

services made available under the initial phase of the implementation of the Act, and to consult with Federal agencies and other potential users in order to assess the quality and value of these interim services.

The initial online services include access to a WAIS Server at GPO offering the following databases: the **Federal Register**, Volume 59 (1994); the Congressional Record, Volume 140 (1994); the Congressional Record Index, Volumes 138 to 140 (1992-1994); and Congressional Bills from the 103d Congress (1993-1994). The **Federal Register**, Congressional Record and Congressional Bills databases provide ASCII text files with all graphics included as individual files in TIFF format. Brief ASCII text summaries of each **Federal Register** entry are also available. The Congressional Record Index provides ASCII text files with all graphics included as individual files in TIFF format. The Congressional Bills are available as ASCII text files and as Adobe Acrobat Portable Document Format (PDF) files. Users with Acrobat viewers can display and print typeset page facsimiles of enrolled bills.

Seating is limited to 75 people per session. Individuals interested in attending should contact the GPO's Office of Electronic Information Dissemination Services on 202-512-1530 or (FAX) 202-512-1262. Reservations can also be made by Internet e-mail at john@eids06.eids.gpo.gov.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Ryan White Title IV; Grants for Coordinated HIV Services and Access to Research for Children, Youth, Women, and Families

AGENCY: Health Resources and Services Administration (HRSA), PHS.

ACTION: Notice of availability of funds.

SUMMARY: The Maternal and Child Health Bureau (MCHB), HRSA, announces that fiscal year (FY) 1995 funds are available for grants for projects that develop and support the provision of coordinated comprehensive services and enhance access to clinical research trials and other research activities for children, youth, women

and families infected/affected by the Human Immunodeficiency Virus (HIV). Projects will be funded to implement innovative models of family-centered, community-based coordinated care and research for children, youth, women, and families infected/affected by HIV, or those at risk for developing infection. Funds were appropriated for this purpose under Section 2671 of the Public Health Service Act [as enacted by Title IV of the Ryan White Comprehensive AIDS Resource Emergency (CARE) Act of 1990, Public Law 101-381 (42 U.S.C. 300ff-11 *et seq.*)].

The PHS is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS national activity for setting priority areas. Title IV directly addresses the Healthy People 2000 objectives related to the priority area of HIV infection. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report; Stock Number 017-001-00474-0) or *Healthy People 2000* (Summary Report; Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (telephone 202 783-3238).

The PHS strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

ADDRESSES: Grant applications for the HIV Program for Children, Youth, Women, and Families (PHS form #5161-1, approved under OMB #0937-0189) must be obtained from and submitted to: Chief, Grants Management Branch, Office of Program Support, Maternal and Child Health Bureau, Health Resources and Services Administration, Room 18-12, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-1440.

DATES: The application deadline date is April 7, 1995. Competing applications will be considered to be on time if they are:

- (1) Received on or before the deadline date, or
- (2) Postmarked on or before the deadline date and received in time for orderly processing.

As proof of timely mailing, applicants should obtain a legibly dated receipt from the commercial carrier or the U.S. Postal Service; private metered postmarks will not be accepted as proof of timely mailing.

Late applications not accepted for processing or those sent to an address

other than specified in the **ADDRESSES** section will be returned to the applicant.

Applicants will be notified of grant awards in July 1995. The starting dates for projects will be specified in the program guidance.

FOR FURTHER INFORMATION CONTACT:

Additional information regarding technical and program issues may be obtained from: Beth D. Roy, Division of Services for Children with Special Health Needs, Maternal and Child Health Bureau, Health Resources and Services Administration, Room 18A-19, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857, telephone (301) 443-9051. Requests for information concerning business management issues should be directed to: Dorothy Kelley, Acting Grants Management Officer (GMO), Maternal and Child Health Bureau, at the address specified in the **ADDRESSES** section.

SUPPLEMENTARY INFORMATION

Program Background and Objectives

The Pediatric AIDS Program was initiated in 1988. The program grew from 13 projects funded at \$4.4 million to a total of 48 projects funded at \$22 million in 1994. Since 1988, the program has evolved from a primary focus on the coordination of services for the management and care of infected children and their families to also address the broader prevention and care needs of youth and women infected/affected by HIV. In FY 1994, Congress funded the Pediatric AIDS Program under section 2671 of the Public Health Service Act (Title IV of the Ryan White Comprehensive AIDS Resource Emergency (CARE) Act of 1990, Public Law 101-381). As a result of authorization under Title IV, the focus of the program was expanded to include the development of innovative models linking systems of comprehensive primary/community-based medical and social services with the National Institutes of Health (NIH) and other clinical research trials. Funds authorized under Title IV may be used to develop and support the provision of coordinated comprehensive services and enhance access to clinical research trials and other research activities, for children, youth, women, and families infected/affected by HIV.

Last year, published results from a NIH clinical trial (ACTG 076) demonstrated the potential for reducing perinatal transmission by two-thirds when pregnant HIV-infected women were given AZT during pregnancy and at delivery, and the infants received AZT in the first weeks of life. In FY