

e-mail it to Ms. Gianelli at one of the addresses given below.

FOR FURTHER INFORMATION CONTACT: Ms. Diane Gianelli, Director of Communications, The President's Council on Bioethics, Suite 700, 1801 Pennsylvania Avenue, Washington, DC 20006. Telephone: 202/296-4669. E-mail: info@bioethics.gov. Web site: <http://www.bioethics.gov>.

Dated: June 30, 2003.

Dean Clancy,

Executive Director, The President's Council on Bioethics.

[FR Doc. 03-17057 Filed 7-3-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Health Care Policy and Research Special Emphasis Panel (SEP); Notice of Meeting

In accordance with section 10(d) of the Federal Advisory Committee Act (5 U.S.C., appendix 2), announcement is made of a Health Care Policy and Research Special Emphasis Panel (SEP) meeting.

The Health Care Policy and Research Special Emphasis Panel is a group of experts in fields related to health care research who are invited by the Agency for Healthcare Research and Quality (AHRQ), and agree to be available, to conduct on an as needed basis, scientific reviews of applications for AHRQ support. Individual members of the Panel do not attend regularly-scheduled meetings and do not serve for fixed terms or long periods of time. Rather, they are asked to participate in particular review meetings which require their type of expertise.

Substantial segments of the upcoming SEP meeting listed below will be closed to the public in accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., appendix 2 and 5 U.S.C. 552b(c)(6). Grant applications for Minority Research Infrastructure Support Program (R24) Awards are to be reviewed and discussed at this meeting. These discussions are likely to reveal personal information concerning individuals associated with the applications. This information is exempt from mandatory

disclosure under the above-cited statutes.

SEP Meeting on: AHRQ Minority Research Infrastructure Support Program (R24) Awards.

Date: July 11, 2003 (open on July 11 from 8 a.m. to 8:10 a.m. and closed for the remainder of the meeting).

Place: Quality Suites & Conference Center, 3 Research Court, Rockville, MD 20850.

Contact Person: Anyone wishing to obtain a roster of members, agenda or minutes of the nonconfidential portions of this meeting should contact Mrs. Bonnie Campbell, Committee Management Officer, Office of Research Review, Education and Policy, AHRQ, 540 Gaither Road, Room 2038, Rockville, Maryland 20850, Telephone (301) 427-1554.

Agenda items for this meeting are subject to change as priorities dictate.

This notice is being published less than 15 days to the July 11 meeting, due to the time constraints of reviews and funding cycles.

Dated: June 27, 2003.

Carolyn M. Clancy,

Director.

[FR Doc. 03-17045 Filed 7-3-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-03-87]

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) 498-1210.

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 or other forms of information technology. Send comments to Anne O'Connor, 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 Project: 2004 Lesbian/Gay/Bisexual/Transgender (LGBT) Adult Tobacco Survey (ATS)—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

The purpose of this project is to test and pilot a culturally appropriate Adult Tobacco Survey questionnaire for the lesbian/gay/bisexual/transgender (LGBT) population. This questionnaire will expand data and existing knowledge of tobacco use among LGBTs in order to benefit tobacco use and prevention surveillance at a state, local, and/or regional level. The questions will help to narrow existing gaps in knowledge of tobacco use among LGBTs and inform development of LGBT-specific interventions.

Numerous factors suggest that LGBT individuals may be at risk for high smoking prevalence. These factors include economic and social marginalization, homophobia, discrimination, the high prevalence of smoking in historically important LGBT social settings such as bars, and behaviors associated with smoking, such as alcohol and drug abuse. Additionally, since the 1980s, the tobacco industry has targeted the LGBT population. A recent review of the literature estimated smoking rates to range from 25 percent to 50 percent among gays, lesbians, and bisexuals compared to 28 percent nationally for adults overall during comparable periods. No articles addressing tobacco use by transgender individuals were found.

In an effort to better understand the effects of smoking among LGBTs, CDC will utilize a culturally appropriate questionnaire for pilot implementation in the LGBT population. The survey will be conducted with 750 lesbian, 750 gay, 750 bisexual, and 750 transgender individuals, for a total of three-thousand participants. There is no cost to the respondents.

Respondents	Number of respondents	Number of responses/respondent	Avg. burden/response (in hrs.)	Total burden (in hrs.)
Lesbian	750	1	45/60	562.5
Gay	750	1	45/60	562.5
Bisexual	750	1	45/60	562.5
Transgender	750	1	45/60	562.5
Total				2,250

Dated: June 30, 2003.
Thomas A. Bartenfeld,
Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.
 [FR Doc. 03-17012 Filed 7-3-03; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-03-86]

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) 498-1210.

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 or other forms of information technology. Send comments to Anne O'Connor, 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 Project: 2004 Latino Adult Tobacco Survey (ATS)—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

The purpose of this project is to test and pilot a culturally appropriate Adult Tobacco Survey questionnaire for Latinos, specifically Puerto Ricans, Mexican-Americans, and Cubans. This questionnaire will expand data and existing knowledge of tobacco use among Latinos in order to benefit tobacco use and prevention surveillance at a state, local, and/or regional level. The questions will help to narrow

existing gaps in knowledge of tobacco use among Latinos and inform development of Latino-specific interventions.

The Latino population is fast growing in the United States. It is expected that the number of Latinos living in the U.S. will increase from 35.3 million in the year 2000 to 98.2 million in the year 2050, almost 3 times the current population. A large growth in Latino populations, especially in non-traditional states, will have important implications in terms of tobacco control in the years to come. CDC is conducting a survey project that includes:

- (1) Developing a culturally appropriate Adult Tobacco Survey questionnaire for Latinos
- (2) Piloting the final instrument in approximately five Latino communities

In an effort to better understand the effects of smoking in Latino populations, CDC will utilize a culturally appropriate questionnaire for pilot implementation in approximately five Latino communities. The location of these communities is currently undecided. Within each community, the survey will be conducted with six-hundred participants, for a total of three-thousand participants. The survey will be conducted in both English and Spanish. There is no cost to the respondents.

Respondents	No. of respondents	No. of responses/respondent	Avg. burden/response (in hrs.)	Total burden (in hrs.)
Participants Community 1	600	1	45/60	450
Participants Community 2	600	1	45/60	450
Participants Community 3	600	1	45/60	450
Participants Community 4	600	1	45/60	450
Participants Community 5	600	1	45/60	450
Total				2,250