

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention**

[INFO-98-14]

**Proposed Data Collections Submitted for Public Comment and Recommendations**

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call the CDC Reports Clearance Officer on (404) 639-7090.

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; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques for other forms of information technology. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

**Proposed Projects**

1. 1999 and 2001 National School-Based Youth Risk Behavior Surveys—The purpose of this request is to renew OMB clearance for a biennial, national, youth risk behavior survey. This ongoing biennial survey is administered to students attending regular public, private, and Catholic schools in grades 9–12. The survey addresses priority health risk behaviors related to the major preventable causes of mortality,

morbidity, and social problems among both youth and adults in the U.S. Previous OMB clearance for these surveys expired in October of 1997 (OMB No. 1920-0258, expiration 10/97). OMB clearance for a similar survey conducted among alternative school students will expire in December of 1998 (OMB No. 0920-0416, expiration 12/31/98). Data on the health risk behaviors of adolescents is the focus of at least 26 national health objectives in *Healthy People 2000: Midcourse Review and 1995 Revisions*. This survey will provide end-of-decade data to help measure these objectives as well as baseline data to measure many new national health objectives proposed for 2010. No other national source of data exists for most of the proposed 2010 objectives that address behaviors of adolescents. The data also will have significant implications for policy and program development for school health programs nationwide. The total estimated cost to respondents is \$47,250 assuming a minimum wage of \$5.25 for the 1997–1998 school year.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hrs.)	Total burden (in hrs.)
Alternative school students .....	12,000	1	0.75	9,000

2. Multistate Case-Control Study of Childhood Brain Cancers—New—The Agency for Toxic Substances and Disease Registry (ATSDR) is mandated pursuant to the 1980 Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), and its 1986 Amendments, the Superfund Amendments and Reauthorization Act (SARA), to prevent or mitigate adverse human health effects and diminished quality of life resulting from exposure to hazardous substances in the environment. Scientific knowledge is lacking concerning the reasons for the apparent rise in childhood brain cancer incidence during the last two decades in the U.S.

and for explanations of childhood brain cancer in general. To date, most epidemiologic studies exploring the causes of childhood brain cancer have suffered from lack of statistical power due to the small numbers of cases available for the study. By combining recent childhood brain cancer data from multiple states, this study will help to better understand what environmental factors may be associated with childhood brain cancer, and therefore to possibly develop well-focused prevention measures.

This study will examine the association between environmental exposures and risk of childhood brain cancers, by employing a population based case-control study of childhood

brain cancer. Information to be collected includes proximity of parental residence to hazardous waste sites and other known or suspected risk factors. Other known or purported risk factors identified from the literature will include both environmental and host factors during the prenatal as well as postnatal periods: parental occupation, parents' and child's dietary habits, parental history of smoking and drinking, mother's and child's exposure to radiation through medical care, residential use of pesticides or herbicides, mother's and child's history of viral infection, and family history of cancer and neurological disorders. This request is for a 3-year OMB approval.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hrs.)	Total burden (in hrs.)
Parent/Child questionnaire .....	1200	1	0.75	900
Blood sample collection .....	200	1	0.5	100
Total .....				1000

**Charles Gollmar,**

*Acting Associate Director for Policy, Planning, and Evaluation, Centers for Disease Control and Prevention (CDC).*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Citizens Advisory Committee on Public Health Service (PHS) Activities and Research at Department of Energy (DOE) Sites: Idaho National Engineering and Environmental Laboratory Health Effects Subcommittee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

*Name:* Citizens Advisory Committee on PHS Activities and Research at DOE Sites: Idaho National Engineering and Environmental Laboratory (INEEL) Health Effects Subcommittee.

*Times and Dates:* 8:30 a.m.-5:30 p.m., April 7, 1998; 7 p.m.-8 p.m., April 7, 1998; 7:30 a.m.-4 p.m., April 8, 1998.

*Place:* DoubleTree Hotel, 2900 Chinden Boulevard, Boise, Idaho 83714, telephone 208/343-1871, fax 208/344-1079.

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

#### Background

Under a Memorandum of Understanding (MOU) signed in December 1990 with DOE and replaced by an MOU signed in 1996, the Department of Health and Human Services (HHS) was given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to

radiation or to potential hazards from non-nuclear energy production use. HHS delegated program responsibility to CDC.

In addition, an MOU was signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or "Superfund"). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles.

#### Purpose

This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, regarding community, American Indian Tribes, and labor concerns pertaining to CDC's and ATSDR's public health activities and research at this DOE site. The purpose of this meeting is to provide a forum for community, American Indian Tribal, and labor interaction and serve as a vehicle for community concern to be expressed as advice and recommendations to CDC and ATSDR.

#### Matters To Be Discussed

Agenda items include presentations from the CDC and the U.S. Department of Energy on national priorities and research agendas; the National Institute for Occupational Safety and Health will provide updates on the progress of current studies; the National Cancer Institute (NCI) will update the NCI study, and Fallout and Thyroid Cancer; the Radiological Assessments Corporation will provide updates on the

Status of Chemical Screening and Radionuclide Screening; and committee deliberations and working group discussions. On April 7, at 7 p.m., the meeting will continue in order to allow more time for public input and comment.

Agenda items are subject to change as priorities dictate.

*Contact Persons for More Information:* Arthur J. Robinson, Jr., or Sharona Woodley, Radiation Studies Branch, Division of Environmental Hazards and Health Effects, NCEH, CDC, 4770 Buford Highway, NE (F-35), Atlanta, Georgia 30341-3724, telephone 770/488-7040, FAX 770/488-7044.

Dated: March 17, 1998.

#### Carolyn J. Russell,

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

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* Application and program reporting requirements for the Children's Justice Act authorized by the Child Abuse Prevention and Treatment Act (as amended).

*OMB No.:* 0980-0196.

*Description:* Application information is required when a State wishes to be considered for a Children's justice Act grant award. Program reports are used by Children's Bureau and the States as a mechanism for monitoring, evaluating and measuring State achievements in addressing the problems of child abuse and neglect. State reports also provide information for the Congress.

*Respondents:* Individuals and Households; Not-for-Profit Institutions; and State, Local or Tribal Govt.

#### ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Application .....	52	1	40	2,080
Performance Report .....	52	1	20	1,040

*Estimated Total Annual Burden Hours:* 3,120

*Additional Information:* Copies of the proposed collection may be obtained by writing to The Administration for

Children and Families, Office of Information Services, Division of Information Resource Management