

Announcement 99099, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Mail Stop E-15, Atlanta, GA 30341, Telephone (770) 488-2720, Email address: kgm1@cdc.gov or sjd9@cdc.gov

A full application package is also available on the CDC home page on the Internet: <http://www.cdc.gov>.

For program technical assistance, contact John Miles at (404) 639-8025 or jrm2@cdc.gov.

See also the CDC home page on the Internet: <http://www.cdc.gov>.

Dated: May 14, 1999.

Henry S. Cassell III,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 99144]

Cooperative Agreements for Non-Governmental Organization (NGO) Partnerships Pilot Project; Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) and the United States Agency for International Development (USAID) announces the availability of fiscal year (FY) 1999 funds for a cooperative agreement program for Non-Governmental Organization (NGO) Partnerships Pilot Projects. This program addresses the "Healthy People 2000" priority areas of Educational and Community-Based Programs, HIV Infection, and Sexually Transmitted Diseases. The purpose of this program is to facilitate the exchange of information through partnerships between U.S. domestic NGOs and NGOs in developing countries where CDC and USAID provide support for HIV/AIDS activities. Mutual learning can have significant benefits for both the international and U.S. domestic response to HIV/AIDS. The goal of the pilot project is to gather experiential data regarding the most efficient and valuable avenues for fostering sustainable linkages between developing world NGOs and U.S. domestic NGOs, with improved capacity to deliver HIV/AIDS information and prevention services as the ultimate result. Lessons learned and assistance will be exchanged between the U.S.

NGOs and the developing world NGOs along lines of affinity, such as language/culture, risk behaviors, and population groups. United States NGOs are especially well equipped to provide this technical assistance since they have been active in HIV/AIDS activities for more than a decade.

B. Eligible Applicants

Applications may be submitted by public and private nonprofit NGOs; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, and federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations.

Acceptable evidence of nonprofit status, Internal Revenue Service (IRS) 501(c)3, is a copy of a currently valid IRS tax exemption determination letter; national organizations must also submit a statement signed by the parent organization indicating that the applicant is a local nonprofit affiliate and is authorized to apply for funds. Proof of nonprofit status must be provided with the application. No application will be accepted without proof of nonprofit status.

Note: Public Law 104-65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form.

C. Availability of Funds

Approximately \$230,000 is available in FY 1999 to fund approximately 2-3 awards. It is expected that the average award will be \$80,000, ranging from \$50,000 to \$120,000. It is expected that the awards will begin on or about September 1, 1999, and will be made for a 12-month budget period within a project period of up to 2 years. Funding estimates may change based on the following: availability of funds; scope and quality of applications received; appropriateness and reasonableness of budget request; proposed use of project funds; and extent to which the applicant is contributing its own resources to HIV/AIDS prevention activities.

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. Satisfactory progress will be determined by site visits by CDC representatives, progress reports, and the quality plans.

Use of Funds

Funds available under this announcement must support activities

directly related to primary HIV prevention. However, intervention activities that involve preventing other STDs or substance abuse as a means of reducing or eliminating the risk of HIV infection may also be supported. No funds will be provided for direct patient medical care (including substance abuse treatment and medical prophylaxis or drugs).

These funds may not be used to supplant or duplicate existing funding. Contracts with other organizations are allowable under these cooperative agreements. However, applicants must perform a substantial portion of the activities (including program management and operations and delivery of prevention services) for which funds are requested.

Before using funds awarded through this cooperative agreement to develop HIV prevention materials, recipients must enquire with the CDC National Prevention Information Network (1-800-458-5231) to determine if suitable materials are already available. Also, materials developed by recipients must be made available for dissemination through the CDC National Prevention Information Network.

D. Program Requirements

Potential activities to strengthen and sustain linkages among the collaborating partners may include:

1. Operations research: training and technical assistance support on how to use operations research to improve the delivery of primary prevention services or assess the effectiveness of interventions. Additional activities may include the development of interventions based on research results;

2. Network development: training and assistance in the development and strengthening of a formal network of NGOs to address the primary prevention needs of one of the priority populations identified above (e.g., youth, women, and men who have sex with men, IDUs). The partnering activity should be designed to facilitate collaboration, networking and information exchange among NGOs, government and donor agencies;

3. Institutional development: management strengthening activities to enhance performance. This may include the design and implementation of management training workshops on strategic planning, change management, time management, and project management. Other activities may include volunteer motivation, performance management (staff appraisal, development and improvement of work environment),

impact measurement, fund-raising and income generation; and

4. Educational materials development: assessment and design of materials that are suitable for various population groups and risk behaviors.

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

1. Recipient Activities

a. Use epidemiological data, needs assessments, and prioritization of groups and interventions to design program activities and place emphasis on communities at high risk for HIV infection;

b. Incorporate cultural competency and linguistic appropriateness into all capacity and skills building efforts, including those involving the development, production, dissemination, and marketing of health communication or prevention messages;

c. Coordinate program activities with relevant counterpart foreign national and regional HIV prevention programs to prevent duplication of efforts;

d. Facilitate the dissemination of successful prevention interventions and program models through meetings, workshops, conferences, and other communications;

e. Broaden the linkages with counterpart communities in other developing countries;

f. Compile "lessons learned" from the project and share these with network organizations and CDC; and

g. Develop and implement a plan for obtaining additional resources from non-CDC sources to supplement the program conducted through this cooperative agreement and to enhance the likelihood of its continuation after the end of the pilot project period.

2. CDC Activities

a. Provide consultation and technical assistance in planning, operating, and evaluating prevention activities;

b. Provide up-to-date scientific information on risk factors for HIV infection, prevention measures, and program strategies for prevention of HIV infection;

c. Assist in the evaluation of program activities and services;

d. Facilitate the transfer of successful prevention interventions and program models to other areas; and

e. Monitor the recipient's performance of program activities, protection of client confidentiality and compliance with other requirements.

E. Application Content

Use the information in the Program Requirements, Other Requirements, and Evaluation Criteria sections to develop the application content. Your application will be evaluated on the criteria listed, so it is important to follow them in laying out your program plan. The narrative should be no more than 45 double-spaced pages, printed on one side, with one inch margins, and unrounded 12 CPI font. Number each page clearly, and provide a complete index to the application and its appendices. Please begin each separate section of the application on a new page. Submit the original and each copy of the application set unstapled and unbound. Materials that should be part of the basic plan will not be accepted if placed in the appendices.

In developing the application, follow the format and instructions below:

Format

1. Abstract
2. Organizational History and Capacity
3. Description of Target Population and Needs

Assessment

4. Program Plan
5. Evaluation Plan
6. Communications and Dissemination Plan
7. Plan for Sustaining Linkages
8. Personnel
9. Budget
10. Attachments

Instructions

1. Abstract (not to exceed 2 pages): Briefly summarize your proposed program activities and include the following:

- a. The need for the proposed activities;
- b. Proposed plan of operation, including the populations to be served, activities to be undertaken, and services to be provided;
- c. Plans for evaluating the activities of this project;
- d. Future year activities; and
- e. Brief description of the applicant organization and its "linkage" partner/developing country counterpart.

2. Organizational History and Capacity (not to exceed 5 pages):

- a. Describe your existing organizational structure, including constituent or affiliate organizations or networks, how the organizational structure will support the proposed program activities, and how the structure offers the capacity to reach targeted populations.
- b. Describe your past and current experience in developing and

implementing effective HIV prevention strategies and activities, and in developing and implementing programs similar to the one proposed in this application.

c. Describe your capacity to provide culturally competent and appropriate services that respond effectively to the cultural, gender, environmental, social, and multilingual character of the target populations, including any history of providing such services.

d. Describe your experience in collaborating with international and developing country organizations that provide HIV prevention services.

e. Describe your experience in collaborating with government agencies of a developing country, e.g., Ministry of Health, Ministry of Education.

3. Description of Target Population and Needs Assessment (not to exceed 6 pages):

a. Target Population: Describe the target populations to be served through the proposed program, including the approximate number of persons to be reached. Describe the impact of HIV/AIDS on the community and any other specific environmental, social, cultural, or multilingual characteristics of the target populations that the program will consider and address in developing prevention strategies.

b. Needs Assessment: List and briefly describe current HIV prevention and risk-reduction efforts under way among the target populations and outline major gaps in the provision of prevention services for the target populations.

(1) Explain any specific barriers to the dissemination of adequate HIV prevention information and education that exist or have existed;

(2) Explain the unmet HIV prevention needs in the target community and opportunities for creating linkages with U.S. based NGOs;

(3) Identify and describe the HIV prevention needs of the target populations that the proposed program will directly address.

4. Program Plan (not to exceed 10 pages): Describe your proposed program in an organized, concise manner. Funds available under this program must be targeted to support activities directly related to primary HIV prevention; however, intervention activities that involve preventing other STDs and substance abuse as a means of reducing or eliminating the risk of HIV infection may be supported. You may wish to describe the conceptual basis for interventions and program activities. Your program plan should describe and explain:

- a. The specific behaviors and practices that the interventions are

designed to promote and prevent (e.g., increases in correct and consistent condom use, knowledge of serological status, not sharing needles, and enrollment in drug treatment and other preventive programs).

b. The involvement of the target population in planning, implementing, and evaluating activities and services throughout the project period.

c. How the proposed priority interventions and services are culturally competent, sensitive to issues of sexual identity, developmentally appropriate, linguistically-specific, and educationally appropriate.

In addition, the program plan should include:

a. Project objectives: Provide specific, realistic, time-phased and measurable objectives to be accomplished during the first budget period. Describe the expected outcomes of program activities on its target populations.

b. Plan of operation: Describe the activities that will be undertaken and specific interventions that will be provided to meet the objectives within projected time frames during the first program year. Outline the major steps necessary to attain specified objectives and note the approximate dates by which activities will be accomplished. Note all major activities that will represent necessary milestones in the attainment of objectives. Describe, where possible, how you will obtain participation and input into the program by appropriate service groups or organizations, how collaborative relationships with other agencies and organizations will be established and maintained, and the extent to which members of the target population will be involved in project planning and implementation. Include, as attachments, memoranda of understanding or agreement as evidence of these established or agreed upon collaborative relationships. Include a description of how the proposed program fills gaps left by existing programs as determined by the needs assessment.

c. Memorandum of Agreement between the applicant and the "linkage" partner/developing country counterpart. The memorandum of agreement should include the following:

(1) Statement of agreement to collaborate and for what purpose (what are the goals of the collaboration effort?). Provide full name, address, and a description of each collaborating agency.

(2) Statement of services or goods each collaborating agency is willing to provide or exchange.

(3) Statement of how services and goods will be provided or exchanged.

(4) Statement of responsibilities related to confidentiality.

(5) Statement of responsibilities related to documentation and reporting expected from each agency.

(6) Statement of how the MOA content (collaboration agreement) will be reviewed, evaluated and updated, if necessary.

(7) Statement defining the length of the agreement (start and termination clause).

(8) Statement clarifying the date of the agreement and signatures of agency personnel authorized to commit collaborating agencies to provide services and share resources.

Collaborating agencies may want to include a statement of indemnity. For instance, no element of this agreement will be construed to imply any form of financial obligation or liability, nor to confer on one party the capacity to represent or act as an agent of the other.

d. Letter of Concurrence from the USAID Mission in the selected host country. The letter should state that the USAID Mission has reviewed the proposed activities and concurs with the request to conduct the proposed activities. The letter should also indicate how the proposed effort will contribute to the results framework of the USAID Health Sector in the selected host country and that the activity is consistent with the overall HIV/AIDS prevention efforts of the Ministry of Health.

5. Plan of Evaluation (not to exceed six pages): How project activities will be evaluated (i.e., a plan that will help determine if the methods used to deliver these services are effective and the objectives are being achieved). Clearly identify specific methods you will use to measure progress toward attaining objectives and monitoring activities during the first year of the program. Describe how that information will be obtained, including a description of methods that will be implemented to gather and record data, and in what manner it will be summarized for Quarterly Progress Reports. Describe how data will be used to improve the program and how successful approaches and "lessons learned" will be shared with other organizations.

6. Communications and Dissemination Plan: (not to exceed 2 pages).

7. Plan for Sustaining Linkages: (not to exceed 2 pages).

8. Personnel: Describe how the proposed program will be managed and staffed, including the location of the program within your organization.

Describe in detail each existing or proposed position for this program by job title, function, general duties, and activities with which that position will be involved. Include the level of effort and allocation of time for each project activity by staff position. If the identity of any individual who will fill a position is known, her/his name and curriculum vitae (not to exceed one page each) should be attached. Note experience and training related to the proposed project. If the identity of staff is not known, describe your recruitment plan. If volunteers are involved in the project, provide job descriptions and methods to ensure accountability to the project.

9. Budget Breakdown and Justification: Provide a detailed budget for each priority activity to be undertaken, with accompanying justification of all operating expenses that is consistent with the stated objectives and planned activities of the project. CDC may not approve or fund all proposed activities. Be precise about the program purpose of each budget item and itemize calculations wherever appropriate.

For the personnel section, indicate the job title, annual salary/rate of pay, and percentage of time spent on this program.

For contracts contained within the application budget, name the contractor, if known; describe the services to be performed; justify using a third party; and provide a breakdown of and justification for the estimated costs of the subcontracts; the kinds of organizations or parties to be selected; the period of performance; and the method of selection.

10. Attachments: Provide the following as attachments:

a. Proof of nonprofit status. No awards will be made without acceptable proof of nonprofit status;

b. A list of the members of the governing body and their positions on the board, their expertise in working with or providing services to the proposed target population;

c. An organizational chart of existing and proposed staff, including the board of directors, volunteer staff;

d. A description of any funding received from CDC or other sources to conduct HIV/AIDS programs which includes:

(1) A summary of funds and income received to conduct HIV/AIDS programs and other programs targeting the population proposed in the program plan. This summary must include the name of the sponsoring organization/ source of income, level of funding, a description of how the funds have been

used, and the budget period. In addition, identify proposed personnel devoted to this project who are supported by other funding sources and the activities of the funded programs;

(2) A summary of the objectives and activities of the funded programs;

(3) A description of how the requested funds will be used differently or in ways that will expand upon the funds already received, applied for, or being received; and

(4) An assurance that the funds being requested will not duplicate or supplant funds received from any other source.

e. Independent audit statements from a Certified Public Accountant for the previous 2 years.

f. Affiliates of national organizations must include an original, signed letter from the chief executive office of the national organization assuring their understanding of the intent of this program announcement and the responsibilities of recipients.

Note: Materials submitted as attachments should be printed on one side of 8½ x 11 paper. Please do not attach bound materials such as booklets or pamphlets. Rather, submit copies of the materials printed on one side of 8½ x 11 paper. Bound materials will not be reviewed.

F. Submission and Deadline

Submit the original and two copies of PHS 5161-1 (OMB Number 0937-0189). Forms are in the application kit.

On or before July 23, 1999, submit the application to: Patrick Smith, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement 99144, Centers for Disease Control and Prevention, 2920 Brandywine Road, Mail Stop E-15, Room 3000, Atlanta, Georgia 30341-4146.

Deadline: Applications shall be considered as meeting the deadline if they are either received on or before the deadline date or 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 carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.) Applications that do not meet these criteria are considered late applications, will not be considered, and will be returned to the applicant.

G. Evaluation Criteria

Each application will be evaluated individually against the following criteria by an independent review group appointed by CDC.

1. Organizational History and Capacity (25 points): The extent to which the applicant demonstrates experience in providing HIV prevention services to the target population and demonstrates experience in collaborating with non-governmental organizations and government agencies of a developing country.

2. Description of Target Population and Needs Assessment (10 points): The extent to which the applicant demonstrates a need for the program.

3. Plan for Sustaining Linkages (25 points): The extent to which the applicant provides proof of collaboration with the linkage partner/developing country counterpart, USAID Mission, and government agencies in the host country. This includes a letter of concurrence from the USAID Mission and government agencies in the host country, a signed memorandum of agreement with the linkage partner, as well as signed work plans, or other evidence of collaboration. The memorandum of agreement should describe previous, current, as well as future areas of collaboration.

4. Program Objectives (10 points): The extent to which the proposed objectives are specific, measurable, time-phased, related to the proposed activities, related to national HIV prevention goals, and consistent with the applicant's overall mission.

5. Program Plan (25 points): The quality of the applicant's plan for conducting program activities and the potential effectiveness of the proposed methods for establishing and sustaining partnerships.

6. Evaluation Plan (10 points): The extent to which the evaluation plan measures the accomplishment of program objectives.

7. Personnel (not scored): The appropriateness of the staffing pattern for the proposed project.

8. Budget (not scored): The appropriateness of the budget for the proposed project. A business and fiscal recipient capability assessment may be required of some applicants prior to the award of funds.

Before final award decisions are made, CDC may conduct pre-decisional site visits to highly ranked applicants. The purpose of these site visits will be to meet with project staff and a representative of the board of directors to assess the organizational capability of the applicant to implement the proposed program.

H. Other Requirements

Technical Reporting Requirements

Provide CDC with the original plus two copies of:

1. Quarterly progress reports
2. Financial status report, no more than 90 days after the end of the budget period; and

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

Send all reports to: Patrick Smith, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Mail Stop E-15, Room 3000, Atlanta, GA 30341-4146.

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I in the application kit.

AR-4 HIV/AIDS Confidentiality Provisions

AR-5 HIV Program Review Panel Requirements

AR-9 Paperwork Reduction Act Requirements

AR-10 Smoke-Free Workplace Requirements

AR-11 Healthy People 2000

AR-12 Lobbying Restrictions

AR-14 Accounting System Requirements

AR-15 Proof of Non-Profit Status

I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under sections 301(a) and 317 of the Public Health Service Act, [42 U.S.C. section 241(a) and 247(b)], as amended. The Catalog of Federal Domestic Assistance Number is 93.939, HIV Prevention Activities—Non-governmental Organization Based.

J. Where To Obtain Additional Information

To receive additional written information and to request an application kit, call 1-888-GRANTS4 (1-888-472-6874). You will be asked to leave your name and address and will be instructed to identify the Announcement number of interest.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from: Patrick Smith, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement 99144, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Mail Stop E-15, Room 3000, Atlanta, GA 30341-4146, telephone (770) 488-2731, Email address PHS3@CDC.GOV.

For program technical assistance, contact: Renee J. Saunders, M.S.W., National Center for HIV, STD, and TB

Prevention, Centers for Disease Control and Prevention 1600 Clifton Road, NE, Mail Stop E-35, Atlanta, Georgia 30333, Telephone (404) 639-5259, Email address: RJS4@CDC.GOV.

See also the CDC home page on the Internet: HTTP://WWW.CDC.GOV.

Dated: May 14, 1999.

Henry S. Cassell III,

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

[FR Doc. 99-12693 Filed 5-19-99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Citizens Advisory Committee on Public Health Service Activities and Research at Department of Energy (DOE) Sites: Idaho National Engineering and Environmental Laboratory Health Effects Subcommittee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Citizens Advisory Committee on Public Health Service Activities and Research at DOE Sites: Idaho National Engineering and Environmental Laboratory Health Effects Subcommittee.

Times and Dates: 8:30 a.m.-5 p.m., June 9, 1999; 8:30 a.m.-5 p.m., June 10, 1999.

Place: Weston Plaza Hotel and Convention Center, 1350 Blue Lakes Boulevard North, Twin Falls, Idaho 83301.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 50 people.

Background: Under a Memorandum of Understanding (MOU) signed in December 1990 with DOE and replaced by an MOU signed in 1996, the Department of Health and Human Services (HHS) was 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 use. HHS delegated program responsibility to CDC.

In addition, a memo was signed in October 1990 and renewed in November 1992 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under section 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.

Purpose: This subcommittee is charged with providing advice and recommendations to the Director, CDC and the Administrator, ATSDR, regarding community, American Indian Tribes, and labor concerns pertaining to CDC's and ATSDR's public health activities and research at this DOE site. The purpose of this meeting is to provide a forum for community, American Indian Tribal, and labor interaction and serve as a vehicle for community concern to be expressed as advice and recommendations to CDC and ATSDR.

Matters To Be Discussed: Agenda items include presentations from the National Center for Environmental Health (NCEH), the National Institute for Occupational Safety and Health and ATSDR on updates regarding progress of current studies.

Agenda items are subject to change as priorities dictate.

Contact Persons for More Information: Arthur J. Robinson, Jr., Radiation Studies Branch, Division of Environmental Hazards and Health Effects, NCEH, CDC, 4770 Buford Highway, NE, M/S F-35, Atlanta, Georgia 30341-3724, telephone 770/488-7040, fax 770/488-7044.

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 the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: May 14, 1999.

Carolyn J. Russell,

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

[FR Doc. 99-12696 Filed 5-19-99; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Program Announcement No. ACF/ACYF/CB-99-05]

Fiscal Year (FY) 1999 Notice of an Announcement of the Availability of Financial Assistance and Request for Applications To Support Adoption Opportunities Demonstration Projects, National Child Welfare Resource Centers and Child Welfare Training Projects

AGENCY: Administration on Children, Youth and Families (ACYF), ACF, DHHS.

ACTION: Notice of Fiscal Year (FY) 1999 availability of financial assistance and request for applications to support projects under the Adoption Opportunities Program, Title II of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978, as amended, [42 U.S.C. 5111]; the Child Welfare Training Program, Section 426 of Title IV-B, Subpart 1, of the Social Security Act, as amended, [42 U.S.C. 626]; Section 476a of title IV-E of the Social Security Act, as amended, [42 U.S.C. 676]; and Promoting Safe and Stable Families Program, Section 430 of Title IV-B, Subpart 2, of the Social Security Act, as amended, [42 U.S.C. 629].

SUMMARY: The Children's Bureau (CB) within the Administration on Children, Youth and Families (ACYF), Administration for Children and Families (ACF) announces the availability of fiscal year (FY) 1999 funds for competing new Adoption Opportunities Program, Child Welfare Resource Center and Child Welfare Training Projects. Funds from the Adoption Opportunities Program are designed to provide support for demonstration projects that facilitate the elimination of barriers to adoption and provide permanent loving homes for children who would benefit from adoption, particularly children with special needs. Title IV-E of the Social Security Act, Section 476a, provides funds for technical assistance to the States. Discretionary funds from the Promoting Safe and Stable Families Program support research, training and technical assistance and evaluation efforts to preserve families. The Child Welfare Training Program funds supports discretionary awards to public or other non-profit institutions of higher learning for special projects for training personnel for work in the field of child