

## Other Requirements

### *Human Subjects*

If the proposed project involves research on human subjects, the applicant must comply with the Department of Health and Human Services Regulations (45 CFR Part 46) regarding the protection of human subjects. Assurance must be provided to demonstrate that the project will be subject to initial and continuing review by an appropriate institutional review committee. The applicant will be responsible for providing assurance in accordance with the appropriate guidelines and forms provided in the application kit.

### *Women and Racial and Ethnic Minorities*

It is the policy of the Centers for Disease Control and Prevention (CDC) to ensure that women and racial and ethnic groups will be included in CDC/ATSDR-supported research projects involving human subjects, whenever feasible and appropriate. Racial and ethnic groups are those defined in OMB Directive No. 15 and include American Indian, Alaska Native, Asian, Pacific Islander, Black and Hispanic. Applicants shall ensure that women and racial and ethnic minority populations are appropriately represented in applications for research involving human subjects. Where clear and compelling rationale exist that inclusion is inappropriate or not feasible, this situation must be explained as part of the application. In conducting review for scientific merit, review groups will evaluate proposed plans for inclusion of minorities and both sexes as part of the scientific assessment and scoring. This policy does not apply to research studies when the investigator cannot control the race, ethnicity and/or sex of subjects. Further guidance to this policy is contained in the Federal Register, Vol. 60, No. 179, pages 47947-47951, and dated Friday, September 15, 1995.

### Where To Obtain Additional Information

To receive additional written information call (404) 332-4561. You will be asked to leave your name, address, and telephone number and will need to refer to announcement 729. You will receive a complete program description, information on application procedures, and application. Business management information may be obtained from Georgia Jang, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East

Paces Ferry Road, NE., MS-E13, Atlanta, GA 30305, telephone (404) 842-6814; fax: (404) 842-6513; Internet: glj2@cdc.gov.

Programmatic technical assistance may be obtained from Roy M. Fleming, Sc.D., Associate Director for Grants, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Building 1, Room 3053, MS-D30, Atlanta, GA 30333, telephone: (404) 639-3343; fax: (404) 639-4616; Internet: rmf2@cdc.gov.

Please Refer to Announcement Number 729 When Requesting Information and Submitting an Application.

This and other CDC Announcements can be found on the CDC home page at <http://www.cdc.gov>.

CDC will not send application kits by facsimile or express mail.

Potential applicants may obtain a copy of "Healthy People 2000" (Full Report, Stock No. 017-001-00474-0) or "Healthy People 2000" (Summary Report, Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, DC, 20402-9325, telephone (202) 512-1800.

Dated: March 4, 1997.

Diane D. Porter,

*Acting Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC).*

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BILLING CODE 4163-19-P

## [Announcement 725]

### **National Institute for Occupational Safety and Health; Childhood Agricultural Safety and Health Research, Notice of Availability of Funds for Fiscal Year 1997**

#### Introduction

The Centers for Disease Control and Prevention (CDC) announces that applications are being accepted for research on childhood agricultural safety and health. Projects are sought to conduct research on etiology, outcomes, and intervention strategies, and to rigorously evaluate the effectiveness of commonly used educational materials and methods in preventing childhood agricultural injuries and illnesses. Findings from these projects are intended to advance the scientific base of knowledge needed to maximize the safety and health of children exposed to agricultural production hazards.

CDC is committed to achieving the health promotion and disease prevention objectives of "Healthy

People 2000," a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority areas of "Occupational Safety and Health" and "Unintentional Injuries." (For ordering a copy of "Healthy People 2000," see the section Where to Obtain Additional Information.)

#### Authority

This program is authorized under the Public Health Service Act, as amended, Section 301(a) (42 U.S.C. 241(a)) and the Occupational Safety and Health Act of 1970, Section 20(a) (29 U.S.C. 669(a)). The applicable program regulation is 42 CFR Part 52.

#### Eligible Applicants

Eligible applicants include non-profit and for-profit organizations, universities, colleges, research institutions, and other public and private organizations, including State and local governments, and small, minority and/or woman-owned businesses.

Note: An organization described in Section 501(c)(4) of the Internal Revenue Code of 1986 which engages in lobbying activities shall not be eligible to receive Federal funds constituting an award, grant, contract, loan, or any other form.

#### Smoke-Free Workplace

CDC strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products, and Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

#### Availability of Funds

About \$2,500,000 is available in fiscal year (FY) 1997 to fund approximately 11 to 15 project grants in four priority research areas: (1) etiology (3-4 awards); (2) outcomes (3-4 awards); (3) intervention strategies (3-4 awards); and (4) rigorous evaluations of commonly available and used childhood educational or training programs to determine effectiveness in influencing safety and health behaviors and consequently preventing agricultural injuries and illnesses among children and adolescents (2-3 awards).

Awards for the first three areas are anticipated to range from \$150,000 to \$200,000 in total costs (direct and indirect) per year. Awards for the fourth priority area are anticipated to range from \$200,000 to \$300,000 in total costs (direct and indirect) per year.

The amount of funding available may vary and is subject to change. Awards are expected to begin on or about September 30, 1997. Awards will be made for a 12-month budget period within a project period not to exceed 3 years. Continuation awards within the project period will be made on the basis of satisfactory progress and availability of funds.

#### Background

Agricultural production, which consistently ranks among the industries with the highest rates of work-related injuries and deaths in the United States, is unique with respect to children and adolescents. Compared to nonagricultural industries, coverage and protections of Federal child labor laws are limited, work by youth under 14 years of age is common, and childhood exposures to work hazards are not confined to working youths. Research is needed to facilitate the appropriate prioritization of efforts to prevent childhood injuries and illnesses associated with agricultural production, and expand the knowledge base for the development and implementation of effective and appropriate intervention strategies.

Federal child labor laws are organized by agricultural and nonagricultural work. Whereas the minimum age for employment in nonagricultural industries is 14 years, there are provisions which allow for agricultural employment of children as young as 10 years of age. Although work declared hazardous by the Secretary of Labor is prohibited for youths less than 18 years of age in nonagricultural industries, in agriculture, it is prohibited for youths less than 16 years of age, and only then for youths formally employed off the family farm. Federal child labor regulations contain a statutory exemption which permits the children of farmers to perform any job at any age on a family farm.

Data on employment of youths less than 15 years of age are not routinely collected or reported. Children less than 15 years of age are known to work, especially in agriculture. In 1995, an estimated 275,000 youths 16–19 years of age were employed in agriculture, accounting for 4% of working youths in this age group. It is reported that 72% of these agricultural youth workers were wage and salary workers, 24% were self-employed, and 5% were unpaid family workers. The Bureau of Labor Statistics (BLS) reports 89 agricultural work-related deaths of youths 16–19 years of age for the years 1992–1995, accounting for a disproportionate 15% of work-related deaths among this age group

during this period. Further, BLS reports 66 agricultural work-related deaths of youth less than 16 years of age during this period, a group for which employment data are not available.

An estimated 2,100 injuries serious enough to require time away from work occurred among working youth 14–19 years of age on farms with at least 11 employees in 1994. Estimates of serious injuries on farms with fewer than 11 employees are not available. A couple of studies have suggested that among youth, work-related injuries in agriculture tend to be more serious than injuries in other industries. Farm machinery, stored grain, power lines, manure pits, ponds, and livestock are among injury hazards in agricultural workplaces.

Children and adolescents may be exposed to agricultural production hazards not only through work activities, but by virtue of living on a farm or ranch, accompanying their parents to work, or visiting farms or ranches. In 1991, an estimated 1.3 million youth less than 20 years of age resided on farms or ranches. Another 800,000 children lived in households of hired farm workers. Data from the early 1980s suggested that 300 children and adolescents die annually from farm injuries, with about 35% of the deaths occurring among youth less than 9 years of age. Recent data suggest that about 100,000 children suffer a nonfatal injury associated with agricultural production each year. The monetary and social costs of these injuries are unknown, but they are needed to form and evaluate prevention efforts.

In April 1996, the National Committee for Childhood Agricultural Injury Prevention (NCCAIP) published a National Action Plan towards maximizing the safety and health of all children and adolescents who may be exposed to agricultural hazards. This National Action Plan, which includes 13 objectives and 43 recommended action steps, was based on input from 42 members representing the public and private sector. The National Action Plan calls for funding of research and safety programs by the Federal government, foundations, agribusiness, and other private-sector groups.

Congress allocated FY 1997 funds to NIOSH to facilitate the implementation of this National Action Plan. This announcement and expected awards are one component in the process of NIOSH implementation of the National Action Plan. Research studies which result from this announcement are intended to advance the following objectives in the proposed National Action Plan: establish guidelines for children's and

adolescents' work in the industry of agriculture; conduct research on costs, risk factors, and consequences associated with children and adolescents who participate in agricultural work; use systematic evaluation to ensure that educational materials and methods targeted toward childhood agricultural safety and health have demonstrated positive results; influence adult behaviors which affect protection of children and adolescents through the use of incentives and adoption of voluntary safety guidelines; and, provide a protective and supportive environment for children exposed as bystanders to agricultural hazards.

#### Purpose

NIOSH seeks to maximize the safety and health of children and adolescents exposed to agricultural production hazards by expanding the knowledge base regarding etiology, outcomes, intervention strategies, and the effectiveness of commonly utilized educational materials and methods. Research may address children directly involved in work tasks and/or other children exposed to agricultural production hazards. The funded research projects should cover a variety of types of agricultural production in different geographical regions (e.g. tomato harvesting in California, dairy farms in Wisconsin, and blueberry picking in Maine).

#### Programmatic Interest

The focus of these grants should facilitate progress in maximizing the safety and health of children and adolescents exposed to agricultural hazards. The rationale for the significance of the research and application to the prioritization, development, or implementation of intervention efforts must be developed in the proposal. Proposals are being accepted which focus on one of three research areas (etiology, outcomes, intervention strategies), or that involve rigorous evaluations of commonly used childhood educational materials or methods. Applications should identify the focus or foci of the research proposal (etiology, outcomes, intervention strategies, evaluation of commonly used childhood educational materials or methods); types and geographical distribution of agricultural production which will be addressed, and size and characteristics of child and adolescent populations which can potentially be impacted by research findings.

### 1. Etiology Research

Etiologic research into contributors to injury and illness among children in agricultural production settings, with specific attention to risk factors unique to child and adolescent development e.g. physical, cognitive and behavioral. Research which can form the development of age- and developmentally-appropriate guidelines for work and protection of non-working children are of particular interest. Potential research areas follow for illustrative purposes only, and should not be considered boundaries for proposed research questions. Youths who are still maturing may not meet the anthropometric and strength requirements of various agricultural machines, tools, personal protective equipment, and work tasks. Physical maturation and growth may result in unique susceptibilities to physical and chemical work exposures. Cognitive requirements of tasks and safe negotiation of agricultural hazards may exceed cognitive capabilities of children and adolescents. Feelings of invulnerability, lack of perception of risk, and a desire to demonstrate competence and independence may contribute to childhood exposures to agricultural hazards. Fatigue resulting from balancing demands of school and work, the need for intensive work during harvest periods, and inadequate sleep may contribute to injury. Safety awareness and adequate supervision of children and adolescents may protect children from agricultural injury and illness. Both laboratory- and field-based research are appropriate for this priority area of research.

### 2. Outcomes Research

Research into the consequences, both positive and negative, of children's and adolescents' involvement in agriculture. Outcomes of interest include: physical outcomes related to exposure to health hazards; impact of agricultural injuries on youth's lives and futures; positive and negative psychosocial outcomes for children; and societal and economic costs and consequences associated with childhood agricultural injury. Examples of research efforts which are appropriate under this priority area include, but are not limited to: studies to estimate the societal and economic costs and consequences associated with childhood agricultural injury; assessments of short- and long-term disability from injuries; assessment of short- and long-term psychosocial outcomes related to children's and adolescents' participation in different types of agricultural work; physical

assessments of children and adolescents who have been exposed to agricultural hazards such as agricultural chemicals, organic dusts, toxic gases, nitrates, volatile organic compounds, oils and solvents; and, studies of the impact of noise, vibration, cumulative trauma, and other work-induced health hazards on children and adolescents participating in agricultural work.

### 3. Intervention Strategies Research

Research to form the development and implementation of interventions to protect children and adolescents from agricultural injury. This research may include studies into aids and barriers for implementing a variety of forms of intervention, from control technology to regulations to behavioral change; the development, implementation, and evaluation of new and innovative intervention strategies; and, the relative effectiveness of different intervention strategies. Examples of research efforts which are appropriate under this priority area include, but are not limited to: identification of barriers to implementing prevention measures; identification of innovative methods for removing barriers; identification of effective methods to influence positive safety behaviors of farm and ranch owners and operators, farm workers, parents, caregivers, and manufacturers, children and adolescents; identification of the types and levels of incentives that are most likely to influence protection of children; planning, implementation, and evaluation of structural and machinery design options to provide a protective environment for children at the farm work site; design, implementation and evaluation of community-based programs to enhance the safety and well-being of children who may be exposed as bystanders to agricultural hazards; studies to determine the relative effectiveness of education, engineering, voluntary incentives, and mandatory standards on childhood agricultural injury reduction.

### 4. Evaluation of Commonly Used Childhood Educational Materials or Methods

Rigorous evaluations of commonly available and used education or training programs to determine effectiveness in influencing safety and health behaviors and consequently preventing agricultural injuries among children and adolescents. Existing childhood education or training programs which require evaluation include, but are not limited to, school curricula, farm safety day camps, and tractor and/or machine operator safety certification programs. Research projects need to include

process and outcome evaluations. The process evaluation will document the implementation of the intervention using the educational materials and methods, including identification of key activities, and monitoring delivery of the educational materials and methods to the target population. Outcomes of interest are exposure to injury hazards, knowledge about safety hazards, safety and health behaviors, and the incidence of childhood agricultural injuries. Outcome evaluations should be based on pre- and post-intervention data. The sustainability of intervention effects should be assessed over time, and should not be limited to assessments directly after the delivery of the educational intervention. The research proposals need to demonstrate that the study design and size is sufficient to detect intervention effects, and to evaluate the association of changes in outcome variables with the intervention versus natural change, extraneous events, etc.

The research needs identified in this announcement are consistent with the National Occupational Research Agenda (NORA) developed by NIOSH and partners in the public and private sectors to provide a framework to guide occupational safety and health research in the next decade towards topics which are most pressing and most likely to yield gains to the worker and the nation. The agenda identifies 21 research priorities. Research priorities with specific relevance to this announcement are: traumatic injuries; special populations at risk; control technology and personal protective equipment; intervention effectiveness research; and social and economic consequences of workplace illness and injury. The NORA document is available through the NIOSH Home Page; <http://www.cdc.gov/niosh/nora.html>.

Potential applicants with questions concerning the acceptability of their proposed work are strongly encouraged to contact the technical information contact listed in this announcement in the section Where to Obtain Additional Information.

### Reporting Requirements

Progress reports are required annually as part of the continuation application (75 days prior to the start of the next budget period). The annual progress reports must contain information on accomplishments during the previous budget period and plans for each remaining year of the project. Financial status reports (FSR) are required no later than 90 days after the end of the budget period.

The final performance and financial status reports are required 90 days after the end of the project period. The final performance report should include, at a minimum, a statement of original objectives, a summary of research methodology, a summary of positive and negative findings, and a list of publications resulting from the project. Research papers, project reports, or theses are acceptable items to include in the final report. The final report should stand alone rather than citing the original application. Three copies of reprints of publications prepared under the grant should accompany the report.

#### Evaluation Criteria

Upon receipt, applications will be reviewed by CDC for completeness and responsiveness. Applications determined to be incomplete or unresponsive to this announcement will be returned to the applicant without further consideration. If the proposed project involves organizations or persons other than those affiliated with the applicant organization, letters of support and/or cooperation must be included.

Applications that are complete and responsive to the announcement will be reviewed by an initial review group in which applications will be determined to be competitive or non-competitive, based on the review criteria relative to other applications received. Applications determined to be non-competitive will be withdrawn from further consideration and the principal investigator/program director and the official signing for the applicant organization will be promptly notified. Applications judged to be competitive will be discussed and assigned a priority score.

Review criteria for technical merit are as follows:

1. Technical significance and originality of proposed project.
2. Appropriateness and adequacy of the study design and methodology proposed to carry out the project.
3. Qualifications and research experience of the Principal Investigator and staff, particularly but not exclusively in the area of the proposed project.
4. Availability of resources necessary to perform the project.
5. Documentation of cooperation from collaborators in the project, where applicable.
6. Adequacy of plans to include both sexes and minorities and their subgroups as appropriate for the scientific goals of the project. (Plans for the recruitment and retention of subjects will also be evaluated.)

7. Appropriateness of budget and period of support.

8. Human Subjects—Procedures adequate for the protection of human subjects must be documented. Recommendations on the adequacy of protections include: (1) protections appear adequate and there are no comments to make or concerns to raise, (2) protections appear adequate, but there are comments regarding the protocol, (3) protections appear inadequate and the Initial Review Group has concerns related to human subjects, or (4) disapproval of the application is recommended because the research risks are sufficiently serious and protection against the risks are inadequate as to make the entire application unacceptable.

Secondary review criteria for programmatic importance are as follows:

1. Results of the initial review.
2. Magnitude of the problem in terms of numbers of workers affected.
3. Severity of the disease or injury in the worker population.
4. Usefulness to applied technical knowledge in the evaluation, or control of agricultural safety and health hazards.
5. Degree to which the project can be expected to yield or demonstrate results that will be useful on a national or regional basis.

The following will be considered in making funding decisions:

1. Quality of the proposed project as determined by peer review.
2. Availability of funds.
3. Program balance among priority areas of the announcement.
4. Program balance among types and geographical distribution of agriculture.

#### Executive Order 12372 Review

Applications are not subject to the review requirements of Executive Order 12372.

#### Public Health System Reporting Requirement

This program is not subject to the Public Health System Reporting Requirements.

#### Catalog of Federal Domestic Assistance Number

The Catalog of Federal Domestic Assistance number is 93.262.

#### Other Requirements

##### *Human Subjects*

The applicant must comply with the Department of Health and Human Services Regulations, 45 CFR Part 46, regarding the protection of human subjects. Assurances must be provided

to demonstrate that the project will be subject to initial and continuing review by an appropriate institutional review committee. The applicant will be responsible for providing assurance in accordance with the appropriate guidelines and form provided in the application kit.

##### *Women and Racial and Ethnic Minorities*

It is the policy of the CDC to ensure that women and racial and ethnic groups will be included in CDC-supported research projects involving human subjects, whenever feasible and appropriate. Racial and ethnic groups are those defined in OMB Directive No. 15 and include American Indian, Alaskan Native, Asian, Pacific Islander, Black and Hispanic. Applicants shall ensure that women and racial and ethnic minority populations are appropriately represented in applications for research involving human subjects. Where clear and compelling rationale exist that inclusion is not feasible, this situation must be explained as part of the application. In conducting the review of applications for scientific merit, review groups will evaluate proposed plans for inclusion of minorities and both sexes as part of the scientific assessment and assigned score. This policy does not apply to research studies when the investigator cannot control the race, ethnicity and/or sex of subjects. Further guidance to this policy is contained in the Federal Register, Vol. 60, No. 179, Friday, September 15, 1995, pages 47947–47951.

#### Application Submission and Deadlines

##### *A. Preapplication Letter of Intent*

Although not a prerequisite of application, a non-binding letter of intent-to-apply is requested from potential applicants. The letter should be submitted to the Grants Management Officer (whose address is reflected in section B, "Applications"). It should be postmarked no later than April 10, 1997. The letter should identify the announcement number, name of principal investigator, and specify the priority area to be addressed by the proposed project. The letter of intent does not influence review or funding decisions, but it will enable CDC to plan the review more efficiently, and will ensure that each applicant receives timely and relevant information prior to application submission.

##### *B. Applications*

Applicants should use Form PHS-398 (OMB Number 0925-0001) and adhere

to the ERRATA Instruction Sheet for Form PHS-398 contained in the Grant Application Kit. Please submit an original and five copies on or before June 10, 1997 to: Ron Van Dyne, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 321, MS-E13, Atlanta, GA 30305.

### C. Deadlines

1. Applications shall be considered as meeting a deadline if they are either:

A. Received at the above address on or before the deadline date, or

B. Sent on or before the deadline date to the above address, and received in time for the review process.

Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or the U.S. Postal Service. Private metered postmarks shall not be accepted as proof of timely mailings.

2. Applications which do not meet the criteria above are considered late applications and will be returned to the applicant.

### Where to Obtain Additional Information

To receive additional written information call (404) 332-4561. You will be asked your name, address, and telephone number and will need to refer to Announcement 725. You will receive a complete program description, information on application procedures, and application forms. In addition, this announcement is also available through the CDC Home Page on the Internet. The address for the CDC Home Page is <http://www.cdc.gov>.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from Georgia L. Jang, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., MS-E13, Atlanta, GA 30305, telephone (404) 842-6814; fax 404-842-6513; internet: [glj2@cdc.gov](mailto:glj2@cdc.gov).

Programmatic technical assistance may be obtained from Roy M. Fleming, Sc.D., Associate Director for Grants, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Building 1, Room 3053, MS-D30, Atlanta, GA 30333, telephone 404-639-3343; fax 404-639-4616; internet: [rmf2@cdc.gov](mailto:rmf2@cdc.gov).

Please refer to announcement number 725 when requesting information and submitting an application.

Potential applicants may obtain a copy of "Healthy People 2000" (Full Report, Stock No. 017-001-00474-0) or "Healthy People 2000" (Summary Report, Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9325, telephone (202) 512-1800.

### Useful References

The following documents may also provide useful information:

National Committee for Childhood Agricultural Injury Prevention. Children and Agriculture: Opportunities for Safety and Health. Marshfield, WI: Marshfield Clinic, 1996.

National Institute for Occupational Safety and Health. National Occupational Research Agenda. Cincinnati, OH: U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 96-115.

Dated: March 4, 1997.

Diane D. Porter,

*Acting Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 97-5789 Filed 3-7-97; 8:45 am]

BILLING CODE 4163-18-P

### Translation Advisory Committee for Diabetes Prevention and Control Programs: Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following committee meeting.

*Name:* Translation Advisory Committee for Diabetes Prevention and Control Programs.

*Times and Dates:* 1 p.m.-5 p.m., March 26, 1997. 8 a.m.-5 p.m., March 27, 1997.

*Place:* San Diego Marriott Mission Valley, 8757 Rio San Diego Drive, San Diego, California 92108, telephone 619/692-3800.

*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people.

*Purpose:* This committee is charged with advising the Director, CDC, regarding policy issues and broad strategies for diabetes translation activities and control programs designed to reduce risk factors, health services utilization, costs, morbidity, and mortality associated with diabetes and its complications. The Committee identifies research advances and technologies ready for

translation into widespread community practice; recommends broad public health strategies to be implemented through public health interventions; identifies opportunities for surveillance and epidemiologic assessment of diabetes and related complications; and for the purpose of assuring the most effective use and organization of resources, maintains liaison and coordination of programs within the Federal, voluntary, and private sectors involved in the provision of services to people with diabetes.

*Matters to be Discussed:* Agenda items include a discussion on the public health issues surrounding screening for undiagnosed diabetes mellitus, issues in chronic disease screening, salient issues for program development, and goals and future areas of emphasis for the Division of Diabetes Translation.

Agenda items are subject to change as priorities dictate.

*Contact Person for More Information:* Jay Allen, Program Analyst, Division of Diabetes Translation, National Center for Chronic Disease Prevention and Health Promotion, CDC, 4770 Buford Highway, NE, M/S K-10, Atlanta, Georgia 30341-3724, telephone 770/488-5004.

Dated: March 3, 1997.

Carolyn J. Russell,

*Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).*

[FR Doc. 97-5827 Filed 3-7-97; 8:45 am]

BILLING CODE 4163-18-P

### Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* Runaway and Homeless Youth Management Information System.

*OMB No.:* 0970-0123.

*Description:* In the Runaway and Homeless Youth Act (42 U.S.C. 5701 *et seq.*) Congress mandated that the Department of Health and Human Services (HHS) report regularly on the status of HHS-funded programs serving runaway and homeless youth. In the Anti-Drug Abuse Act of 1988 (42 U.S.C. 11801 *et seq.*) Congress mandated that HHS report regularly on the status of HHS-funded Drug Abuse and Prevention Programs (DAPP) serving runaway and homeless youth. Organizations funded under the Runaway and Homeless Youth Program and/or Drug Abuse and Prevention Program are required by statute (42 U.S.C. 5712, 42 U.S.C. 5714-2 and/or 42 U.S.C. 11824) to meet several data collection and reporting requirements, including maintaining client statistical records and submitting annual program reports with regard to the profile of youth and families served and the