officials, and representatives of community-based organizations and affected communities. Currently, there are three major components of the USCM HIV/AIDS program: (1) Collaborative HIV/AIDS Prevention Grants; (2) Research and Technical Assistance; and (3) Community Planning Case Profiles. Through these programs, USCM: (1) Provides financial and technical support to LHDs and CBOs who work together to implement high priority HIV prevention interventions which have been identified in previous needs assessments; (2) analyzes and disseminates information and provides technical assistance to local and State governments, health departments, and CBOs on innovative and effective HIV prevention-related policies and programs; and (3) assists CDC in its assessment of the HIV prevention community planning process.

Executive Order 12372 Review

The application is not subject to Intergovernmental Review of Federal Programs as governed by Executive Order 12372.

Public Health System Reporting Requirements

This program is not subject to the Public Health System Reporting Requirements.

Catalog of Federal Domestic Assistance Number

The Catalog of Federal Domestic Assistance number is 93.939, HIV Prevention Activities—Non-Governmental Organizations.

Where To Obtain Additional Information

Additional information may be obtained from Kevin Moore, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 320, Mailstop E–15, Atlanta, GA 30305, telephone (404) 842–6550.

A copy of "Healthy People 2000" (Full Report, Stock No. 017–001–00474–0) or "Healthy People 2000" (Summary Report, Stock No. 017–001–00473–1) referenced in the "Summary" may be obtained through the Superintendent of Documents, Government Printing Office, Washington, DC 20402–9325, telephone (202) 783–3238.

Dated: January 17, 1995.

Joseph R. Carter,

Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention (CDC).

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[CDC 520]

An International Collaborative Study of Cancer Risk Among Nuclear Industry Workers

Summary

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1995 funds for a cooperative agreement with the World Health Organization (WHO), International Agency for Research on Cancer (IARC), to plan and conduct an international, collaborative study of cancer risk among nuclear industry workers. Approximately \$100,000 will be available in FY 1995 to fund the cooperative agreement. The award will begin on or about April 1, 1995, for a 12-month budget period within a project period of up to 5 years. Funding estimates may vary and are subject to change. Continuation award(s) within the project period will be made on the basis of satisfactory progress and the availability of funds.

The purpose of this cooperative agreement is to assist the WHO, IARC, in further developing and strengthening epidemiologic research in order to promote the further understanding of the cancer risk associated with long-term, low-level occupational radiation exposure. The effort funded by this agreement will result in an improved understanding and quantification of the cancer risk encountered by United States workers in nuclear industries.

CDC/NIOSH will provide assistance on program management and administrative matters related to the conduct of the scientific aspects of the cooperative agreement; technical and scientific consultation and assistance in the implementation of all epidemiologic activities conducted under the cooperative agreement; scientific consultation and assistance in formulating the research plan; and collaborate in the preparation of the scientific epidemiologic reports that result from the cooperative agreement.

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led national activity to reduce morbidity and mortality and improve the quality of life. This announcement

is related to the priority area of Occupational Safety and Health. (For ordering a copy of Healthy People 2000 see the section "Where To Obtain Additional Information.")

Authority

This program is authorized under Section 301(a) of the Public Health Service Act (42 U.S.C. Section 241(a)) and Section 22(e)(7) of the Occupational Safety and Health Act (29 U.S.C. Section 671(e)(7)).

Smoke-Free Workplace

The PHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. This is consistent with the PHS mission of promoting the protection and advancement of an individual's physical and mental health.

Eligible Applicant

Assistance will be provided only to the WHO, IARC, Lyon, France, for this project. No other applications will be solicited. The program announcement and application kit have been sent to WHO, IARC. This organization is the only appropriate and qualified institution to provide the services specified under this cooperative agreement for the following reasons:

- 1. Serving as the headquarters for international cancer research for the WHO, the IARC is the only organization with access to all the necessary data from the 14-member nations. No one in the United States or its territories has access to this data.
- 2. The IARC serves as the cancer research arm of the WHO. Located in Lyon, France, the IARC was founded in 1965 and is responsible for conducting cancer epidemiologic research, disseminating information on cancer causes and prevention, and assisting countries in cancer control programs.
- 3. The IARC has unique experience in planning and conducting cooperative international epidemiologic studies of workers in nuclear industries. In 1988, a collaborative study of over 250,000 nuclear workers was undertaken in the United States, the United Kingdom, and Canada. This study, now nearing completion, was coordinated through IARC.
- 4. The IARC has already conducted a preliminary study demonstrating the feasibility of this investigation and has in place experts in epidemiology and radiation dosimetry who provided the technical assistance and guidance required for the study mentioned in 3 above. These technical experts will be available to plan and oversee this