



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service
Centers for Disease Control
and Prevention (CDC)

This funding announcement is not a request for applications. This is a public notice of the Centers for Disease Control and Prevention’s intention to fund the following project activities without full and open competition.

ABSTRACT

Funding Opportunity Number	CDC-RFA-GH12-1211
Title of Announcement	Provision of Comprehensive Public Health Services for the Fishing Communities in the Republic of Uganda under the President’s Emergency Plan for AIDS Relief
Applicant: Name, Mailing address, phone number, FAX number, email address	Kalangala District Local Government Dr. Hillary Bitakalamire P.O. Box 2 Kalangala Uganda E-mail: drhbita@yahoo.co.ug Tel: +256-772-590851
Approximate Total Project Period Funding	\$7,500,000
Approximate Current Fiscal Year Funding	\$1,500,000
Award Ceiling:	
Budget Year 1	\$1,500,000
Budget Year 2	\$1,500,000
Budget Year 3	\$1,500,000
Budget Year 4	\$1,500,000
Budget Year 5	\$1,500,000
Award Floor:	
Budget Year 1	None
Budget Year 2	None
Budget Year 3	None
Budget Year 4	None
Budget Year 5	None
New Award or Continuation	New Award
Project Period Length	5 Years
Budget Period Length	12 Months
Award Mechanism	U2G – Global HIV/AIDS Non-Research Cooperative Agreements
Statutory Authority	This program is authorized under Public Law 108-25 (the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003) [22 U.S.C. 7601, <i>et seq.</i>], and Public Law 110-293 (the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008).
CFDA # and Title	93.067 – Global AIDS
Purpose of the Award	The purpose of this program is to enhance the capacity of Kalangala District Government to fully implement and scale

	<p>up comprehensive public health services and related support activities.</p>
<p>Single Source Justification Reasons Cited</p>	<p>Kalangala District Local Government (KDLG) is a decentralized administrative entity serving highly mobile, high HIV-prevalence fishing communities in the Lake Victoria region. This is a local government entity and it is the only entity that is able to provide health services to this population. There are no private or NGO network clinics that can support the entire population.</p> <p>This funding opportunity will provide continued financial support to KDLG to support the response to the unique social and health needs of fishing communities, related to vulnerability to HIV. The district is comprised of 84 islands of which 64 are permanently habited, occasionally rising to 78 due to fish migratory patterns. The rest of the islands are rocky and do not favor fishing or settlement. Kalangala's unique geographical location and terrain has resulted in limited access to health and human services. The district has a projected population of 62,000 in 2011, served by 11 health facilities of which only two are ART accredited. Patients with health complications are referred to the mainland referral units, at least 80 nautical kilometers from the main island.</p> <p>Results from the Uganda National Health and Behavioral Survey (USHBS) reveal that the central region, in which Kalangala is located, has the highest HIV prevalence in the country, reported at 8.5%. Secondary analysis of the USHBS central region data indicate that Kalangala district has a prevalence of 27% which is approximately five times the national average.</p> <p>KDLG has worked both within Kalangala and closely with the district-health teams of six neighboring districts through community- and facility-based based approaches, to provide comprehensive HIV/AIDS services to the highly migrant population. Despite the progress in providing near universal HCT services, major challenges remain in providing HIV-prevention services, and linking and retaining HIV- infected individuals in care. A gap in service provision would result in adverse program and health system impacts.</p> <p>Approximately 3,100 pregnant women would not receive PMTCT services. As a result of this, at least 256 HIV-infected pregnant women would not be identified and therefore not be provided indicated prevention, care and treatment services. Also, approximately 178 new HIV infections among infants would not be prevented; many of these infections will result in death. At least 6,000 individuals would have a disruption of on-going HIV care and at least 900</p>

	<p>would have interruption of treatment services. Finally, district and health facility supply chain, information, human resources (hiring, training, mentoring) systems would be disrupted; also, because of the instability in funding, the commitment to continue increasing host government ownership of these activities and partnering with CDC to do so will be adversely affected.</p> <p>Over the last four years KDLG has built the necessary administrative and management structures to enable service provision. KDLG is the only organization which can continue to carry out these activities at the required scope and intensity to avert any negative health outcomes for this vulnerable population</p>
<p>Grants Management Specialist: Name, Mailing address, Phone number, email address</p>	<p>Centers for Disease Control and Prevention (CDC) Procurement and Grants Office (PGO) Kathy Raible 2920 Brandywine Road Atlanta, GA 30341-4146 Tel: 770-488-2045 Email: KRaible@cdc.gov</p>
<p>Project Officer: Name, mailing address, phone number, email address, FAX number</p>	<p>Centers for Disease Control and Prevention (CDC) Center for Global Health Division of Global HIV/AIDS Nafuna Wamai UVRI, P.O. Box 49, Plot 51-59 Nakiwogo Road, Entebbe, Uganda Tel: 256 414 320776 Email: hmt6@ug.cdc.gov</p>