combination of CSA members raising the FAK and GDSM rates on which NVOs base their LCL rates, and Tropical lowering its LCL rates, has created a "price squeeze" on the NVOs. Petitioner alleges that CSA's members' "obviously coordinated series of actions" has severely and unfairly injured the ability of Petitioner's members to compete. Moreover, Petitioner suggests that CSA's members' unreasonably raising rates may foreclose U.S. exporters from certain of the involved trades. Finally, Petitioner states that it has been advised that the CSA's goal and purpose in adopting the "selective" rate increase plan is to "destroy non-conference competition" and "diminish the influence of the NVOs".

If the Commission's investigation concludes that Shipping Act violations have occurred, Petitioner urges the Commission to: (1) Issue sanctions against CSA and its members pursuant to section 13 of the Shipping Act for violations found; (2) require CSA member lines to pay reparations pursuant to section 11(g) of the Shipping Act to those OTIs who have been damaged;¹ and (3) seek appropriate injunctive relief to enjoin further operation of CSA pursuant to sections 6(g) and (h) of the Shipping Act.

The Petition was filed under Rule 69 of the Commission's Rules of Practice and Procedure, 46 CFR 502.69, and states that it was served upon CSA. Replies to the petition, as provided by Rule 69 and Rule 74, 46 CFR 502.74, are due October 23, 2002. In order for the Commission to make a thorough evaluation of the petition, the Commission is also inviting interested persons to submit their comments on the petition no later than October 23, 2002. Comments shall consist of an original and 15 copies, or, if e-mailed, as an attachment in WordPerfect 8, Microsoft Word 97, or earlier versions of these applications; be directed to the Secretary, Federal Maritime Commission, 800 North Capitol Street, NW., Washington, DC 20573-0001 (email to: Secretary@fmc.gov); and be served on Petitioner's counsel: David P. Street, Galland, Kharasch, Greenberg, Fellman & Swirsky, P.C., 1054 Thirty-First Street, NW., Washington, DC 20007-4492; and on CSA, Suite 414, Galleria Professional Building, 915 Middle River Drive, Fort Lauderdale, FL 22204-3561.

Copies of the petition are available at the Office of the Secretary of the Commission, 800 N. Capitol Street, NW., Room 1046, by telephone request at 202–523–5725 or through email request directed to Secretary@fmc.gov.

Parties participating in this proceeding may elect to receive service of the Commission's issuances in this proceeding through e-mail in lieu of service by U.S. mail. A party opting for electronic service shall advise the Office of the Secretary in writing and provide an e-mail address where service can be made.

### Bryant L. VanBrakle,

Secretary.

[FR Doc. 02–26246 Filed 10–15–02; 8:45 am] BILLING CODE 6730–01–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

[60Day-03-02]

## 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**

Evaluating Toolbox Training Safety Program for Construction and Mining (OMB 0920–0535)—Extension—
National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC) proposes to evaluate the effectiveness of various educational approaches utilizing "toolbox" safety training materials targeted to construction and mining industries. The mission of the National Institute for Occupational Safety and Health is to promote safety and health at work for all people through research and prevention.

In comparison to other industries, construction and mining, workers continue to have the highest rates of occupational fatalities and injuries. The Bureau of Labor Statistics estimated for 1999 that while the construction industry comprises only 6% of the workforce, they account for 20% of the fatal occupational injuries across all industry types (BLS, 1999). Similarly, though the mining industry comprises less than .5% of the workforce, this industry reflects 2% of all fatal occupational injuries (BLS, 1999).

Research on the effectiveness of safety and health training programs has revealed that training can lead to increases in worker knowledge and awareness of workplace safety practices. However, fewer evaluations of safety training effectiveness have investigated the relationship between various instructional approaches and the actual transfer of safety training information into workplace practices. Preliminary input from employees, managers, and union leaders representing construction and mining concerns revealed a desire in these industries for affordable safety training materials that can be effectively administered in short sessions on the job.

Representatives from these industries reported that safety training sessions need to establish a closer connection between the safety recommendations and the background experiences and knowledge of the workers. An instructional approach that may address these needs is often called "toolbox" or "tailgate" training. This type of training is characterized by brief (15 minute) workplace safety lessons. Despite the popularity of toolbox safety talks, research is needed to identify the most effective format for this medium. NIOSH will investigate the impact of using a narrative, case-study instructional approach versus a more typical, didactic "learn the facts" approach. Comparative analyses will examine differences in knowledge gain, safety attitudes and

<sup>&</sup>lt;sup>1</sup> Section 11(g) of the Shipping Act, 46 App. U.S.C. 1710(g), provides that, for any complaint filed within 3 years after the cause of action accrued, the Commission shall, upon petition of the complainant and after notice and hearing, direct payment of reparations to the complainant for injury caused by a violation of the Act.

beliefs, and workplace behaviors. Findings from this research will help identify the conditions critical to effective toolbox safety training for mining and construction. The materials developed and evaluated during this study will be made available to the public at the conclusion of the evaluation.

Construction and mining companies who participate in the study will be

randomly assigned to receive eight weekly toolbox safety training sessions that use either a case-study narrative or conventional instructional approach. The training sessions are designed to last fifteen minutes. The impact of these materials will be evaluated through the examination of changes in employee knowledge gains, attitudes toward safety practices, and the use of safety

behaviors prior to and following their participation in the safety training program. Trainers will complete brief response cards each week. A sample of trainers will participate in structured interviews. Findings of the study will be reported to participants and in the literature. There is no cost to respondents.

Respondents	Number of respondent	Number of re- sponses/re- spondent	Average bur- den/response (in hours)	Total burden (in hours)
Worker Pre-training Survey (attitude survey)	640 640 64	1 1 8	15/60 15/60 5/60	160 160 43
Total				363

Dated: October 7, 2002.

#### Nancy E. Cheal,

Acting Associate Director for Policy, Planning, and Evaluation, Centers for Disease Control and Prevention.

[FR Doc. 02–26204 Filed 10–15–02; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[60Day-03-03]

## 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 Seleda Perryman, 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**

Survey Development: Child Stress and Toxics—New—Agency for Toxic Substances and Disease Registry (ATSDR). ATSDR is mandated pursuant to the 1980 Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) and its 1986 amendments, the Superfund Amendments and Reauthorization Act (SARA), to serve the public by using the best science, taking responsive public health actions, and providing trusted health information to prevent harmful exposures and disease related to toxic substances. For the past 6 years, ATSDR has worked with the U.S. **Environmental Protection Agency** (EPA), the Substance Abuse and Mental Health Services Administration (SAMSHA), state health departments, and local communities on the issue of psychosocial stress due to the presence of toxic hazards. A significant amount of research has focused on adult psychosocial stress in communities affected by hazardous substances.

Comparatively little is known about levels of psychosocial stress among children or other susceptible populations in these settings.

There is a critical need to develop a research instrument to screen children who live in communities at or near hazardous waste sites for elevated stress levels. The instrument will facilitate the establishment of group norms for levels of stress in children and is not intended to provide clinical or diagnostic information on individual children.

The purposes of this project are to: (1) Develop and pilot-test a scale to assess levels and sources of psychosocial stress in children who live in communities at or near hazardous waste sites, (2) modify the scale based on pilot-test results, (3) validate the scale on children living in communities near hazardous waste sites, and (4) provide an evidence base for planning and conducting interventions in affected communities.

In year one, we will pilot test the scale in at least 100 children in two age groups (5th and 9th grade levels) at one or more test sites. We will also conduct semi-structured interviews or focus groups to determine whether additional variables need to be included in the scale. During the second and third years of the project, we will use the scale to screen up to 4,700 children in communities at or near hazardous waste sites. We will then, hopefully, be able to plan effective interventions and to further predict and explain levels of stress in children living around hazardous waste sites. There is no cost to respondents.