

services among rural Native Hawaiians. Other residents of rural Hawaii residing in the particular services area may also be provided services. The anticipated project period is three years and the estimated FY 1995 award is \$500,000. An award will be made based on an acceptable application that is approved by a peer review committee and the CSAT National Advisory Council.

AUTHORITY/JUSTIFICATION: A cooperative agreement award will be made under the authority of section 510(b)(1) of the Public Health Service (PHS) Act, as amended (42 U.S.C. 290bb-3).

The Catalog of Federal Domestic Assistance number for this program is 93.122.

The State of Hawaii has been selected for an award because of the special substance abuse problems of Native Hawaiians. Hawaii also has the highest percentage of chronic drinkers in the Nation. Among Native Hawaiians who self reported drinking patterns from the age of 18 to 34, 90 percent of males and 67 percent of females identified themselves as heavy drinkers and/or substance abuse users. Almost one-fifth of the adult drinking population meet the screening criteria for alcoholism and over 10 percent of pregnant women tested in a four-month period had positive drug urine results at the time of delivery.

In addition, rural remote areas of Hawaii, such as the Neighbor Islands of Kauai, Maui, Molokai, Lanai and the Big Island of Hawaii, are very isolated and have limited substance abuse treatment and related services. Lack of transportation and communication are common problems, thus, access to the very limited substance abuse and related health care services is difficult, if not impossible.

The availability of treatment services for Native Hawaiians and other neighboring residents of rural areas is inadequate to meet the extensive needs for treatment and related services. For example, there are only 32 licensed residential treatment beds in Maui, 30 on the Big Island and 6 on Kauai. None exist on Lanai or Molokai. The Neighbor Islands have virtually no methadone services, either for methadone detoxification or maintenance. The Big Island has just begun to provide methadone maintenance to 30 of those in need. Three hundred and fifteen individuals are currently on the Big Island waiting list for these services. In view of these considerations and in order to assure that specific attention is focused on rural Native Hawaiians and their neighbors, it has been determined that \$500,000 should be reserved for the

exclusive purpose of providing services to this population in need.

The proposed project will focus on improving the availability and accessibility of substance abuse treatment services for Native Hawaiians and other neighboring residents of rural Hawaii. No non-native Hawaiian residing in the service area will be denied services based on their status as non-native Hawaiians. Further, the required evaluation component of the program will provide information useful in the future design of rural substance abuse treatment programs.

Since the only sizable number of Native Hawaiians are found in Hawaii, and consistent with CSAT's goals to coordinate Federal, State and local treatment planning and coordination provision of other health care services, and data collection efforts, and to work in partnership with the single State agencies (SSAs) to administer discretionary funds to the maximum extent practical, eligibility is being limited to the State of Hawaii. The Hawaii Department of Health, as the SSA for alcohol and drug abuse, is uniquely qualified to carry out the proposed project because it has mechanisms in place for securing pertinent information from public and private nonprofit agencies for service planning, management, evaluation and data collection. It also has the unique ability to coordinate health services, oversight and maximize the long-term benefit of the award. It is anticipated that the high degree of interdisciplinary State involvement will facilitate planning and integration of services, as well as State support of systemic improvements after Federal support is no longer available.

The cooperative agreement mechanism is being used for this award in order to facilitate the coordination of this project with the five projects funded under this program in September 1993, as well as with other SAMHSA, PHS, HHS, and Departments of Justice, Housing and Labor programs.

FOR FURTHER INFORMATION CONTACT:

Clifton D. Mitchell, CSAT/SAMHSA, Rockwall II, Room 740, 5600 Fishers Lane, Rockville, MD 20857; telephone (301) 443-8802.

Dated: July 26, 1995.

Richard Kopanda,

Acting Executive Officer, Substance Abuse and Mental Health Services Administration.
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Center for Mental Health Services; Meeting

Pursuant to Pub. L. 92-463, notice is hereby given of the meeting of the Center for Mental Health Services (CMHS) National Advisory Council in September 1995.

The meeting of the CMHS National Advisory Council will include a discussion of the mission and programs of the Center, administrative announcements and program developments. It will focus on managed care initiatives across the country and CMHS's leadership role in providing consultative services to states pursuing managed care activities. The Council will also be performing review of applications for Federal assistance and individual contract proposals; therefore, portions of this meeting will be closed to the public as determined by the Administrator, SAMHSA, in accordance with 5 U.S.C. 552b(c)(3), (4) and (6) and 5 U.S.C. app. 2 10(d).

A summary of the meeting and/or a roster of Council members may be obtained from: Gloria Yockelson, Committee Management Officer, CMHS, Room 18C-07, Parklawn Building, Rockville, Maryland 20857, Telephone: (301) 443-7919.

Substantive program information may be obtained from the contact whose name and telephone number is listed below.

Committee Name: Center for Mental Health Services, National Advisory Council.

Meeting dates: September 11-12, 1995.

Place: Chevy Chase Holiday Inn, 5520 Wisconsin Avenue, Chevy Chase, Maryland 20815.

Closed: September 11, 8:30 a.m.-10:30 a.m.

Open: September 11, 10:30 a.m.-5 p.m.

Open: September 12, 9 a.m.-adjournment.

Contact: Anne Mathews-Younes, Ed.D., Room 11C-26, Parklawn Building, Telephone: (301) 443-3606.

Dated: July 25, 1995.

Jeri Lipov,

Committee Management Officer, Substance Abuse and Mental Health Services Administration.

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National Advisory Council; Meetings

Pursuant to Pub. L. 92-463, notice is hereby given of the meetings of the Substance Abuse and Mental Health Services Administration (SAMHSA) National Advisory Council in September 1995.

The September 1 teleconference meeting will include the review, discussion and evaluation of contract proposals. Therefore, a portion of the