

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 04196]

Rapid Expansion of HIV/AIDS Prevention, Care and Treatment Activities by the Ministry of National Education of Cote d'Ivoire Under the President's Emergency Plan for AIDS Relief; Notice of Intent to Fund Single Eligibility Award

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2004 funds for a cooperative agreement program to assist the Ministry of National Education (MEN) of Cote d'Ivoire to rapidly expand their efforts to prevent HIV/AIDS among students and staff members, and to provide, or link with, effective comprehensive care and treatment services for HIV-infected students and staff members. The Catalog of Federal Domestic Assistance number for this program is 93.941.

B. Eligible Applicant

The Ministry of National Education (MEN) of Cote d'Ivoire is the only organization that can apply for these funds. This Ministry is the only organization that is mandated by the Government of Cote d'Ivoire to train, supervise, and provide services and activities for all three target groups named in this announcement: students, school teachers, and school health professionals; and is, therefore, the most direct route to reach these populations with effective HIV prevention and care interventions.

C. Funding

Approximately \$200,000 is available in FY 2004 to fund this award. It is expected that the award will begin on or before July 15, 2004, and will be made for a 12-month budget period within a project period of up to three years. Funding estimates may change.

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 program technical assistance, contact: Karen Ryder, Project Officer, CDC/Projet RETRO-CI, 2010 Abidjan Place, Dulles, Virginia 20189-2010,

Telephone: (225) 21-25-41-89, E-mail: kkkr1@cdc.gov.

For financial, grants management, or budget assistance, contact: Shirley Wynn, Contract Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: (770) 488-1515, E-mail: zbx6@cdc.gov.

Dated: June 4, 2004.

William P. Nichols,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

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Scale-Up of Home Based Care Activities for People Living With HIV/AIDS in the United Republic of Tanzania

Announcement Type: New.

Funding Opportunity Number: 04208.

Catalog of Federal Domestic

Assistance Number: 93.941.

Key Dates: Application Deadline: July 26, 2004.

I. Funding Opportunity Description

Authority: This program is authorized under Sections 307 and 317(k)(2) of the Public Health Service Act, [42 U.S.C. 242l and 247b(k)(2)], and Section 104 of the Foreign Assistance Act of 1961, 22 U.S.C. 2151b.

Purpose: The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2004 funds for a cooperative agreement program in the United Republic of Tanzania to provide high quality and appropriate home based care (HBC) to individuals living with HIV/AIDS in Tanzania. This will be accomplished by cooperation between CDC, the Tanzania Ministry of Health National AIDS Control Program (MOH-NACP) and the funded organization.

The purpose of this project is to support the public health infrastructure in Tanzania to strengthen the capacity of MOH and partner institutions to coordinate, plan, monitor and evaluate an integrated TB/HIV program. This will be accomplished by cooperation and collaboration in implementing activities between CDC, the Tanzania (MOH-NACP) and the funded organization. These collaborative activities will improve national capacity to ensure the availability of a continuum of care for

the chronically ill HIV/AIDS patients in Tanzania. These services will be used as entry points for antiretroviral therapy (ART) programs.

The Global AIDS Program (GAP) has established field operations to support national HIV/AIDS control programs in 25 countries. The CDC's GAP exists to help prevent HIV infection, improve care and support, and build capacity to address the global AIDS pandemic. GAP provides financial and technical assistance through partnerships with governments, community-based and faith-based organizations, the private sector, and national and international entities working in the 25 resource-constrained countries. CDC/GAP works with the Health Resources and Services Administration (HRSA), the National Institutes of Health (NIH), the U.S. Agency for International Development (USAID), the Peace Corps, the Departments of State, Labor and Defense, and other agencies and organizations. These efforts complement multilateral efforts, including UNAIDS, the Global Fund to Combat HIV, TB and Malaria, World Bank funding, and other private sector donation programs.

The U.S. Government seeks to reduce the impact of HIV/AIDS in specific countries within sub-Saharan Africa, Asia, and the Americas through the Presidential Emergency Plan for AIDS Relief (PEPFAR). Through this new initiative, CDC's GAP will continue to work with host countries to strengthen capacity and expand activities in the areas of: (1) Primary HIV prevention; (2) HIV care, support, and treatment; and (3) capacity and infrastructure development, especially for surveillance and training. Targeted countries represent those with the most severe epidemics where the potential for impact is greatest and where U.S. government agencies are already active. The United Republic of Tanzania is one of these targeted countries.

To carry out its activities in these countries, CDC is working in a collaborative manner with national governments and other agencies to develop programs of assistance to address the HIV/AIDS epidemic. CDC's program of assistance to Tanzania focuses on several areas of national priority including scaling up of prevention and care strategies for HIV prevention, care, and treatment.

The measurable outcomes of the program will be in alignment with goals of the GAP to reduce HIV transmission and improve care of persons living with HIV. They also will contribute to the goals of PEPFAR, which are: (1) Within five years, treat more than two million HIV-infected persons with effective