

establish linkages and build partnerships with state and other organizations; this focal point will also identify gaps and facilitate the establishment of an infrastructure for comprehensive women's health services; (2) Women's Behavioral Health Systems Building: Innovative Ideas For Local And State Collaboration (WBHS-LSC) will fund creative partnerships in the area of women's health, specifically women of childbearing age, to develop horizontal networks of behavioral and health care service providers, policymakers and consumer and family groups; these networks will also foster systems coordination, policy development and coalition building among consumer and professional organizations and local and state agencies with local and state agencies with the ultimate goal of integrating and improving behavioral health services to women of childbearing age; and (3) Innovative Approaches To Promoting A Healthy Weight In Women (IPHWW) will fund projects to develop creative, innovative approaches that are effective in reducing the prevalence of overweight/obesity in women by increasing the number of women who adopt positive health lifestyles. The interventions must be substantive in nature and positively impact the woman's knowledge, attitudes, and behaviors. These approaches should target women in communities who have limited access to preventive health services and be linked with Title V, Community Centers of Excellence in Women's Health, Centers of Excellence in Women's Health, and/or other relevant resources. Proposals must target: (1) Women who are members of racial and ethnic minority populations who are disproportionately affected by overweight/obesity; and, (2) women before (preconception) and after (post-partum) pregnancy.

**Eligibility:** Any public or private entity, including an Indian tribe or tribal organization (as defined at 25 U.S.C. 450b), and faith and community-based organizations are eligible to apply.

**Review Criteria:** Final review criteria are included in the application kit.

**Special Considerations:** For purpose (1) to (3), only 1 applicant per state will be funded. For the purposes of the Integrated Comprehensive Women's Health Services in State MCH Programs (H74) only, in the interest of equitable geographic distribution, special consideration for funding may also be given to States or jurisdictions who have never received funding for this program

**Estimated Amount of This Competition:** For program purposes (1)

\$600,000; (2) \$450,000; and (3) \$600,000.

**Estimated Number of Awards:** For program purposes (1) 6 awards, (2) 3 awards; and (3) 4 awards.

**Estimated Project Period:** 3 years.

**HRSA-04-063 Women's Health (MCH-WH)**

**Application Availability Date:**

November 18, 2003.

**Letter of Intent Deadline:** December 16, 2003.

**Application Deadline:** February 2, 2004.

**Projected Award Date:** For program purpose (1) July 1, 2004, (2) May 1, 2004; and (3) June 1, 2004.

**Program Contact Person:** For program purposes (1) and (3) Lisa King. For program purpose (2) Juliann De Stefano.

**Program Contact Phone:** Lisa King 301-443-5720; Juliann De Stefano 301-443-8783.

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**HRSA-05-001 Maternal and Child Health Library Services (MCHLS)**

**CFDA:** 93.110.

**Legislative Authority:** Social Security Act, Title V, 42 U.S.C. 701.

**Purpose:** The purpose of the MCH Library Services cooperative agreement is to support a national information and education resource library which provides the information needed by the MCH community to plan and carry out program and policy development and to improve service delivery. The overall goal is to use information sciences and information technology to identify, collect, and organize information from the MCH field that is not readily available from other information sources, such as Healthy Start, infant mortality, oral health, nutrition, mental health, health promotion, women's health, MCH organizations, Medicaid, research, etc. The MCH Library is expected to conduct activities in the following areas: Collection and management of MCH information, and outreach for awareness and utilization of MCH information, including maintenance of databases, bibliographies, and other information resources on a website which provides national access to key MCH-related data and information.

**Federal Involvement:** The scope of Federal involvement is included in the application kit.

**Eligibility:** As cited in 42 CFR part 51a.3 (a), any public or private entity, including an Indian tribe or tribal organization (as those terms are defined at 25 U.S.C. 450b), is eligible to apply for this Federal funding.

**Review Criteria:** Final review criteria are included in the application kit.

**Estimated Amount of This Competition:** \$550,000.

**Estimated Number of Awards:** 1.

**Estimated Project Period:** 5 years.

**HRSA-05-001 Maternal and Child Health Library Services (MCHLS)**

**Application Availability Date:** April 20, 2004.

**Letter of Intent Deadline:** June 18, 2004.

**Application Deadline:** July 19, 2004.

**Projected Award Date:** January 1, 2005.

**Program Contact Person:** James A. Resnick.

**Program Contact Phone:** 301-443-2778.

**Program Contact E-Mail:** [JResnick@hrsa.gov](mailto:JResnick@hrsa.gov).

**HRSA-04-006 Emergency Medical Services for Children Demonstration Grant Program (EMSC)**

**CFDA:** 93.127.

**Legislative Authority:** Public Health Service Act, Section 1910, 42 U.S.C. 300w-9.

**Purpose:** The goal of the EMSC program is the reduction of child and youth mortality and morbidity sustained as a result of severe illness or trauma. The EMSC program does not intend to promote the development of a separate EMS system for children, but rather to enhance the pediatric capability of EMS systems originally designed primarily for adults. The EMSC grants support activities in the following areas: Injury prevention, database studies, outcome measures, patient assessments, facility and equipment standards, procedure standards, protocols for treatment, triage, and transfer, model agreements, training courses, videotapes and books, and community programs for special populations. EMSC projects demonstrate how the outcomes of pediatric emergencies can be improved by strengthening or expanding the pediatric capabilities of an existing EMS system.

For FY 2004, three categories of EMSC Demonstration Grant funding opportunities are offered: I. Funding is available for up to 9 EMSC State Partnership (EMSCP) demonstration grants to support activities that represent the steps to take in order to institutionalize EMSC within Emergency Medical Services (EMS) and to continue to improve and refine EMSC. Proposed activities should be consistent with documented needs in the State and should reflect a logical progression in enhancing pediatric capabilities. For example, funding might