

delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or "Superfund"). These activities include health consultations and public health assessments at DOE sites listed on, or proposed for, the Superfund National Priorities List and at sites that are the subject of petitions from the public; and other health-related activities such as epidemiologic studies, health surveillance, exposure and disease registries, health education, substance-specific applied research, emergency response, and preparation of toxicological profiles. In addition, under an MOU signed in December 1990 with DOE, and replaced by an MOU signed in 2000, the Department of Health and Human Services (HHS) has been given the responsibility and resources for conducting analytic epidemiologic investigations of residents of communities in the vicinity of DOE facilities, workers at DOE facilities, and other persons potentially exposed to radiation or to potential hazards from non-nuclear energy production and use. HHS has delegated program responsibility to CDC.

Purpose: This subcommittee is charged with providing advice and recommendations to the Director, CDC, and the Administrator, ATSDR, pertaining to CDC's and ATSDR's public health activities and research at this DOE site. Activities focus on providing the public with a vehicle to express concerns and provide advice and recommendations to CDC and ATSDR. The purpose of this meeting is to receive updates from ATSDR and CDC, and to address other issues and topics, as necessary.

Matters To Be Discussed: The agenda includes a discussion of the public health needs assessment, updates from the Public Health Assessment, Public Health Needs Assessment, and Outreach and Communications Workgroup.

Agenda items are subject to change as priorities dictate.

For Further Information Contact: Lorine Spencer, Designated Federal Official, or Marilyn Palmer, Committee Management Specialist, Division of Health Assessment and Consultation, ATSDR, 1600 Clifton Road, NE., M/S E-32, Atlanta, Georgia 30333, telephone 1-888-42-ATSDR (28737), fax 404/498-1744.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and ATSDR.

Dated: July 1, 2003.

Alvin Hall,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 03-17158 Filed 7-7-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 03064]

Expansion of HIV/AIDS/TB Care and Prevention Activities Among People With HIV/AIDS in the Republic of Uganda; 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) 2003 funds for a cooperative agreement program to strengthen tuberculosis prevention and treatment, and expand other HIV/AIDS prevention, diagnostic and care programs in Uganda, including to promote healthy behavior choices for young people. The Catalog of Federal Domestic Assistance number for this program is 93.941.

B. Eligible Applicant

Assistance will be provided only to The AIDS Support Organization (TASO) Uganda. No other applications are solicited.

There is limited, large-scale HIV/AIDS care and support experience in Uganda. TASO is the only HIV-care provider in Uganda that works in several different areas of the country, both rural and urban settings, and has both home-based and clinic-based activities. It currently has 20,000 clients with HIV, more than 400 percent more than the next largest HIV specialist organization. TASO is the only organization in Uganda with demonstrated experience in administering individual- and group-focused HIV prevention programs on a large scale. TASO has over ten years of experience with HIV care programs involving psychosocial support, management of opportunistic infections, and TB care. TASO is the only organization in Uganda with experience implementing large-scale cotrimoxazole prophylaxis programs and a safe-water vessel program among rural communities—two critically important components of the proposed cooperative agreement. Lastly, TASO is the only significant provider of health care services for people living with HIV/AIDS in the rural Tororo area where CDC's HBAC project is to be implemented. Data has already been collected on baseline morbidity and mortality among a proportion of TASO clients as part of a diarrhea prevention study and this is the only population in Uganda with which HBAC could be

implemented and provide the necessary information for evaluation of its effectiveness.

CDC has worked with TASO previously to establish a computerized information system at their seven centers, and on pilot programs for cotrimoxazole prophylaxis and safe water vessel use. This cooperative agreement will allow improved services for all of TASO clients including those at TASO-Tororo, which will enhance the project. If found successful, the HBAC program could be more rapidly and cost-effectively implemented throughout Uganda using existing TASO structures because of the experience of working on HBAC with CDC.

C. Funding

Approximately \$750,000 is available in FY 2003 to fund this award. It is expected that the award will begin on or before September 1, 2003, 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 technical questions about this program, contact: Jonathan Mermin, Global AIDS Program (GAP), Uganda Country Team, National Center for HIV, STD and TB Prevention, Centers for Disease Control and Prevention, PO Box 49, Entebbe, Uganda. Telephone: +256-410320776. E-mail: jhm7@cdc.gov.

Dated: July 1, 2003.

Sandra R. Manning,

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

[Program Announcement 03159]

Cooperative Agreement To Strengthen, Monitor, and Evaluate Communicable Disease Surveillance and Response in Africa; 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) 2003 funds for a cooperative agreement to improve country-level capacity for prompt detection and response to priority communicable diseases in the priority countries of Mozambique, Ethiopia, Burkina Faso, and Mali. The Catalog of Federal Domestic Assistance number for this program is 93.283.

B. Eligible Applicant

Assistance will be provided only to Communicable Disease Surveillance and Response, African Regional Office of the World Health Organization (CSR, WHO-AFRO). No other applications are solicited.

CSR, WHO-AFRO is the most appropriate and qualified organization to conduct the activities specified under this cooperative agreement because it is the sole organization with legal authority to provide guidance, monitoring and evaluation on IDSR to the member states in the African region and with the internal administrative capacity to provide funds to the WHO country offices and ministries of health for country-level activities.

C. Funding

Approximately \$240,000 is available in FY 2003 to fund this award. It is expected that the award will begin on or before September 1, 2003, and will be made for a 12-month budget period within a project period of one year. 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 technical questions about this program, contact: Ms. Helen Perry or Dr. Montse Soriano-Gabarro, Meningitis and Special Pathogens Branch, Division of Bacterial and Mycotic Diseases, National Center for Infectious Diseases, Centers for Disease Control and Prevention, 1600 Clifton Road, Atlanta, GA 30333. Telephone number (404) 639-0706 or (404) 639-4062; email address hap5@cdc.gov or zzd7@cdc.gov.

Dated: July 1, 2003.

Sandra R. Manning,

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

[FR Doc. 03-17160 Filed 7-7-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 03061]

Expansion of Reference Laboratory Infrastructure To Support HIV/AIDS/STD/TB Control Activities in the Republic of Zambia; Notice of Availability of Funds

Application Deadline: August 7, 2003.

A. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under section 307 of the Public Health Service Act, (42 U.S.C. 2421), as amended. The Catalog of Federal Domestic Assistance number is 93.941.

B. Purpose

The Centers for Disease Control and Prevention (CDC), announces the availability of fiscal year (FY) 2003 funds for a cooperative agreement program with the national reference laboratories that support HIV, Sexually Transmitted Infections (STIs) and Tuberculosis (TB) surveillance and control activities in Zambia.

The purpose of this program is to build Zambia's national reference laboratory capacity to effectively monitor and control HIV/AIDS and Sexually Transmitted Diseases (STDs), as well as TB, the most common opportunistic infection associated with HIV in Zambia. Funds in this agreement may be used to support surveillance of these diseases and enhancements in information technology and capacity to analyze and disseminate reference laboratory findings. Collaborative activities between CDC and reference laboratories are intended to profoundly improve the effectiveness of HIV/AIDS, STD and TB program activities in Zambia.

The United States Government (USG) seeks to reduce the impact of HIV/AIDS in specific countries in sub-Saharan Africa, Asia and the Americas through its Leadership and Investment in Fighting an Epidemic (LIFE) initiative. To carry out this initiative, the Department of Health and Human Services (HHS) has organized its Global AIDS Program (GAP) to strengthen capacity and expand activities in the areas of (1) HIV prevention; (2) HIV care, support and treatment; and (3) capacity and infrastructure development, especially for HIV/AIDS surveillance activities.

Targeted countries represent those with the most severe epidemics and the

highest number of new infections. They also represent countries where the potential for impact is greatest and where U.S. Government agencies are already active. Zambia is one of these targeted countries.

Through CDC, HHS is working in a collaborative manner with national governments and other agencies to develop programs of assistance to address the HIV/AIDS epidemics in LIFE Initiative countries. In particular, CDC's mission in Zambia is to improve surveillance for HIV, TB and STIs and to strengthen and make more effective programs for preventing and treating these diseases.

Measurable outcomes of the program will be in alignment with one or more of the following performance goals for the National Center for HIV/STD/TB Prevention: Strengthen the capacity nationwide to monitor the epidemic, develop and implement effective HIV prevention interventions and evaluate prevention programs, and improve HIV/AIDS information management and decision making by developing well coordinated databases by 2005.

C. Eligible Applicants

Applications may be submitted by research institutions, hospitals, and government reference laboratories in Zambia. Applicants must be actively involved in surveillance of HIV, STIs or TB on a national or regional level. CDC has been working closely with the Government of the Republic of Zambia (GRZ) to build its national laboratory system. Because the intent of this agreement is to support national public health laboratory infrastructure, applicants must have a mandate from the GRZ to provide reference laboratory services within the system.

D. Funding

Availability of Funds

Approximately \$300,000 is available in FY 2003 to fund approximately three awards. It is expected that the average award will be \$100,000, ranging from \$90,000 to \$110,000. It is expected that the awards will begin on or about September 15, 2003, and will be made for a 12-month budget period within a project period of up to five years. Funding estimates may change.

Continuation awards within an approved project period will be made on the basis of satisfactory progress as evidenced by required reports and the availability of funds.

Use of Funds

Funds may not be used for:

1. Funds received from this announcement will not be used for the