

## Ohio

Wright-Patterson Air Force Base—  
Fairborn—(PB20-101405).

## Texas

Austin City of Holly Street Power—  
Austin—(a/k/a Holly Street Power  
Plant)—(PB20-101712).

## Washington

Port Hadlock Detachment (US Navy)  
[a/k/a US Navy Port Hadlock  
Detachment (Indian Island Depot)]—  
Port Hadlock—(PB20-102551).

## Wyoming

F.E. Warren Air Force Base—  
Cheyenne—(PB20-101764).

*Non NPL Petitioned Sites*

## Georgia

T.H. Agriculture and Nutrition  
(Albany)—Albany—(PB20-102004).

## New Jersey

Atlantic State Cast Iron Pipe—  
Phillipsburg—(PB20-102003).

## New York

Brookfield Avenue Landfill—Staten  
Island—(PB20-101763).

Dated: March 15, 2000.

**Georgi Jones, Director,**

*Office of Policy and External Affairs Agency  
for Toxic Substances and Disease Registry.*

[FR Doc. 00-6905 Filed 3-20-00; 8:45 am]

**BILLING CODE 4163-70-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with section  
3506(c)(2)(A) of the Paperwork  
Reduction Act of 1995 concerning  
opportunity for public comment on  
proposed collections of information, the

Substance Abuse and Mental Health  
Services Administration will publish  
periodic summaries of proposed  
projects. To request more information  
on the proposed projects or to obtain a  
copy of the information collection  
plans, call the SAMHSA Reports  
Clearance Officer on (301) 443-7978.

Comments are invited on: (a) Whether  
the proposed collections of information  
are 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 or  
other forms of information technology.

#### **Proposed Project: Assessment of Hablemos en Confianza Materials**

New—In the United States, Hispanic/  
Latinos present a disproportionately  
higher prevalence of alcohol, tobacco,  
cocaine, and marijuana use than other  
ethnic groups. In the Spring of 1995, the  
Secretary of the U. S. Department of  
Health and Human Services authorized  
the establishment of the Departmental  
Working Group on Hispanic Issues. Part  
of the Hispanic Agenda for Action calls  
for an increase in the Department's  
capacity to reach out and communicate  
with Hispanic/Latino populations using  
culturally and language appropriate  
techniques. In-depth literature review  
documented a lack of materials focusing  
on substance abuse prevention targeting  
Hispanic/Latino populations. Based on  
formative research, the "Hablemos en  
Confianza" kit (HEC) was designed  
specifically to respond to this need for  
culturally and language appropriate  
materials.

The HEC kit consists of five booklets  
addressing various aspects of  
communication between parents/  
caregivers with children, three

fotonovelas with open-ended stories of  
Hispanic/Latino families who are  
learning to discuss and resolve the issue  
of alcohol and drug use by their  
children, and a poster for youth 13-17  
years old. The dissemination of the  
materials was initiated in October, 1999  
through the National Clearinghouse for  
Alcohol, and Drug Information (NCADI).  
The information resulting from the  
proposed survey will be employed by  
SAMHSA's Center for Substance Abuse  
Prevention (CSAP) to assess the quality  
of the materials regarding cultural  
adequacy and clarity, as well as the  
short term impact of the messages. This  
information will be instrumental in  
highlighting areas that should be  
addressed in future CSAP prevention/  
education materials targeting Hispanic/  
Latino audiences.

The adequacy of the prevention  
messages will be assessed by conducting  
a survey to collect data on five major  
areas: (1) Assess the degree to which the  
materials raise awareness in parents/  
caregivers about the potential  
communication problems with their  
children regarding substance use/abuse  
matters; (2) assess the degree to which  
the materials prompt parents/caregivers  
to generate intent or to pursue actions  
toward improving communication with  
their children; (3) assess the degree to  
which the materials are perceived as  
providing and/or increasing adults'  
capacity to communicate with youth; (4)  
assess the quality of the materials  
(clarity of the messages, cultural  
adequacy, and attractiveness of the  
materials); and (5) determine whether  
there are aspects to be modified and/or  
enhanced in the development of future  
materials focusing substance use/abuse  
targeted to Hispanic/Latino audiences.  
The study population is composed of  
parents or care givers (person  
responsible for the care of the children)  
who have requested the materials from  
NCADI.

The following table presents the  
response burden for this project.

Number of respondents	Responses/ Respondent	Hours/ Response	Total burden
1,375 .....	1	.2	275

Send comments to Nancy Pearce, SAMHSA Reports Clearance Officer, Room 16-105, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: March 15, 2000.

**Richard Kopanda,**

*Executive Officer, SAMHSA.*

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**BILLING CODE 4162-20-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a list of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (301)443-7978.

#### Treatment Improvement Protocol Evaluation: Addiction Technology Transfer Center Study

New—The ATTC Study is a special study under the ongoing TIPs Evaluation Project. Since 1993, SAMHSA's Center for Substance Abuse Treatment (CSAT) has published 36 Treatment Improvement Protocols, or TIPs, which provide consensus-based administrative and clinical practice guidance to the substance abuse treatment field; and 23 Technical Assistance Publications (TAPs), which are publications, manuals, and guides developed by experts with first-hand experience to offer practical responses to emerging issues and concerns in the substance abuse treatment field.

A qualitative study, the ATTC study will elicit data related to assessing both actual use, and usefulness, of TIPs, TAPs and other CSAT products in developing curricula and other knowledge application products for ATTCs. Data will be collected through intensive interviews with both ATTC faculty and curriculum developers at six of the 13 ATTCs. Purposive sampling will be used to identify appropriate participants; ATTC Directors will recommend faculty/curriculum

developers for participation. Prior to the interview process, faculty and curriculum developers will be asked to complete a brief questionnaire. Measures will be primarily descriptive and process, for example, whether, and if so, which, TIPs and TAPs have been or are being used in development of ATTC curricula; how and to what extent TIPs and TAPs are used; faculty/trainers' and curriculum developers' perceptions regarding the advantages and disadvantages of using TIPs and TAPs; and their impressions and suggestions concerning the content and format of TIPs and TAPs.

Burden for faculty/trainers and curriculum developers includes participation in a study introduction phone call (15 minutes); written responses to a brief questionnaire, including mailing it back to the contractor (30 minutes); and subsequent participation in an indepth interview (1½ hours). Burden attributed to the ATTC Directors of the six selected ATTCs includes time spent assisting the study team with background information, site visit coordination, and identifying and discussing possible participants for interviews.

	No. of respondents	Responses/ respondent	Hours/ response	Burden hours
Faculty/Curriculum Developers .....	90	1	*2.25	202.50
ATTC Directors .....	6	1	0.50	3.00
Total .....	96	.....	.....	205.50

\*includes travel time.

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Allison Eydt, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: March 15, 2000.

**Richard Kopanda,**

*Executive Officer, SAMSHA.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a list of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (301)443-7978.

#### Registration Form for the National Registry of Effective Prevention Programs

New—Section 515(d) of the Public Health Service Act (42 U.S.C. 290bb-21) requires that the Director of SAMHSA's Center for Substance Abuse Prevention

(CSAP) establish a national data base providing information on programs for the prevention of substance abuse and specifies that the data base shall contain information appropriate for use by public entities and information appropriate for use by nonprofit private entities. Since 1994, CSAP has met this responsibility through the High Risk Populations Databank on programs for the prevention of substance abuse funded by direct CSAP grants. Because relatively few direct grants of this type have been issued in recent years, CSAP must expand its information collection to include voluntary submission of descriptions of effective substance abuse prevention conducted by state and local governments, nonprofit entities, and the private sector.

CSAP has developed a template to enable practitioners who have evidence that their program reduces risk factors or increases protective factors pertaining to substance abuse to nominate their own standardized program for the