# 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: *kkr1@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

# Centers for Disease Control and Prevention

## 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. 242] and 247b(k)(2)], and Section 104 of the Foreign Assistance Act of 1961, 22 U.S.C. 215lb.

*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 resourceconstrained 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 combination anti-retroviral therapy; (2) care for ten million HIV-infected and affected persons including those orphaned by HIV/AIDS; and (3) prevent seven million infections in 14 countries throughout the world.

*Activities:* Awardee activities for this program are as follows:

• Obtain the necessary staff, equipment, and supplies to enhance HBC services in Tanzania.

• Recruit and train staff in counseling, testing and HBC services according to national guidelines.

• Collaborate with the MOH–NACP to review and update HBC guidelines to include palliative care and other intervention for care and treatment of chronically ill HIV/AIDS patients.

• Plan, develop, conduct, and evaluate HBC training programs for home care providers and community based providers in collaboration with CDC and the MOH–NACP.

• Conduct a mapping exercise to identify the extent to which HBC is being implemented in Tanzania.

• Participate in district HIV Prevention Task Force and support communities to form/establish educational and support groups including AIDS committees.

• Procure, distribute and replenish drugs and supplies in the HBC kits.

• Develop and disseminate Information, Education and Communication (IEC) materials and messages for HBC and community mobilization events.

• Conduct Train-the-Trainer sessions on management of HIV including use of antiretrovirals in HBC settings.

• Develop a peer support mechanism for care providers.

• Provide VCT services and referrals for testing of low-income earners.

• Collaborate with private health providers to develop and introduce a model of low cost wards, in private health facilities, for low-income people living with HIV/AIDS (PLWHA).

• Provide treatment and prophylaxis for opportunistic infections, under continuum of care and support, to communities in target districts.

• Provide nutritional support and HBC services to TB/AIDS patients.

Awardee should ensure that all of the above activities integrate into the national HIV/AIDS strategy.

In a cooperative agreement, CDC staff is substantially involved in the program activities, above and beyond routine grant monitoring.

CDC activities for this program are as follows:

• Collaborate with the awardee, the Tanzania Ministry of Health and other in-country and international partners in

the development of plans for program assistance based on the country needs, the CDC technical assistance portfolio, and HIV laboratory activities conducted by other partners.

• Provide consultation, scientific and technical assistance, based on the "CDC GAP Technical Strategies" document, to promote the use of best practices known at the time.

• Facilitate in-country planning and review meetings for the purpose of ensuring coordination of country-based program technical assistance activities. CDC will act as liaison and assist in coordinating activities as required between the applicant and other Nongovernmental organizations (NGOs), government of Tanzania organizations, and other CDC, GAP partners.

Technical assistance and training may be provided directly by CDC staff, or through organizations that have successfully competed for funding, under a separate CDC contract.

## **II. Award Information**

*Type of Award:* Cooperative Agreement. CDC involvement in this program is listed in the Activities Section above.

Fiscal Year Funds: 2004. Approximate Total Funding:

\$6,000,000 (This amount is for the entire five-year project period.)

Approximate Number of Awards: One.

Approximate Average Award: \$1,200,000 (This amount is for the first 12-month budget period, and includes only direct costs.)

Floor of Award Range: None. Ceiling of Award Range: \$1,200,000. Anticipated Award Date: September 1, 2004.

Budget Period Length: 12 months. Project Period Length: Five years. Throughout the project period, CDC's commitment to continuation of awards will be conditioned on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal Government.

# **III. Eligibility Information**

## III.1. Eligible Applicants

Applications may be submitted by public and private NGOs based in Tanzania.

Applicants must:

2. Ĥave extensive experience in design, implementation, and evaluation of community-based activities for HIV/AIDS in Tanzania.

2. Have an established infrastructure and the ability to mobilize a network of

volunteers and organizations to ensure local ownership of activities and longterm sustainability.

3. Have an established agreement or memorandum of understanding with the Tanzania MOH for collaboration in HIV/ AIDS and/or health related intervention programs.

4. Have at least three years previous experience working on various community based initiatives in Tanzania, including experience working with public and private sector partners.

5. Have regional branches in all regions of Tanzania.

6. Have the ability to utilize support from international affiliations.

## III.2. Cost Sharing or Matching

Matching funds are not required for this program.

#### III.3. Other

If you request a funding amount greater than the ceiling of the award range, your application will be considered non-responsive, and will not be entered into the review process. You will be notified that your application did not meet the submission requirements.

If your application is incomplete or non-responsive to the requirements listed in this section, it will not be entered into the review process. You will be notified that your application did not meet submission requirements.

**Note:** Title 2 of the United States Code Section 1611 states that an organization described in section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, or loan.

### IV. Application and Submission Information

# IV.1. Address To Request Application Package

To apply for this funding opportunity use application form PHS 5161. Application forms and instructions are available on the CDC Web site, at the following Internet address: *http:// www.cdc.gov/od/pgo/forminfo.htm*.

If you do not have access to the Internet, or if you have difficulty accessing the forms on-line, you may contact the CDC Procurement and Grants Office Technical Information Management Section (PGO–TIM) staff at: 770–488–2700. Application forms can be mailed to you.

# IV.2. Content and Form of Submission

*Application:* You must include a project narrative with your application forms. The narrative must be submitted in the following format:

• Maximum number of pages: 25. If your narrative exceeds the page limit, only the first pages, which are within the page limit, will be reviewed.

- Font size: 12 point unreduced
- Double spaced
- Paper size: 8.5 by 11 inches
- Page margin size: One inch

Printed only on one side of page
Held together only by rubber bands or metal clips; not bound in any other way.

• All pages should be numbered, and a complete index to the application and any appendices must be included.

• Applications must be submitted in English.

Your narrative should address activities to be conducted over the entire project period, and must include the following items in the order listed:

- Background
- Documented needs
- Eligibility and Capacity
- Proposed Program Plan
- Goals & Objectives
- Methods
- Plan of Operation
- Collaboration
- Timeline
- Performance Measures
- Staffing Breakdown
- Summary budget by line item with justification (budget and justification not be counted in the page limit stated above.)

Guidance for completing your budget can be found on the United States government Web site at the following address: http://www.cdc.gov/od/pgo/ funding/budgetguide.htm.

Additional information is optional and may be included in the application appendices. The appendices will not be counted toward the narrative page limit. Additional information could include but is not limited to: Organizational charts, curriculum vitas, letters of support, etc.

You are required to have a Dun and Bradstreet Data Universal Numbering System (DUNS) number to apply for a grant or cooperative agreement from the Federal government. The DUNS number is a nine-digit identification number, which uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access *http:// www.dunandbradstreet.com* or call 1– 866–705–5711.

For more information, see the CDC Web site at: *http://www.cdc.gov/od/pgo/ funding/pubcommt.htm.* 

If your application form does not have a DUNS number field, please write your DUNS number at the top of the first page of your application, and/or include your DUNS number in your application cover letter. Additional requirements that may require you to submit additional documentation with your application are listed in section "VI.2. Administrative and National Policy Requirements."

#### IV.3. Submission Dates and Times

Application Deadline Date: July 26, 2004.

Explanation of Deadlines: Applications must be received in the CDC Procurement and Grants Office by 4 p.m. eastern time on the deadline date. If you send your application by the United States Postal Service or commercial delivery service, you must ensure that the carrier will be able to guarantee delivery of the application by the closing date and time. If CDC receives your application after closing due to: (1) Carrier error, when the carrier accepted the package with a guarantee for delivery by the closing date and time, or (2) significant weather delays or natural disasters, you will be given the opportunity to submit documentation of the carriers guarantee. If the documentation verifies a carrier problem, CDC will consider the application as having been received by the deadline.

This announcement is the definitive guide on application format, content, and deadlines. It supersedes information provided in the application instructions. If your application does not meet the deadline above, it will not be eligible for review, and will be discarded. You will be notified that your application did not meet the submission requirements.

CDC will not notify you upon receipt of your application. If you have a question about the receipt of your application, first contact your courier. If you still have a question, contact the PGO–TIM staff at: 770–488–2700. Before calling, please wait two to three days after the application deadline. This will allow time for applications to be processed and logged.

#### *IV.4. Intergovernmental Review of Application*

Executive Order 12732 does not apply to this program.

#### IV.5. Funding Restrictions

Restrictions, which must be taken into account while writing your budget, are as follows:

• Antiretroviral Drugs—The purchase of antiretrovirals, reagents, and laboratory equipment for antiretroviral treatment projects require pre-approval from the GAP headquarters.

• Needle Exchange—No funds appropriated under this Act shall be

used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

• Funds may be spent for reasonable program purposes, including personnel, training, travel, supplies and services. Equipment may be purchased if deemed necessary to accomplish program objectives; however, prior approval by CDC officials must be requested in writing.

• All requests for funds contained in the budget shall be stated in U.S. dollars. Once an award is made, CDC will not compensate foreign grantees for currency exchange fluctuations through the issuance of supplemental awards.

• The costs that are generally allowable in grants to domestic organizations are allowable to foreign institutions and international organizations, with the following exception: With the exception of the American University, Beirut, and the World Health Organization, Indirect Costs will not be paid (either directly or through sub-award) to organizations located outside the territorial limits of the United States or to international organizations regardless of their location.

• The applicant may contract with other organizations under this program; however, the applicant must perform a substantial portion of the activities (including program management and operations, and delivery of prevention services for which funds are required).

• You must obtain an annual audit of these CDC funds (program-specific audit) by a U.S. "based audit firm with international branches and current licensure/authority in-country, and in accordance with standard(s) approved in writing by CDC.

• A fiscal Recipient Capability Assessment may be required, prior to or post award, in order to review the applicant's business management and fiscal capabilities regarding the handling of U.S. Federal funds.

• Prostitution and Related Activities The U.S. Government is opposed to prostitution and related activities, which are inherently harmful and dehumanizing, and contribute to the phenomenon of trafficking in persons.

Any entity that receives, directly or indirectly, U.S. Government funds in connection with this document ("recipient") cannot use such U.S. Government funds to promote or advocate the legalization or practice of prostitution or sex trafficking. Nothing in the preceding sentence shall be construed to preclude the provision to individuals of palliative care, treatment, or post-exposure pharmaceutical prophylaxis, and necessary pharmaceuticals and commodities, including test kits, condoms, and, when proven effective, microbicides. A recipient that is otherwise eligible to receive funds in connection with this document to prevent, treat, or monitor HIV/AIDS shall not be required to endorse or utilize a multisectoral approach to combating HIV/AIDS, or to endorse, utilize, or participate in a prevention method or treatment program to which the recipient has a religious or moral objection. Any information provided by recipients about the use of condoms as part of projects or activities that are funded in connection with this document shall be medically accurate and shall include the public health benefits and failure rates of such use.

In addition, any foreign recipient must have a policy explicitly opposing, in its activities outside the United States, prostitution and sex trafficking, except that this requirement shall not apply to the Global Fund to Fight AIDS, Tuberculosis and Malaria, the World Health Organization, the International AIDS Vaccine Initiative or to any United Nations agency, if such entity is a recipient of U.S. government funds in connection with this document.

The following definitions apply for purposes of this clause:

• Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act. 22 U.S.C. 7102(9).

• A foreign recipient includes an entity that is not organized under the laws of any State of the United States, the District of Columbia or the Commonwealth of Puerto Rico. Restoration of the Mexico City Policy, 66 FR 17303, 17303 (March 28, 2001).

All recipients must insert provisions implementing the applicable parts of this section, "Prostitution and Related Activities," in all subagreements under this award. These provisions must be express terms and conditions of the subagreement, acknowledge that each certification to compliance with this section, "Prostitution and Related Activities," are a prerequisite to receipt of U.S. government funds in connection with this document, and must acknowledge that any violation of the provisions shall be grounds for unilateral termination of the agreement prior to the end of its term. In addition, all recipients must ensure, through contract, certification, audit, and/or any other necessary means, all the applicable requirements in this section, "Prostitution and Related Activities," are met by any other entities receiving

U.S. government funds from the recipient in connection with this document, including without limitation, the recipients' sub-grantees, subcontractors, parents, subsidiaries, and affiliates. Recipients must agree that HHS may, at any reasonable time, inspect the documents and materials maintained or prepared by the recipient in the usual course of its operations that relate to the organization's compliance with this section, "Prostitution and Related Activities."

All primary grantees receiving U.S. Government funds in connection with this document must certify compliance prior to actual receipt of such funds in a written statement referencing this document (*e.g.*, "[Recipient's name] certifies compliance with the section, "Prostitution and Related Activities."") addressed to the agency's grants officer. Such certifications are prerequisites to the payment of any U.S. Government funds in connection with this document.

Recipients' compliance with this section, "Prostitution and Related Activities," is an express term and condition of receiving U.S. government funds in connection with this document, and any violation of it shall be grounds for unilateral termination by HHS of the agreement with HHS in connection with this document prior to the end of its term. The recipient shall refund to HHS the entire amount furnished in connection with this document in the event it is determined by HHS that the recipient has not complied with this section,

"Prostitution and Related Activities." Awards will not allow reimbursement of pre-award costs.

#### *IV.6. Other Submission Requirements*

Application Submission Address: Submit the original and two hard copies of your application by mail or express delivery service to:

Technical Information Management-PA# 04208, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341.

Applications may not be submitted electronically at this time.

## **V. Application Review Information**

# V.1. Criteria

You are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the cooperative agreement. Measures of effectiveness must relate to the performance goals stated in the "Purpose" section of this announcement. Measures must be objective and quantitative, and must measure the intended outcome. These measures of effectiveness must be submitted with the application and will be an element of evaluation.

Your application will be evaluated against the following criteria:

#### 1. Technical Approach (25 Points)

Does the applicant's proposal include an overall design strategy, including measurable time lines? Does the proposal address regular monitoring and evaluation, and the potential effectiveness of the proposed activities in meeting objectives?

2. Understanding of the Problem (20 Points)

Does the applicant demonstrate a clear and concise understanding of the nature of the problem described in the Purpose section of this announcement? Does the proposal specifically include a description of the public health importance of the planned activities to be undertaken and realistic presentation of proposed objectives and projects?

3. Ability To Carry Out the Project (20 Points)

Does the applicant document demonstrated capability to achieve the purpose of the project?

# 4. Personnel (20 Points)

Are the professional personnel involved in this project qualified, including evidence of experience in working with HIV/AIDS, opportunistic infections, and HIV/STD surveillance?

5. Plans for Administration and Management of Projects (15 Points)

Are there adequate plans for administering the project?

#### 6. Budget (Not Scored)

Is the itemized budget for conducting the project, along with justification, reasonable and consistent with stated objectives and planned program activities?

#### V.2. Review and Selection Process

Applications will be reviewed for completeness by the Procurement and Grants Office (PGO) staff, and for responsiveness by National Center for HIV, STD and TB Prevention (NCHSTP). Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance through the review process. Applicants will be notified that their application did not meet submission requirements.

An objective review panel will evaluate complete and responsive applications according to the criteria listed in the "Criteria" section above.

# **VI. Award Administration Information**

# VI.1. Award Notices

Successful applicants will receive a Notice of Grant Award (NGA) from the CDC Procurement and Grants Office. The NGA shall be the only binding, authorizing document between the recipient and CDC. The NGA will be signed by an authorized Grants Management Officer, and mailed to the recipient fiscal officer identified in the application.

Unsuccessful applicants will receive notification of the results of their applications review by mail.

# VI.2. Administrative and National Policy Requirements

45 CFR Part 74 and Part 92

For more information on the Code of Federal Regulations, see the National Archives and Records Administration at the following Internet address: http:// www.access.gpo.gov/nara/cfr/cfr-tablesearch.html.

The following additional requirements apply to this project:

 AR–10 Smoke-Free Workplace Requirements.

Additional information on these requirements can be found on the CDC Web site at the following Internet address: http://www.cdc.gov/od/pgo/ funding/ARs.htm.

# VI.3. Reporting Requirements

You must provide CDC with an original, plus two hard copies of the following reports in English:

1. Interim progress report, no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:

a. Current Budget Period Activities Objectives.

b. Current Budget Period Financial Progress.

c. New Budget Period Program

Proposed Activity Objectives. d. Budget.

e. Additional Requested Information.

f. Measures of Effectiveness.

2. Financial status report no more

than 90 days after the end of the budget period.

3. Final financial and performance reports, no more than 90 days after the end of the project period.

These reports must be mailed to the Grants Management or Contract Specialist listed in the "Agency Contacts" section of this announcement.

# VII. Agency Contacts

For general questions about this announcement, contact: Technical Information Management Section, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: 770–488–2700.

For program technical assistance, contact: Cecil Threat, Project Officer, Global AIDS Program, c/o American Embassy, 2140 Dar es Salaam Place, Washington, DC 20521-2140, Telephone: 255 22 212 1407, Fax: 255 22 212 1462, E-mail: Cthreat@cdc.gov.

For budget assistance, contact: Diane Flournoy, Contract Specialist, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341, Telephone: 770-488-2072, E-mail: dmf6@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

# Centers for Disease Control and Prevention

# **Comprehensive Community and** Home-Based Care and Support for People Living With HIV and AIDS in India

Announcement Type: New. Funding Opportunity Number: 04201. Catalog of Federal Domestic Assistance Number: 93.941.

Kev Dates:

Application Deadline: July 12, 2004.

## I. Funding Opportunity Description

Authority: This program is authorized under section 307 of the Public Health Service Act, [42 U.S.C. Section 2421], as amended.

*Purpose:* The purpose of the program is to improve the quality of life of people living with HIV/AIDS in India and their families. With the recent commitment by the government of India to provide antiretroviral (ARV) treatment to a large population of people living with HIV/AIDS, there is an urgent need to implement sustainable and comprehensive programs for comprehensive community and home-based care in areas of high prevalence and high risk. This is accomplished by supporting, sustaining and expanding current activities for comprehensive community and homebased care and support for people living with HIV and AIDS in India.

Measurable outcomes of the program will be in alignment with the following

performance goal(s) for the National Center for HIV, STD and TB Prevention (NCHSTP): initiate, expand or strengthen HIV/AIDS prevention, care, treatment and support activities globally.

The measurable outcomes of the program will be in alignment with goals of the Global AIDS Program (GAP), NCHSTP to reduce HIV transmission and improve care of persons living with HIV.

The program will also contribute to the United States Federal Government's goals of:

• Increasing the proportion of HIV infected people who are linked to appropriate prevention, care and treatment services.

• Increasing the proportion of HIV infected persons who know they are infected.

• Decreasing the number of persons at high-risk for acquiring or transmitting HIV infection.

Activities:

Awardee activities for this program are as follows:

 Collaborate with CDC, the Government of India, the Indian Network of Positive People, Non-Governmental Organizations (NGOs) and other partners to ensure: (1) That there is country ownership of all activities; (2) that proposed activities complement existing efforts within India; and (3) that activities are supportive of indigenous expertise and institutions.

• Collaborate with CDC, the Government of India, the Indian Network of Positive People, NGOs and other partners for the development of capacity for the local and national level Ministries of Health, care providers, NGOs, groups and networks of HIV positive people and other in-country partners to deliver services.

 Develop and implement community and home level intervention programs with vulnerable populations such as youth (age 15-29 years old), women and migrant populations living in selected high prevalence (urban and rural) areas. Intervention programs may include: (1) Provision of voluntary counseling and testing for HIV/STD and/or tuberculosis; (2) provision of care and treatment for HIV/STD and/or tuberculosis; (3) Information, Education and Communication (IEC) campaigns; and (3) behavior change for HIV infected and uninfected persons.

• Focus on the following specific activities:

1. Voluntary Counseling and Testing (VCT): implement, monitor, and evaluate HIV counseling and testing programs. Identify barriers and concerns