Department of Health and Human Services Regulations (45 CFR Part 46) regarding the protection of human subjects. Assurance must be provided to demonstrate that the project will be subject to initial and continuing review by an appropriate institutional review committee. In addition to other applicable committees, Indian Health Service (IHS) institutional review committees also must review the project if any component of IHS will be involved or will support the research. If any American Indian community is involved, its tribal government must also approve that portion of the project applicable to it. The applicant will be responsible for providing evidence of this assurance in accordance with the appropriate guidelines and form provided in the application kit.

Women, Racial and Ethnic Minorities

It is the policy of the Centers for Disease Control and Prevention (CDC) and Agency for Toxic Substances and Disease Registry (ATSDR) to ensure that individuals of both sexes and the various racial and ethnic groups will be included in CDC/ATSDR-supported research projects involving human subjects, whenever feasible and appropriate. Racial and ethnic groups are those defined in OMB Directive No. 15 and include American Indian. Alaskan Native, Asian, Pacific Islander, Black, and Hispanic. Applicants shall ensure that women, racial and ethnic minority populations are appropriately represented in applications for research involving human subjects. Where clear and compelling rationale exists that inclusion is inappropriate or not feasible, this situation must be explained as part of the application. This policy does not apply to research studies when the investigator cannot control the race, ethnicity and/or sex subjects. Further guidance to this policy is contained in the Federal Register, Vol. 60, No. 179, pages 47947–47951, dated Friday, September 15, 1995.

Application Submission and Deadline

The original and two copies of each application Form PHS-5161-1 (revised 7/92, OMB Control Number 0937-0189) must be submitted to Sharron P. Orum, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 300, Mailstop E-18, Atlanta, Georgia 30305, Attention: Marsha Driggans, on or before August 5, 1996:

1. Deadline: Applications shall be considered as meeting the deadline if they are either:

a. Received on or before the deadline date; or

b. Sent on or before the deadline date and received in time for submission to the objective review group. (Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

2. Late Applications: Applications which do not meet the criteria in 1.a. or 1.b. above are considered late applications. Late applications will not be considered in the current competition and will be returned to the applicant.

Where To Obtain Additional Information

A complete program description and information on application procedures are contained in the application package. An application package and business management and technical assistance may be obtained from Marsha Driggans, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Mailstop E-18, Room 300, Atlanta, Georgia 30305, telephone (404) 842-6523, E-mail mdd2@opspgo1.em.cdc.gov, facsimile (404) 842–6513.

Programmatic technical assistance may be obtained from Dr. Fred C. Tenover, Hospital Infections Program, National Center for Infectious Diseases, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Mailstop G–08, Atlanta, Georgia 30333, E-mail fnt1@cidhip1.em.cdc.gov, telephone (404) 639–3246.

Please refer to Announcement Number 663 when requesting information regarding this program.

Important Notice: Atlanta, Georgia, will be the host of the 1996 Summer Olympics Games, July 19 through August 4, 1996. As a result of this event, it is likely that the Procurement and Grants Office (PGO), CDC, may experience delays in the receipt of both regular and overnight mail deliveries. Contacting PGO employees during this time frame may also be hindered due to the possible telephone disruptions. To the extent authorized, please consider the use of voice mail, E-mail, and facsimile transmission to the maximum extent practicable. However, do not fax lengthy documents or grant applications.

You may obtain this announcement from one of two Internet sites on the actual publication date: CDC's homepage at http://www.cdc.gov or at the Government Printing Office homepage (including free on-line access to the Federal Register at http://www.access.gpo.gov).

Potential applicants may obtain 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 Introduction through the Superintendent of Documents, Government Printing Office, Washington, DC 20402–9325, telephone (202) 512–1800.

Dated: June 11, 1996.

Joseph R. Carter,

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

[FR Doc. 96–15558 Filed 6–18–96; 8:45 am] BILLING CODE 4163–18–P

[Announcement Number 532A]

Cooperative Agreements for a National System of Integrated Activities To Prevent HIV Infection and Other Serious Health Problems Among Students, Especially Postsecondary Students and Those in High-Risk Situations

Introduction

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1996 funds for cooperative agreements to establish a national system of integrated activities for preventing HIV infection and other serious health problems among the nation's students, especially postsecondary students and those in high-risk situations. This program announcement is an amendment to Announcement Number 532 published in the Federal Register on June 16, 1995, pages 31721 through 31724 [60 FR 31721]. (A cooperative agreement is a legal agreement in which CDC provides financial assistance and substantial programmatic assistance to the recipient during the project.)

The CDC is committed to implementing the recommendations outlined in the External Review of HIV Prevention Strategies and the health promotion and disease prevention objectives of Healthy People 2000, a national activity to reduce morbidity and mortality and improve the quality of life. This program announcement is related to the priority areas of Health Promotion and Preventive Services with a particular focus on HIV Infection Objective 18.11, to "Provide HIV education for students and staff in at least 90% of colleges and universities";

Objective 8.5, "Increase to at least 50% the proportion of postsecondary institutions with institutionwide health promotion programs for students, faculty, and staff"; Objective 8.4, "Increase to at least 75 percent the proportion of the Nation's elementary and secondary schools that provide planned and sequential kindergarten through 12th grade quality school health education"; and Objective 8.6, "Increase to at least 85 percent the proportion of workplaces with 50 or more employees that offer health promotion activities for their employees, preferably as part of a comprehensive employee health promotion program." The most recent description of CDC efforts to prevent HIV infection is included in Public Health Reports, including CDC efforts to prevent HIV infection among youth. (To order a copy of the External Review of HIV Prevention Strategies, Healthy People 2000, and Public Health Reports, see the section on Reference Materials.)

Authority

This program is authorized under sections 311(c) [42 U.S.C. 243(c)], and 317(k) [42 U.S.C. 247(k)] of the Public Health Service Act, as amended. Regulations are set forth in 42 CFR Part 51b.

Eligible Applicants

To be considered eligible for this announcement, applicants must meet all five of the criteria listed below. Applicants must provide evidence of eligibility in a cover letter to the Grants Management Officer. Please attach this cover letter and any supportive documentation to your application.

- 1. Eligible applicants must be a national organization whose focus is education, health, or social service that also is private, nonprofit, professional, or voluntary. Postsecondary institutions are not eligible to apply for funding under this announcement. NOTE: Public Law 104–65 dated December 19, 1995, prohibits an organization described in section 501(c)(4) of IRS Code of 1986, that engages in lobbying activities to influence the Federal Government, from receiving Federal funds.
- 2. The grantee, as the direct and primary recipient of grant funds, must perform a substantive role in carrying out project activities and not merely serve as a conduit for an award to another party or to provide funds to an ineligible party.
- 3. Eligible applicants must have affiliate offices, organizations, or constituencies in a minimum of 10 States and territories.

4. The organization must possess a documented history of directly serving postsecondary constituencies, institutions, or programs through its offices at the national level for at least 24 months prior to submission of the application to CDC.

5. Eligible applicants must have the organizational capacity to help develop an ongoing national system of integrated activities to prevent HIV infection and other serious health problems among students, especially postsecondary students and those in high-risk

National organizations that received funding for a priority area under Program Announcement 532 in FY 1995 are ineligible to apply for funding under this announcement. These organizations include the American College Health Association, Association of American Colleges and Universities, American Association of Community Colleges, and the American Association of Colleges for Teacher Education.

Smoke-Free Workplace

CDC strongly encourages all grant recipients to provide a smoke-free workplace and to promote the nonuse of all tobacco products, and Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

Availability of Funds

Approximately \$1 million is available in FY 1996 to fund approximately 4 awards. It is expected that the average award will be \$250,000, ranging from \$200,000 to \$300,000. It is expected that awards will begin on or about September 25, 1996, and will be made for a 12-month budget period within a project period of up to 4 years. Funding estimates may vary and are subject to change. Continuation awards for new budget periods will be based on satisfactory performance, receipt of an acceptable continuation application, and the availability of funds.

Applicants may apply for funding to carry out activities in one or more of the following priority areas:

Priority One—Educate Policy and **Decision-Makers**

To educate and encourage policy and decision-making members of postsecondary institutions across the nation to support programs to prevent HIV infection and other serious health problems among students, especially postsecondary students and those in high-risk situations.

Priority Two—Support Institution-Wide **Health Promotion Programs**

To build the capacity of postsecondary institutions across the nation to implement comprehensive integrated strategies designed to prevent HIV infection and other serious health problems as part of institution-wide health promotion and disease prevention programs for postsecondary students, especially those in high-risk situations.

Priority Three—Support Preservice Education

To provide technical assistance and training to personnel in postsecondary institutions across the nation about the skills that health, education, social service, and other professionals need in order to help young people, including students in grades K-12, postsecondary institutions, and those in high-risk situations, avoid HIV infection and other serious health problems.

Funds must be used for categorical activities to prevent HIV infection among youth. Activities can also be included that support the integration of HIV activities as part of broader programs to improve the health of youth (e.g., related STD and pregnancy prevention programs; related alcohol and other drug prevention programs; related institution-wide health promotion programs for students, faculty, and staff). These funds may not be used to conduct research.

Purpose

The purpose of this program is to support national organizations in establishing an ongoing national system of integrated activities to prevent HIV infection and other serious health problems among students, especially postsecondary students and those in high-risk situations.

Program Requirements

In conducting activities to achieve the purpose of this program, the recipient will be responsible for the activities under A. Recipient Activities, and CDC will be responsible for the activities listed under B. CDC Activities.

A. Recipient Activities

1. Collaborate with constituents; other national organizations whose foci are postsecondary institutions; community planning groups; State and local education, health, and social service agencies; and CDC to develop a national system to achieve the purpose of this program announcement.

2. Establish and implement an operational plan that could include, but

is not limited to:

(a) Including as a priority within the organization, health promotion and disease prevention programs to reduce HIV risk behaviors of students, especially postsecondary students and those in high-risk situations.

(b) Developing and promoting the implementation of State, and local policies designed to reduce the HIV risk behaviors of students, especially postsecondary students and those in

high-risk situations.

(c) Developing and promoting the implementation of activities designed to prevent HIV risk behaviors among students, especially postsecondary students and those in high-risk situations.

(d) Educating and encouraging policy and decision-making members of other national organizations and their constituents, to support HIV prevention education programs for students, especially postsecondary students and those in high-risk situations.

3. Evaluate the project's effectiveness in achieving goals and objectives.

4. Disseminate programmatic information to other interested recipients as well as CDC through appropriate methods that include:

- (a) Identifying and submitting pertinent programmatic information for incorporation into a computerized database of health information and health promotion resources, such as the Combined Health Information Database (CHID).
- (b) Sharing information through electronic bulletin boards, such as the Comprehensive Health Education Network (CHEN).
- 5. Participate with CDC and other appropriate agencies in planning and convening meetings that support the purpose of this program announcement. The budget request should include the cost of a five-day trip to Atlanta for two individuals to attend a CDC annual conference and a two-day trip to Atlanta for two individuals to attend an additional meeting.

B. CDC Activities

- 1. Provide and periodically update information related to the purposes or activities of this program announcement.
- 2. Collaborate with national, State, and local education and health agencies and other relevant organizations in planning and conducting national strategies designed to strengthen programs for preventing HIV infection and other serious health problems among youth.
- 3. Provide substantial programmatic consultation and guidance related to program planning, implementation, and

evaluation; assessment of program objectives; and dissemination of successful strategies, experiences, and evaluation reports.

- 4. Plan meetings of national, State, and local education agencies and other appropriate agencies to address issues and program activities related to improving the health of postsecondary students; and strengthening the capacity of education, health, and other relevant agencies to prevent HIV infection and other serious health problems among youth, especially those in high-risk situations.
- 5. Assist in the evaluation of program activities.

Review and Evaluation Criteria

Each application will be allocated a total of 100 points, and will be reviewed and evaluated according to the following criteria:

A. Background/Need (10 Points)

The extent to which the applicant justifies the need for the activities including:

- 1. Identifying target populations;
- 2. Identifying the barriers in reaching the target population; and
- 3. Identifying what might move HIV prevention efforts forward within the target population.

B. Capacity and Impact (30 Points)

The extent to which the applicant demonstrates the capacity and ability to:

- 1. Develop and conduct the proposed activities:
- 2. Involve postsecondary institutions or programs; and,
- 3. Institutionalize activities that can reduce HIV infection among students, especially postsecondary students and those students who may be in high-risk situations.
- 4. Perform a substantive role in carrying out project activities and not merely serve as a conduit for an award to another party or to provide funds to an ineligible party.

C. Goals and Objectives (10 Points)

- 1. Goals. The extent to which the applicant has submitted realistic goals for the projected four-year project period.
- 2. Objectives. The extent to which the applicant has submitted specific, measurable, and feasible objectives for the one-year budget period that directly relate to the applicant's goals.

D. Operational Plan (15 Points)

- 1. The extent to which proposed activities:
- (a) Involve the applicant's constituencies nation-wide.

- (b) Are likely to reduce HIV infection and related health problems among students, especially postsecondary students and those in high risk situations.
- (c) Achieve the stated objectives within the first budget period.
- 2. The extent to which the applicant includes a reasonable timeline for conducting proposed activities.
- 3. The extent to which the applicant provides a brief description of the activities anticipated for years 2, 3, and 4 of the project.

E. Project Management and Staffing (15 Points)

The extent to which the applicant identifies staff and other agencies that have the responsibility and authority to carry out each activity, including:

- 1. Organizational charts demonstrating that the staff have the authority needed to carry out those responsibilities.
- 2. Job descriptions and curricula vitae demonstrating that the staff have backgrounds that qualify them to fulfill the proposed responsibilities.
- 3. Commitment of at least one fulltime staff member to provide direction for the proposed activities.
- 4. Letters from collaborating organizations indicating their intent and capacity to carry out their designated responsibilities.

F. Sharing Experiences and Resources (5 Points)

The extent to which the applicant indicates how it will share effective materials and activities.

G. Collaborating (5 Points)

The extent to which the applicant describes how it will collaborate with CDC and with other relevant agencies.

H. Evaluation (10 Points)

The extent to which the applicant:

- 1. Identifies how it will monitor progress in meeting objectives.
- 2. Identifies how program effectiveness will be measured and presents a reasonable plan for obtaining data, reporting results, and using the results for programmatic decisions.

I. Budget and Accompanying Justification (Not Scored)

The extent to which the applicant provides a detailed and clear budget narrative consistent with the stated objectives and planned activities of the project.

Executive Order 12372 Review

This program is not subject to the Executive Order 12372 review,

Intergovernmental Review of Federal Programs.

Public Health Systems Reporting Requirements

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

Catalog of Federal Domestic Assistance Number

The Catalog of Federal Domestic Assistance Number is 93.938.

Other Requirements

Paperwork Reduction Act

Projects that involve the collection of information from 10 or more individuals and funded by the cooperative agreement will be subject to review and approval by the Office of Management and Budget (OMB) under the Paperwork Reduction Act.

HIV/AIDS Requirements

Recipients must comply with the document entitled: "Interim Revision of Requirements of the Content of AIDS-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey Instruments, and Educational Sessions in Centers for Disease Control and Prevention Assistance Programs" (June 15, 1992), a copy of which is included in the application kit. The names and affiliations of the review panel members must be listed on the Assurance of Compliance form CDC 0.1113, which is also included in the application kit. In progress reports, the recipient must submit the program review panel's report indicating all materials have been reviewed and approved.

Application Submission and Deadline

The original and two copies of the application Form PHS–5161–1 (Revised 7/92) (OMB Number 0937–0189) must be submitted to Sharron P. Orum, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 300, Mailstop E18, Atlanta, GA 30305, Attention: Marsha Driggans, on or before August 9, 1996. Facsimile copies will not be accepted.

- 1. *Deadline:* Applications shall be considered as meeting the deadline if they are either:
- (a) Received on or before the deadline date. or,
- (b) Sent on or before the deadline date and received in time for submission to the independent review group. Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a

commercial mail carrier or U.S. Postal Service. Private metered postmarks shall not be accepted as proof of timely mailing.

2. Late Applications: Applications that do not meet the criteria in 1(a) or 1(b) above are considered late applications. Late applications will not be considered in the current competition and will be returned to the applicant.

Where To Obtain Additional Information

A complete program description, information on application procedures, application package, and business management technical assistance may be obtained from Marsha Driggans, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Rd., NE., Room 300, Mailstop E18, Atlanta, GA, 30305; telephone (404) 842–6523, E-mail mdd2@opspg01.em.cdc.gov, facsimile (404) 842–6513.

Programmatic technical assistance may be obtained from Elizabeth Majestic, Chief, Special Populations Program Section, Program Development and Services Branch, Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (CDC), 4770 Buford Highway, NE., Mailstop K31, Atlanta, GA 30341–3724, telephone (404) 488–5356, E-mail eam0@ccdash1.em.cdc.gov, facsimile (404) 488–5972.

Please refer to Announcement 532A when requesting information or submitting an application.

Important Notice: Atlanta, Georgia, will be the host of the 1996 Summer Olympics Games, July 19 through August 4, 1996. As a result of this event, it is likely that the Procurement and Grants Office (PGO), CDC, may experience delays in the receipt of both regular and overnight mail deliveries. Contacting PGO employees during this time frame may also be hindered due to the possible telephone disruptions. To the extent authorized, please consider the use of voice mail, E-mail, and facsimile transmission to the maximum extent practicable. However, do not fax lengthy documents or grant applications.

You may obtain this announcement from one of two Internet sites on the actual publication date: CDC's homepage at http://www.cdc.gov or at the Government Printing Office homepage (including free on-line access

to the Federal Register at http://www.access.gpo.gov).

Reference Materials

- (1) Potential applicants may obtain a copy of Healthy People 2000 (Full Report, Stock No. 017–001–00474–0), Healthy People 2000 (Summary Report, Stock No. 017–001–00473–1), and Adolescent Health (Volume 1, Stock No. 052–00301234–1; Volume 2, Stock No. 052–003–01235–9; Volume 3, Stock No. 052–003–01236–7), referenced in the Introduction, through the Superintendent of Documents, Government Printing Office, Washington, DC 20402–9325, telephone (202) 512–1800, facsimile (202) 512–2250.
- (2) Potential applicants may obtain a copy of the External Review of HIV Prevention Strategies, from the Centers for Disease Control and Prevention, National Center for HIV, STD, and TB Prevention, (name of Center pending), Division of HIV/AIDS Prevention, 1600 Clifton Rd., Mailstop D21, Atlanta, GA 30333; telephone (404) 639–0900.

(3) Potential applicants may obtain a copy of Public Health Reports, Volume 106, Number 6, from the National AIDS Information Clearinghouse, P.O. Box 6003, Rockville, MD, 20850; telephone (800) 458–5231, select option 2.

- (4) Potential applicants can obtain additional information about HIV Prevention Community Planning Groups, by contacting Mary Willingham, Centers for Disease Control and Prevention, National Center for HIV, STD and TB Prevention (name of Center pending), Division of HIV/AIDS Prevention, 1600 Clifton Rd., Mailstop D21, Atlanta, GA 30333; telephone (404) 639–0965.
- (5) Potential applicants may obtain a copy of The Second Annual National School Health Conference Proceedings, from the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health, 1600 Clifton Rd., Mailstop K31, Atlanta, GA 30333; telephone (404) 488–5324.

Special Guidelines for Technical Assistance Workshop

A one-day technical assistance workshop will be held in Washington, DC, approximately two weeks after the publication date in the Federal Register. The purpose of this meeting is to help potential applicants to:

- 1. Understand the scope and intent of Announcement 532A; and
- 2. Understand the Public Health Service grants policies, applications, and review procedures.

Attendance at this workshop is not mandatory. Applicants who are currently funded by CDC may not use project funds to attend this workshop.

Each potential applicant may send no more than two representatives to this meeting. Please provide the names of the persons that are planning to attend this meeting to Elizabeth Majestic, Chief, Special Populations Section, Division of Adolescent and School Health; telephone (404) 488–5356; no later than July 2, 1996.

Dated: June 11, 1996. Joseph R. Carter,

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

[FR Doc. 96–15556 Filed 6–18–96; 8:45 am] BILLING CODE 4163–18–P

[Announcement 628]

Outcome Evaluations of HIV/AIDS Prevention Interventions

Introduction

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1996 funds for a cooperative agreement program to conduct outcome evaluations of existing innovative interventions designed to reduce the transmission of the human immunodeficiency virus (HIV).

CDC is committed to achieving the health promotion and disease prevention objectives of "Healthy People 2000," a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority area of Human Immunodeficiency Virus (HIV) Infection. (For ordering a copy of "Healthy People 2000," see the section "Where To Obtain Additional Information.")

Authority

This program is authorized under Sections 301 and 317(k)(2), of the Public Health Service Act (42 U.S.C. 241 and 247b(k)(2)) as amended.

Smoke-Free Workplace

CDC strongly encourages all recipients to provide a smoke-free workplace and to promote the nonuse of all tobacco products, and Public Law 103–227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

Eligible Applicants

Applications may be submitted by public and private, nonprofit and forprofit organizations and governments and their agencies. Thus, universities, colleges, research institutes, hospitals, other public and private organizations, State and local health departments or their bona fide agents or instrumentalities, federally recognized Indian tribal governments, Indian tribes or Indian tribal organizations, and small, minority- and/or women-owned businesses are eligible to apply.

Note: Organizations described in section 501(c)(4) of the Internal Revenue Code of 1986 that engage in lobbying are not eligible to receive Federal grant/cooperative agreement funds.

Availability of Funds

Approximately \$500,000 is available in FY 1996 to fund approximately three awards each evaluating a different intervention strategy in a different highrisk population. It is expected that the average award will be \$150,000, ranging from \$125,000 to \$175,000. Awards are expected to begin on or about September 30, 1996, and will be made for a 12-month budget period within a project period of up to three years. Funding estimates may vary and are subject to change.

Continuation awards within the project period will be made on the basis of satisfactory progress and the availability of funds.

Definitions

For the purposes of this program, an Innovative HIV Prevention Intervention is an HIV prevention strategy that has not been extensively researched in the context in which it is being applied or one that represents a new approach to the integration of known prevention strategies. The terms Outcome Evaluation and Effectiveness Study are used somewhat interchangeably and refer to the design and methods used to assess the short- or long-term effects that can be reasonably attributed to the intervention.

The term HIV Community Planning Priorities are priorities based upon the epidemiologic profile of HIV in a community as determined by the Community Planning Group (CPG). For example, if a CPG determined that there is a significant problem of HIV intravenous drug (ID) use in the community then the funding of HIV prevention strategy for ID use would be a priority for HIV community planning.

Purpose

The purpose of this program is to support intervention effectiveness

studies that assess social, behavioral, programmatic, and policy outcomes of specific innovative HIV prevention interventions. These outcome evaluations should assess prevention interventions that are innovative, have new components or involve the innovative application of interventions that are commonly employed (e.g. HIV counseling and testing) and have potentially broad relevance to the field of HIV prevention. These evaluation studies will use methods common to rigorous outcome evaluation research (e.g. comparison groups, individual baseline data, cohorts, cross-sectional surveys) within the limits of the funding available and appropriately matched to the nature and size of the intervention.

This program is designed to provide evaluation resources to organizations that might not otherwise have the resources to determine the effectiveness of their programs. Funds are intended solely to implement the evaluation and not to support the intervention itself. Interventions being evaluated should target high-risk populations (e.g. men who have sex with men, injection drug users and their partners, youth in high risk situations).

Lastly, this program is to devise practical, yet reasonably rigorous, outcome evaluation methods and designs that integrate both qualitative and quantitative data, possibly from multiple sources, in the analysis and interpretation of the findings.

Program Requirements

The application should demonstrate the applicant's ability to design and implement the evaluation, analyze the data, and disseminate the findings. In conducting activities to achieve the purpose of this program, the recipient will be responsible for the activities under A. (Recipient Activities), and CDC will be responsible for the activities listed under B. (CDC Activities).

A. Recipient Activities

Recipients will be asked to attend meetings in Atlanta approximately twice a year to brief CDC staff on the project and discuss key decisions. Additionally the recipient should expect to host periodic (up to 4 per year) site visits by the CDC project officer.

1. Prepare a detailed evaluation protocol, including a description of the intervention and how it is innovative, the study research questions, proposed methods, including sampling, assessment, and analysis plans, draft measurement instruments, and project timelines.