and messages aimed at increasing healthy food choices among children and youth. For the research to be useful to Congress and to the nation's public health agenda, a thorough understanding of a child's attitude toward healthy food choices at varied developmental stages, and the barriers and motivations for adopting and sustaining those choices is essential. Also important is a thorough understanding of those who can influence the health behaviors of children and youth. This research will facilitate the development of messages, strategies, and tactics that resonate with

children, youth, parents, and other influencers.

The focus groups will be conducted in three phases: Phase One will address "tweens" (ages 9–13) and parents of tweens; Phase 2 will focus on children 6–8 years old and their parents, and Phase 3 will conduct groups with parents of children under 6 years old. The research will begin with tweens. Current market literature and opinionleaders both strongly suggest that tweens are highly influential in their parents' nutrition decisions, as well as those made by their younger siblings.

For each phase, 36 focus groups will be conducted; thus, three phases will amount to 108 total focus groups. In Phases 1 and 2, focus groups will involve both young people and their parents or key caregivers. In this way, CDC can gain insight into both parents' and children's views, as well as the

dynamics of family shared decisionmaking around food choices and attitudes toward healthy eating patterns. For Phase 3, 36 focus groups about the toddler/young child set (ages 1–5) will be held with their parents and other important influencers such as educators, primary caregivers, and health care providers.

All focus group recruiting will incorporate appropriate representation of diverse ethnic groups, and the groups will be held in several cities to ensure broad geographic representation.

The intent of this audience research is to solicit input and feedback from potential audiences. The information gathered will be used to develop, refine, and modify messages and strategies to increase healthy food choices by children and parents. There is no cost to participants other that their time.

ESTIMATE OF ANNUALIZED BURDEN HOURS

Type of respondents	Number of respondents	Number of responses/ respondents	Average burden/re- sponse (in hours)	Total burden (in hrs)
Phase 1: Recruitment	528	1	10/60	88
Phase 1: Tweens (ages 9-13); 24 groups of 11 people per group	264	1	2.0	528
Phase 1: Parents of tweens; 12 groups of 10 people per group	120	1	2.0	240
Phase 2: Recruitment	528	1	10/60	88
Phase 2: Elementary aged children (ages 6–8); 24 groups of 11 children per group)	264	1	2.0	528
group	120	1	2.0	240
Phase 3: Recruitment	720	1	10/60	120
Phase 3: Parents of preschoolers (ages 1–5); 36 groups of 10 people per group	360	1	2.0	720
Total				2552

Dated: June 6, 2005.

Betsey Dunaway,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[RFA IP05-095]

Effectiveness of a Hospital-Based Program for Vaccination of Birth Mothers and Household Contacts With Inactivated Influenza Vaccine; Notice of Availability of Funds—Amendment

A notice announcing the availability of fiscal year (FY) 2006 funds for a cooperative agreement for Effectiveness of a Hospital-Based Program for Vaccination of Birth Mothers and Household Contacts with Inactivated Influenza Vaccine was published in the **Federal Register**, Thursday, May 12, 2005, Volume 70, Number 91, pages 25079–25084.

The notice is amended as follows: Page 25079, third column, Letter of Intent Deadline, delete June 13, 2005, and replace with August 15, 2005. Page 25079, third column, Application Deadline, delete June 27, 2005, and replace with August 31, 2005. Page 25080, third column, Fiscal Year Funds, delete 2005, and replace with 2006. Page 25080, third column, Anticipated Award Date, delete August 31, 2005, and replace with November 30, 2005. Page 25081, third column, LOI Deadline Date, delete June 13, 2005, and replace with August 15, 2005. Page 25081, third column, Application Deadline Date, delete June 27, 2005, and replace with August 31, 2005. Page 25083, second

column, Anticipated Award Date, delete August 31, 2005, and replace with November 30, 2005.

Dated: June 2, 2005.

William P. Nichols,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention. [FR Doc. 05–11513 Filed 6–9–05; 8:45 am]

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