

Reports, OMB No. 0920-0208, for an additional 3 years. This request is for a 3-year extension. There are currently 65 cooperative agreements for HIV prevention projects (50 states, 6 cities, 7 territories, Washington, DC, and Puerto Rico) and 54 community based organizations to support HIV counseling, testing, and referral programs funded by CDC. Program initiatives such as HIV counseling, testing, and referral services in STD clinics, Women's Health Centers, Drug Treatment Centers, and other health facilities have been described as a primary prevention strategy of the national HIV prevention program. The funded public health departments and community based organizations have increased the provision of HIV counseling, testing, and referral activities to those at increased risk for acquiring or transmitting HIV, as well as

minority communities and women of child bearing age. CDC is responsible for monitoring and evaluating HIV prevention programs conducted under the HIV Prevention cooperative agreements. HIV counseling, testing, and referral services are a major component of HIV prevention programs. Without data to measure the impact of HIV counseling, testing, and referral programs, HIV prevention program priorities cannot be assessed and redirected to prevent further spread of the virus in the general population. CDC needs information from all grantees describing the number of HIV tests completed for at-risk persons and the number HIV-positive test results for at-risk persons. The HIV counseling and testing report form provides a simple yet complete means to collect this information. Public health departments will be able to use either a summary form, a scan form, or a form unique to their

jurisdiction. All reporting to the CDC will take place electronically. Sixteen (16) respondents (public health departments) will use the summary data collection tool. It takes approximately 2 hours to complete the form. The respondents will complete the form 4 times each year for a total burden of 8 hours per year per project area. Thirty (30) respondents (public health departments) will use a scan form provided by CDC. Nineteen (19) respondents (public health departments) will use a form unique to their jurisdiction. It will take approximately 15 minutes for each respondent using either the scan or unique formats to transfer data to CDC electronically on a quarterly basis for a total burden per project area of 1 hour per year. Therefore, the total burden hours for collecting this data will be 49 hours. There is no cost to respondents except for their time.

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Manual Form Project Areas .....	16	4	2	128
Scan or Unique Form Project .....	49	4	15/60	49
<b>Total .....</b>				<b>177</b>

Dated: March 21, 2003.  
**Thomas Bartenfeld,**  
*Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[Program Announcement 03015]

**Unintentional Injury and Violence Prevention and Control Initiatives Related to the World Health Organization (WHO); Notice of Intent To Fund Single Eligibility Award**

**A. Purpose**

The Centers for Disease Control and Prevention (CDC) announces the intent to award fiscal year (FY) 2003 funds for an international grant program to promote surveillance, research, and dissemination of expertise and information related to unintentional injury and violence prevention and control.

**B. Eligible Applicant**

Assistance will be provided only to the World Health Organization (WHO). WHO is the technical agency for health within the United Nations, they have access to all national health promotion and research sites, and they collaborate with other international organizations to coordinate research initiatives and disseminate violence prevention and control programs.

**C. Funding**

Approximately \$109,000 is available in FY 2003 to fund this award. It is expected that the award will begin on or about March 30, 2003, and will be made for a 12-month budget period within a project period of up to three years.

**D. Where To Obtain Additional Information**

For general comments or questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146. Telephone: 770-488-2700.

For technical questions about this program, contact: Richard J. Waxweiler, Ph.D., Associate Director for Extramural Research, National Center for Injury Prevention and Control, Centers for

Disease Control and Prevention (CDC), Mail Stop K-02, 4770 Buford Highway, NE., Atlanta, GA 30341. Telephone: (770) 488-4694. E-mail address: [rwaxweiler@cdc.gov](mailto:rwaxweiler@cdc.gov).

Dated: March 21, 2003.  
**Sandra R. Manning,**  
*Director, Procurement and Grants Office, Centers for Disease Control and Prevention.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[Program Announcement 03037]

**Communication and Negotiation About Barrier Contraceptive Use Among Young Adults at Risk; Notice of Availability of Funds**

Application Deadline: May 27, 2003.

**A. Authority**

This program is authorized under sections 301(a) and 317(k)(2) of the Public Health Service Act, [42 U.S.C. sections 247b(k)(2)], as amended. The