Charged with developing programs for those 25 years of age and younger, community groups in the local demonstration sites chose to segment the target audience even further, and to mount a variety of types of interventions. Decisions about segmentation and the nature of local interventions were based on formative research conducted in each community. It is hoped that this demonstration project will result in reductions in HIV risk behavior among members of the target audiences, as well as in enhanced collaboration among individuals and organizations in the participating communities.

As part of the evaluation of the effectiveness of the interventions, questionnaire data will be collected in three of the demonstration communities. These data will be collected at four time points over a two year period after prevention activities and message campaigns are launched. Baseline survey data have been collected recently under OMB No.0920-0343 (Evaluation of the National AIDS Information and Education Program Activities). The total annual burden hours are 4,260.

### Meeting Announcement

The National Center for Environmental Health (NCEH) of the Centers for Disease Control and Prevention (CDC) announces the following meeting:

**Name:** Preventing Birth Defects Due to Thalidomide Exposure.

**Time and date:** 8 a.m.-5 p.m., March 26, 1997.

**Place:** Sheraton Colony Square Hotel, 188 14th Street, NE, Atlanta, Georgia 30361.

**Status:** Open to the public, limited only by the space available. The meeting room accommodates approximately 75 people. Registration is not required.

**Purpose:** The meeting will enable academic and public health professionals to discuss strategies to prevent birth defects due to exposure to thalidomide and other human teratogens. Thalidomide, a potent human teratogen, is now available as an investigational drug in the USA. Although the drug is currently being considered for approval only for the treatment of leprosy, its potential applications appear to be numerous. This meeting will bring together leaders from the fields of birth defects research, clinical practice, bioethics, and public health to review existing strategies for limiting intrauterine exposure to human teratogens, and to discuss and provide individual input on new approaches for preventing birth defects due to future teratogens such as thalidomide.

**Matters to be discussed:** Agenda items will include presentations on the following topics: (1) Assessment of the Accutane Pregnancy Prevention Program, (2) use and limitations of drug registries, (3) contraception efficacy, (4) ethical issues on teratogen exposure, and (5) measures to assure appropriate use of pharmaceuticals. Group discussions on strategies for health care provider education, patient education, and appropriate use of pharmaceuticals will follow the presentations. Written materials may be submitted to CDC until March 21, 1997, for distribution to meeting participants. Agenda items are subject to change as priorities dictate.

**FOR FURTHER INFORMATION CONTACT:** Dwight Jones, Division of Birth Defects and Developmental Disabilities, NCEH, CDC, 4770 Buford Highway, NE, M/S F-45, Atlanta, Georgia 30341-3724, telephone 770-488-7160, Fax 770-488-7197.


Wilma G. Johnson,
Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

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### Respondents

<table>
<thead>
<tr>
<th>Respondents</th>
<th>Number of respondents</th>
<th>Number of responses/respondent</th>
<th>Average burden/response (in hrs.)</th>
<th>Total burden (in hrs.)</th>
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<tr>
<td>Eligibility Screening</td>
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<td>Consent</td>
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<td>Young People under 25 years of age in targeted prevention program communities</td>
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