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Issue Date: March 29, 2024
Amendment Date: May 01, 2024
Amendment #: 02
Deadline for Questions: April 22, 2024
12:00PM EDT
Closing Date: May 29, 2024
Closing Time: 9:00AM EDT

Subject: Request for Applications Number: 7200AA24RFA00008

Program Title: GH Social and Behavior Change (SBC) Activity

Dear Applicant:

The United States Agency for International Development (USAID) is seeking applications for a cooperative agreement from qualified entities to implement the GH Social and Behavior Change (SBC) Activity. This RFA is hereby amended to incorporate the Questions and Answers (Q&A) responses received by the deadline (April 22, 2024, 12:00PM EDT) and to make the necessary edits to the RFA as it pertains to the Q&As. All revisions are highlighted yellow within this amendment. Eligibility for this award is not restricted.

USAID intends to make an award to the applicant who best meets the objectives of this funding opportunity based on the merit review criteria described in this Request for Applications (RFA) subject to a risk assessment. Eligible parties interested in submitting an application are encouraged to read this RFA thoroughly to understand the type of program sought, application submission requirements and selection process.

To be eligible for award, the applicant must provide all information as required in this RFA and meet eligibility standards in Section C of this RFA. This funding opportunity is posted on www.grants.gov, and may be amended. It is the responsibility of the applicant to regularly check the website to ensure they have the latest information pertaining to this notice of funding opportunity and to ensure that the RFA has been received from the internet in its entirety. USAID bears no responsibility for data errors resulting from transmission or conversion process. If you have difficulty registering on www.grants.gov or accessing the RFA, please contact the Grants.gov Helpdesk at 1-800-518-4726 or via email at support@grants.gov for technical assistance.

USAID may not award to an applicant unless the applicant has complied with all applicable unique entity identifier and System for Award Management (SAM) requirements detailed in Section D.6.h. The registration process may take many weeks to complete. Therefore, applicants are encouraged to begin registration early in the process.



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Please note that USAID will not accept any further questions. The deadline for questions is shown above. Responses to questions received prior to the deadline is being furnished to all potential applicants through an amendment to this notice posted to www.grants.gov.

Issuance of this notice of funding opportunity does not constitute an award commitment on the part of the Government nor does it commit the Government to pay for any costs incurred in preparation or submission of comments/suggestions or an application. Applications are submitted at the risk of the applicant. All preparation and submission costs are at the applicant's expense.

Thank you for your interest in USAID programs.

Sincerely,

Alisa J. Dunn

Alisa J. Dunn
Agreement Officer



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TABLE OF CONTENTS

Section A – Program Description	4
Section B – Federal Award Information	24
Section C – Eligibility Information	37
Section D – Application and Submission Information	39
Section E – Application Review Information	70
Section F – Federal Award Administration Information	78
Section G – Federal Awarding Agency Contacts	82
Section H – Other Information	83
Annex A - Other Bureau for Global Health SBC Projects and Initiatives	84
Annex B - USAID Priority Countries (PRH, PMI, PCMD, Nutrition, PEPFAR)	86
Annex C - Past Performance Short Form	87
Annex D - Standard Provisions	90
Annex E - Abbreviations and Acronyms	93



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SECTION A: PROGRAM DESCRIPTION

This funding opportunity is authorized under the Foreign Assistance Act of 1961, as Amended, and the award is subject to the 2 Code of Federal Regulations (CFR) 200 and 2 CFR 700—Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards. The following are applicable for the administration of this award:

- For U.S. organizations, 2 CFR 200 and 2 CFR 700, and the Standard Provisions for U.S. Non-Governmental Recipients are applicable (ADS 303maa).
- For non-U.S. organizations, the Standard Provisions for Non-U.S. Non-Governmental Recipients will apply (ADS 303mab).

For the purposes of this RFA, the word ‘project’ refers to GH SBC Activity.

USAID encourages and anticipates that applicants may indicate formal arrangements with partner organizations and with sub-awardees for implementing activities in their application.

1. Introduction

The United States Agency for International Development (USAID) plans to invest in a five-year cooperative agreement titled **GH Social and Behavior Change (SBC) Activity** to support countries in achieving desired improvements in health and development outcomes.

The GH SBC Activity will build upon current USAID investments in SBC research and programming, including both global and bilateral projects, to guide integration of SBC evidence and theory in development programming, support generation and use of new learning, strengthen local technical and organizational capacity, and drive local leadership of SBC programming for better, broader, and more sustainable results. The project will fulfill a global leadership function within SBC, working through new and existing partnerships to create opportunities for locally-driven, innovative, and cost-effective SBC programs; systematic integration of SBC best practices within public and private health systems; and generating, synthesizing, and catalyzing the application of evidence-based and theory-informed SBC in diverse program settings to accelerate achievement of global health and development goals.

The **strategic objective** of the project is to increase implementation of theory-informed, evidence-based, locally-led SBC programming. While focused primarily on health, the project may address SBC needs in other sectors, with particular attention to areas of potential complementarity such as environmental conservation, agriculture, food security, and nutrition. Within the health sector, the project will maintain a substantive but non-exclusive focus on family planning, reproductive health (FP/RH) and reproductive empowerment; malaria; and maternal, newborn, and child health (MNCH), with attention to emerging pandemic threats and other infectious diseases. Considerations of USAID priorities such as localization, gender integration, youth engagement/integration, health systems strengthening, the inclusion of LGBTQI+ people, the inclusion of people with physical and cognitive disabilities, engaging the voices, skills, and experiences of all—including marginalized and underrepresented groups such as racial, ethnic, and Indigenous communities—and climate change, will be a focus across the project.



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The following are the GH SBC Activity's three **intermediate results**:

- IR 1:** Theory-informed, evidence-based, locally-led SBC programming designed, implemented, and monitored;
- IR 2:** Capacity of country-level systems and organizations to fund, initiate, manage, monitor, and sustain theory-informed, evidence-based, locally-led SBC programming strengthened; and
- IR 3:** Evidence for effective SBC programming generated, packaged, and shared.

2. Background

Global Context

SBC programming has long been an area of strategic priority for USAID. The Agency has invested heavily in social and behavior change communication (SBCC), an important SBC approach, for more than four decades, and in the last 15 years USAID began to invest in SBC approaches that incorporate practices from other behavior change fields, such as behavioral science, behavioral economics, human-centered design, and marketing, into USAID-supported SBC research and programming. USAID remains one of the world's leading funders of SBC research and programming. SBC has also garnered significant attention and increased investment from other major donors, including the Bill and Melinda Gates Foundation (BMGF), the World Bank¹, and United Nations (UN) Agencies². This sustained investment in SBC has supported the growth of a global community of SBC organizations and professionals, allowing for focused attention to - and significant progress against - priority behavioral challenges.

As the international community strives to end poverty, protect the planet, achieve gender equality and empower all women and girls, reduce inequalities, and promote peaceful and inclusive societies and promote prosperity for all by 2030 under the SDGs (Sustainable Development Goals), SBC is uniquely positioned to support the goals of Family Planning 2030 (FP2030), Preventing Child and Maternal Deaths (PCMD), Ending HIV/AIDS as a Public Health Threat by 2030, and malaria control and elimination through sustained change to population-level norms and behaviors. SBC, including Risk Communication and Community Engagement (RCCE), is also an essential component of health emergency readiness and response activities. Most recently, the response to the COVID-19 pandemic, including introduction and deployment of the COVID-19 vaccine, reinforced the critical role of SBC/RCCE programming for addressing challenges of communicating uncertainty and risk while addressing public concern, misinformation/disinformation, and distrust to contribute to a range of outcomes, including building trust and reputation between institutions and affected communities, addressing hesitancy, and improving acceptance and adherence to protective behaviors, including vaccination. SBC provides an opportunity to address health and development challenges that are not amenable to supply-side interventions alone, shaping not only demand for, and correct use of, products and services, but also human-centered client-provider communication, couples' communication, and engagement of community organizations, leaders, and members to change social norms and structures.

¹ <https://www.worldbank.org/en/programs/embed>

² <https://www.un.org/en/content/behaviouralscience/>



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Recent years have seen significant changes in behavioral programming generally and SBC specifically. Widespread access to mobile phones and social media has transformed the communication landscape, enhancing interpersonal connectivity, and accelerating the spread of new ideas and norms as well as misinformation/disinformation. The number and types of institutions engaged in SBC -- including international non-governmental organizations (NGOs), local NGOs, local and international creative agencies, social media platforms, and governments -- has increased dramatically, introducing new ways of thinking about and describing behavioral programming. Newfound interest in behavioral economics, performance-based financing, and other approaches that impact individual behavior through attention to structural and environmental factors has contributed to the expanded use of a range of SBC approaches. A growing focus on social norms and normative programming has also expanded the scope of factors that SBC research and programming explore and aim to affect. This changing landscape offers USAID an opportunity to utilize its longstanding expertise in SBC, leading donors, implementers, and partner governments in advancing the practice of SBC to support effective, rights-based, and gender-integrated health and development programming.

Operating Context (Relationship to USAID Initiatives and Other USAID Projects)

USAID's work advances U.S. national security and economic prosperity, demonstrates American generosity, and promotes a path to recipient self-reliance and resilience. Key USAID health policies and initiatives, and global efforts, support the Agency's goal to end extreme poverty, including: FP2030; the Ouagadougou Partnership; Getting to 2030: Maternal and Child Health and Nutrition Technical Roadmap; eliminating HIV/AIDS as a public health threat by 2030; A End Malaria Faster; the Global Health Security Agenda; the Gender Equality and Female Empowerment Policy; the U.S. Strategy to Prevent and Respond to Gender-Based Violence Globally; the USAID Youth in Development Policy; the USAID Disability Policy; USAID's Equity Action Plan; USAID's Racial and Ethnic Equity Initiative; USAID's Local Capacity Strengthening Policy; USAID's Climate Strategy 2022-2030; and the USAID Global Health Anti-Corruption Integration Handbook. All of these strategies, policies, and initiatives are publicly available and shape the context in which this project will prioritize investments. Most are elaborated on below.

Reproductive Empowerment and Family Planning

Key USAID policies and initiatives and global efforts: USAID's FP Pathways, [FP2030](#), and the [Ouagadougou Partnership](#)

USAID's family planning and reproductive health (FP/RH) programming supports partner countries to realize a world where ongoing improvements to sexual and reproductive health (SRH) contribute to longer, healthier, and more prosperous lives for all. To reach this transformational destination, PRH supports three rights-based pathways that collectively operate at societal, systems, and individual levels. These pathways include: 1) Local communities, organizations, institutions, and governments create and foster social norms and policies that support individuals to make and act on their own SRH decisions, free from violence, coercion, and discrimination; 2) Health systems provide quality, accessible, and people-centered sexual and reproductive healthcare; and 3) Individuals have accurate information, skills, and ability to decide, voice, and act on their reproductive intentions and achieve the highest attainable levels of SRH across their lifetime.



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PRH's implementing partners collaborate with local civil society, faith-based, youth-led, and gender-equality-focused organizations in the public and private sectors to drive norms, practices, and policies, including youth-centered, gender-equitable policies and programs, in support of positive SRH outcomes. This includes local advocacy to hold health systems and governments accountable to the populations they serve, with an explicit focus on underrepresented or marginalized groups. Cross-cutting best practices across PRH SBC investments include youth engagement and integration in programming and gender-transformative programming (i.e., programming that addresses the root causes of gender inequalities and transforms gender relations to promote equality and achieve program objectives).

Important gaps exist in FP/RH-focused SBC programming, as detailed here and in the section on "priority challenges in SBC" further down in this Program Description. USAID strongly supports meaningful youth engagement and gender integration in SBC programming and recognizes that more progress has been made in some areas (e.g., community mobilization, normative change) than other areas (e.g., provider behavior change). For example, gender roles, norms, and inequalities influence multiple SRH outcomes (e.g., risk for HIV, use/non-use of contraception, use of ANC and delivery services), but relatively few SBC programs address gender as a way to improve multiple SRH outcomes. Understanding whether and how addressing gender improves health and integrating and scaling effective gender transformative programming is a high priority for PRH. Another high priority with insufficient recent progress is large-scale SBC programming that meaningfully engages youth, their families, communities, and the health services and systems that are meant to assist them. Youth-centered programming is particularly important to enable adolescents to delay childbearing and to contribute to improved economic, social, and health outcomes for adolescent girls and boys and their communities. Meaningful, participatory engagement and programming focused on underrepresented groups, indigenous groups, and racial and ethnic minorities is another gap in FP/RH-focused SBC programming.

PRH also supports FP2030 and The Ouagadougou Partnership. FP2030 is a partnership of more than 130 governments, foundations, multilateral agencies, civil society organizations, and private sector entities working together to advance family planning around the world. The Ouagadougou Partnership was launched in February 2011 at a Regional Conference on Population, Development, and Family Planning held by the nine governments of Francophone West African countries (Benin, Burkina Faso, Côte d'Ivoire, Guinea, Mali, Mauritania, Niger, Senegal, and Togo). Both FP2030 and the Ouagadougou Partnership recognize the need to improve demand creation and SBC in order to achieve the family planning and reproductive health goals that have been set by the international community for 2030. USAID has been a major contributor to these efforts at both the global and country levels.

Maternal and Child Health and Nutrition

Key USAID policies and initiatives and global efforts: [MCHN Technical Roadmap](#), [Preventing Child and Maternal Deaths \(PCMD\) Framework](#), [Every Newborn Action Plan](#), [Ending Preventable Maternal Mortality](#), [Child Survival Action](#), [USAID Multi-Sectoral Nutrition Strategy 2014-2025](#), [Global Malnutrition Prevention and Treatment Act of 2021 Implementation Plan](#)

In the last 30 years, significant progress to improve maternal and child survival has been achieved, yet an estimated 5 million deaths continue to occur each year among children before their 5th birthday,



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and hundreds of thousands of mothers continue to die during what should be a joyous moment in their lives. Progress on maternal, newborn, and child survival is stalling. In March 2023, Administrator Power released the [Agency's Preventing Child and Maternal Deaths \(PCMD\) Framework](#), which provides the overarching direction of our program. Through this framework, MCHN will work to reduce preventable child and maternal mortality in 25 countries to 12 percent or lower of total deaths by 2030. We will do this through increasing coverage of essential MCHN interventions with an intensified focus on quality and equity. In carrying out this work, we are guided by six strategic approaches that focus on: anchoring our response in primary health care systems to optimize health outcomes; reaching the hardest to reach mothers and children; identifying and tailoring solutions through locally-led development; investing in the health workforce as the foundation of health systems; catalyzing country commitment; and generating and using data and evidence in decision making. The [Maternal and Child Health and Nutrition \(MCHN\) Technical Roadmap](#) further focuses on the pillars of coverage, quality, and equity and articulates a measurable results framework. The MCHN Technical Roadmap is the technical framework for MCHN programs and a key component of the Agency's PCMD efforts, along with family planning, malaria, and health systems strengthening (HSS). The PCMD objectives are grounded in robust and resilient health systems as outlined in the [USAID Vision for Health System Strengthening 2030](#). The Roadmap guides USAID Missions on priority actions to support countries in achieving their 2030 Sustainable Development Goals (SDGs) for mothers, newborns, and children. The Roadmap acknowledges the centrality of behaviors and norms to support healthy individuals and communities. Priority areas for MCHN SBC investments include efforts to improve quality of care including respectful care, provider behavior change, and demand for MCH services including immunization.

USAID is committed to accelerating progress on maternal, newborn, and child survival with countries and global partners through three key global action plans that share the same goal through a lifecourse and continuum of care approach. The [Every Newborn Action Plan \(ENAP\)](#) and [Ending Preventable Maternal Mortality \(EPMM\)](#) are global action plans supported by a multi-partner group to strengthen synergy and coordination of actions at the global and country level to accelerate reductions in maternal and newborn mortality and to prevent stillbirth. At the International Maternal Newborn Health Conference (IMNHC) in Cape Town in May 2023, the two groups launched the first Joint ENAP-EPMM Progress Report which highlighted coverage targets and milestones that will be renewed every two years. The conference stimulated the development of 28 ENAP-EPMM country acceleration plans that identified priority actions to achieve the targets. [Child Survival Action \(CSA\)](#) works alongside EPMM and the ENAP to address mortality across the lifecourse. CSA is an initiative from a coalition of partners including WHO, UNICEF, the Global Financing Facility (GFF)/World Bank (WB), USAID, Save the Children, and others to accelerate actions to reduce mortality among children 1-59 months of age, especially in those countries that need accelerated progress to meet 2030 targets. Nutrition interventions directly contribute to ENAP-EPMM-CSA goals. During the 2021 Nutrition for Growth Summit, USAID announced large commitments to combat global malnutrition, including prevention and management of wasting, particularly in non-emergency contexts. These efforts are working together to strengthen community and health facility delivery platforms for the delivery of high impact interventions essential for maternal, newborn and child survival, and to reduce fragmentation/optimize available resources.



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As outlined in USAID’s Multi-Sectoral Nutrition Strategy 2014–2025, the Agency’s nutrition investments address the prevention of all forms of undernutrition, with emphasis on those that target the "1,000 day window of opportunity" from pregnancy through a child's second birthday – a period in which good nutrition is critical for optimal physical and cognitive development. SBC for improved nutrition behaviors is a key aspect of this strategy. In 2021, Congress passed the Global Malnutrition Prevention and Treatment Act, which directs USAID to prevent and treat malnutrition globally. USAID’s [Implementation Plan](#) serves as a roadmap for USAID’s investments in the prevention and treatment of malnutrition for the period from October 2022 to October 2029. A number of health-related nutrition behaviors which are vital to improve nutrition outcomes are highlighted in this plan. These include early initiation of breastfeeding and exclusive breastfeeding up to six months; appropriate complementary feeding; increased dietary diversity for children 6-24 months; and increased dietary diversity for pregnant women. Recent USAID investments in SBC for nutrition have focused on improving the quality of SBC design, implementation, and measurement. Applying innovative techniques that have proven successful in other sectors to nutrition in the health sector is a priority for USAID to accelerate progress in preventing malnutrition.

HIV/AIDS

Key USAID policies and initiatives and global efforts: [The U.S. President’s Emergency Plan for AIDS Relief \(PEPFAR\)](#)

The United States Government (USG) is leading other donors and governments to coalesce around its ambitious goal of controlling the HIV epidemic and ending HIV/AIDS as a public threat by 2030. The U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) is the U.S. government’s initiative to help save the lives of those infected and affected by HIV/AIDS around the world. This historic commitment is the largest by any nation to combat a single disease internationally, and PEPFAR investments also help alleviate suffering from other co-occurring diseases and conditions. PEPFAR seeks to end HIV/AIDS as a public threat by 2030 through accelerating core interventions for epidemic control, with particular emphasis on impact; efficiency; sustainability; partnership; and human rights. In 2014, the Joint United Nations Programme on HIV/AIDS (UNAIDS) put forth the 95-95-95 targets, proposing that by 2030 95% of all people living with HIV should know their HIV status; 95% of all people with a diagnosed HIV infection should receive sustained antiretroviral therapy (ART); and 95% of all people receiving antiretroviral therapy should be virally suppressed. PEPFAR has endorsed these targets and has identified behavioral science as a key component in its [2023-2028 strategy](#).

Achieving the 95-95-95 targets will require effectively addressing related social and behavioral factors affecting demand for biomedical prevention methods such as Pre-Exposure Prophylaxis (PrEP) and voluntary medical male circumcision (VMMC), HIV testing, treatment initiation, and continuity and adherence to HIV treatment. Areas of particular interest within PEPFAR include but are not limited to closing inequity gaps (such as lower case finding among men and children), addressing last mile and persistent challenges (such as lower adherence to HIV treatment among adolescents and young adults), and supporting the introduction of longer acting treatment and new options for PrEP. USAID’s Office of HIV/AIDS (OHA), in particular, has focused its SBC investments in the strengthening of evidence for high-quality SBC approaches for high-risk, hard-to-reach populations; innovative use of proven behavior change approaches from diverse disciplines, including a blend of strategic marketing, HCD,



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and SBCC, at community, facility, and above-site levels; and structural interventions which ease access to critical products and services.

Malaria

Key USAID policies and initiatives and global efforts: [The U.S. President's Malaria Initiative \(PMI\)](#)

The past two decades have seen extraordinary progress in malaria control efforts. The scale-up of proven, cost-effective malaria interventions – such as effective case management and prevention of malaria in pregnancy – has contributed to this progress. The World Health Organization's (WHO) [2021 World Malaria Report](#) estimates that more than 10.6 million malaria deaths and 1.7 billion malaria cases were averted worldwide between 2000 and 2020. During that same time period, many countries made notable progress towards subnational or national malaria elimination. Despite incredible achievements, progress has been uneven and has fallen short of global goals. The COVID-19 pandemic further threatened this progress, resulting in excess malaria cases and deaths due to COVID-19 service disruptions. The vast majority of these cases and deaths occurred among young children in sub-Saharan Africa (SSA) where malaria infection during pregnancy also contributes to maternal and newborn morbidity and mortality. Gaps in intervention quality and coverage contribute to continued malaria-related mortality and morbidity. In 2020, care was sought for only 69% of children with fever in SSA, of whom only 76% received an artemisinin-based combination therapy. Additionally, 43% of pregnant women in SSA did not receive a single dose of intermittent preventive treatment for malaria during pregnancy.

[The U.S. President's Malaria Initiative 2021-2026 Strategy: End Malaria Faster](#) articulates a vision for how PMI will contribute to the global goals of saving more than four million lives and averting over 1 billion cases by 2025. The Strategy maintains the broader orienting goal to work with 30 PMI [partner countries](#) and global partners to further reduce malaria deaths and substantially decrease malaria morbidity, towards the long-term goal of elimination and includes five core focus areas: reaching the unreached; strengthening community health systems; keeping malaria services resilient; investing locally; and innovating and leading.

Achieving the goals and objectives outlined in the 2021-2026 Strategy will require coordinated and innovative behavioral programming to achieve optimal uptake of current and emerging malaria interventions among affected communities and the providers who serve them. To support this, PMI needs innovation in expedient and cost-efficient quantitative and qualitative formative research.

Global Health Security

Key USAID policies and initiatives and global efforts: [Global Health Security Agenda](#)

Across our nation and around the world, millions of people have lost their lives and livelihoods because the world lacked capacity to prevent, detect, and respond to COVID-19 and other emerging infectious disease threats. USAID's Global Health Security (GHS) Program seeks to prevent and mitigate the increasing occurrence and severity of epidemics, pandemics, and other emerging infectious disease threats. We do this by partnering with countries as well as global, regional, and local public and private sector organizations. These partnerships build and strengthen measurable, sustainable capacity while helping to develop and adopt evidence-based and innovative solutions to prevent, rapidly detect, effectively respond to, and ultimately recover from emerging infectious disease



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threats – whether naturally occurring, accidental, or deliberate.

Recognizing the connection between the health of the environment, animals, and people, we implement the [One Health](#) approach. Our GHS program uses an integrated approach that includes strengthening capacity; responding to outbreaks and other health emergencies; bolstering the GHS architecture; and building resilience in concert with USAID’s broader global health programs.

For more than 15 years, USAID has been a leader in promoting sustainable, whole-of-government, whole-of-society, and One Health approaches to implement GHS. In recognition of the growing risk that biological threats pose to national and international security, USAID has significantly expanded its GHS program. In 2023, USAID expanded its work to 50 countries across sub-Saharan Africa, Asia, the Middle East, Latin America and the Caribbean, and Europe and Eurasia. USAID’s vision is for every country to be capable of addressing health security gaps and responding to major outbreaks, epidemics, and pandemics.

As a core element of program expansion, the USAID GHS Program will support countries to achieve demonstrated capacity in at least 5 key GHS technical areas in at least 50 countries by the end of 2025. This is consistent with the [Global Health Security Agenda \(GHSA\) multilateral initiative](#). These priority areas are drawn from the [Joint External Evaluation \(JEE\) 3rd edition](#) and include disease surveillance; national laboratory systems; human resources; antimicrobial resistance; zoonotic disease; biosafety and biosecurity; infection prevention and control; and risk communication and community engagement (RCCE). In addition, USAID will help countries to achieve internationally accepted outbreak response timeliness metrics (such as [7-1-7](#)), now incorporated in [WHO’s Early Action Review \(EAR\)](#) guidance.

To achieve these capacities, USAID works with countries to identify and address their highest priority gaps. Among the key capacity areas of strategic focus is the effort to improve risk RCCE, including activities to mitigate risk, encourage appropriate treatment seeking behavior, promote interactive communication channels, and improve community preparedness. Global guidance such as [WHO’s Risk Communication and Community Engagement Guidance](#), [WHO’s Tools for COVID-19 Vaccine Acceptance and Demand](#), including [Acceptance and demand for COVID-19 vaccines](#) and [Acceptance and demand for COVID-19 vaccines: communications plan template](#), [UNICEF’s Risk Communication and Community Engagement for COVID-19 Pandemic Response](#), as well as the [Synthesized Guidance for COVID-19 Message Development](#) present a body of knowledge for continued investments in RCCE programming to advance USG’s GHS goals.

Cross-Cutting Priorities

The cross-cutting priorities detailed below are considered important considerations across the project and its activities.

Gender Equality and Women’s Empowerment

[USAID’s 2023 Gender Equality and Women’s Empowerment Policy](#) cuts across all development sectors, programs, and objectives, including the health areas cited above and this project. Achievement of the policy’s objectives -- reduce gender disparities, strive to eliminate gender-based violence and mitigate its harmful effects, increase women’s and girls’ agency, and advance structural changes and



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promote equitable gender norms -- contributes to individual agency, gender-equitable relationships, and enabling systems and environments in which women, men, gender diverse individuals, youth, and couples can more easily adopt healthier behaviors and utilize health services. USAID considers these objectives as critical factors within SBC processes across the project life cycle as well as within the outcomes and impact of SBC programming. This includes gender-transformative SBC approaches that not only seek to change underlying causes of gender-based inequalities and foster meaningful, progressive changes in gendered power relationships but also approaches that address gender stereotypes; center parity, representation, and inclusion in program participation; and utilize gender, power, and intersectional analytical lenses in programmatic and social structures that implement SBC. Other gender-related policies and strategies reinforce the critical role gender equality plays in USAID's SBC programming. The Agency's [LGBTQI+ Inclusive Development Policy](#) reiterates USAID's commitment to embracing an inclusive development approach across all sectors to respond to the health needs of LGBTQI+ individuals, and the [United States Strategy to Prevent and Respond to Gender Based Violence](#) (GBV) informs the role SBC plays in addressing the needs of at-risk populations across the life course, increasing GBV prevention and response across health programming, and capacity strengthening within the health sector to combat GBV.

Youth

An enhanced focus on adolescents and youth is vital to USAID's ability to achieve its global health goals of PCMD and ending HIV/AIDS as a public health threat by 2030. HIV and pregnancy-related complications remain major causes of death among youth worldwide and, globally, adolescent mortality rates have remained virtually unchanged over the past 50 years. The continued practice of child, early, and forced marriages and unions and other forms of GBV yields severe and negative consequences for the present and future health and wellbeing of girls, boys, and their children. [USAID's Youth in Development Policy's \(2022\)](#) goals are to: increase the meaningful participation of youth within their communities, schools, organizations, economies, peer groups, and families; enhance their technical and soft skills; provide opportunities to contribute to communities and for workforce development; and foster healthy relationships so they may build on their collective leadership. USAID defines youth as individuals ages 10-29 years and acknowledges that a range of investments and programs are needed from all development sectors, including those focusing on health and wellbeing, in order to achieve these goals. Adolescence and young adulthood are critical periods for establishing both social norms and behavioral patterns which continue into adulthood and influence health outcomes of both individuals and their families, educational attainment, and economic security across the lifespan. For this reason, young people, including married adolescents and gender diverse and marginalized youth, remain a critical priority audience for SBC interventions, while behavior change is central to many youth-inclusive programs across health and other development sectors.

Health Systems Strengthening

USAID's publication on [Social and Behavior Change and Health System Strengthening](#) highlights the use of SBC to strengthen the overall health system. SBC methodologies and approaches can be integrated into health system strengthening (HSS) efforts to address the social and behavioral drivers of key actors that affect health system performance. This integration can help improve social accountability efforts, change the behavior of providers, supervisors, or policy makers, and increase chances for social change, which go beyond the accumulation of changes at the individual level and



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transform social norms and structures that influence individual and collective decision-making. SBC approaches can improve the design and uptake of financial protection schemes; link households to resources, services and networks; mobilize communities and health system actors around uptake and service quality; and strengthen social accountability efforts. SBC methods may assist with identifying normative issues such as corruption as an underlying factor in accessing care and address it through a mixture of traditional SBC approaches and social norm work. SBC activities can provide insights into why healthcare workers may not be providing quality care by analyzing and responding to underlying bias or social norms that may be indirectly weakening access to high quality and equitable health care. Health system actors, especially health care providers, are both a priority audience for behavior change efforts but also a key change agent for affecting others' behaviors. Strengthening the health system to more effectively support health care providers and other actors within the system improves the enabling environment for behavior change in individuals, communities, and institutions.

Climate Change

USAID's [2022-2030 Climate Strategy](#) recognizes climate change as a global crisis that threatens progress made through decades of investments in health and development. Building on the 2012-2018 Climate Change and Development Strategy, which focused on specific climate change mitigation and adaptation measures, the new strategy emphasizes a “whole-of-Agency” approach, working with partner governments and local actors to set the global trajectory toward the vision of a resilient, prosperous, and equitable world with net-zero greenhouse gas emissions. USAID's Strategy underscores negative effects of climate change on physical and mental health, mortality, food security, and access to essential services, such as health care; water, sanitation and hygiene; and the exacerbated impact of climatic shocks in worsening health outcomes during disease outbreaks. The Strategy also acknowledges that climate change impacts populations unequally, and that USAID's programming should pay particular attention to Critical Populations that are more vulnerable to the impacts of climate change and/or that have been traditionally excluded from leadership and decision-making around climate action.

To strengthen climate resilience of populations vulnerable to climate impacts, the Climate Strategy highlights the role of SBC programming to foster the adoption of new climate-friendly behaviors by a range of actors; shift social and gender norms to provide greater voice for marginalized and underrepresented groups in climate action; and address the structural barriers impeding access to products, services, and financing as part of larger climate change initiatives. To address the complexity of climate change, the Strategy notes the importance of applying insights and evidence on behavior change to inform the design and implementation of new programming.

Localization

Localization at USAID is defined as intentional changes to policies, processes, staffing, and funding decisions to support partnerships and programs that equitably empower local actors, strengthen local systems, and facilitate local leadership so that development and humanitarian assistance are more effective and sustainable. USAID is deepening its commitment to being transparent, inclusive, and responsive to and supportive of local actors in leading their own development. To achieve this, USAID's approach to integrate localization requires three mutually-reinforcing practices: [locally-led development](#), [local systems](#), and [local capacity strengthening](#). Directly aligned with [USAID's Local Capacity Strengthening Policy](#), implementation of this project will include capacity strengthening and



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facilitation with and through local actors to strengthen local systems. This includes local public and private sector organizations and institutions that could serve as potential new partners or recipients of awards from USAID (including transition awards) or other donors in the future.

Disability, Indigenous Rights, and Racial and Ethnic Equity

As detailed in [USAID's Disability Policy](#), USAID is committed to the inclusion of people who have physical and cognitive disabilities and those who advocate and offer services on behalf of persons with disabilities. This commitment extends from the design and implementation of USAID programming to advocacy for and outreach to persons with disabilities. The policy promotes nondiscrimination against and equal opportunity for persons with disabilities. As of December 2023, this policy is undergoing updates. USAID's [Policy on Promoting the Rights of Indigenous Peoples](#) (PRO-IP) guides development practitioners to strengthen the design and management of programs that affect Indigenous Peoples. PRO-IP has four objectives: 1) Strengthen engagement with Indigenous Peoples to safeguard against harm and support their development priorities and self-reliance; 2) Increase the integration of Indigenous Peoples' concerns across all sectors of USAID's portfolio of investments and promote cross-sectoral development approaches; 3) Empower Indigenous Peoples and their representative organizations to advocate for, and exercise, their rights and practice self-determined development; and 4) Foster an enabling environment for Indigenous Peoples to advocate for and exercise their rights. Finally, new in 2023, USAID's [Racial and Ethnic Equity Initiative](#) builds on USAID's long-standing efforts to ensure development programming is fully inclusive of historically marginalized racial, ethnic, and Indigenous communities, including people of African descent, and further incorporates equity into USAID operations, programming, and learning. Implementation of this project will align with the priorities laid out in these policies and initiatives.

USAID Bureau for Global Health (GH) Investments in SBC

Much of USAID's investment in SBC to date has focused on improving health behaviors pertaining to FP/RH, HIV/AIDS, MNCH, malaria, nutrition, and water, sanitation, and hygiene (WASH). SBC has also been used to combat pandemic threats such as COVID-19, H1N1, Ebola, and Zika through focused RCCE, preparedness, and post-epidemic recovery programming. In recent years, USAID has also begun to integrate non-health development sectors, such as democracy and governance, agriculture, and environment, into its SBC programming in an effort to increase behavioral impact while leveraging pre-existing social and programmatic structures. Cross-cutting areas such as gender and youth have also been a focus across health sector programming.

SBC projects under the Bureau for Global Health's portfolio have varied in size and scope. Since 1982, USAID has invested in global flagship projects for SBC, including Population Communication Services (1982-2002), the Health Communication Partnership (2002-2007), Communication for Change (C-Change) (2007-2012), the Health Communication Capacity Collaborative (HC3) (2012-2017), and Breakthrough-RESEARCH (BR) (2017-2023) and Breakthrough-ACTION (BA) (2017-2025). BR was mandated to drive the generation, packaging, and use of innovative SBC research to expand the evidence base, increase healthy behaviors, and enable positive social norms through improved SBC programming. Working across approximately ten countries, BR expanded the evidence base on program costing and cost effectiveness of SBC. The project generated costing tools, business cases for SBC in malaria, nutrition, and family planning, and research briefs and publications which are publicly available on the [website](#) and [legacy page](#). The current flagship SBC implementation



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project, BA, is mandated to provide global technical leadership and to work in partnership with governments, civil society, and communities around the world to implement creative and sustainable SBC programming, nurture SBC champions, mainstream new techniques and technologies, and advocate strategic and sustained investment in SBC. Working in more than 35 countries, BA has expanded the reach and breadth of SBC work, both in terms of the approaches used and the health issues addressed. BA works in SBC across a wide range of health areas, including a rapid response to COVID-19 and implementation of integrated, cross-sector activities. The project has also championed two important knowledge management resources: [Springboard](#), an online networking and sharing resource that supports and nurtures global-, regional-, and country-level SBC communities of practice, and [the Compass](#), a curated, interactive online materials repository. Further information on BA is available publicly on the [project website](#), as well as from the project's [midterm evaluation report](#).

GH SBC Activity Stakeholders

This project will set the standard for quality technical assistance and programming in SBC, strengthening capacity to implement best practices with a broad range of stakeholders at the global, regional, and country levels. It is expected that the project will leverage existing platforms (i.e., Springboard and the Compass) and multi-agency working groups to help facilitate these partner relationships.

Bureau for Global Health: The GH SBC Activity will be managed centrally by the Office of Population and Reproductive Health (PRH) in the Bureau for Global Health. It is expected that approximately 6% of potentially available funds for this project will originate in the technical offices of the Bureau; these funds are known as Core funds. In addition to executing high-priority technical leadership activities as needed, specific to cross-cutting issues (e.g., gender, youth) and each contributing health area, these Core funds will likely be used to support global and regional technical learning events; provide multi-site or multi-country program design or implementation; conduct research to develop or trial innovative SBC practices and interventions, including those that address gender and other cross-cutting issues; develop or apply specialized capacity strengthening resources; and conduct high-quality knowledge management. An expanded management team including SBC Advisors from the Bureau's Office of Population and Reproductive Health (PRH); Office of Maternal and Child Health and Nutrition (MCHN); Office of HIV/AIDS (OHA); and Office of Infectious Disease (ID) will provide technical, financial, and administrative oversight of the project. This team will regularly communicate with cross-cutting technical advisors within the Global Health Bureau as well as with global leadership of the project, including providing strategic guidance and review of project work plans and outputs. See Section B of this RFA for more information about management of this project.

USAID Missions: Missions represent a key stakeholder for the project. It is expected approximately 93% of the project's potential funding will originate in Missions through field support buy-ins. Mission funds will likely support designing and supporting SBC programming, with the project co-creating, implementing, and monitoring SBC programming with local stakeholders. This may include shorter-term programming initiatives and responses. Mission funds will also likely support technical and organizational capacity strengthening of Missions' bilateral SBC implementing partners as well as multi-year technical capacity strengthening assistance to Ministries of Health for strengthening national health systems. The project will engage actively with the USAID Washington management



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team and Mission staff to respond to Mission scopes of work. The management team will facilitate and approve buy-ins as well as provide oversight on all country-based activities. The Missions will coordinate with the AOR in Washington on direct day-to-day management oversight of Mission buy-ins.

USAID Global Health Projects Active in SBC: The Bureau for Global Health has a large portfolio of projects with substantial SBC components. In general, these projects are both smaller in size and narrower in focus than this SBC flagship project, focusing on a single health area, audience, and/or programmatic approach. The GH SBC Activity will serve to link and coordinate these diverse SBC investments across health element portfolios and to help disseminate key learnings and outputs of these investments through communities of practice, online knowledge management platforms, and other channels. The project's own activities should also leverage and build upon other GH projects that focus on specific aspects of SBC interventions and research. These projects and initiatives are further described in Annex A of the RFA (Other Bureau for Global Health SBC Projects and Initiatives).

Local and International Organizations Active in SBC: USAID and other donors collaborate with many local and international organizations that are active in the field of SBC. These partners include small non-governmental and community-based organizations, businesses/corporations, governments, international organizations, and academic institutions. Some of these organizations are themselves experts in SBC or other behavior change disciplines, while others have more limited experience and capacity. USAID expects that the GH SBC Activity will actively and continuously engage these partners, ensuring effective experience-sharing and making use of programmatic synergies.

USAID Projects: USAID invests heavily in health service delivery improvement, both through core-funded central projects and bilateral mechanisms. The Bureau for Global Health increasingly recognizes and emphasizes the importance of close alignment of SBC and service delivery across all health areas. In order to successfully achieve their shared purpose and strategic objective, the project must become familiar with key tenets and objectives of USAID-supported service delivery improvement programming in FP/RH, HIV/AIDS, MCHN, infectious disease including malaria, including both major strategic priorities and key implementing partners, and must understand how high-quality SBC may best contribute to, and complement, health systems and service delivery. This also applies to other health-related projects such as supply chain and vector control. USAID expects that the GH SBC Activity will actively collaborate with other USAID projects in order to avoid redundancy, uphold best practices, and maximize USAID investments.

USG Agencies, Multilateral Organizations, & Donors: USAID encourages the project to engage other USG agencies, multilateral organizations, and donors active in SBC in the interest of strategic coordination and harmonization of efforts. At a minimum, the GH SBC Activity will engage UNFPA, FCDO, UNICEF, BMGF, WHO, and the World Bank, which together fund the large majority of internationally-supported SBC efforts in many parts of Africa and Asia.



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Priority Challenges in SBC

The following priority challenges require intensive focus by the GH SBC Activity in order to achieve population-level social and behavior change that measurably improves global health and development outcomes.

- ***Uneven SBC capacity among local actors to drive and sustain theory-based, evidence-informed SBC programming.***
 - Achieving long-term changes in population-level behaviors and norms requires ongoing, locally-driven, gender-integrated SBC programming, often grounded in locally-conducted or -adapted research findings.
 - In many countries, increasing local capacity will necessitate further elevating the field of SBC to ensure adequate public and private sector investment; developing the technical and operational capacities of high-performing country-based SBC organizations and country-level systems; and creating or supporting existing mechanisms for ongoing academic and professional training.
- ***Limited use of the full range of evidence-informed SBC approaches; specifically, an overreliance on communication-based approaches.***
 - To advance the SBC field, the SBC community must continue to prioritize approaches that allow for improved efficiency or behavioral impact in a variety of settings and contexts. Such approaches may be truly “new” or reflect the merging or adaptation of existing approaches.
 - The SBC community must proactively seek out and test emerging and proven approaches in SBC and establish mechanisms that support ongoing innovation. Engaging leading practitioners from fields such as advertising, artificial intelligence (AI)/machine learning (ML), psychology, behavioral economics, human-centered design (HCD), gender studies, neuroscience, and information and communication technology (ICT) allows practitioners to identify or develop promising SBC research, intervention, monitoring, and evaluation practices that may be tested, documented, and disseminated.
- ***Inadequate application of gender-transformative programming to address deep-rooted gender inequalities.***
 - The inadequate integration of programming that seeks to transform inequitable gender relations and power dynamics by strengthening positive norms and addressing root causes of gender inequalities throughout the SBC program cycle represents a significant barrier to creating an enabling environment for positive and sustained social and behavior change and improved health and development outcomes.
 - Inequitable gender norms and power dynamics continue to restrict the participation and agency of certain groups, particularly women, girls, and other marginalized groups.
 - Inequitable gender norms restrict the equitable participation of men and boys as well, and male engagement approaches often do not incorporate attention to gender and power dynamics that reinforce men’s control within couple’s decision making and health seeking behavior. Male engagement approaches, when used, should emphasize reaching men and boys on several levels: as partners; as caregivers; as individuals with their own unique and distinct health needs that SBC can address in communities and



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within health facilities; and as agents of change with an important role in advancing gender equity within families and communities.

- The intersectionality between gender and other forms of social identity such as age, caste, disability, race or ethnic origin, class, nationality, religion, or belief contribute to unique experiences of oppression, privilege, access (including access to development programming), and health and development outcomes. To date there has been inadequate analysis of how or to what extent intersectionality influences health seeking behavior and further exacerbates gender inequalities.
- A commitment to gender equality and advancing health equity must be demonstrated in SBC systems, structures, and partnerships, as well as in designing, implementing, and monitoring the impact of development programming.
- ***Insufficient integration of SBC into health systems to optimize health system performance, effect change of system actors, and support sustained, large-scale SBC programming.***
 - Health systems require additional effort to better support health care providers and other health system actors through attention not just to their knowledge and skills, but also their normative and attitudinal factors, organizational norms, supportive systems, and supervision. Provider behavior change (PBC) interventions remain an important and underused tool for improving health service quality, client satisfaction, and provider job satisfaction.
 - Implementation of large-scale, cost-effective SBC interventions is an essential function of a health system. Greater attention is needed to strengthen technical capacity and commitment to evidence-informed SBC delivery within public health systems to drive appropriate use of services and to support clients and communities to maintain health.
 - While technical training in SBC is essential, it is equally important to address the overall system elements required to create and sustain good SBC programming within the health system. These elements may include improving the system that finances SBC programming; addressing what cadres of professionals are responsible for SBC activities, how they are equitably paid, and what their credentials are; governance decisions that identify who has oversight of SBC work in a country; and how indicators are tracked and analyzed.
- ***Weak SBC monitoring and evaluation systems and inadequate and inconsistent measurement of behavioral outcomes and impact have hindered the assessment of program effectiveness and use of local data for evidence-based decision making.***
 - Though progress has been made in measuring and documenting the cost and cost effectiveness of SBC, more such evidence is needed to catalyze investment in high-quality, effective SBC programming. There also remains a strong need to increase and improve the rigor of measurement of behavioral outcomes and programming impact, as the right data is not being collected and used to convince policymakers of SBC's contribution to improved health and development outcomes. Exploration and application of alternative impact measurement methods could help generate these data.
 - Currently there is limited SBC program measurement and data use for program adaptation. There is a shared felt need among stakeholders and donors that increasing the rigor and frequency of routine monitoring, including the capture of data on behavioral determinants/intermediate outcomes, is necessary for adaptive management purposes as well as improved understanding of whether and how SBC research and



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programming is effecting change. The lack of in-country behavioral monitoring systems/SBC data management platforms also contributes to this challenge.

- Monitoring and evaluation approaches need to be strengthened to better deal with complexity and to measure and monitor complex factors such as normative change.
- SBC practitioners are not routinely applying new technologies and tools that can simplify and reduce costs associated with SBC monitoring and evaluation.
- ***Lack of preparedness for country-led, coordinated SBC responses to mitigate health shocks such as COVID-19.***
 - Across several regions and countries, emerging and recurring health outbreaks, epidemics, and pandemics continue to pose disruptions to health services, product availability, systems, and outcomes. Effective responses to mitigate spread and impact often require interdisciplinary, coordinated multi-sectoral and gender-integrated approaches, yet the organization of country-level health systems remain fragmented, and capacity remains suboptimal, especially at sub-national levels.
 - Despite the clear and important role of RCCE in preparedness and response to health shocks, RCCE is often underfunded, undervalued, reactive (rather than proactive), and/or not data-informed.
 - The rapidly evolving nature of outbreaks often require adaptive SBC programming approaches; the nuanced data needed to enable these approaches is often not intentionally generated, and competencies for adaptive management are weak.
- ***Difficulties in accessing and analyzing the existing global evidence base and other programmatic resources necessitates the use of innovative and effective approaches to information-sharing and knowledge management.***
 - While there is a global evidence base on the effectiveness (and, at times, cost-effectiveness) of some SBC interventions, sifting through that literature to identify studies that are applicable to the local context is complex and time consuming.
 - Local SBC practitioners need support to create and strengthen local and regional networks that facilitate information exchange and learning.
 - Robust knowledge management practices are needed to connect global and local expertise and bring valuable experiential knowledge to a global audience.
 - Knowledge management challenges in the SBC field lead to a range of issues such as stifled evidence dissemination and uptake; weak practitioner understanding of foundational theoretical concepts; low perceived efficacy of SBC as a discipline by donors and governments; and low visibility of the field of SBC as a whole.
 - Existing resources and platforms like national, regional, and global technical working groups and communities of practice should be leveraged to support evidence and knowledge translation and use.
- ***Untapped opportunities to understand and thoughtfully incorporate new technologies and media into SBC research and programming.***
 - More work should be done to harness the potential of digital platforms, mobile apps, and social media for improved SBC programming as well as monitoring (e.g., surveillance, data collection and management, and information exchange). Building on and integrating into national systems may help achieve this. It will also be important to consider the role of social media, technology, and AI in system structures.



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- The development and uptake of new technologies and newer media channels and platforms has proceeded more quickly than SBC practitioners have been able to respond, resulting in a need to build media and digital literacy skills among both the general population and practitioners.
- There is strong interest in incorporating the use of AI and other newer technologies to advance the field of SBC and enhance the efficiency and effectiveness of programming. However, it will be important to explore the ethical and equitable adoption of new technologies and their application in SBC research and programming, including anticipating and considering unintended consequences, understanding how these technologies can and have affected client engagement and disrupted gender and power dynamics, and how they can enhance SBC efforts while still emphasizing local ownership and upholding data privacy and the responsible use of data. It will also be important to keep in mind the digital divide that will leave certain communities and populations less able to benefit from these innovations, particularly in places where women and girls have less access and therefore ability to use mobile internet to access information.

3. Purpose and Rationale for the Proposed Project

The purpose of the project is to increase the adoption and sustained practice of priority behaviors and the development and maintenance of enabling social norms, including gender norms, for improved health and development outcomes. This purpose will be achieved through the increased implementation of theory-informed, evidence-based, locally-led SBC programming.

The project will build upon USAID investments in SBC research and programming, including both global and bilateral projects, to simultaneously guide new learning and drive broad application of proven practices and tools. It will engage a broad range of health and development stakeholders, supporting them in developing, promoting, and operationalizing SBC approaches and programming that contribute to measurable global health and development impact. While USAID recognizes SBCC as the historical cornerstone of its SBC investments, it encourages applicants to consider the use of structural and environmental interventions and to draw upon fields such as behavioral science, behavioral economics, human-centered design, social capital, social psychology, and emergent and interdisciplinary fields such as artificial intelligence (AI) in designing effective solutions to social and behavioral challenges.

Rationale for the Proposed Project

The practice of priority behaviors (e.g., timely use of primary healthcare services, handwashing with soap, immunizations) and supportive equitable social and gender norms have increased in recent decades but remain below the levels required to achieve countries' health and development goals in all areas, including FP/RH, MNCH, nutrition, infectious diseases - including malaria, TB, and emerging infectious diseases-, and HIV/AIDS.

Multiple evaluations of SBC activities in a variety of settings have helped implementers understand programmatic determinants of success, including use of formative research; grounding in behavioral theory; clear priority population segmentation and behavioral objectives; continued engagement of



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stakeholders in design, implementation, and monitoring; and use of multiple channels and strategies to influence key determinants of behaviors.

SBC's potential to accelerate and sustain the achievement of USAID's ambitious health and development goals hinges on three critical factors: 1) consistent application of theory-informed, evidence-based SBC programming by local partners; 2) strong monitoring and evaluation of behavioral determinants and outcomes to continue learning and building evidence for effective SBC interventions; and 3) local leadership, policy support, and financial investments to support and sustain SBC programming. USAID seeks creative and technically sound leadership from Applicants in proposing best-odds solutions to these critical factors as well as ongoing priority SBC challenges.

4. Statement of Expected Results

The project will maintain a clear focus on achieving measurable change in priority health and development behaviors. The project is expected to contribute to shifts in priority behaviors; these behaviors should have a positive impact on health outcomes and enabling social and gender norms. Illustrative examples include:

- delay of first birth to age 18 through delay of marriage and/or use of modern contraceptive methods among sexually active adolescent girls and boys;
- use of modern contraceptive methods by women and men of reproductive age;
- After a live birth, women use a modern contraceptive method to avoid pregnancy for at least 24 months (resulting in approximately three years between births)
- HIV testing among high-risk, hard-to-reach priority populations and initiation of and adherence to antiretroviral treatment if positive or uptake of biomedical prevention methods (such as VMMC and PrEP);
- consistent condom use and reduction of multiple sexual partners by sexually active youth, men and women;
- correct and consistent use of insecticide-treated nets by children under five and pregnant women;
- adherence to malaria case management guidelines for diagnosis and treatment by providers;
- pregnant women complete three or more doses of intermittent preventive treatment during pregnancy (IPTp) for malaria;
- attendance at four antenatal care visits and delivery at a facility by pregnant women;
- breastfeeding within one hour after delivery and exclusively for six months after birth;
- adequate and appropriate complementary feeding for children six months to two years;
- complete a full course of timely vaccinations for infants and children under 2 years;
- prompt and appropriate care for signs and symptoms of acute respiratory infection (ARI) by caregivers;
- provision of appropriate treatment for children with diarrhea at onset of symptoms by caregivers; and
- respectful and quality provision of care by health workers to clients.

In addition to these, the project may be expected to define and contribute to a range of WASH and climate-friendly "health" behaviors, including but not limited to those that encourage handwashing



with soap, safe drinking water, safe disposal of waste, reducing food waste, and purchasing green energy for household use, amongst others.

Figure 1 – Expected Results

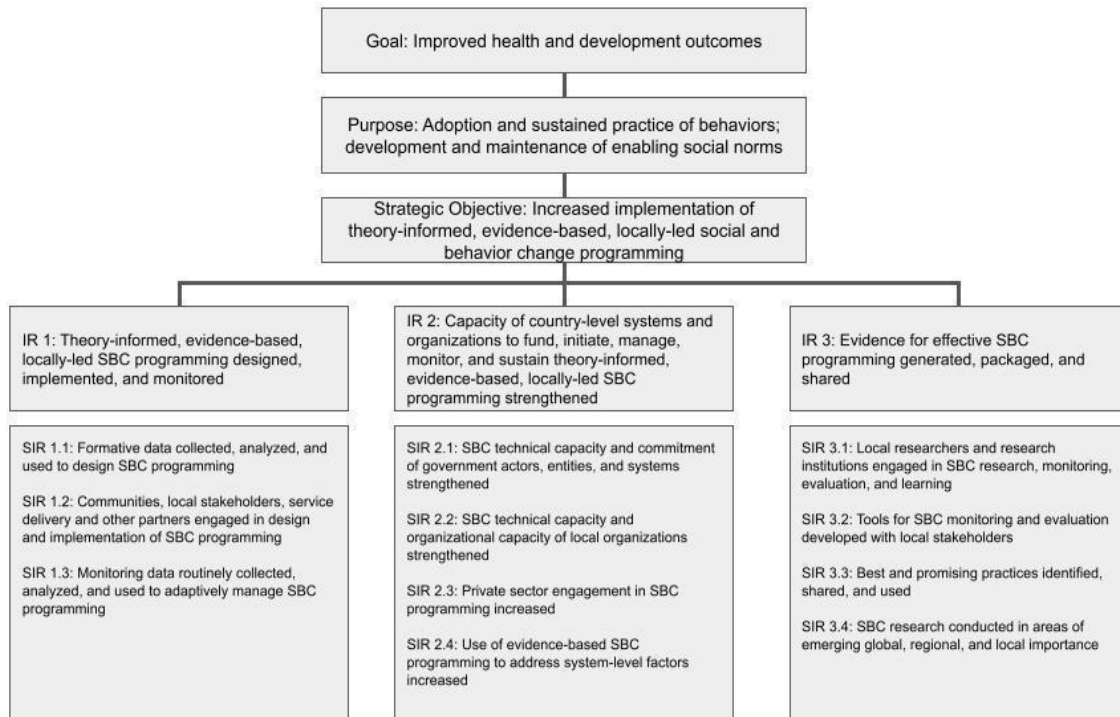


Figure 1 depicts the Results Framework for the GH SBC Activity. For a description of the three Intermediate Results (IR) and the Sub-Intermediate Results (SIR) expected for each IR, please refer to Section B.2.

5. Management and Staffing Plan

The GH SBC Activity will have expertise in, or access to, specialists in the range of SBC technical areas outlined in the RFA, specifically Section A – Program Description. Applicants are requested to propose a staffing and management plan that demonstrates a balance of skills that will support the achievement of the project’s objectives and results. The staffing pattern should reflect the minimum number of highly experienced staff sufficient to conduct activities anticipated under this award. Successful applicants will have in-depth knowledge of and experience in key cross cutting areas of focus that will heavily inform project positioning, design, implementation, and MEL, such as gender integration and youth engagement. This core capability must be supplemented by a feasible and realistic plan to identify local organizations and expertise to support in-country SBC programming in multiple countries simultaneously, as well as SBC experts with global and/or regional experience (multi-country experience) who may be mobilized quickly to address Mission buy-ins and/or unforeseen health emergencies. Applicants will propose the optimal mix of technical and management personnel considered necessary for global leadership and country support and specifically detail the



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mechanism and cost effective approaches through which relevant professional expertise will be provided as required. The staffing level and pattern may be modified over time if needed to provide effective support to country programs as they evolve.

All key personnel must demonstrate strong project and personnel management skills; innovation and flexibility in technical practice and/or management; the ability to network and collaborate effectively with a wide range of stakeholders; and strong communication skills. Diversity of institutional, technical, management, and geographic experience across key personnel and other senior project staff is strongly desired by USAID. Accordingly, if the prime proposes to include partner organizations in its application, partners' staff should be assigned roles and positions that match the prime applicant's vision of the partners' intended contributions to the achievement of the project's purpose. Individually and collectively, proposed key personnel must show evidence of strong skills for building collaborative relationships with donors, host-country governments, and local and international health and development implementers.

Five (5) positions will be designated as key personnel³ for the success of this project, inclusive of the Project Director and the Management and Operations Director. USAID requires that all key personnel function at 100 percent level of effort (defined as 40 hours/week). The Applicant is encouraged to propose three (3) additional key personnel, for a total of five (5), and an overall staffing structure that includes the necessary experience and expertise that will support cost-efficient achievement of the project's ambitious results. Reference Sections B and D as it pertains to Key Personnel.

END OF SECTION

³ The Applicant may designate as key personnel only those positions that are essential to the successful implementation of the program.



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SECTION B: FEDERAL AWARD INFORMATION

1. Estimate of Funds Available and Number of Awards Contemplated

USAID intends to award one (1) Cooperative Agreement pursuant to this notice of funding opportunity. Subject to funding availability and at the discretion of the Agency, USAID intends to provide an award ceiling up to \$321.5 million in total USAID funding over a five (5) year period. The total funding amount will be inclusive of both core and mission field support. All funding will be provided on an incremental basis subject to the availability of funds and successful performance. USAID reserves the right to adjust funding levels, the funding amounts, cycle of funding, sources of funding, and/or terms of the agreement as a result of availability of funding, U.S. Government requirements or recipient performance. Note that not all funding is interchangeable and some budget adjustments may need to take place. Should such changes occur, the recipient will be notified appropriately. As the intent of the project is to stimulate and support the awardees' existing activities, a 10 percent cost share is required for this award (see Section C.2).

The GH SBC Activity is anticipated to be funded primarily by the Global Health Programs account, and the project will be authorized to accept funds from Missions, Regional Offices, Regional Bureaus, or USAID functional bureaus outside Global Health. Other eligible funding accounts include Development Assistance Economic Support Funds.

USAID provides funding for development work through two sources of funding: core funding provided from USAID/Washington (USAID/W) Offices and field support provided from USAID field Missions. USAID field Missions use Mission-based funding sources to “buy-in” to centrally-based projects to implement country-level activities. Activities funded by field support are expected to support and be aligned with that country’s development priorities as part of the USAID Mission portfolio of work. Field support funding provides Missions with the opportunity to access state-of-the-art services and take advantage of technical leadership and oversight that centrally-managed USAID/W programs offer. USAID/W projects also serve as a mechanism to respond to urgent and rapidly evolving public health and development needs. USAID Mission staff and the AOR will be involved with the development of Program Description and corresponding work plans in response to field support.

Under the GH SBC Activity, it is estimated that up to \$300 million (93%) will be available from Mission field support buy-ins, and up to \$21.5 million (6%) in core funding, through the five-year project. Please note that a significant portion of the ceiling is anticipated to be funded by field support, which is unpredictable. As such, the ceiling does not equate to the actual total award funding. Mission field support funds will likely support designing and supporting SBC programming, with the project co-creating, implementing, and monitoring SBC programming with local stakeholders. This may include shorter-term programming initiatives and responses. Mission funds will also likely support technical and organizational capacity strengthening of Missions’ bilateral SBC implementing partners as well as multi-year technical capacity strengthening assistance to Ministries of Health for strengthening national health systems. Core funds will likely be used to support global and regional technical learning events; provide multi-site or multi-country program design or implementation;



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conduct research to develop or trial innovative SBC practices and interventions, including those that address gender and other cross-cutting issues; develop or apply specialized capacity strengthening resources; and conduct high-quality knowledge management, in addition to executing high-priority technical leadership activities as needed, specific to cross-cutting issues (e.g., gender, youth) and each contributing health area.

For this award, USAID strongly encourages that approximately 50 percent of the total subaward funding (i.e., all funding not programmed directly by the prime applicant) is allocated to (sub-awarded/sub-contracted) local organizations⁴ in the countries in which the project is working.

Note: As appropriate, feasible, and as requested by bureaus, independent offices or missions, the initial award resulting from this RFA will seek to transition direct USAID or other donor funding to local organizations that were sub-awardees on the initial award.

2. Expected Performance Indicators, Targets, Baseline Data, and Data Collection

The objective of this award is to increase implementation of theory-informed, evidence-based, locally-led social and behavior change programming. The three main areas of work are: 1) design, implementation, and monitoring of SBC programming; 2) increased organizational and SBC technical capacity of country-level systems and organizations; and 3) research, evaluation, and knowledge management and sharing. Indicators, targets, and data collection methods will be finalized during the six-month refinement period in collaboration between the awardee and USAID.

⁴ Per [ADS 303.6](#), local entity means an individual, a corporation, a nonprofit organization, or another body of persons that: (1) is legally organized under the laws of; (2) has as its principal place of business or operations in; and (3) is (A) majority owned by individuals who are citizens or lawful permanent residents of; and (B) managed by a governing body the majority of who are citizens or lawful permanent residents of a country receiving assistance. For purposes of this definition, “majority-owned” and “-managed by” include, without limitation, beneficiary interests and the power, either directly or indirectly, whether exercised or exercisable, to control the election, appointment, or tenure of the organization's managers or a majority of the organization's governing body by any means.



Figure 1 – Expected Results

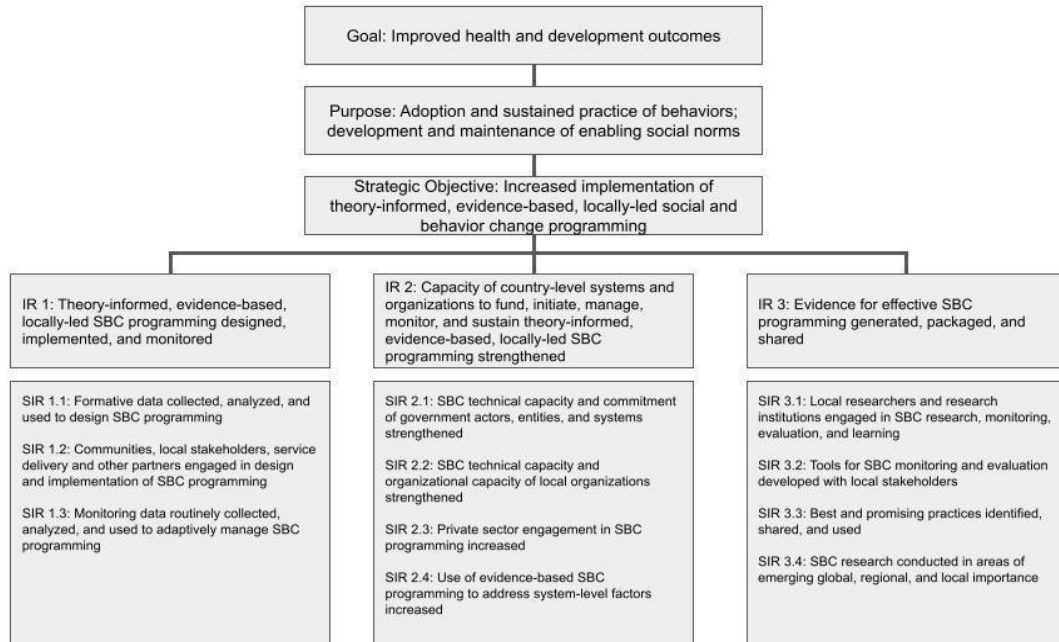


Figure 1 depicts the Results Framework for the GH SBC Activity. For a description of the three Intermediate Results (IR) and the Sub-Intermediate Results (SIR) expected for each IR, please see below:

IR 1: Theory-informed, evidence-based, locally-led SBC programming designed, implemented, and monitored

The project will improve both the quality and coverage of SBC interventions in USAID priority countries through direct implementation of activities and targeted support to a range of local organizations, decision-makers, and implementers. Project activities should identify and demonstrate consistent application of behavioral theories and evidence-based best practices in SBC research, design, implementation, monitoring, and evaluation, as well as innovation that moves the SBC field forward. SBC programming should also be gender-integrated and advance gender equality principles and practices within SBC processes across the project life cycle as well as within project outcomes and impact. Project approaches should demonstrate alignment with USAID’s [localization vision](#) to “place local communities in the lead to either co-design a project, set priorities, drive implementation, or evaluate the impact of programs.” The project should incorporate elements from USAID’s [locally led programs indicator](#) which lays out four categories of good practices in local leadership. Activities under IR1 will emphasize rapid, robust, and programmatically useful formative research, concept- and pre-testing, and monitoring.

The three sub-intermediate results under IR 1 are:

- SIR 1.1: Formative data collected, analyzed, and used to design SBC programming
- SIR 1.2: Communities, local stakeholders, service delivery and other partners engaged in design and implementation of SBC programming



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SIR 1.3: Monitoring data routinely collected, analyzed, and used to adaptively manage SBC programming

SIR 1.1: Formative data collected, analyzed, and used to design SBC programming

The project will collaborate with local stakeholders to use advanced quantitative and qualitative research methods to collect and analyze data on behavioral determinants (including normative and structural factors) and priority populations. The project will then work with partners to use the data to design SBC interventions, with strong attention paid to strengthening equitable gender dynamics that drive healthy behaviors. Such interventions may be comprehensive, multi-year national programs; intensive programming in response to emerging pandemic threats or natural disasters; or narrowly-focused, term-limited efforts to enhance the impact of a pre-existing program. The project’s country-level programming should include a locally-led gender and equity analysis to inform selection of priority behaviors, strategies and interventions. It is expected that the project will routinely employ qualitative and quantitative research and co-design approaches that support development of innovative and effective solutions to needs among primary and secondary audiences, resulting in programs that are context-specific and impactful.

SIR 1.2: Communities, local stakeholders, service delivery and other partners engaged in design and implementation of SBC programming

It is expected that a range of partners, including communities, health system actors, faith leaders, civil society organizations, and host country governments will be engaged throughout the SBC program cycle. These partners should include women-led, youth-led, and gender equality-focused organizations. The project will employ co-creation approaches, defined by USAID as an intentional design approach to address a specific problem, challenge, question, or to gain further insight on a topic of interest through a participatory process whereby participants share power and decision-making. The aim of engagement is not to accomplish a USAID-defined requirement but instead to empower local organizations to drive programming and results. Using participatory approaches, the project will elevate diverse local voices across the program cycle and facilitate joint ownership of USAID investments. The project will also address ways in which gender and power inequalities can limit certain people’s access to, equitable participation in, and benefit from SBC interventions. The project will integrate intentional and active accountability and feedback processes in activity design, implementation, and management, with the result that those processes become a central part to how the activity is implemented and managed.

This project’s SBC interventions will support other USAID-funded activities by generating demand, improving adherence, promoting healthy behaviors, and shifting norms around the practice of key behaviors. Therefore, the project will engage in active collaboration with USAID, other USAID implementing partners, and host country government actors, including those in the fields of service delivery, vector control, and supply chain in order to create synergies, avoid redundant or conflicting efforts, and foster a high level of SBC rigor in all USAID-funded work.

SIR 1.3: Monitoring data routinely collected, analyzed, and used to adaptively manage SBC programming

The project will work closely with USAID Missions and central and bilateral health and development projects to design and apply tools and approaches for rigorous SBC program monitoring to ensure the



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same diligence applied to the design of SBC programs and interventions is employed over the course of implementation. SBC monitoring will include complexity-aware methods as well as quality assurance/continuous quality improvement approaches as a means to assess the effectiveness of SBC interventions on an ongoing basis. Innovative and adapted monitoring tools developed with local stakeholders (see SIR 3.2) will be used to gather real-time data and sex- and age-disaggregated population-level data to facilitate the course-correcting of interventions to strengthen quality assurance of SBC programs as a standard practice. This monitoring will also serve to facilitate the collection of outcome indicators in the absence of a formal SBC evaluation. The project will advance the practice of measuring programmatic success using locally defined measures by 1) engaging local actors and communities who are directly affected by the programming to articulate locally valued programmatic results and by 2) selecting, adapting, and/or co-developing new indicators, including gender-sensitive and locally led monitoring indicators, which measure locally valued programmatic results and incorporating these into the project monitoring, evaluation, and learning (MEL) Plan.

IR 2: Capacity of country-level systems and organizations to fund, initiate, manage, monitor, and sustain theory-informed, evidence-based, locally-led SBC programming strengthened

Systems strengthening for SBC is much more than training and capacity building of government officials or local organizations. Systems strengthening for SBC looks comprehensively at the various system components -- human resources, governance, financing, information systems, infrastructure and technology -- that must be functioning to create and sustain effective SBC programming and to respond quickly in a crisis such as disease outbreaks or in humanitarian/fragile settings. Financial and human resource investments in SBC by host country governments, civil society, and the private sector are critically important. This project will prioritize collaboration with and capacity strengthening of new and existing stakeholders to increase the ability of country-level systems and actors to fund, design, implement, monitor, evaluate, and sustain effective SBC programming in support of key health and development goals. Anticipated outcomes of these efforts include improved SBC responses from country-level systems to priority health and development challenges and increased multi-sectoral SBC coordination capacity and multi-sectoral SBC programming.

USAID's [local capacity strengthening policy](#) defines local capacity strengthening as “a set of approaches that supports local actors to achieve their own mission; take actions to design and implement equitable responses to local challenges; learn and adapt; and innovate and transform over time.” Capacity strengthening activities will support a wide and diverse range of SBC practitioners and organizations using new and existing tools. To the greatest extent possible, the project will facilitate exchange and learning across health areas and development sectors. Successful applicants will be expected to report against [CBLD-9](#).

The four sub-intermediate results under IR 2 are:

SIR 2.1: SBC technical capacity and commitment of government actors, entities, and systems strengthened

SIR 2.2: SBC technical capacity and organizational capacity of local organizations strengthened

SIR 2.3: Private sector engagement in SBC programming increased

SIR 2.4: Use of evidence-based SBC programming to address system-level factors increased



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SIR 2.1: SBC technical capacity and commitment of government actors, entities, and systems strengthened

Though all public health systems deliver SBC programming (provider counseling, immunization campaigns, outreach through health promoters, etc), use of evidence-based and theory-informed SBC programming is not often valued and prioritized for funding in health systems. Financial and human resource investments in SBC by host country governments, civil society, and the private sector are critically important to inspire program innovation and expansion and, ultimately, population-level changes in behaviors and norms. This project will prioritize advocacy and collaboration with new and existing stakeholders, including the private sector, to increase sustained funding for SBC within the public sector at both the national and sub-national levels. The project will integrate opportunities for capacity strengthening in the design, implementation, monitoring, evaluation, and overall management of SBC programming to maximize opportunities for inclusive engagement and applied learning, especially for traditionally marginalized actors. The project will employ innovative and effective approaches to monitor and evaluate its stakeholder engagement activities and to improve local oversight and leadership of SBC programming.

SIR 2.2: SBC technical capacity and organizational capacity of local organizations strengthened

Strengthening SBC capacity of local organizations in designing, implementing, monitoring, evaluating, and overall management of high-quality SBC programming is central to this award. Project approaches will prioritize interventions that increase both technical and organizational capacity of local SBC organizations, including marginalized local organizations. Local organizations include but are not limited to traditional and non-traditional public and private sector SBC partners, community-based organizations (CBO), faith-based organizations (FBO), and civil society organizations (CSO) or networks, including those that are women led, youth led, and/or gender equality focused. Example areas of organizational capacity include governance, financial management, project management, gender integration, human resource management, compliance and reporting, etc. The project will advance capacity strengthening approaches that are grounded in the aspirations, goals, and needs that have been communicated by and mutually agreed upon with local partners (individuals, organizations, and/or networks); this includes the selection of which capacities to strengthen, which methods can be most effective, and what performance improvement targets will be set. The project should also work to identify and acknowledge local capacities and incorporate them as appropriate into global practices.

Examples of capacity strengthening strategies include landscape analysis of gaps in capabilities and core competencies of identified local organizations; co-creation, testing, and scaling of tailored solutions that address identified capacity gaps; and innovative strategies to measure and adaptively manage as well as strengthen gender integration, diversity, equity, and inclusion within organizational structures and programs. USAID's localization vision and approach aims to, under its locally led programs indicator, enable local organizations to exercise leadership over priority setting, activity design, implementation, and measuring results. Many good capacity strengthening resources exist and this project should, whenever possible, utilize and build on best practices and tools rather than developing new ones.

SIR 2.3: Private sector engagement in SBC programming increased

SBC programs and practitioners have developed mutually beneficial partnerships and relationships with multinational and local corporations, private health providers, individual donors, and local



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philanthropists. Such partnerships have leveraged private-sector owned technology, marketing approaches, information systems (such as mass and electronic media), and cost share in the form of airtime or subscriber fees to advance SBC programming objectives. SBC projects have, in turn, enhanced SBC technical and managerial know-how, especially of private local media organizations, while drawing on the specialized skill sets of local design and marketing agencies, among others. In addition to these ongoing efforts primarily in the media and communication sectors, many more opportunities exist to increase private sector engagement in country-led SBC programming by inviting and stimulating greater participation from private companies in the analysis, development, and delivery of SBC initiatives. This project should work to engage the private sector fully in co-financing, designing, and implementing SBC programming that aligns with national priorities and initiatives. Another way that the private sector can better support SBC objectives at a national level is through expanding access to services, products, and information that responds to the expressed needs and aspirations of populations that are underserved, such as adolescents or minority populations. In alignment with USAID's [private-sector engagement policy](#), this project must support strategic and innovative approaches to collaborate with the private sector, including private health providers, facilities, and product manufacturers. One such way that this can be done is through helping to improve access to technology, particularly for women and girls, who oftentimes have less access to technology but can benefit from the knowledge, information, and connections available on these innovative platforms.

SIR 2.4: Use of evidence-based SBC programming to address system-level factors increased

There is growing interest in how to incorporate SBC approaches to advance the accountability, affordability, accessibility, and reliability of high-quality health services. Within the context of strengthening health systems, SBC programming activities shape the demand for accountable, affordable, accessible, and reliable care. SBC programming addresses, and modulates the behavior of, people, communities, and organizations within the health system to promote the equitable provision of respectful quality care. This project will explore and deploy approaches to increase the application of evidence-based SBC programming to address health system factors. This includes integrating new and emerging evidence-based SBC methodologies and approaches into HSS efforts to address the social, normative, and behavioral drivers that 1) affect health system performance, including health system actors; 2) accelerate or impede positive health outcomes; and/or 3) enhance the enabling environment for quality and equitable access to services and products. USAID's [white paper](#) on SBC and HSS offers actionable insights and illustrative examples of SBC and HSS integration approaches.

IR 3: Evidence for effective SBC programming generated, packaged, and shared

This project will employ a range of evidence-generation, learning, and knowledge management approaches to achieve broad socialization and uptake of new and existing SBC evidence, tools, and learning at the global, regional, and country levels.

The four sub-intermediate results under IR 3 are:

- SIR 3.1: Local researchers and research institutions engaged in SBC research, monitoring, evaluation, and learning
- SIR 3.2: Tools for SBC monitoring and evaluation developed with local stakeholders
- SIR 3.3: Best and promising practices identified, shared, and used



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SIR 3.4: SBC research conducted in areas of emerging global, regional, and local importance

SIR 3.1: Local researchers and research institutions engaged in SBC research, monitoring, evaluation, and learning

Increasing support to locally led research and learning agendas is an important step in the process of decolonizing knowledge and the best way to support equitable development solutions that work. USAID aims to support local research partners as they identify their challenges and develop knowledge and capacity to implement workable and sustainable SBC solutions to priority health and development issues. USAID is also committed to a networked approach that connects the academic, policy, and practitioner worlds and ensures learning across regions and health areas. This project should develop creative and sustainable country- and regional-based approaches that promote inclusivity and diversity and address a range of SBC research and learning capacities within institutions and systems. This project should acknowledge that theories and models developed in local contexts have merit and will be investigated and used in addition to prevailing global SBC approaches and theories of change.

SIR 3.2: Tools for SBC monitoring and evaluation developed with local stakeholders

USAID has invested for decades in monitoring and evaluation tools that support SBC practitioners to improve the quality of SBC programming and results. However, local stakeholders and funders still see a major need for increased measurement of SBC program outcomes and effectiveness (including cost-effectiveness), not just program outputs. This project has an opportunity to both innovate and build on existing tools to incorporate new technologies, such as remote digital data collection, and adapt them to make large-scale application of high-quality monitoring and evaluation processes easier and less costly. Innovative tools to gather real-time data -- behavioral and normative, on outcomes and effectiveness-- and facilitate the course-correcting of interventions will be designed, implemented, tested, and disseminated. Development of these tools should incorporate training for gender- and age-sensitive data collection, analysis, quality, and use. Another major need is for tools that support rapid adaptation, replication, and scale up of proven and/or promising interventions. Adaptation of tools and processes are best done using participatory processes within the context in which they will be applied to ensure they meet the specific needs of all involved, including marginalized groups and local policy and financial decision-makers.

SIR 3.3: Best and promising practices identified, shared, and used

The science of SBC is evolving so rapidly that organizations seeking to apply SBC in real world settings are challenged to keep up. In addition to sharing lessons and evidence emerging from SBC activities supported within this project, the GH SBC Activity, serving in a global leadership role, must develop effective strategies to mine, synthesize, and package best and promising practices from the global evidence base across diverse projects, programming sectors, and geographies to inspire innovation and rapid adaptation and to facilitate scale up of the latest SBC evidence and of existing programmatic tools in new contexts. Resources to be identified and shared should include evidence, lessons, programmatic tools, databases, etc. Local and regional stakeholders are among the primary intended audiences/users of this information; the project should explore meaningful ways to engage a diverse set of stakeholders at these levels to identify knowledge management needs as well as already-known best and promising practices.



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SIR 3.4: SBC research conducted in areas of emerging global, regional, and local importance

The ability to rapidly co-design, conduct, and oversee research to inform innovative and cost-effective SBC solutions and to evaluate project programming is critical to the achievement of the project's key results. The range of research areas potentially needed is large: examples include research on behavioral determinants leading to the reduction of disease transmission; the most cost-effective strategies for identifying and sustaining gender-equitable norms that underpin multiple behaviors; research on best actions to address structural and systems factors that support sustainable development; generative costing and cost-effectiveness data and other evidence of impact; and testing and applying newer approaches. Performance and impact evaluations, including evaluations of the project's activities, are considered part of this research, and evaluations of SBC program outcomes and effectiveness (including costing and cost-effectiveness) should be planned and measured collaboratively with local stakeholders starting early in the design and implementation phases of the project activities. As mentioned earlier, SBC research areas of global and regional importance are more likely to be funded by GH Bureau Offices. The Offices' very limited core funding is determined annually. Local, country-based research areas of importance will likely be funded within multi-year Field Support-funded programs (buy-ins), as determined by Missions and based on availability of funds.

3. Start Date and Period of Performance for Federal Awards

The anticipated period of performance is five (5) years. The estimated start date will be on or about September 16, 2024, with an estimated end date of September 15, 2029 (subject to change).

4. Substantial Involvement

USAID considers collaboration with the Recipient crucial for the successful implementation of this project. Substantial involvement is deemed necessary and, therefore, is anticipated between USAID and the Recipient during the performance of this activity.

The first six months of implementation following the award are intended as a refinement period, particularly for the activities funded by USAID/Washington (core funds). The Recipient and USAID will work closely during this period to further refine and adapt the activity design and ground truth programming approaches to improve the impact and sustainability of results. During this period, the Recipient will work in close collaboration with the AOR and USAID Technical Advisors to develop and finalize the AMELP, Work Plan, and any necessary strategic guidance documents.

USAID's substantial involvement during the implementation of the program will be limited to approval by the Agreement Officer's Representative (AOR) – delegated to the AOR by the Agreement Officer (AO) -- of the elements listed below, except for any changes to the program description, key personnel, or the approved budgets that require AO approval:

1. Approval of the Recipient's Implementation Plans: Implementation plans include, but are not limited to, annual work plans, including planned activities for the following year and any subsequent revisions, international travel plans, planned expenditures,



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international meeting preparation, and research studies/protocols, and any changes to any activities, locations, and beneficiary population under the cooperative agreement.

USAID requires the approval of implementation plans annually to ensure alignment with stated goals, milestones, and outputs. The implementation plan communicates how and when the Recipient will complete award activities and is drafted annually to describe new and ongoing activities. This plan will be developed in partnership between the Recipient and the AOR team, inclusive of Mission Activity Managers for field support-funded work plans.

The AOR will ensure that the implementation plans fit within the program description and the terms and conditions of the agreement.

2. Approval of Specified Key Personnel: the Key Personnel for the GH SBC Activity will include the following positions:

- a. Project Director
- b. Management and Operations Director
- c. Three (3) additional Key Personnel positions that the Recipient proposed and USAID accepts

Key personnel positions will require concurrence from the AOR and approval from the AO.

3. Agency and Recipient Collaboration or Joint Participation:

a. *Approval of the recipient's Monitoring and Evaluation plans.* This describes USAID involvement in monitoring progress toward the achievement of program objectives during the performance of the award, including written guidelines for the content of annual reports and final evaluations in accordance with 2 CFR 200.328 and guidance conforming with PEPFAR reporting requirements at country level, if necessary. While an illustrative Activity Monitoring, Evaluation, and Learning (MEL) Plan may be requested in the full application submission, the final Activity MEL Plan will be developed in consultation with USAID post-award during the first six months of implementation (the refinement period). During the refinement period, the awardee shall work closely with USAID to establish major milestones, program monitoring indicators, and baseline data and performance targets that will demonstrate successful achievement of the results addressed in the cooperative agreement. The Activity MEL plan shall be finalized within 90 calendar days of the award. The awardee and USAID will jointly review progress on a periodic basis.

b. *Collaborative involvement in selection of advisory committee members, if the program will establish an advisory committee that provides advice to the recipient.* USAID will participate as a member of this committee as well. Advisory committees must only deal with programmatic or technical issues and not routine administrative matters.



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c. *Monitor to authorize specified kinds of direction or redirection because of interrelationships with other projects.* Activities will be included in the program description, negotiated in the budget, and made a part of the award. Note: the AOR will provide review of the proposed change, and the AO is the only individual who can provide approval for this element of substantial involvement.

d. *Concurrence on the substantive provisions of sub-awards.* 2 CFR 200.308 (or Mandatory Provision 3. Amendment of Award and Revision of Budget (August 2013) for non-US NGOs) requires the recipient to obtain the AO's prior approval for the sub-award, transfer, or contracting out of any work under an award. Some of the subaward approval responsibilities may be delegated to the AOR. Please note that any contracts to any organization (not including those for supplies, material, equipment or general support services per 2 CFR 200.308(c)(6)), and sub-awards (sub-agreements or contracts) to foreign governmental organizations or parastatals of any amount, must be approved by the AO, and may warrant additional clearances.

4. **Agency Authority to Halt a Construction Activity.** The AO may immediately halt a construction activity if identified specifications are not met. However, construction activities are not anticipated under this cooperative agreement.

5. **Agency and Recipient Collaboration on Transition Award(s).** As appropriate, feasible, and as requested by bureaus, independent offices or missions, the initial award resulting from this RFA will seek to transition direct USAID or other donor funding to local organizations that were sub-awardees on the initial award. While it is USAID's intent to make transition awards to qualified local subrecipients as explained in Section A, there is no guarantee that the Agency will make a transition award. Decisions related to issuing a transition award and the selection of transition award recipients are solely within USAID's discretion.

As explained in [ADS Reference 303mbb](#), "transition awards can be an effective means for USAID to increase local engagement, promote self-reliance, foster, and strengthen local sustainability, and enhance the quality of the Agency's relationship with local partners." A transition award is an assistance award to a local entity or locally established partner (collectively referred to as local subrecipients) that is or has been a subrecipient under a USAID assistance award. A transition award can only be made when the following conditions have been met:

- a. The recipient of the transition award is a local subrecipient that has not previously received a direct award from USAID;
- b. The initial award required the recipient to develop the capacity of the local subrecipient(s) to become more capable of receiving a direct award from USAID or other donors; and
- c. The initial award recipient recommended the local subrecipient for a potential transition award based on explicit criteria contained in the initial award."



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The terms “transition award,” “local entity,” and “locally established partner” are defined in [ADS 303.6 – DEFINITIONS](#).

If a bureau, independent office or mission indicates an intent to make a transition award as part of its buy-in to this initial award, the Recipient must provide local subrecipients a subaward to carry out a distinct portion of the work in the award’s program description. (For example, in a field support-funded scope of work under this award, the Recipient may make an award to the local subrecipient to design and carry out a community-based component of the SBC programming with the expectation that the subrecipient will receive a transition award to continue and/or expand the work in future years.) Like all recipient and subrecipient relationships, the recipient is required to monitor the local subrecipient and is ultimately responsible for the local subrecipient’s work (see [2 CFR 200.331](#)). The award must also include appropriate mechanisms to avoid, eliminate, mitigate and reduce potential or actual conflict of interests, separate funds and accounts, and additional award oversight to ensure proper segregation of roles and funds resulting from an entity being a subrecipient and a beneficiary under the same award. After the recipient identifies the local subrecipient(s) to USAID as having met the initial award capacity development criteria, the Agreement Officer (AO) of the bureau, independent office, or mission, in consultation with the initial award’s Agreement Officer’s Representative (AOR), may make the transition award consistent with the requirements in Section 5 of [ADS Reference 303mbb](#).

Prior to recommending a local subrecipient to USAID, the Recipient must demonstrate that the local subrecipient has met the following criteria:

- Has the necessary staff with the technical knowledge, skills, and experience to carry out SBC activities;
- Has demonstrated an ability to maintain relationships with stakeholders;
- Has proficiency of financial management systems and internal controls;
- Has demonstrated management experience;
- Has the ability to use relevant IT systems or software needed to accomplish the SBC activity which is the basis of the transition award;
- Has the ability to monitor its own program performance in a cost-effective and efficient manner;
- Is registered in all applicable USG systems (for example, System for Award Management);
- Can meet any other pre-award requirements, including the risk assessment, as defined by the Agreement Officer.

The Recipient is responsible for developing the local subrecipient’s capacity and tracking progress towards meeting the criteria for a transition award. To assist in this effort, the Recipient will conduct a baseline capacity assessment at the time any subaward is made to a potential transition award recipient, with a follow-up assessment prior to recommending the local subrecipient for a transition award. The content of the baseline capacity assessment will include the areas that the Recipient anticipates being needed by the subrecipient as well as



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areas of capacity that the subrecipient itself identifies as necessary for its further development. This ‘stocktaking’ will be considered as contributing to the Recipient’s inclusion of ‘local voice’ in its program, which is an Agency metric for localization. Finally, USAID strongly encourages the Recipient to consider local organizations and institutions for subawards (see localization section under “Cross-Cutting Priorities” in Section A.2) independently of any determination that they meet the criteria for a transition award in the future. For example, the Recipient may select a local organization that has worked with USAID in the past as a sub-awardee, even though this organization would not be eligible for a transition award, as well as invite them to participate in capacity strengthening activities. The option to use transition awards is just one strategy for promoting localization.

5. Authorized Geographic Code

The geographic code for the procurement of commodities and services under this program is 937 (“any area or country including the recipient country, but excluding any country that is a prohibited source,” per ADS 310.3.1.1). The technical and geographic areas included in this RFA are referenced in Annex B of the RFA (USAID Priority Countries).

6. Nature of the Relationship between USAID and the Recipient

The principal purpose of the relationship with the Recipient and under the subject program is to transfer funds to accomplish a public purpose of support or stimulation of the GH SBC Activity which is authorized by Federal statute. The successful Recipient will be responsible for ensuring the achievement of the program objectives and the efficient and effective administration of the award through the application of sound management practices. The Recipient will assume responsibility for administering Federal funds in a manner consistent with underlying agreements, program objectives, and the terms and conditions of the Federal award.

END OF SECTION



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SECTION C: ELIGIBILITY INFORMATION

1. Eligible Applicants

U.S. and non-U.S. public, private, for-profit, and nonprofit organizations, as well as institutions of higher education, public international organizations, and non-governmental organizations, are eligible to submit applications for this RFA. Further, the organization must be a legally recognized, organizational entity under applicable law, not otherwise restricted by statute, regulation, Agency policy, or administrative determination (i.e., suspension and debarment) from receiving assistance, and legally registered in a country that is not a prohibited source per ADS 310.

Additionally, eligible applicants must have the:

- Ability to work in more than one country (multiple countries) simultaneously.
- Demonstrated capacity in support of implementation of SBC activities across a range of health and related areas in LMICs (this capacity can be achieved across the prime applicant and proposed partner organizations).
- Demonstrated managerial, technical, and institutional capacities to achieve the results outlined in this RFA, including financial systems.
- Documented capacity to collaborate with, and convene, a range of stakeholders to achieve the results outlined in this RFA.
- Demonstrated ability to collaborate with host-country governments, NGOs and other donors to undertake SBC programming and advance policy and advocacy in the substantive areas outlined in this RFA.
- Established financial management, monitoring and evaluation processes, internal control systems, and policies and procedures that comply with established U.S. Government standards, laws, and regulations.

Each recipient must be a responsible entity. The AO may determine a Pre-Award survey is required and if so, would establish a formal survey team to conduct an examination that will determine whether the prospective recipient has the necessary organizational, experience, accounting and operational controls, and technical skills – or ability to obtain them – in order to achieve the objectives of the program.

While for-profit firms may participate, pursuant to 2 CFR 200.400(g) it is USAID's policy not to award profit to prime recipients and subrecipients under assistance instruments. However, while profit is not allowed for sub-awards, the prohibition does not apply when the recipient acquires goods and services in accordance with 2 CFR 200.317 -327, "Procurement Standards." This is discussed more specifically in ADS 303sai "Profit Under USAID Assistance Instruments."

Program income will not be generated under this award.



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The application must include only one prime applicant – which can be a single organization, or a formal consortium -- and may enter into sub-agreements or contracts under assistance with partnering institutions. In this case, the prime applicant will be responsible for establishing and maintaining sub-agreement and/or contracting relationships with proposed partners.

Consortiums should be of manageable size with relationships and responsibilities clearly defined. Formal consortiums should submit official consortium documentation as described in Section D.

Eligible organizations may submit only one (1) application in response to this RFA as the Prime Applicant. The proposed persons for the Key Personnel positions may be included on more than one (1) application.

Applications from organizations that do not meet the above eligibility criteria will not be reviewed and evaluated. Individuals are not eligible to apply to this RFA.

2. Cost Sharing or Matching

USAID has established a mandatory minimum recipient cost share not less than ten (10) percent of the proposed budget (in award implementation, it will be 10 percent of the total obligated amount of federal funds). An application will be determined noncompliant and will not be evaluated if it does not comply with this required percentage of cost share.

Such funds may be provided directly by the recipient; other multilateral, bilateral, and foundation donors; host governments; and local organizations, communities and private businesses that contribute financially and in-kind to implementation of activities at the country level. This may include contribution of staff level of effort, office space or other facilities or equipment which may be used for the program, provided by the recipient. For guidance on cost sharing in grants and cooperative agreements see 2 CFR 200.306.

Note that while the RFA may express cost share as a percentage of the projected award, the award budget must express it as a dollar amount.

END OF SECTION



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SECTION D: APPLICATION AND SUBMISSION INFORMATION

1. Agency Point of Contact

LaVietra Shannon
Agreement Specialist
oaa-sbc@usaid.gov
500 D Street, SW,
Washington, DC 20547

2. Questions and Answers

Questions regarding this RFA must be submitted by email to LaVietra Shannon at oaa-sbc@usaid.gov no later than the due date and time indicated on the cover letter, as amended. There will only be one round of questions and answers throughout the full application process. Therefore, applicants should submit all questions prior to the deadline listed in the cover letter; a Question & Responses document will then be shared with all prime applicants as quickly as possible.

Any information given to a prospective applicant concerning this RFA will be furnished promptly to all other prospective applicants as an amendment to this RFA, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicant.

Applicants are expected to review, understand, and comply with all aspects of this RFA. Failure to do so will be at the applicant's risk.

3. General Content and Form of Application

Applications in response to this RFA must respond directly to the terms, conditions, specifications, and provisions of this request for applications. Applications not conforming to this request for applications may be categorized as non-responsive, thereby eliminating them from further consideration.

All applications received by the submission deadline will be reviewed for responsiveness to the RFA and the application format in this request. Section E: Application Review Information addresses the technical review procedures for the applications. No additions or modifications will be accepted after the submission date. Applications that are submitted late or are incomplete may not be considered for award. Additional information in the application not requested by the request for applications may be removed and may adversely affect an applicant's evaluation/review.

Each applicant must furnish the information required by this RFA. Applications must be submitted in two separate parts: (a) Technical Application and (b) Cost Application. This subsection addresses general content requirements applying to the full application. Please see subsections 5 and 6, below, for information on the content specific to the Technical and Cost applications. The Technical application must address technical aspects only while the Cost Application must present the costs, and address risk and other related issues.



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All information (including both the technical and cost applications) must be submitted in English. If the application is in any other language, it will be treated as non-responsive and eliminated from further consideration.

Both the Technical and Cost Applications must include a cover page containing the following information:

- Name of the organization(s) submitting the application;
- Identification and signature of the primary contact person (by name, title, organization, mailing address, telephone number and email address) and the identification of the alternate contact person (by name, title, organization, mailing address, telephone number and email address);
- Program name (GH Social and Behavior Change Activity);
- Request for Applications number; and
- Name of any proposed sub-recipients or partnerships (identify if any of the organizations are local organizations, per USAID's definition of 'local entity' under ADS 303.

The applicant must sign the application and certifications and print or type its name on the cover page of the technical and cost applications.

The initials of the person signing the application must be added to any erasures or other changes to the application. Applications signed by an agent on behalf of the applicant must be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the issuing office.

Applicants may choose to submit a cover letter in addition to the cover pages, but it will serve only as a transmittal letter to the Agreement Officer. The cover letter will not be reviewed as part of the merit review criteria.

Content and format instructions must be followed as instructed below or applicants are at risk of being considered non-compliant and eliminated from the review process. The following requirements apply to documents submitted for this RFA, with the exception of Government-issued forms:

- USAID will not review any pages in excess of the page limits noted in the subsequent sections. Please ensure that applications comply with the page limitations;
- Written in English;
- Uses standard 8 ½" x 11", single sided, single-spaced, 12 point Times New Roman font, 1" margins, left justification and headers and/or footers on each page including consecutive page numbers, date of submission, and applicant's name;
- Uses a minimum of 10 point font for graphs and charts; however, tables must comply with the 12 point Times New Roman font requirement;
- Submitted via Word 2010 or later or PDF formats, except budget files which must be submitted in Microsoft Excel 2010 or later;



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- Budget amounts must be detailed in U.S. Dollars (USD);
- Uses the estimated start date identified in Section B of this RFA;
- Uses a searchable and editable Word or PDF format, as appropriate, for the technical application;
- Additionally, the cost application must include an Excel spreadsheet with all cells unlocked and no hidden formulas or sheets. A PDF version of the Excel spreadsheet may be submitted in addition to the Excel version at the applicant's discretion. However, the official cost application submission is the unlocked Excel version.

Applicants are expected to review, understand, and comply with all aspects of this RFA. Failure to do so may be considered as being non-responsive and may be evaluated accordingly. Applicants should retain a copy of the application and all enclosures for their records.

4. Application Submission Procedures

Applications received in response to this request for applications must be submitted no later than the closing date and time indicated on the cover letter, as amended. Late applications may not be considered for award at the discretion of the Agreement Officer. Applicants must retain proof of timely delivery in the form of system generated documentation of delivery receipt date and time/confirmation from the receiving office.

In compliance with 5 CFR 1320, the Paperwork Reduction Act, applications (technical and cost) need to be submitted in electronic format only. Applications must be submitted electronically to LaVietra Shannon at oa-sbc@usaid.gov no later than the due date and time provided on the cover letter, as amended. A complete application includes (a) one complete technical application and (b) one complete cost application.

Email submissions must include the RFA number and applicant's name in the subject line heading. In addition, for an application sent by multiple emails, the subject line must also indicate whether the email relates to the technical or cost application, and the desired sequence of the emails and their attachments (e.g., "No. 1 of 4", etc.). For example, if your cost application is being sent in two emails, the first email should have a subject line that states: "[RFA number], [organization name], Cost Application, Part 1 of 2".

USAID's preference is that the technical application and the cost application each be submitted as consolidated email attachments, i.e., that you consolidate the various parts of a technical application into a single document before sending it. If this is not possible, please provide instructions on how to collate the attachments. USAID will not be responsible for errors in compiling electronic applications if no instructions are provided or are unclear.

After submitting an application electronically, applicants should immediately check their own email to confirm that the attachments were indeed sent. If an applicant discovers an error in transmission, please send the material again and note in the subject line of the email that it is a "corrected" submission. Do not send the same email more than once unless there has been a change, and if so, please note that it is a "corrected" email.



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Applicants are reminded that email is NOT instantaneous, and in some cases delays of several hours occur from transmission to receipt. Therefore, applicants are requested to send the application in sufficient time ahead of the deadline. For this RFA, the initial point of entry to the government infrastructure is the USAID mail server.

There may be a problem with the receipt of *.zip files due to anti-virus software. Therefore, applicants are discouraged from sending files in this format as USAID/M/OAA cannot guarantee their acceptance by the internet server. File size must not exceed 25MBs.

All applications received by the submission deadline will be reviewed for responsiveness to the RFA and the application format. Section E: Application Review Information addresses the technical review procedures for the applications. No additions or modifications will be accepted after the submission date. Applications that are submitted late or are incomplete may not be considered for award. Additional information in the application not requested by the RFA may be removed and may adversely affect an applicant's evaluation/review.

Applicants must set forth full, accurate, and complete information as required by this RFA. The penalty for making false statements to the U.S. Government is prescribed in 18 U.S.C. 1001.

Issuance of this RFA does not constitute an award commitment on the part of USAID, nor does it commit USAID to pay for any costs incurred in the preparation or submission of an application.

The application must include only one prime applicant – which can be a single organization, or a formal consortium -- and may enter into sub-agreements or contracts under assistance with partnering institutions. In this case, the prime applicant will be responsible for establishing and maintaining sub-agreement and/or contracting relationships with proposed partners. For the purposes of this RFA, the term “applicant” is used to refer to the prime.

Consortiums should be of manageable size with relationships and responsibilities clearly defined. Formal consortiums should submit official consortium documentation as described later in this Section.

For the purposes of the technical and cost applications for this RFA, partners should be grouped into three categories:

1. **“Core partners,”** which have an intended or proposed role across multiple buy-ins, whether core- or USAID Mission- funded. Core partners are those funded at 15% or more of the total project budget, which should be reflected in the cost narrative and budget. Past performance forms and signed letters of intent to collaborate are required for partners in this category.
2. **“Resource partners,”** which have an intended or proposed role across multiple buy-ins, whether core- or USAID Mission-funded, who will be funded at a level less than 15% of the total project budget. Signed letters of intent to collaborate are required for partners in this category. Past performance forms are not required - and will not be accepted - for partners in this category.



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3. **“Local partners,”** likely regional- and/or country-level organizations, which may have a role in one specific Mission-funded buy-in but are not anticipated to have a substantial role across multiple countries or core-funded work and as such do not have a proposed budget in the application. Signed letters of intent to collaborate and past performance forms are NOT required - and will not be accepted - for partners in this category.

For all core and resource partners that have a proposed budget, the prime applicant needs to provide a budget tab and narrative for each of these organizations in the cost application. All named partners with budgets in the cost application will be considered sub-awardees, and may be approved at time of award if they meet all pre-award requirements AND have a budget tab and narrative included in the cost application.

5. Technical Application Format

The technical application should be specific, concise, complete and realistic, taking into account the requirements of the project as detailed in Section A: Program Description and the merit review criteria found Section E: Application Review Information of this RFA. The technical application must only respond to what is requested in this RFA, articulating the applicant’s ability and expertise to achieve project objectives/IRs in a manner that is specific, complete, concise, and realistic.

The technical application must be in English and all applicants must follow the guidelines for submission. **The technical application must not exceed 26 pages, not including the cover page, table of contents, acronym list, executive summary, and annexes (including figures and tables within the annexes). Any figures and tables within the technical application itself (not the annexes) must fit within the 26-page limit. USAID will not review any pages in excess of the page limits noted in the application or the annexes. Please ensure that applications comply with the page limitations (both by sections and overall). Further, unnecessarily elaborate brochures or other presentations beyond those sufficient to present a complete and effective application in response to this request for full applications, are not desired and may be construed as an indication of the applicant's lack of cost consciousness. Elaborate artwork, expensive paper and bindings, and expensive visual and other presentation aids are neither necessary nor wanted. No additional annexes other than those stated under “Technical Application Annexes” will be accepted.**

A USAID Selection Committee will evaluate the Technical Applications against the merit review criteria in Section E. The format of the Technical Application must follow the outline and order of the technical merit review criteria according to the guidelines provided in Section E, and specified below:

Technical Application

- a) Cover Page
- b) Table of Contents
- c) Acronym List
- d) Executive Summary



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- e) Technical Approach
 - e.1) Overall Technical Understanding and Approach to Address Intermediate Results 1-3 and Sub-IRs
 - e.2) Local Capacity Strengthening and Collaboration Approach
 - e.3) Activity Monitoring, Evaluation, and Learning Plan (AMELP) and Approach
- f) Organizational Capacity and Management
 - f.1) Management Plan
 - f.2) Consortium-wide Coordination and Collaboration Approach
 - f.3) Institutional and Consortium Capability and Past Performance
- g) Key Personnel and Staffing
 - g.1) Key Personnel
 - g.2) Staffing Narrative and Roster
- h) **Required Annexes**
 - Annex 1: Draft first six months work plan
 - Annex 2: Illustrative Activity Monitoring, Evaluation, and Learning Plan (AMELP)
 - Annex 3: Organogram
 - Annex 4: Signed Letters of Intent to Collaborate from each proposed core partner and resource partner
 - Annex 5: List of Proposed Resource Partners with a summary description of the intended role for each across multiple activities or countries
 - Annex 6: List of past relevant awards/projects for the prime
 - Annex 7: Past Performance References: three Past Performance Short Forms each for the prime and for each proposed core partner
 - Annex 8: Job descriptions for each of the Key Personnel
 - Annex 9: Signed Letters of Intent from proposed Key Personnel
 - Annex 10: CVs/Resumes of Key Personnel and References
 - Annex 11: Staffing Roster

a. Cover Page (1 page, not included in the 26-page limit)

See Section D.3 above for requirements

b. Table of Contents (not included in the 26-page limit)

Include major sections and page numbering to easily cross-reference and identify merit review criteria.

c. Acronym List (not included in the 26-page limit)

d. Executive Summary (1 page, not included in the 26-page limit)

The Executive Summary must offer a succinct 1-page summary of the application as a whole and should contain the information that the applicant believes best represents its proposed program, which may include an overview of the proposed technical approach, expertise and experience of the prime applicant and its proposed core partners, project management approach, and technical and managerial resources to achieve the proposed project.



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e. Technical Approach

This section must reflect the Applicant's understanding and expertise with respect to the program description and achieving the purpose, strategic objective, and intermediate results outlined in Section A of this RFA, as well as the ability to synthesize and apply the lessons learned from the Applicant's other program experiences. The technical section must be specific, complete, concise, and realistic. Applicants must address all three IRs and their corresponding sub-IRs. In addition to providing an explanation of how the applicant will realize the RFA's intermediate results and sub-IRs and support the strategic priorities of the project, the applicant must explicitly discuss its approach to the program's technical considerations. The proposed methodology must incorporate innovative and new ways of thinking but also build upon best practices and lessons learned/developed by the applicant, other organizations, or USAID under similar programs. The applicant must articulate the proposed approach(es) to ensure local ownership, sustainability, and institutionalization, as appropriate. Merit review details for each Criterion and Sub-Criterion appear in Section E.

e.1 Overall Technical Understanding and Approach to Address Intermediate Results 1-3 and Sub-IRs

The purpose of the GH SBC Activity is the adoption and sustained practice of behaviors and the development and maintenance of enabling social norms to improve health and development outcomes. The GH SBC Activity will use SBC approaches to design, implement, and monitor SBC programming; to strengthen the organizational and SBC technical capacities of country-level systems and organizations; and generate, package, and share evidence for effective SBC programming. To be successful, the activities funded under this project must capitalize on previous investments and focus sharply on building capacity and sustainability into every aspect of the project. Applicants should be mindful of and identify how their approach and partnerships adhere to the principles of [locally-led development](#).

e.2 Local Capacity Strengthening and Collaboration Approach

This section must provide a detailed description of plans for local partner inclusion and capacity strengthening of country-level systems and organizations as a central element of the technical approach and measures of success. This section must also include a detailed approach to engage and strengthen local partners and systems in country-level work. The approach must demonstrate how the applicant will work with and through local organizations, enhancing their sustainable capacity for delivery of technical assistance and services and enabling some local organizations and institutions to function independently in future SBC procurements. The applicant must also describe how it will use existing SBC capacity strengthening resources, and existing proven organizational and financial capacity strengthening resources, to support improved ability for local partners and entities – including civil society organizations or networks, faith-based organizations, government institutions, and other development actors -- at global, regional, and country levels. The applicant must also describe how these approaches may be mainstreamed within country-level SBC programs and systems, as well as how successful approaches can be scaled more broadly, and how such proposed approaches are feasible.

e.3 Activity Monitoring, Evaluation, and Learning Plan (AMELP) and Approach

This section must provide a clear narrative overview of the Applicant's MEL approach, describing a process for monitoring, evaluating, adapting, and learning for the proposed technical approach, as



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well as reporting progress toward achievement of the GH SBC Activity purpose, strategic objective, results, and intermediate results. The AMELP (Annex 2) must include appropriate indicators for the project purpose, results, and intermediate results, be reflective of the project's priorities, and identify the data collection method, type, information source, and frequency of collection. The AMELP is not included in the page limits for the technical application and is a Required Annex. Applicants must include a MEL narrative in the technical application; however, this information must be within the page limit for the technical approach, of 26 pages.

The illustrative AMELP must utilize a hypothetical scenario that includes the following funding parameters:

- \$2 million in core funding from the Office of Population and Reproductive Health annually for the life of the project
- \$500,000 in core funding from the Office of Maternal and Child Health and Nutrition annually (\$250,000 for maternal and child health and \$250,000 for nutrition) for the life of the project
- \$700,000 from the U.S. President's Malaria Initiative annually for the life of the project
- Buy-ins from 3 Missions
 - Mission 1 provides roughly an equal amount of FP, MCH, and PMI funds for a total of \$2m/year for 4 years
 - Mission 2 provides roughly an equal amount of FP, PMI, and GHS funds for a total of \$3m/year for 3 years
 - Mission 3 provides FP (\$500,000), MCH (\$500,000), PMI (\$1,500,000), and OHA (\$2,000,000) funds for a total of \$4.5 m/year for 3 years.
- The breakdown of the AMELP must be for the project as a whole. In other words, the applicant must take into account its expected programming for both core and Mission buy-ins simultaneously.

This is a hypothetical funding scenario and not a guarantee of actual annual budgets.

For core funding, activities must address all three IRs and describe how the purpose of the project could be achieved globally and in specific countries.

The proposed AMELP must reflect activities that would fit within the hypothesized budget for each year.

For the hypothetical Mission buy-ins, the applicant must plan for one country in West Africa, one country in East Africa, and one country in Southern Africa. All Mission buy-in activities will focus on IR1 and IR2 and at least one will include a focus on all three IRs.

All activities for both core and Mission buy-ins must take note of the cross-cutting principles of gender, youth, and equity. The AMELP must demonstrate how proposed indicators will be rooted in the principles of locally led development. The AMELP must demonstrate a strong understanding of context and current SBC programming to ensure the proposed AMELP is realistic. The AMELP must include the following:



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- Specify behavioral determinants and outcomes related to IR1 and IR2 that would be addressed within each core and Mission buy-in;
- Specify the time frame and sequencing of activities; and
- Identify the type of local partners with whom the applicant will collaborate.

f. Organizational Capacity and Management

This section must provide an overview of the management approach proposed by the applicant for the GH SBC Activity. The applicant must propose a management plan consistent with the technical complexity of the proposed approach and AMELP and that addresses its ability to manage: a) overall program administration and operations; b) regional-, country-, or technical area-specific approaches; c) partnerships with global, regional, national, and local organizations or groups, each bringing a particular set of experiences and expertise that would contribute to the accomplishment of the activities undertaken within this RFA; and d) coordination and collaboration across Consortium members.

f.1 Management Plan

This section must detail a management structure that ensures the efficient use of resources, as well as effective and adaptive management, strong technical implementation, and high-quality administrative and financial support. The management structure must demonstrate the necessary competencies to implement the technical interventions proposed. The applicant must explain the management structure presented in the consortium-wide organogram (Annex 3), which details a visual representation of the structure and relationships across all partners. Applicants must describe how consortium partnerships will be organized and managed to use complementary capabilities intentionally, effectively, and efficiently. The applicant must also provide signed letters of intent to collaborate for each proposed core partner and resource partner (Annex 4).

f.2 Consortium-wide Coordination and Collaboration Approach

This section provides a clear, feasible, and specific plan for coordinating and collaborating within the proposed Consortium and with local partners for the GH SBC Activity, inclusive of data and knowledge sharing.

f.3 Institutional and Consortium Capability and Past Performance

This section of the application provides information about the prime, core, and resource partners' capabilities and experiences implementing relevant large and complex SBC programs. Organizations lacking relevant past performance history shall be given a "neutral" past performance rating that neither rewards nor penalizes those applicants. This section should describe clearly the experience and past performance of the prime in managing and administering large and complex projects, including timeliness and quality of financial operations, partnerships, and management of sub-awards. This narrative should be supported by the required Annexes 5, 6, and 7. Relevant is defined as projects with a total life of award funding of over \$10 million dollars and with a substantive SBC scope that addressed multiple health technical areas.

g. Key Personnel and Staffing

This section must describe the proposed key personnel and staffing plan for the project. Applicants must propose key personnel and present a comprehensive staffing strategy and staffing plan that aligns



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with the technical approach and local capacity strengthening and collaboration approach and demonstrates an appropriate balance of skills that will enable a focus on the strategic priorities and achievement of results.

g.1 Key Personnel

This section must identify key personnel by name and position. Five (5) key personnel are envisioned, including the Project Director and the Management and Operations Director. The applicant shall propose three (3) additional key personnel positions, for a total of five (5), and an overall staffing structure that includes the necessary experience and expertise that will support cost-efficient achievement of the project's ambitious results.

The qualifications for the Project Director and Management and Operations Director are set forth below. As a Required Annex (Annex 8), applicants must submit brief job descriptions, including major duties for the position, required qualifications for the position, and a summary of the named key personnel's qualifications including but not limited to institutional, technical, and geographic experience, for the additional three (3) proposed key personnel positions (1 page max per position). Each key personnel position requires USAID approval, as noted in the substantial involvement section in Section B.4 of the RFA.

Required attributes for all key personnel include strong project and personnel management skills; innovation and flexibility in technical practice and/or management; an ability to network and collaborate effectively with a wide range of stakeholders; and strong communication skills. Individually and collectively, proposed key personnel show evidence of strong skills for the identified technical area, building collaborative relationships with donors, host-country governments, and local and international health and development implementers.

Through the technical application and the required annexes the applicant must clearly demonstrate that each proposed key personnel have the requisite experience and expertise to meet or exceed the requirements described below, and that as a group, the proposed key personnel complement each other in management, design, technical, and implementation skills necessary to successfully and effectively implement the proposed technical approach.

Project Director: The Project Director will have overall responsibility for coordination of project activities and staff. They will possess both deep applied experience in SBC programs operating at country and headquarters levels and demonstrated abilities in leadership; strategic thinking; development of effective teams; and change management. They will provide strategic direction and management for the project and proactively engage a broad range of donors and implementers in advancing the practice of SBC globally. They will have principal responsibility for representation of the project to USAID and will cultivate open and collaborative management relationships with the project management team at USAID Washington.



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The proposed Project Director must meet or exceed all of the following specific requirements:

- Has a Master's degree in international development, public health, behavioral science, or a related field with at least twenty (20) years' experience in global public health programming, including at least ten (10) years' experience in senior-level management positions and experience leading large (>\$10 million dollars life of award budget) and complex (at least two health and development technical areas) projects primarily focused on SBC; OR a Bachelor's degree in international development, public health, behavioral science or a related field with at least twenty-five (25) years' experience in global public health programming, including at least fifteen (15) years' experience in senior-level management positions and experience leading large and complex projects primarily focused on SBC.
- Has a proven record of leadership in design and management of SBC programs in LMICs, including experience leading projects across a range of intervention types and/or health areas;
- Has proven ability to effectively engage partners and manage multi-partner consortia; and
- Has experience interacting with U.S. government agencies, including overseas offices.

Management and Operations Director: The Management and Operations Director will oversee management and operations of the project as a whole. They will have principal responsibility for command of management processes generally and USAID reporting and compliance requirements specifically and producing quality results on schedule.

The proposed Management and Operations Director must meet or exceed all of the following specific requirements:

- Has a Masters' degree in business, management, finance, international development, public health, or a related field with at least twenty (20) years' experience in global public health and development, including senior-level management positions and experience managing large (>\$10 million dollars life of award budget) and complex (at least two health and development technical areas) projects implemented by multi-partner consortia, OR a Bachelor's degree in business, public health, communication, or a related field with at least twenty-five (25) years' experience in international health and development, including in senior-level management positions and experience managing large and complex projects implemented by multi-partner consortia;
- Has at least five (5) years' in-country experience managing health and development programming in the Global South or at least five (5) years' experience providing in-country support in the form of extensive STTA
- Has a demonstrated record of recruiting, managing, and developing personnel for large and complex projects;
- Has a demonstrated record of overseeing/managing USG funding support to country-based, non-governmental organizations/civil society organizations to design and implement health and development programming;
- Has at least five (5) years' experience managing the reporting and compliance requirements for large health and development contracts/subcontracts or agreements/sub-agreements that serve clients in LMICs funded by the U.S. Government; and
- Has experience interacting with U.S Government agencies, including overseas offices.



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Please note that USAID reserves the right to verify expertise and attributes of proposed staff, in part through past performance and references provided in the technical application, and through contact of references other than those provided in the application.

As a Required Annex, applicants must include a signed letter of intent from each named key personnel stating that they are 1) available within **two months** of project start-up and 2) will participate for at least two (2) years post-award (Annex 9). Finally, CVs/Resumes for each of the key personnel must be included as a Required Annex, including three professional references for each proposed key personnel (Annex 10).

g.2 Staffing Narrative and Roster

The section must provide and describe a comprehensive staffing plan that reflects the minimum number of highly experienced technical and administrative staff sufficient to manage and implement project activities under this award. The applicant must propose a sufficient but small core staff available to provide global technical leadership. This core capability must be supplemented by a depth of professional expertise which can respond to country-level requests for targeted technical assistance and capacity strengthening in the technical and cross-cutting areas of focus under the GH SBC Activity. Applicants must propose the optimal mix of technical personnel considered necessary for global leadership and country support and specifically detail the mechanisms and approaches through which relevant professional expertise in areas not included in core staffing will be provided as required. The staff must have expertise in - or access to specialists in - the technical and geographic areas included in this RFA (see Annex B USAID Priority Countries).

The applicant must provide a personnel team with an appropriate balance of managerial, technical, and operational skills sufficient to achieve the project purpose, strategic objective, IRs, and the proposed technical approach.

Additional staffing-related information is provided via the organogram included as part of the Management Plan (Annex 3) and the Staffing Roster included as a Required Annex (Annex 11).

This narrative section on staffing and the Staffing Roster annex are different. More detail is expected in the narrative section.

Under the narrative section on staffing, the applicant must:

- Include brief statements of major duties for any full-time staff proposed;
- Include a staffing approach which is comprehensive and demonstrates an appropriate balance of technical, operational, and managerial functions to successfully execute the proposed technical approach and to achieve project objectives;
- Provide a strategy for rapid recruitment and deployment of qualified and appropriate staff, both at the central level and in the countries where the project works, to ensure timely start up of the award;
- Provide a strategy for rapid recruitment and deployment of qualified and appropriate staff if/when surge capacity may be needed (e.g., mitigation of an infectious disease outbreak); and
- Describe any plans for using consultants to complement staff positions.



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h. Required Annexes (not included as part of the 26-page limit):

Annex 1. Draft first six months work plan (not to exceed 3 pages)

The first six months of implementation following the award are intended as a refinement period, particularly for those activities funded by USAID/Washington (core funds). During this period, the Recipient will work in close collaboration with AOR and USAID Technical Advisors to further refine and adapt the activity design and develop and finalize the AMELP, Work Plan, and any necessary strategic guidance documents. Applicants must propose a draft six month work plan that is realistic and achievable, and that will allow for rapid initial start up and the ability to quickly respond to field support requests. The proposed first six months work plan should focus on how the Applicant proposes to use this refinement period and should include a brief description of any strategic guidance documents the Activity will develop. Proposed activities should be realistic and achievable within the proposed budget and timeframe, and reflect a grasp of the necessary steps to ensure efficient, effective execution of program activities.

Annex 2. Illustrative Activity MEL Plan (not to exceed 7 pages)

The AMELP must align clearly with all aspects of the hypothetical funding parameters and guidance as detailed above in e.3. It must include appropriate indicators for the project purpose, results, intermediate results, and activities, disaggregated appropriately; be reflective of the project's priorities; identify the data collection method, type, information source, and frequency of collection; provide a clear mapping of interventions to outcomes; include a sound, flexible collaborating, learning, and adapting plan with three (3) illustrative central learning questions; and provide justification for any proposed external and/or internal baseline assessments and evaluations.

Annex 3. Consortium-Wide Organogram (not to exceed 2 pages)

The consortium-wide organogram provides a visual representation of the structure and relationships across the core partners, resource partners, and illustrative local partners, with proposed roles and responsibilities and lines of authority and reporting within the project including both technical and administrative functions. The organogram should indicate the proposed physical location/duty station of key personnel and senior technical positions with anticipated project funding equal to or greater than fifty percent (50%) level of effort over the performance period of the project.

Annex 4. Signed Letters of Intent to Collaborate from each proposed core partner and resource partner (not to exceed 1 page per partner)

A representative from each core partner organization and known resource partner organization must sign a letter of intent to collaborate. This indicates the intent to collaborate and/or commit resources as described in the cost application, should the project be funded. Signed letters of intent are not required and will not be accepted for local partners as defined above in Section D.4.

Annex 5. List of Proposed Resource Partners (not to exceed 5 pages)

Applicants must submit a list of proposed resource partners with brief summaries of the intended role for each partner across multiple activities or countries.



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Annex 6. List of Past Relevant Awards (not to exceed 3 pages)

Applicants must submit a list of relevant awards for the Prime Applicant from the past three (3) years. Relevant is defined as projects with total life of award budgets of >\$10 million, addressing multiple health technical areas in LMICs with a substantive focus on SBC program implementation. For each relevant project on the list include the name of the project, period of performance, total budget, funder(s), geographic focus, and technical focus areas.

Annex 7. Past Performance References

Applicants must submit three (3) Past Performance Short Forms each for the Prime Applicant and all Core Partners. See Annex C for the Past Performance Short Form. Past performance references must be for contracts, grants, and/or cooperative agreements for recent and relevant projects carried out by the applicant. Recent is defined as the last five years. Relevant is defined as projects of similar size, scope and complexity to the Program Description in this RFA. Large projects are defined as (>\$10 million dollars life of award budget) and complex (at least two health and development technical areas) projects primarily focused on SBC. Please note that USAID reserves the right to obtain past performance information from other sources, including those not named in this application.

The Past Performance Short Forms for the Prime and Core Partners are required in addition to the narrative for the Institutional and Consortium Capability and Past Performance sub-criterion. Specifically, these short forms will provide additional information on the following:

- Quality of product or service, including consistency in meeting goals and targets, and cooperation and effectiveness in fixing problems. This includes specific instances of good or poor performance, especially in the most critical areas regarding significant achievements and/or problems.
- Cost control, including forecasting costs as well as accuracy in financial reporting.
- Customer satisfaction, including satisfactory business relationship to clients, initiation and management of several complex activities simultaneously, coordination among sub-awardees and in-country partners, prompt and satisfactory correction of problems, and cooperative attitude in fixing problems.
- Effectiveness of key personnel/staff including effectiveness and appropriateness of personnel for the job; and prompt and satisfactory changes in personnel when problems with clients were identified.
- Ability to form strong collaborative partnerships with a range of donors, implementing partner, government, and host country organizations, among others.

Annex 8. Job descriptions for the additional proposed Key Personnel Positions (not to exceed 1 page per position, 5 pages total)

Applicants must submit brief job descriptions, including major duties for the position, required qualifications for the position, and a summary of the named key personnel's qualifications, including but not limited to institutional, technical, and geographic experience, for the additional three (3) proposed key personnel beyond the Project Director and the Management and Operations Director. This Annex must include the summary of named key personnel's qualifications for all five (5) key personnel positions.



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Annex 9. Signed Letters of Intent from each of the named Key Personnel (not to exceed 1 page per person)

Each Key Personnel must sign a letter of intent stating that they will 1) be available within **two months** of project start-up and 2) participate for at least two (2) years post-award.

Annex 10. CVs/Resumes of Key Personnel (no more than 4 pages each) and references

The applicant must provide CVs/resumes for each of the proposed Key Personnel and the names and contact information, including email address and phone number for three references (whom USAID may contact) for each Key Personnel. The references may be listed on a separate page outside of the 4-page limit for each key personnel CV/resume; however, they should not exceed 1 page per person.

Annex 11. Staffing Roster (no more than 5 pages)

The staffing roster must include the name of the personnel proposed (key and non-key personnel), position, proposed annual level of effort, date of availability, years of relevant experience, specific and relevant experience, language skills, the organization where the person is currently employed, the organization where the person will be employed under this project, and, if applicable, how long the person has been employed by the applicant/sub-recipient. These are experts who are likely to assist with project activities and can address the broad range of SBC and capacity strengthening activities envisioned in the RFA on an as-needed basis. **These may include consultants.** These must minimally cover the range of activities and interventions discussed in the proposed technical approach.

6. Cost Application Format

The following section describes the Cost/Business documentation that Applicants must submit to USAID prior to award. This documentation enables an Agreement Officer to make a positive risk assessment (meaning that the applicant possesses or has the ability to obtain the necessary management competence to plan and carry out the assistance program to be funded, and that the applicant will practice mutually agreed upon methods of accountability for funds and other assets provided by USAID). Prior to award, Applicants may be required to submit additional documentation deemed necessary for the Agreement Officer to assess the Applicant's risk in accordance with 2 CFR 200.206. Applicants should not submit any additional information with their initial application.

The Cost Application must be submitted separately from the Technical Application. While no page limit exists for the full cost application, applicants are encouraged to be as concise as possible while still providing the necessary details. The cost application must illustrate the entire period of performance, using the budget format shown in the SF-424A.

As specified earlier, the Applicant should submit the Cost/Business application formatted in Word 2010 or later **or PDF formats** (budget narrative) and Excel 2010 or later (for the budget itself). The Applicant must sign and submit the cost application using the SF-424 series. Failure to accurately complete these forms could result in the rejection of the application.



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If the applicant has established a consortium or another type of legal relationship with any of its

partners, the Cost/Business application must include a copy of the document that specifies the legal relationship between the parties. This document should include a full discussion of the relationship between the organizations including identification of the lead applicant with whom USAID will work for purposes of Agreement administration; identification of the applicant responsible for accounting; discussion of how the Agreement effort will be allocated among the parties; and specification of the express agreement of the principals thereto to be held jointly and severally liable for the acts or omissions of the other.

Applicants must include a detailed five-year budget including both core and field support funding, including accompanying detailed budget narratives for the application. The budget must provide in detail the total costs for implementation of the program that the organization is proposing. Under the GH SBC Activity, it is estimated that up to \$300 million (93%) will be available from Mission field support buy-ins, and up to \$21.5 million (6%) in core funding, through the five-year project. Note: USAID cannot guarantee any field buy-ins.

Over the life of the project, in addition to USAID funds, applicants are expected to contribute, from their own and other sources, no less than ten (10) percent of the amount obligated by USAID for the implementation of this program. Contributions can be either cash or in-kind and can include contributions from NGOs, local counterpart organizations, project clients, and other donors (not other USG funding sources). Information regarding the proposed cost-share should be included in the SF-424 and the Cost Matrix as indicated on those documents. The cost-share, and the feasibility of the cost-sharing plan, should be discussed in the budget narratives to the extent necessary to realistically assess these sources and funds. **Applications that do not meet the minimum cost-share requirement are not eligible for award consideration.** It should be noted that there is no separate/additional evaluation criteria category for cost share.

To support the proposed costs, please provide detailed budget notes/narrative for all costs that explain how the costs were derived. The following provides guidance on what is needed:

- The breakdown of all costs associated with the program according to the costs of, if applicable, headquarters, regional, and/or country offices. Project management and administrative costs will be shared equitably across all funding sources.
- The breakdown of all costs according to each partner/subaward organization involved in the program.
- The costs associated with external, expatriate technical assistance and those associated with local in-country technical assistance.
- The breakdown of any financial and in-kind contributions of all organizations involved in implementing this Cooperative Agreement.
- A description of how allocable costs will be managed.
- Potential contributions of non-USAID or private commercial donors to this Cooperative Agreement.
- Procurement plan for commodities (if applicable).



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A complete cost application will consist of the following sections:

Cost Application:

- a) Cover Page
- b) SF 424 Form(s)
- c) Required Certifications and Assurances
- d) Budget and Budget Narrative
- e) Prior Approvals in accordance with 2 CFR 200.407
- f) Approval of Subawards/Partners
- g) Consortium Documentation
- h) Unique Entity Identifiers (UEI) and SAM Requirements
- i) Branding Strategy and Marking Plan
- j) Funding Restrictions
- k) Conscience Clause Implementation (February 2012)
- l) Conflict of Interest Pre-Award Term (August 2018)

The following further elaborates the cost application sections for each requirement:

- a) Cover Page** (See Section D.3 above for requirements)
- b) SF 424 Form(s)**

The applicant must sign and submit the cost application using the SF-424 series. Standard Forms can be accessed electronically at <https://www.grants.gov/forms>.

Instructions for SF-424	https://www.grants.gov/forms/forms-repository/sf-424-family
Application for Federal Assistance (SF-424)	https://www.grants.gov/forms/forms-repository/sf-424-family
Instructions for SF-424A	https://www.grants.gov/forms/forms-repository/sf-424-family
Budget Information (SF-424A)	https://www.grants.gov/forms/forms-repository/sf-424-family
Instructions for SF-424B	https://www.grants.gov/forms/forms-repository/sf-424-family
Assurances (SF-424B)	https://www.grants.gov/forms/forms-repository/sf-424-family

Failure to accurately complete these forms could result in the rejection of the application.



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c) Required Certifications and Assurances

The applicant must complete the following documents and submit a signed copy with their application:

- (1) “Certifications, Assurances, Representations, and Other Statements of the Recipient” ADS 303mav document found at <https://www.usaid.gov/ads/policy/300/303mav>.
- (2) Assurances for Non-Construction Programs (SF-424B)
- (3) Certificate of Compliance: Please submit a copy of your Certificate of Compliance if your organization's systems have been certified by USAID/Washington's Office of Acquisition and Assistance (M/OAA).

Note: Past performance references are not required to be completed in this document since they are provided in the technical application.

Applicants must submit any additional evidence of responsibility deemed necessary for the Agreement Officer to make a positive risk assessment. The information submitted must substantiate that the applicant:

- Has adequate financial resources or the ability to obtain such resources as required during the performance of the cooperative agreement;
- Has the ability to comply with the cooperative agreement conditions, taking into account all existing and currently prospective commitments of the applicant, non governmental and governmental;
- Has a satisfactory record of performance. Past relevant unsatisfactory performance is ordinarily sufficient to justify a finding of non-responsibility, unless there is clear evidence of subsequent satisfactory performance;
- Has a satisfactory record of integrity and business ethics;
- Is otherwise qualified and eligible to receive a cooperative agreement under applicable laws and regulations (e.g., Equal Employment Opportunity laws); and
- Has a completed copy of certifications and assurances found in ADS 303.

d) Budget and Budget Narrative

The Budget must be submitted as one unprotected Excel file (MS Office 2010 or later versions) with visible formulas and references and must be broken out by project year, including itemization of the federal and non-federal (cost share) amount. Budget items with the total zero value should not be included in the budget. Files must not contain any hidden or otherwise inaccessible cells. Budgets with hidden cells lengthen the cost analysis time required to make an award and may result in a rejection of the cost application. **The Budget Narrative must contain sufficient detail so that USAID can read the document while reviewing the Detailed Budget and understand the proposed costs.** The applicant must ensure the budgeted costs address any additional requirements. The Budget Narrative must be thorough, including sources for costs to support USAID’s determination that the proposed costs are fair and reasonable. Applicants are



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encouraged to provide copies of quotes or reference online resources for determining the costs so that USAID can verify the costs included in the budget. Explain all assumptions in the budget narrative.

For illustrative purposes, Applicants may assume some larger and some smaller country buy-ins, with the countries included in the budget exercise remaining the same across all five years. Applicants should estimate core funding to be approximately 6% of the yearly total budget. Field support will vary in type of activities and in funding amount, based on the country's need for specific work and mission funding availability. Applicants should establish a budget utilizing the THREE (3) countries across geographic regions noted below.

Illustrative Country Field Support Buy-In for Budget Estimating:

- Kenya,
- Cote d'Ivoire, and
- Bangladesh.

The Budget must include the following worksheets or tabs, and contents for the prime applicant and each proposed partner/subaward, at a minimum:

- **Summary Budget**, inclusive of all program costs (USAID-funded and cost share), broken out by major budget category and by year for activities implemented by the applicant and any potential sub-applicants for the entire period of the program.
- **Detailed Budget**, including a breakdown by year, by budget category and budget line items for all federal funding (core and field support) and cost share, sufficient to allow the Agency to determine that the costs represent a realistic and efficient use of funding to implement the applicant's program and are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E.
- **Detailed Budgets for each sub-recipient**, for all federal funding and cost share, broken out by budget category and by year, for the entire implementation period of the project.

The Detailed Budget for the applicant and each proposed partner/subaward must contain the following budget categories and information, at a minimum:

- 1) **Salaries and Allowances** – Must be proposed consistent with 2 CFR 200.430 Compensation - Personal Services and separated into expatriate and local personnel and include direct salaries and wages only (not consultants or partners). All personnel must be proposed in accordance with each company's personnel policies. Salaries for each proposed position must be expressed in an amount per workday with the corresponding level of effort required for each proposed position (number of workdays) and then calculated to a total cost for each cost period where the salary would be applicable. All rates must be proposed as **unburdened daily rates** exclusive of benefits and/or fees (if any). If applicable, the magnitude of the proposed level of effort should reflect the startup and close down phases of the project.



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The budget narrative must include as much information as possible about the personnel's name, proposed position with expertise level (Junior, Mid, or Senior), and unburdened daily rate, level of effort and salary escalation factors. Explain all assumptions in the budget narrative. The applicant must demonstrate that the proposed compensation is reasonable for the services rendered and consistent with what is paid for similar work in other activities of the applicant. Applicants must provide their established written policies on personnel compensation. If the Applicant's written policies do not address a specific element of compensation that is being proposed, the Budget Narrative must describe the rationale used and supporting market research. The applicant must also certify that the policy applies to all staff across all projects.

- 2) **Fringe Benefits** – If the applicant has a fringe benefit rate approved by an agency of the U.S. Government, the applicant must use such rate and provide evidence of its approval (i.e. a copy of the organization's NICRA).

If an applicant does not have a fringe benefit rate approved, the applicant must propose a rate and explain how the applicant determined the rate. In this case, the Budget Narrative must include a detailed breakdown of all items of fringe benefits (e.g., unemployment insurance, worker's compensation, health and life insurance, retirement, FICA, etc.) and the costs of each, expressed in U.S. dollars and as a percentage of salaries. If leave and/or holidays are included in the latter, the number of work days per year must be prorated accordingly, to avoid the double charge.

- 3) **Travel and Transportation** – Provide details to explain the purpose of the trips, the number of trips, the mode of travel (airfare, train or other), the origin and destination, the number of individuals traveling, and the duration of the trips and must be separated into international and domestic travel. Travel costs may include transportation, per diem, taxi transfers to/from airport, insurance, etc. For international travel, costs may also include visa, inoculations, MedEvac and DBA (when applicable). Per Diem and associated travel costs must be based on the applicant's normal travel policies, as well as align with the Department of State's Standardized Regulations (DSSR). When appropriate please provide supporting documentation as an attachment, such as company travel policy, and explain assumptions in the Budget Narrative.
- 4) **Procurement or Rental of Goods (Equipment & Supplies), Services, and Real Property** – Must include a line item for each type of equipment or supply, including information on estimated types of equipment, models, supplies and the cost per unit and quantity. The Budget Narrative must include the purpose of the equipment and supplies and the basis for the estimates. Explain all assumptions in the budget narrative, including the proposed number of units and annual escalation factors (if any). The Budget Narrative must support the necessity of any rental costs and reasonableness in light of such factors as: rental costs of comparable property, if any; market conditions in the area; alternatives available; and the type, life expectancy, condition, and value of the property leased.



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- 5) **Subawards** – Specify the budget for the portion of the program (services or goods) to be passed through to any subrecipients (partner/sub awardees). See 2 CFR 200.331 for assistance in determining whether the sub-tier entity is a subrecipient or contractor. The subrecipient budgets must align with the same requirements as the applicant’s budget, including those related to fringe and indirect costs. Additionally, if the applicant and partners propose consultants whose services are directly related to the project, the budget must contain a line item for each such consultant, under this Contractual cost category. Similar information should be provided for Consultants as provided for Personnel, such as in an amount per workday with the corresponding level of effort required for each proposed consultant (number of workdays) and then calculated to a total cost for each cost period where the contractual cost would be applicable. Consulting services not part of the technical scope/delivery of the award (logistical support services such as audit services, IT support, security, etc.) must be included under Other Direct Costs.
- 6) **Other Direct Costs** – This must include both program costs and operational costs under one cost category of ODCs.
- a. **Program Costs** – may include elements such as meeting costs, capacity strengthening activities, workshops, etc. Detailed costs for each element need not be included in the budget as separate line items. Any meeting, workshop, training costs etc. included in the budget may be aggregated to one line item by element (i.e. all workshops in one line, all meetings in one line, etc.). However, a detailed description of cost buildup for each element must be included in the budget narrative to specify the number of events and the cost categories per event (such as facility rental, audio visual rental, meals, local travel for participants, etc.) Explain all assumptions in the budget narrative, including the proposed number of items in each element (such as meals, number participants, etc.) and annual escalation factors (if any).” Meals and local travel must not be duplicated for the applicant’s staff in travel and transportation, but must only cover non-applicant or non-partner employees attending the meetings/trainings.
 - b. **Operational Cost** - may include office rent, utilities, communication, maintenance or service costs, costs associated with implementation of Branding and Marking Plan, costs for services not part of the technical scope/delivery of the award (i.e. logistical support services), taxes (if applicable), etc. Explain all assumptions in the budget narrative, including rates, quantity and annual escalation factors (if any).
- 7) **Indirect Costs** – Applicants must indicate whether they are proposing indirect costs or will charge all costs directly. In order to better understand indirect costs please see Subpart E of 2 CFR 200.414. The application must identify which approach they are requesting and provide the applicable supporting information. Below are the most commonly used Indirect Cost Rate methods:

Method 1 - Direct Charge Only

Eligibility: Any applicant

Initial Application Requirements: See above on direct costs



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Method 2 - Negotiated Indirect Cost Rate Agreement (NICRA)

Eligibility: Any applicant with a NICRA issued by a USG Agency must use that NICRA

Initial Application Requirements: If the applicant has a current NICRA, submit your approved NICRA and the associated disclosed practices. If your NICRA was issued by an Agency other than USAID, provide the contact information for the approving Agency. Additionally, at the Agency's discretion, a provisional rate may be set forth in the award subject to audit and finalization. See [USAID's Indirect Cost Rate Guide for Non Profit Organizations](#) for further guidance.

Method 3 - De minimis rate of 10% of modified total direct costs (MTDC)

Eligibility: Any applicant that does not have a current NICRA

Initial Application Requirements: Costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate an indirect rate, which the non-Federal entity may apply to do at any time. The applicant must describe which cost elements it charges indirectly vs. directly. See 2 CFR 200.414(f) for further information. Such additional information may include the following:

- Reviewed Financial Statements Report: a report issued by a Certified Public Accountant (CPA) documenting the review of the financial statements was performed in accordance with Statements on Standards for Accounting and Review Services; and that management is responsible for the preparation and fair presentation of the financial statements in accordance with the applicable financial reporting framework and for designing, implementing and maintaining internal control relevant to the preparation. The accountant must also state the he or she is not aware of any material modifications that should be made to the financial statements; or
- Audited Financial Statements Report: An auditor issued report documenting the audit was conducted in accordance with Generally Accepted Auditing Standards (GAAS), and the financial statements are the responsibility of management. It also provides an opinion that the financial statements present fairly in all material respects, and the financial position of the company and the results of operations are in conformity with the applicable financial reporting framework (or issues a qualified opinion if the financial statements are not in conformity with the applicable financial reporting framework.)

Method 4 - Indirect Costs Charged As A Fixed Amount

Eligibility: Non U.S. non-profit organizations without a NICRA may request, but approval is at the discretion of the AO

Initial Application Requirements: Provide the proposed fixed amount and a worksheet that includes the following:



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- Total costs incurred by the organization for the previous fiscal year and estimates for the current year.
- Indirect costs (common costs that benefit the day-to-day operations of the organization, including categories such as salaries and expenses of executive officers, personnel administration, and accounting, or that benefit and are identifiable to more than one program or activity, such as depreciation, rental costs, operations and maintenance of facilities, and telephone expenses) for the previous fiscal year and estimates for the current year.
- Proposed method for prorating the indirect costs equitably and consistently across all programs and activities of using a base that measures the benefits of that particular cost to each program or activity to which the cost applies.

If the applicant does not have an approved NICRA and does not elect to utilize the 10% de minimis rate, the Agreement Officer will provide further instructions and may request additional supporting information, including financial statements and audits, should the application still be under consideration after the merit review. USAID is under no obligation to approve the applicant's requested method.

9) Cost Sharing – To be eligible, applicants must propose a cost share of not less than ten (10) percent of the proposed budget (in award implementation, it will be 10 percent of the total obligated amount of federal funds) and specify the sources of such resources, and the basis of calculation in the budget narrative. Applicants should also provide a breakdown of the cost share (financial and in-kind contributions) of all organizations involved in implementing the resulting award. Such funds may be mobilized from the recipient; other multilateral, bilateral, and foundation donors; host governments; and local organizations, communities and private businesses that contribute financially and in-kind to the implementation of activities at the country level. Mobilization of funds from outside sources through cost share of project activities is highly encouraged. Cost share should follow the regulations in 2 CFR 200.306. Cost sharing must be reported in the SF-425 (see Section A.5(a)(1)(B) for the financial reporting requirements), specifically in lines i-k (Recipient Share) and/or lines l-o (Program Income). Cost share must be detailed (who is providing the cost share, how will the cost share be used, how does the cost share contribute to the objectives, what is the basis of calculation, etc.). The applicant and each proposed partner/subaward proposing cost share must confirm that:

- The proposed cost share contributions are not included as cost share contributions for any other U.S. Government (USG)-assisted program; and
- Are necessary and reasonable for proper and efficient accomplishment of this award's objectives.

e) Prior Approvals in accordance with 2 CFR 200.407

Inclusion of an item of cost in the detailed application budget does not satisfy any requirements for prior approval by the Agency. If the applicant would like the award to reflect approval of any cost elements for which prior written approval is specifically required for allowability, the



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applicant must specify and justify that cost. See 2 CFR 200.407 for information regarding which cost elements require prior written approval.

f) Approval of Subawards

The applicant must submit information for all subawards/partners that it wishes to have approved at the time of award. For each proposed subaward the applicant must provide the following:

- Name of organization
- UEI Number
- Confirmation that the subrecipient does not appear on the Treasury Department's Office of Foreign Assets Control (OFAC) list
- Confirmation that the subrecipient does not have active exclusions in the System for Award Management (SAM)
- Confirmation that the subrecipient is not listed in the United Nations Security designation list
- Confirmation that the subrecipient is not suspended or debarred
- Confirmation that the applicant has completed a risk assessment of the subrecipient, in accordance with 2 CFR 200.332(b)
- Any negative findings as a result of the risk assessment and the applicant's plan for mitigation

g) Consortium Documentation

If the applicant has established a consortium, or other type of legal relationship with any of its partners, the Cost Application must include a copy of the legal relationship between the parties. The agreement should include a full discussion of the relationship between the applicant and partner(s), including identification of the applicant with whom USAID will work with for purposes of agreement administration, identity of the applicant which will have accounting responsibility, how agreement effort will be allocated and the express agreement of the principals thereto to be held jointly and severally liable for the acts or omissions of the other.

h) Unique Entity Identifiers (UEI) and SAM Requirements

USAID may not award to an applicant unless the applicant has complied with all applicable Unique Entity Identifiers (UEI) and System for Award Management (SAM) requirements. Each applicant (unless the applicant is an individual or Federal awarding agency that is exempted from requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the Federal awarding agency under 2 CFR 25.110(d)) is required to:

1. Provide a valid UEI number for the applicant and all proposed sub-recipients;
2. Be registered in SAM before submitting its application. SAM is streamlining processes, eliminating the need to enter the same data multiple times, and consolidating hosting to make the process of doing business with the government more efficient (<https://sam.gov/content/home>).



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3. Continue to maintain an active SAM registration with current information at all times during which it has an active Federal award or an application or plan under consideration by a Federal awarding agency.

The registration process may take many weeks to complete. Therefore, applicants are encouraged to begin the process early. If an applicant has not fully complied with the requirements above by the time USAID is ready to make an award, USAID may determine that the applicant is not qualified to receive an award and use that determination as a basis for making an award to another applicant.

UEI and SAM registration: <https://sam.gov/content/home>

Non-U.S. applicants can find additional resources for registering in SAM, including a Quick Start Guide and a video on how to obtain an NCAGE code, on <https://sam.gov/content/home>, navigate to Customer Service, then to External Resources.

USAID will not make a Federal award to an applicant until the applicant has complied with all applicable UEI and SAM requirements and, if an applicant has not fully complied with the requirements by the time USAID is ready to make an award, USAID may determine that the applicant is not qualified to receive a Federal award and use that determination as a basis for making a Federal award to another applicant.

Per 2 CFR Appendix I to Part 200, Full Text of the Notice of Funding Opportunity, Section E, 3, USAID informs all potential applicants:

“i. That the Federal awarding agency [USAID], prior to making a Federal award with a total amount of Federal share greater than the simplified acquisition threshold, is required to review and consider any information about the applicant that is in the designated integrity and performance system accessible through SAM (currently FAPIIS) (see 41 U.S.C. 2313);

ii. That an applicant, at its option, may review information in the designated integrity and performance systems accessible through SAM and comment on any information about itself that a Federal awarding agency [USAID] previously entered and is currently in the designated integrity and performance system accessible through SAM;

iii. That the Federal awarding agency [USAID] will consider any comments by the applicant, in addition to the other information in the designated integrity and performance system, in making a judgment about the applicant's integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicants as described in § 200.205 Federal awarding agency review of risk posed by applicants.”

Applicants must set forth full, accurate, and complete information as required by this APS/request for full applications. The penalty for making false statements to the U.S. Government is prescribed in 18 U.S.C. 1001.



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i) Branding Strategy and Marking Plan

It is a Federal statutory and regulatory requirement that all overseas programs, projects, activities, public communications, and commodities that USAID partially or fully funds under an assistance award or sub-award must be appropriately marked with the USAID identity. Under 2 CFR 700.16, USAID requires the submission of a Branding Strategy and Marking Plan from only the apparently successful applicant; therefore, applicants do not need to submit a draft Branding Strategy and Marking Plan in the initial applications.

Branding Strategy – Assistance (June 2012)

- a. Applicants recommended for an assistance award must submit and negotiate a "Branding Strategy," describing how the program, project, or activity is named and positioned, and how it is promoted and communicated to beneficiaries and host country citizens.
- b. The request for a Branding Strategy, by the Agreement Officer from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.
- c. Failure to submit and negotiate a Branding Strategy within the time frame specified by the Agreement Officer will make the applicant ineligible for an award.
- d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. These costs are subject to the revision and negotiation with the Agreement Officer and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.
- e. The Branding Strategy must include, at a minimum, all of the following:
 - (1) All estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth.
 - (2) The intended name of the program, project, or activity.
 - (i) USAID requires the applicant to use the "USAID Identity," comprised of the USAID logo and brandmark, with the tagline "from the American people" as found on the USAID Web site at <http://www.usaid.gov/branding>, unless Section VI of the RFA or APS states that the USAID Administrator has approved the use of an additional or substitute logo, seal, or tagline.
 - (ii) USAID prefers local language translations of the phrase "made possible by (or with) the generous support of the American People" next to the USAID Identity when acknowledging contributions.
 - (iii) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.
 - (iv) If branding in the above manner is inappropriate or not possible, the applicant must explain how USAID's involvement will be showcased during publicity for the program or project.
 - (v) USAID prefers to fund projects that do not have a separate logo or identity that competes with the USAID Identity. If there is a plan to develop a separate logo to consistently identify this program, the applicant must attach a copy of the proposed logos. Section VI of the RFA or APS will state if an



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- Administrator approved the use of an additional or substitute logo, seal, or tagline.
- (3) The intended primary and secondary audiences for this project or program, including direct beneficiaries and any special target segments.
 - (4) Planned communication or program materials used to explain or market the program to beneficiaries.
 - (i) Describe the main program message.
 - (ii) Provide plans for training materials, posters, pamphlets, public service announcement, billboards, Web sites, and so forth, as appropriate.
 - (iii) Provide any plans to announce and promote publicly this program or project to host country citizens, such as media releases, press conferences, public events, and so forth. Applicant must incorporate the USAID Identity and the message, “USAID is from the American People.”
 - (iv) Provide any additional ideas to increase awareness that the American people support this project or program.
 - (5) Information on any direct involvement from host-country government or ministry, including any planned acknowledgement of the host-country government.
 - (6) Any other groups whose logo or identity the applicant will use on program materials and related materials. Indicate if they are a donor or why they will be visibly acknowledged, and if they will receive the same prominence as USAID.
- e. The Agreement Officer will review the Branding Strategy to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.
- f. If the applicant receives an assistance award, the Branding Strategy will be included in and made part of the resulting grant or cooperative agreement.

(END OF PRE-AWARD TERM)

Marking Plan – Assistance (June 2012)

- a. Applicants recommended for an assistance award must submit and negotiate a “Marking Plan,” detailing the public communications, commodities, and program materials, and other items that will visibly bear the “USAID Identity,” which comprises of the USAID logo and brandmark, with the tagline “from the American people.” The USAID Identity is the official marking for the Agency, and is found on the USAID Web site at <http://www.usaid.gov/branding>. Section VI of the RFA or APS will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.
- b. The request for a Marking Plan, by the Agreement Officer from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.
- c. Failure to submit and negotiate a Marking Plan within the time frame specified by the Agreement Officer will make the applicant ineligible for an award.
- d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth,



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in the budget portion of the application. These costs are subject to the revision and negotiation with the Agreement Officer and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.

- e. The Marking Plan must include all of the following:
- (1) A description of the public communications, commodities, and program materials that the applicant plans to produce and which will bear the USAID Identity as part of the award, including:
 - (i) Program, project, or activity sites funded by USAID, including visible infrastructure projects or other sites physical in nature;
 - (ii) Technical assistance, studies, reports, papers, publications, audio-visual productions, public service announcements, Web sites/Internet activities, promotional, informational, media, or communications products funded by USAID;
 - (iii) Commodities, equipment, supplies, and other materials funded by USAID, including commodities or equipment provided under humanitarian assistance or disaster relief programs; and
 - (iv) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.
 - (v) Events financed by USAID, such as training courses, conferences, seminars, exhibitions, fairs, workshops, press conferences and other public activities. If the USAID Identity cannot be displayed, the recipient is encouraged to otherwise acknowledge USAID and the support of the American people.
 - (2) A table on the program deliverables with the following details:
 - (i) The program deliverables that the applicant plans to mark with the USAID Identity;
 - (ii) The type of marking and what materials the applicant will use to mark the program deliverables;
 - (iii) When in the performance period the applicant will mark the program deliverables, and where the applicant will place the marking;
 - (iv) What program deliverables the applicant does not plan to mark with the USAID Identity, and
 - (v) The rationale for not marking program deliverables.
 - (3) Any requests for an exemption from USAID marking requirements, and an explanation of why the exemption would apply. The applicant may request an exemption if USAID marking requirements would:
 - (i) Compromise the intrinsic independence or neutrality of a program or materials where independence or neutrality is an inherent aspect of the program and materials. The applicant must identify the USAID Development Objective, Interim Result, or program goal furthered by an appearance of neutrality, or state why an aspect of the award is presumptively neutral. Identify by category or deliverable item, examples of material for which an exemption is sought.
 - (ii) Diminish the credibility of audits, reports, analyses, studies, or policy recommendations whose data or findings must be seen as independent.



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- The applicant must explain why each particular deliverable must be seen as credible.
- (iii) Undercut host-country government “ownership” of constitutions, laws, regulations, policies, studies, assessments, reports, publications, surveys or audits, public service announcements, or other communications. The applicant must explain why each particular item or product is better positioned as host-country government item or product.
 - (iv) Impair the functionality of an item. The applicant must explain how marking the item or commodity would impair its functionality.
 - (v) Incur substantial costs or be impractical. The applicant must explain why marking would not be cost beneficial or practical.
 - (vi) Offend local cultural or social norms, or be considered inappropriate. The applicant must identify the relevant norm, and explain why marking would violate that norm or otherwise be inappropriate.
 - (vii) Conflict with international law. The applicant must identify the applicable international law violated by the marking.
- f. The Agreement Officer will consider the Marking Plan's adequacy and reasonableness and will approve or disapprove any exemption requests. The Marking Plan will be reviewed to ensure the above information is adequately included and consistent with the stated objectives of the award, the applicant's cost data submissions, and the performance plan.
- g. If the applicant receives an assistance award, the Marking Plan, including any approved exemptions, will be included in and made part of the resulting grant or cooperative agreement, and will apply for the term of the award unless provided otherwise.

(END OF PRE-AWARD TERM)

The apparently successful applicant will be asked to provide a Branding Strategy and Marking Plan to be evaluated and approved by the Agreement Officer and incorporated into any resulting award. More information on Branding Strategy and Marking Plan are available at <https://www.usaid.gov/branding/gsm>.

j) Funding Restrictions

Please provide a written acknowledgement of the following funding restrictions.

1. Construction is not an allowable activity under this agreement. Therefore, in the Mandatory Standard Provisions (ADS 303maa) of this APS and resulting cooperative agreement, the provision entitled “Limiting Construction Activities” (August 2013) will state the following section (a): “Construction is not eligible for reimbursement under this award.”
2. USAID does not allow reimbursement of pre-award costs (submission of application).
3. Profit is not allowable for recipients or subrecipients under this award. However, while profit is not allowed for sub-awards, the prohibition does not apply when the recipient acquires goods and services in accordance with 2 CFR 200.317 -326, “Procurement Standards.” This is discussed more



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specifically in ADS 303sai “Profit Under USAID Assistance Instruments.” See 2 CFR 200.331 for assistance in determining whether a sub-tier entity is a subrecipient or contractor.

4. Services or commodities must be procured within the authorized geographic code for this award (937), unless authorized in advance by the Agreement Officer per ADS 310 and 312, and 22 CFR 228.
5. Program income will not be generated under any award resulting from this RFA.
6. Funds in this agreement may not be used to finance the travel, per diem, hotel expenses, meals, conference fees, or other conference costs for any member of a foreign government's delegation to an international conference sponsored by a public international organization, except as provided in ADS Mandatory Reference 350maa "Guidance on Funding Foreign Government Delegations to International Conferences" [<https://www.usaid.gov/about-us/agency-policy/series-300/references-chapter>], or as approved by the AO.

k) Conscience Clause

**CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) – PRE-AWARD TERM
(February 2012)**

- (a) An organization, including a faith-based organization, that is otherwise eligible to receive funds under this agreement for HIV/AIDS prevention, treatment, or care—
 - 1) Shall not be required, as a condition of receiving such assistance—
 - (i) to endorse or utilize a multisectoral or comprehensive approach to combating HIV/AIDS; or
 - (ii) to endorse, utilize, make a referral to, become integrated with, or otherwise participate in any program or activity to which the organization has a religious or moral objection; and
 - 2) Shall not be discriminated against in the solicitation or issuance of grants, contracts, or cooperative agreements for refusing to meet any requirement described in paragraph (a)(1) above.
- (b) An applicant who believes that this solicitation contains provisions or requirements that would require it to endorse or use an approach or participate in an activity to which it has a religious or moral objection must so notify the cognizant Agreement Officer in accordance with the Mandatory Standard Provision titled “Notices” as soon as possible, and in any event not later than 15 calendar days before the deadline for submission of applications under this solicitation. The applicant must advise which activity(ies) it could not implement and the nature of the religious or moral objection.
- (c) In responding to the solicitation, an applicant with a religious or moral objection may compete for any funding opportunity as a prime partner, or as a leader or member of a consortium that comes together to compete for an award. Alternatively, such applicant may



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limit its application to those activities it can undertake and must indicate in its submission the activity(ies) it has excluded based on religious or moral objection. The offeror's proposal will be evaluated based on the activities for which a proposal is submitted, and will not be evaluated favorably or unfavorably due to the absence of a proposal addressing the activity(ies) to which it objected and which it thus omitted. In addition to the notification in paragraph (b) above, the applicant must meet the submission date provided for in the solicitation.

(END OF PRE-AWARD TERM)

1) Conflict of Interest Pre-Award Term
CONFLICT OF INTEREST PRE-AWARD TERM (August 2018)

a. Personal Conflict of Interest

1. An actual or appearance of a conflict of interest exists when an applicant organization or an employee of the organization has a relationship with an Agency official involved in the competitive award decision-making process that could affect that Agency official's impartiality. The term "conflict of interest" includes situations in which financial or other personal considerations may compromise, or have the appearance of compromising, the obligations and duties of a USAID employee or recipient employee.
2. The applicant must provide conflict of interest disclosures when it submits an SF-424. Should the applicant discover a previously undisclosed conflict of interest after submitting the application, the applicant must disclose the conflict of interest to the AO no later than ten (10) calendar days following discovery.

b. Organizational Conflict of Interest

The applicant must notify USAID of any actual or potential conflict of interest that they are aware of that may provide the applicant with an unfair competitive advantage in competing for this financial assistance award. Examples of an unfair competitive advantage include but are not limited to situations in which an applicant or the applicant's employee gained access to non-public information regarding a federal assistance funding opportunity, or an applicant or applicant's employee was substantially involved in the preparation of a federal assistance funding opportunity. USAID will promptly take appropriate action upon receiving any such notification from the applicant.

END OF SECTION



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SECTION E: APPLICATION REVIEW INFORMATION

1. Criteria

The merit review criteria prescribed here are tailored to the requirements of this particular RFA. Applicants should note that these criteria serve to: (a) identify the significant matters which the applicants should address in their applications, and (b) set the standard against which all applications will be evaluated.

All applications received by the deadline stated in the Cover Letter will be reviewed first for eligibility, then for responsiveness, and, finally, against the technical evaluation criteria set forth below. If one part of an application is received after the deadline, then the entire application will be considered late and may not be considered for award. Also, full applications that are received after the deadline will be considered late and may not be considered for award. Further, applications in response to this RFA should respond directly to the terms, conditions, specifications, and provisions of this RFA. Applications not conforming to this RFA may be categorized as non-responsive, thereby eliminating them from further consideration. If an applicant takes exception to any of the terms and conditions of the RFA, then USAID will consider its application to be unacceptable. Applicants who wish to take exception to the terms and conditions stated within this RFA are strongly encouraged to contact the Agreement Officer before doing so. USAID reserves the right to change the terms and conditions of the request for full applications by amendment at any time prior to the applicant selection decision.

Technical and other factors will be evaluated relative to each other, as described here and prescribed by the Technical Application Format. The Technical Application will be scored by a Merit Review Committee (MRC) using the criteria described in this section. The Agreement Officer (AO) will make the final determination and award will be made to the applicant(s) whose full application offers the best solution, considering both technical evaluation criteria and cost. Award may be made with or without a request for clarifications/additional detail on an application. The AO is the only individual who may legally commit USG to the expenditure of public funds. No costs chargeable to the proposed agreement may be incurred before receipt of either a fully executed cooperative agreement or grant or a specific written authorization from the AO.

2. Review and Selection Process

Each application received by the deadline will be reviewed against the eligibility criteria outlined in “Section C - Eligibility Information” of the RFA. Applications that do not meet the eligibility criteria will not be considered for award. This includes meeting the minimum cost share requirement of 10 percent of the total obligated amount of federal funds. Any application that does not meet this requirement is not eligible for award consideration.

Eligible, responsive applications will be reviewed in accordance with the merit review criteria and relative weights listed below, the application and submission information in Section D of this document, and the program description in Section A of this RFA.



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The technical application will be reviewed in accordance with the technical merit review criteria set forth below. The cost application will be reviewed in accordance with the cost criteria set forth below. If an application is recommended for award following this review, technical and cost clarification questions may or may not be issued to the apparently successful applicant. USAID may request that key personnel of applicants deemed responsive and eligible deliver an oral presentation describing their proposed approach to inform technical merit review.

To facilitate the review of applications, applicants should organize the narrative sections of their technical applications in the same order as the merit review criteria according to the guidelines provided in Section D and specified below. Following review of the technical applications, the cost application will be reviewed for reasonableness, realism, allowability, and allocability. USAID will award to the responsible applicant whose application offers the greatest value to the USG - technical, cost, and other factors considered.

a) Merit Review

USAID will conduct a merit review of all applications received that comply with the instructions in this RFA. Applications will be reviewed and evaluated in accordance with the following criteria shown in order of importance. In terms of relative importance, the Technical Approach (Criterion A) is weighted more than the Organizational Capacity and Management (Criterion B) and Key Personnel and Staffing (Criterion C). The Organizational Capacity and Management (B) and Key Personnel and Staffing (C) criterion are weighted equally. Each main merit review criterion (A, B, C) will be assigned an adjectival rating; however, sub-criteria will not be assigned adjectival ratings. For the Technical Approach (A), sub-criteria A.1 and A.2 are of equal importance and weighted more than sub-criterion A.3. For the Organizational Capacity and Management (B) and Key Personnel and Staffing (C), sub-criteria are in descending order of importance within each main criterion. All technical review factors when combined are significantly more important than cost.

Merit Review Criteria
A. Technical Approach Sub-criteria: A.1 Overall Technical Understanding and Approach to Address Intermediate Results 1-3 and Sub-IRs A.2 Local Capacity Strengthening and Collaboration Approach A.3 Activity Monitoring, Evaluation, and Learning Plan (AMELP) and Approach
B. Organizational Capacity and Management Sub-criteria: B.1 Management Plan B.2 Consortium-wide Coordination and Collaboration Approach B.3 Institutional and Consortium Capability and Past Performance
C. Key Personnel and Staffing Sub-criteria: C.1 Key Personnel C.2 Staffing Narrative and Roster



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Technical Adjectival Rating

The following are the Technical Application adjectival ratings that will be used to evaluate Technical Applications against the Merit Review Criteria listed below.

- Exceptional
- Very Good
- Satisfactory
- Marginal
- Unsatisfactory

The following merit review criteria will serve as the basis for USAID's review of each application:

A. Main Criterion A: Technical Approach

The extent to which the technical approach clearly and concretely demonstrates a thorough understanding of the GH SBC Activity purpose, strategic objective, results, and intermediate results. The extent to which the applicant describes a relevant and evidence-based approach(es) to achieve the intermediate results. The extent to which the applicant explicitly outlines its various strategies and/or activities to address GH SBC Activity priorities and challenges in an effective way. The extent to which the applicant articulates convincingly how the proposed approach(es) will ensure local ownership, sustainability, and institutionalization, as appropriate.

Sub-criterion A.1: Overall Technical Understanding and Approach to Address Intermediate Results 1-3 and Sub-IRs

The extent to which the applicant articulates a clear and coherent technical approach which will facilitate the applicant's successful achievement of the GH SBC Activity purpose, strategic objectives, and results. The extent to which the applicant also:

- Describes how it will implement a state of the art and effective global SBC program to increase the adoption of priority health behaviors and development and maintenance of enabling social norms for improved health and development outcomes, with attention to the strategic objective, intermediate results, technical considerations, and challenges described in Section A of this RFA.
- Describes how it will leverage existing SBC best practices and approaches while incorporating new and innovative SBC practices and approaches from the project as well as from peer-reviewed research and other projects to improve country-level health and development outcomes, with particular attention to FP, HIV/AIDS, MNCH, GHS and malaria.
- Articulates the pathways between proposed SBC approaches and improved intermediate, behavioral, and health outcomes.
- Demonstrates a clear understanding of the varied contexts of potential project countries and flexible, adaptive approaches that will be needed to support specific contexts and country needs.
- Describes how it will engage and collaborate with service delivery and other partners to, for example, incorporate provider and system actor behavior change into SBC programming.



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- Articulates an initial 6-month work plan (Annex 1) that is realistic and achievable, will allow for rapid initial startup and the ability to quickly respond to Mission buy-in requests, and details how the applicant proposes to use the refinement period and what strategic guidance documents the Activity will develop during that period.

Sub-criterion A.2: Local Capacity Strengthening and Collaboration Approach

The extent to which the applicant articulates a comprehensive and clear local capacity strengthening (LCS) and collaboration approach. USAID defines LCS as “a set of approaches that supports local actors to achieve their own mission; take actions to design and implement equitable responses to local challenges; learn and adapt; and innovate and transform over time”. The extent to which the applicant also:

- Demonstrates clearly and concisely an understanding of demand-driven, need-based and tailored capacity strengthening approaches to strengthen SBC technical and organizational capacity for local partners and entities – including civil society organizations or networks, faith-based organizations, government institutions, and other development actors. These approaches demonstrate an ability to enable some local organizations and institutions to function independently in future SBC procurements.
- Includes activities that reflect an understanding of, and ability to design, implement, and measure capacity strengthening approaches and methodologies. Such approaches will ideally include those that improve understanding of gaps, capabilities, and core competencies required of local organizations; co-create and test tailored solutions that address identified gaps; implement, measure and scale promising solutions and approaches; and strengthen gender integration, diversity, equity, and inclusion within capacity strengthening approaches.
- Describes the methodologies, processes, and steps to be used to implement proposed LCS activities within the timeframes outlined.
- Clearly describes how capacity strengthening tools and approaches -- already existing or developed under this award -- may be mainstreamed within country-level SBC programs and systems, as well as how successful approaches can be scaled more broadly, and how such proposed approaches are feasible.

Sub-criterion A.3: Activity Monitoring, Evaluating, and Learning Plan (AMELP) and Approach

The extent to which the technical application narrative provides a robust MEL approach, and that approach corresponds clearly to the illustrative AMELP (Annex 2). The AMELP aligns clearly with all aspects of the hypothetical funding parameters and guidance (see Section D.5 Technical Application Format) and also includes:

- Feasible ideas of metrics, analytical tools and an illustrative approach to performance monitoring and context monitoring.
- Relevant performance indicators of activity outputs and outcomes disaggregated appropriately.
- Principal sources of data, minimizing the use of systems parallel to existing government data sources.
- A data quality assurance plan.



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- A clear mapping of interventions to outcomes with a feasible description of how performance, accomplishments, and sustainability will be assessed.
- A sound and flexible collaborating, learning, and adapting plan with three illustrative central learning questions.
- Rational justification for any proposed external and/or internal baseline assessments and evaluations.

B. Main Criteria: Organizational Capacity and Management

The extent to which the applicant proposes a comprehensive and appropriate management plan, consistent with the technical complexity of the proposed approach, that addresses its ability to manage: a) overall program administration and operations; b) regional-, country-, or technical area-specific approaches; and c) partnerships with global, regional, national, and local organizations or groups, each bringing a particular set of experiences and expertise that would contribute to the accomplishment of the activities undertaken within this RFA; and d) coordination and collaboration across Consortium members.

Sub-criterion B.1: Management Plan (including consortium-wide organogram)

The extent to which the application details an appropriate and feasible overall project management approach and plan that:

- Describes feasible systems for technical, financial, administrative, and contractual oversight within and between the project's central and country-based activities and partners.
- Aligns with the applicant's proposed technical approach and organogram.
- Reflects proven practices to support cost containment, avoid duplication, and minimize institutional risk.
- Rationalizes selection of core and resource partners that are appropriate for the proposed technical approach.
- Describes clear plans for utilizing core, resource, and local partners, including management patterns, lines of communication, roles and responsibilities, and the processes for determining partner engagement overall and in new buy-ins that demonstrates meaningful, collaborative, effective engagement.
- Articulates appropriate strategies for initiating and maintaining close and collaborative working relationships with USAID/Washington, Missions, and other key stakeholders including local partners.
- Details financial management systems and plans for ensuring timely and accurate management, reporting, development of subawards and monitoring of multiple funding streams.
- Provides a consortium-wide organogram (Annex 3) that depicts a clear representation of the structure and relationships across core, resource, and illustrative local partners, with reasonable proposed roles and responsibilities and lines of reporting within the project to achieve project results with the proposed technical approach.
- Provides signed letters of intent to collaborate for each proposed core partner and resource partner that meet the requirements in Section D.5 Technical Application Format (Annex 4).



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Sub-criterion B.2: Consortium-wide Coordination and Collaboration Approach

The extent to which the application articulates a clear, feasible, and concise plan for effective communication, coordination, and collaboration between all partners, including:

- A clear and appropriate plan for identifying and sharing opportunities for technical engagement, consultation, coordination, and collaboration among all partners.
- Delineation of leadership roles for specific activities and illustrative initiatives.
- Core principles and plans for engagement within and across the Consortium, including local partners, including the relevant sharing of data and knowledge.

Sub-criterion B.3: Institutional and Consortium Capability and Past Performance

The extent to which the application articulates convincingly that the consortium has the necessary technical and management capacity and experience to achieve USAID’s purpose, strategic objective, and intermediate results, including the following:

- Institutional technical capacity of the prime, core, and resource partners, with particular attention to organizational competencies likely to directly support achievement of project objectives and the proposed technical approach.
- List of proposed resource partners with brief summaries of the intended role for each partner across multiple activities or countries (Annex 5)
- Experience and past performance of the prime and core partners in implementing large (>\$10 million dollars life of award budget) and complex (addressing multiple health technical areas) projects in LMICs with a substantive focus on SBC program implementation and local capacity strengthening that demonstrates a record of technical leadership, strong collaborative partnerships, capacity strengthening, and innovation in behavioral programming. (Narrative plus Annexes 6 and 7)
- Experience of the prime demonstrates adherence to the terms and conditions of the projects, as well as efficiency and quality in services provided, customer satisfaction, financial management, management of sub-awards, and staffing.

Note: Applicant(s) will be evaluated on past performance over the past 5 years. Organizations lacking relevant past performance history shall be given a “neutral” past performance rating that neither rewards nor penalizes those applicants.

C. Main Criteria: Key Personnel and Staffing

The extent to which the key personnel and staffing plan for the project demonstrates an appropriate balance of skills that will enable a focus on the strategic priorities and achievement of objectives and results in the proposed technical approach.

Sub-criterion C.1: Key Personnel

The extent to which the application clearly and convincingly details the following:

- A team of key personnel capable of supporting global leadership and technical assistance functions and of building collaborative relationships with donors, country governments, and



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local and international health and development implementers to achieve the GH SBC Activity expected results.

- Each proposed key personnel has the requisite experience and expertise to meet or exceed the requirements described in Section D.5 Technical Application Format and the proposed job descriptions, including required qualifications (Annex 8) for the additional three (3) proposed key personnel positions.
- Each proposed key personnel position is necessary to the success of the project, and as a team the key personnel complement each other in management, design, technical, and implementation skills essential to successfully and effectively implement the proposed project.
- CVs/Resumes, brief summaries of roles and responsibilities, and signed letters of intent for each proposed key personnel are provided and meet the requirements in Section D.5 Technical Application Format (Annexes 9 and 10).

Sub-criterion C.2: Staffing Narrative and Roster

The extent to which the proposed staffing narrative and roster (Annex 11) demonstrate the following:

- An appropriate balance of technical, operational, and managerial functions to successfully execute the proposed technical approach and achieve project objectives.
- A staffing pattern, number, and type of positions that are responsive to technical and management requirements and principal priorities and challenges, with an optimal configuration for efficiency and cost containment.
- Proposed specialists have technical and operational experience in the subject areas for which they are proposed, including experience related to SBC programming, SBC technical capacity strengthening, and organizational capacity strengthening.
- A feasible strategy for rapid recruitment and deployment of qualified staff to ensure timely start-up of the award that is actionable and appropriate given the project's mandate and objectives.
- A feasible strategy to respond to country-level requests for targeted technical assistance and capacity strengthening in the technical and cross-cutting areas of focus.
- A feasible strategy for rapid recruitment and deployment of qualified staff when surge capacity may be needed.

b) Cost Application Review

The Agency will evaluate the cost application of the applicant(s) under consideration for an award as a result of the merit criteria review to determine whether the costs are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E, evaluating overall cost reasonableness, allocability, allowability, cost effectiveness and realism, and adequacy of budget detail.

The Agency will also consider (1) the extent of the applicant's understanding of the financial aspects of the program and the applicant's ability to perform the activities within the amount requested; (2) whether the applicant's plans will achieve the program objectives with reasonable economy and efficiency; and (3) whether any special conditions relating to costs should be included in the award.



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Cost sharing is an important element of the USAID-recipient relationship and the applicant's compliance with Section C will be a consideration for award. The Cost Application must clearly demonstrate the applicant's plan for providing the required cost share. Proposed cost share will be reviewed for compliance with the standards set forth in 2 CFR 200.306, 2 CFR 700.10, and the

Standard Provision "Cost Sharing (Matching)" for U.S. entities, or the Standard Provision "Cost Share" for non-U.S. entities.

The AO will perform a risk assessment (2 CFR 200.206). The AO may determine that a pre-award survey is required to inform the risk assessment in determining whether the prospective recipient has the necessary organizational, experience, accounting and operational controls, financial resources, and technical skills – or ability to obtain them – in order to achieve the objectives of the program and comply with the terms and conditions of the award. Depending on the result of the risk assessment, the AO will decide to execute the award, not execute the award, or award with “specific conditions” (2 CFR 200.208).

END OF SECTION



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SECTION F: FEDERAL AWARD ADMINISTRATION INFORMATION

1. Federal Award Notices

A notice of award signed by the Agreement Officer is the authorizing document for this RFA. The notice of award will be provided electronically to the applicant's point of contact listed in the application. Notification will also be made electronically to unsuccessful applicants pursuant to ADS 303.3.7.1.b. For the successful application, USAID may reach out to the applicant with clarifying questions and a request for a revised application by a specified date. USAID reserves the right to award without requesting clarifications or additional detail on an application.

Award of the agreement contemplated by this RFA cannot be made until funds have been appropriated, allocated and committed through internal USAID procedures. While USAID anticipates that these procedures will be successfully completed, potential applicants are hereby notified of these requirements and conditions for the award.

Prior to issuance of the award, the apparently successful applicant may be required to submit additional information on the organization and key individuals for vetting. For example, for those organizations that have not had previous grants or cooperative agreements with the US Government, Articles of Incorporation or other documentation which substantiates the legal character of the entity will be requested. In such cases, issuance of an award is contingent on the timely receipt of the information requested and the successful completion of the vetting process/post-award risk assessment. Applicants under consideration for an award that have never received funding from USAID will be subject to a pre-award audit to determine fiscal responsibility, ensure adequacy of financial controls and establish an indirect cost rate.

2. Administrative & National Policy Requirements

The resulting award from this RFA will be administered in accordance with the following policies and regulations.

- i. **For US organizations:** [ADS 303](#), [2 CFR 700](#), [2 CFR 200](#), and [Standard Provisions for U.S. Non-governmental organizations \(ADS 303maa\)](#).
- ii. **For Non US organizations:** [Standard Provisions for Non-U.S. Non-governmental Organizations \(ADS 303 mab\)](#).

The award will be administered by the Office of Population and Reproductive Health (PRH) within the Bureau for Global Health (GH). The AO will designate an AOR to review, concur and/or approve certain items; please see the Substantial Involvement information (Section B).

See Annex D, for a list of the Standard Provisions that will be applicable to any awards resulting from this NOFO.



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3. Reporting Requirements

The recipient will adhere to all reporting requirements listed below; further, US Non-Governmental organizations need to be in compliance with 2 CFR 200 and 2 CFR 700 (specifically 2 CFR 200.327-329). All reports will be submitted by the due date for approval from the USAID Agreement Officer Representative (AOR). Reports would include: first year workplan and budget, subsequent annual work plans and budgets, gender strategy (finalized within six months of award), activity Monitoring, Evaluation, and Learning (MEL) plan (finalized within 90 calendar days of award), progress/performance monitoring reports every six (6) months, financial reporting (specifically quarterly SF425s - due no later than 30 calendar days after the end of each quarter based on the fiscal year), environmental compliance planning and reporting, a final report (due within 90 calendar days after the end date of the award), a demobilization plan for close-out (due no later than 90 calendar days before the end date of the award), and additional ad-hoc reporting as needed by USAID. Additionally, if transition award processes are initiated through buy-ins by any bureaus, independent offices or missions under this award, the recipient will provide a transition report as part of the award close out.

The draft First Year Work Plan must be submitted by the recipient within 60 calendar days of the award. Starting with the second year of the award and for each subsequent year of performance thereafter based on the fiscal year, the recipient must submit Annual Work Plans within 30 calendar days after the end of the previous Fiscal Year. Other submission timelines will be determined by the AOR. The plan will display expected activities per month to achieve the annual performance targets, as specified in the Activity MEL Plan (below), with the first six months reserved for the Refinement Period as described in Sections B and D above. The Implementation Plan shall include a timeline and benchmark indicators for achieving the objectives of each component of the activity, all major activities that will be undertaken, rationale behind these activities, anticipated results of these efforts and how they will be measured, and implementation plan for activities that support the key objectives of the program.

The Implementation Plan will describe activities to be conducted at a greater level of detail than in the Program Description but must not serve to change the Program Description in any way. Therefore, all Implementation Plans and changes/revisions thereto shall cross-reference the applicable sections in the Program Description. The Recipient will work with the AOR throughout the Annual Implementation Plan development process to ensure the Annual Implementation Plan appropriately reflects activity objectives and the Program Description. The Annual Implementation Plan must detail the work to be accomplished during the upcoming year.

The activity Monitoring, Evaluation, and Learning (MEL) plan will cover the full period of the Cooperative Agreement and should be revised as needed in response to changes in the activity or context that occur during the life of the activity. The MEL will include proposed indicators for measuring progress on all activities, baseline data, and clear targets throughout the life of the activity. Also, the Recipient will develop a Performance Indicator Sheet (PIRS) for each indicator in the AMELP.



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The Transition Report(s), if required, will identify the local subrecipient(s) to USAID that have met the initial award capacity development criteria. The report will: 1) briefly describe the distinct portion of the work in the award's program description that the subrecipient(s) managed as described in Section B under Substantial involvement; 2) detail the process of the local subrecipient's progress towards meeting the criteria for a transition award (e.g., include descriptions of the type(s) of capacity strengthening work completed under this award); and 3) contain the results of the baseline and follow-up capacity assessments for the local subrecipient(s) as described in Section B.

More detail on each reporting deliverable may be included in the eventual award. The recipient will also consult with the AOR on the format and expected content of all reports prior to submission. Any changes to the Annual Work Plan must be submitted to the AOR for approval. Any updates to the Activity MEL Plan must be submitted with subsequent Annual Work Plans and approved by the AOR.

Development Experience Clearinghouse (DEC) Requirements

The assistance provisions required in AAPD 04-06, Submission of Development Experience Documents, in award documents to ensure that contracts and grants/CAs require the implementing partners to submit reports or deliverables they produce under the award to the DEC. AORs or other individuals who are the most familiar with the award will monitor the recipient's compliance with this requirement.

The recipient will submit an original and one copy of the final report to the Technical Advisor (TA) and the AOR and one copy to the USAID Development Experience Clearinghouse. Submission instructions can be found at: <http://dec.usaid.gov>.

For detailed guidance on the submission of copies of reports and other information to USAID's DEC, please review ADS 540.

4. Program Income

Program income will not be generated under this award.

5. Environmental Compliance

The Foreign Assistance Act of 1961, as amended, Section 117 requires that the impact of USAID's activities on the environment are considered, and that USAID include environmental sustainability as a central consideration in designing and carrying out its development programs. This mandate is codified in 22 CFR 216 and in USAID's Automated Directives System (ADS) Parts 201.5.10g and 204, which, in part, require that the potential environmental impacts of USAID-financed activities are identified prior to a final decision being made and that appropriate environmental safeguards are adopted for all program activities.



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It has been determined that activities conducted under this RFA will not negatively impact the environment. In accordance with the 22 CFR 216.22, the project will not have a significant effect on the human, physical and biological environment and qualifies for a “Categorical Exclusion” in the Initial Environmental Examination (IEE), considering the nature of activities anticipated under this RFA. The AOR management team will continue to collaborate with the GH Environmental Officer to ensure the award(s) and associated activities incorporate environmentally sound principles in implementation and adhere to this determination of a “Categorical Exclusion.”

END OF SECTION



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SECTION G: FEDERAL AWARDING AGENCY CONTACT(S)

1. RFA Points of Contact

Any questions concerning this letter/request for full applications must be submitted in writing to Mrs. LaVietra Shannon, Agreement Specialist, via e-mail at oaasbc@usaid.gov, by the date specified in the Cover Letter.

Primary Point of Contact:

LaVietra Shannon
Agreement Specialist
M/OAA/GH/POP
oaasbc@usaid.gov

Alternate Point of Contact:

Alisa Dunn
Agreement Officer
M/OAA/GH/POP
adunn@usaid.gov

2. Acquisition and Assistance Ombudsman

The A&A Ombudsman helps ensure equitable treatment of all parties who participate in USAID's acquisition and assistance process. The A&A Ombudsman serves as a resource for all organizations who are doing or wish to do business with USAID. Please visit this page for additional information: <https://www.usaid.gov/work-usaid/acquisition-assistance-ombudsman>

[The A&A Ombudsman may be contacted via: Ombudsman@usaid.gov](mailto:Ombudsman@usaid.gov)

END OF SECTION



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SECTION H: OTHER INFORMATION

USAID reserves the right to fund any or none of the applications submitted. The Agreement Officer is the only individual who may legally commit the Government to the expenditure of public funds. Any award and subsequent incremental funding will be subject to the availability of funds and continued relevance to Agency programming.

Applications with Proprietary Data

Applicants who include data that they do not want disclosed to the public for any purpose or used by the U.S. Government except for evaluation purpose, should mark the cover page with the following:

“This application includes data that must not be disclosed, duplicated, used— in whole or in part – for any purpose other than to evaluate this application. If, however, an award is made as a result of – or in connection with – the submission of this data, the U.S. Government will have the right to duplicate, use, or disclose the data to the extent provided in the resulting award.

This restriction does not limit the U.S. Government’s right to use information contained in this data if it is obtained from another source without restriction. The data subject to this restriction are contained in sheets {insert sheet numbers}.”

Additionally, the applicant must mark each sheet of data it wishes to restrict with the following:

“Use or disclosure of data contained on this sheet is subject to the restriction on the title page of this application.”

(END OF SECTION)



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ANNEX A – OTHER BUREAU FOR GLOBAL HEALTH SBC PROJECTS AND INITIATIVES

Existing USAID/GH SBC Mechanisms

GH has invested in a number of central mechanisms focused primarily on SBC over its 60 year history. The list below includes the current flagship SBC mechanism, mechanisms that are global leaders in SBC for their health sector, and recently ended SBC mechanisms. Note that this list is not exhaustive as there are additional GH central mechanisms that include SBC programming.

Current Key SBC Mechanisms (as of March 2024)

- [Agency for All](#) (2022 - 2027) is a five-year project that will generate evidence on the role of agency in effective social and behavior change programming to improve health and well-being for individuals and communities. The project will advance cross-sector development outcomes including family planning and reproductive health, maternal, newborn and child health, nutrition, infectious disease, and HIV/AIDS. Agency for All is committed to advancing principles of inclusion and participation in locally-led research, monitoring, and evaluation.
- [Breakthrough Action](#) (2017-2025) ignites collective action and encourages people to adopt healthier behaviors—from using modern contraceptive methods and sleeping under bed nets to being tested for HIV and preventing the spread of zoonotic diseases—by forging, testing, and scaling up new and hybrid approaches to social and behavior change.
- [ELEVATE Nutrition](#) (2023-2028) aims to advance local implementation of high-quality nutrition programs and policies to improve the nutritional status of women and children, particularly in the first 1,000 days.
- [WASHpals 2](#) (2021-2026) focuses on WASH sector research and learning that results in sustainable, at-scale, and equitable improvements in key services, behaviors, and environmental conditions at the community and household levels.

Illustrative Historical SBC Mechanisms

- [Breakthrough Research](#) (2017-2023) catalyzed social and behavior change by conducting state-of-the-art research and evaluation and promoting evidence-based solutions to improve health and development programs around the world.
- [Passages](#) (2015-2022) was a seven-year implementation research project that aimed to address a broad range of social norms, at scale, to achieve sustained improvements in voluntary family planning, reproductive health, and gender-based violence. Passages built the evidence base and contributed to the capacity of the global community to strengthen normative environments that support reproductive health and well-being, especially among young people at life-course



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transition points, including very young adolescents, newly married youth, and first-time parents.

- [Transform-PHARE](#) (2015-2020) was a five-year project that introduced innovative practices from marketing, advertising, human-centered design and behavioral economics to strengthen health-related behavior change programming. The program focused on generating innovative evidence-based social and behavior change communications to address barriers to modern contraceptive use, transform attitudes about reproductive health and promote family planning in West Africa.
- [Transform-Accelerate](#) (2015-2020) worked with USAID health teams and stakeholders in priority countries to align health programming using behavioral outcomes to maximize investments and accelerate impact.
- [Supporting Operational AIDS Research](#) (Project SOAR, 2014-2019) used the best available science, research expertise, and state-of-the-art methodologies to generate critical evidence to improve HIV prevention, care, and treatment policies and programs around the world.
- [USAID Advancing Nutrition](#) (2018-2023) drew together global nutrition experience to design, implement, and evaluate programs that address the root causes of malnutrition. SBC is one of their primary areas of work.



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ANNEX B – USAID PRIORITY COUNTRIES (PRH, PMI, PCMD, Nutrition, PEPFAR)

Afghanistan	Mali
Angola	Mauritania
Bangladesh	Mozambique
Benin	Namibia
Botswana	Nepal
Burkina Faso	Niger
Burma	Nigeria
Burundi	Pakistan
Cambodia	Philippines
Cameroon	Rwanda
Cote d'Ivoire	Senegal
Dominican Republic	Sierra Leone
Democratic Republic of Congo	South Africa
Eswatini	South Sudan
Ethiopia	Tanzania
Ghana	Thailand/Lao PDR Regional
Guinea	The Gambia
Haiti	Togo
India	Uganda
Indonesia	Ukraine
Kenya	Vietnam
Lesotho	Yemen
Liberia	Zambia
Madagascar	Zimbabwe
Malawi	

Note: countries in this list are priorities for at least one of the health areas noted; some are priority countries for multiple health areas.



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ANNEX C – PAST PERFORMANCE SHORT FORM

	PERFORMANCE REPORT - SHORT FORM
	PART I: Award Information (to be completed by Prime)
1.	Name of Awarding Entity:
2.	Award Number:
3.	Award Type:
4.	Award Value (TEC): (if subagreement, subagreement value)
5.	Problems: (if problems encountered on this award, explain corrective action taken)
6.	Contacts: (Name, Telephone Number and E-mail address)
6a.	Agreement/Contract Officer:
6b.	Technical Officer (AOR/COR):
6c.	Other:
7.	Recipient:
8.	Title/Brief Description of Product/Service Provided:
9.	Information Provided in Response to Solicitation No. :



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PART II: Performance Assessment (to be completed by Agency)

1. How well Recipient/Contractor performed:

1a. Quality of product or service, including consistency in meeting goals and targets, and cooperation and effectiveness in fixing problems. Comment:

1b. Cost control, including forecasting costs as well as accuracy in financial reporting. Comment:

1c. Timeliness of performance, including adherence to schedules and other time-sensitive project conditions, and effectiveness of home and field office management to make prompt decisions and ensure efficient operation of tasks. Comment:

1d. Customer satisfaction, including satisfactory business relationship to clients, initiation and management of several complex activities simultaneously, coordination among subwardees and developing country partners, prompt and satisfactory correction of problems, and cooperative attitude in fixing problems. Comment:



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1e. Effectiveness of key personnel including: effectiveness and appropriateness of personnel for the job; and prompt and satisfactory changes in personnel when problems with clients were identified. Comment:

1f. Ability to form strong collaborative partnerships with a range of donors, implementing partner, government, and host country organizations, among others. Comment:

2. Specify instances of good or poor performance, especially in the most critical areas. Comment:

3. List significant achievements and/or problems. Comment:



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ANNEX D - STANDARD PROVISIONS

(Note: the full text of these provisions may be found at: <https://www.usaid.gov/ads/policy/300/303maa> and <https://www.usaid.gov/ads/policy/300/303mab>). The actual Standard Provisions included in the award will be dependent on the organization that is selected. The award will include the latest Mandatory Provisions for either U.S. or non-U.S. Nongovernmental organizations. The award will also contain the following “required as applicable” Standard Provisions:

Please note that the resulting award will include all standard provisions (both mandatory and required as applicable) in full text.

REQUIRED AS APPLICABLE STANDARD PROVISIONS FOR U.S. NONGOVERNMENTAL ORGANIZATIONS

Required	Not Required	Standard Provision
TBD		RAA1. NEGOTIATED INDIRECT COST RATES - PREDETERMINED (NOVEMBER 2020)
		RAA2. NEGOTIATED INDIRECT COST RATES - PROVISIONAL (Nonprofit) (NOVEMBER 2020)
		RAA3. NEGOTIATED INDIRECT COST RATE - PROVISIONAL (Profit) (DECEMBER 2014)
		RAA4. INDIRECT COSTS – DE MINIMIS RATE (NOVEMBER 2020)
		RAA5. EXCHANGE VISITORS AND PARTICIPANT TRAINING (JUNE 2012)
		RAA6. VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (JANUARY 2009)
		RAA7. PROTECTION OF THE INDIVIDUAL AS A RESEARCH SUBJECT (APRIL 1998)
		RAA8. CARE OF LABORATORY ANIMALS (MARCH 2004)
		RAA9. TITLE TO AND CARE OF PROPERTY (COOPERATING COUNTRY TITLE) (NOVEMBER 1985)
		RAA10. COST SHARING (MATCHING) (FEBRUARY 2012)
		RAA11. PROHIBITION OF ASSISTANCE TO DRUG TRAFFICKERS (JUNE 1999)
		RAA12. INVESTMENT PROMOTION (NOVEMBER 2003)
		RAA13. REPORTING HOST GOVERNMENT TAXES (DECEMBER 2014)
		RAA14. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JUNE 2012)
		RAA15. CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) (FEBRUARY 2012)
		RAA16. CONDOMS (ASSISTANCE) (SEPTEMBER 2014)



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		RAA17. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING (ASSISTANCE) (SEPTEMBER 2014)
		RAA18. USAID DISABILITY POLICY - ASSISTANCE (DECEMBER 2004)
		RAA19. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004)
		RAA20. STATEMENT FOR IMPLEMENTERS OF ANTI-TRAFFICKING ACTIVITIES ON LACK OF SUPPORT FOR PROSTITUTION (JUNE 2012)
		RAA21. ELIGIBILITY OF SUBRECIPIENTS OF ANTI-TRAFFICKING FUNDS (JUNE 2012)
		RAA22. PROHIBITION ON THE USE OF ANTI-TRAFFICKING FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION (JUNE 2012)
		RAA23. UNIVERSAL IDENTIFIER AND SYSTEM FOR AWARD MANAGEMENT (NOVEMBER 2020)
		RAA24. REPORTING SUBAWARDS AND EXECUTIVE COMPENSATION (NOVEMBER 2020)
		RAA25. PATENT REPORTING PROCEDURES (NOVEMBER 2020)
		RAA26. ACCESS TO USAID FACILITIES AND USAID'S INFORMATION SYSTEMS (AUGUST 2013)
		RAA27. CONTRACT PROVISION FOR DBA INSURANCE UNDER RECIPIENT PROCUREMENTS (DECEMBER 2014)
		RAA28. AWARD TERM AND CONDITION FOR RECIPIENT INTEGRITY AND PERFORMANCE MATTERS (April 2016)
		RAA29. RESERVED
		RAA30. PROGRAM INCOME (AUGUST 2020)
		RAA31. NEVER CONTRACT WITH THE ENEMY (NOVEMBER 2020)

REQUIRED AS APPLICABLE STANDARD PROVISIONS FOR NON-U.S. NONGOVERNMENTAL ORGANIZATIONS

Required	Not Required	Standard Provision
TBD		RAA1. ADVANCE PAYMENT AND REFUNDS (NOVEMBER 2020)
		RAA2. REIMBURSEMENT PAYMENT AND REFUNDS (DECEMBER 2014)
TBD		RAA3. INDIRECT COSTS – NEGOTIATED INDIRECT COST RATE AGREEMENT (NICRA) (NOVEMBER 2020)
		RAA4. INDIRECT COSTS – CHARGED AS A FIXED AMOUNT (NONPROFIT) (JUNE 2012)
		RAA5. INDIRECT COSTS – DE MINIMIS RATE (NOVEMBER 2020)
		RAA6. UNIVERSAL IDENTIFIER AND SYSTEM OF AWARD MANAGEMENT (NOVEMBER 2020)
		RAA7. REPORTING SUBAWARDS AND EXECUTIVE COMPENSATION (NOVEMBER 2020)
		RAA8. SUBAWARDS (DECEMBER 2014)



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	RAA9. TRAVEL AND INTERNATIONAL AIR TRANSPORTATION (DECEMBER 2014)
	RAA10. OCEAN SHIPMENT OF GOODS (JUNE 2012)
	RAA11. REPORTING HOST GOVERNMENT TAXES (JUNE 2012)
	RAA12. PATENT RIGHTS (JUNE 2012)
	RAA13. EXCHANGE VISITORS AND PARTICIPANT TRAINING (JUNE 2012)
	RAA14. INVESTMENT PROMOTION (NOVEMBER 2003)
	RAA 15. COST SHARE (JUNE 2012)
	RAA16. PROGRAM INCOME (AUGUST 2020)
	RAA17. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JUNE 2012)
	RAA18. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004)
	RAA19. PROTECTION OF HUMAN RESEARCH SUBJECTS (JUNE 2012)
	RAA20. STATEMENT FOR IMPLEMENTERS OF ANTI-TRAFFICKING ACTIVITIES ON LACK OF SUPPORT FOR PROSTITUTION (JUNE 2012)
	RAA21. ELIGIBILITY OF SUBRECIPIENTS OF ANTI-TRAFFICKING FUNDS (JUNE 2012)
	RAA22. PROHIBITION ON THE USE OF ANTI-TRAFFICKING FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION (JUNE 2012)
	RAA23. VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (JANUARY 2009)
	RAA24. CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) (FEBRUARY 2012)
	RAA25. CONDOMS (ASSISTANCE) (SEPTEMBER 2014)
	RAA26. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING(ASSISTANCE) (SEPTEMBER 2014)
	RAA27. LIMITATION ON SUBAWARDS TO NON-LOCAL ENTITIES (JULY 2014)
	RAA28. CONTRACT PROVISION FOR DBA INSURANCE UNDER RECIPIENT PROCUREMENTS (DECEMBER 2014)
	RAA29. CONTRACT AWARD TERM AND CONDITION FOR RECIPIENT INTEGRITY AND PERFORMANCE MATTERS (April 2016)
	RAA30. RESERVED
	RAA31. NEVER CONTRACT WITH THE ENEMY (NOVEMBER 2020)



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ANNEX E – ABBREVIATIONS AND ACRONYMS

AI	Artificial Intelligence
ARI	Acute Respiratory Infection
ART	Antiretroviral Therapy
BA	Breakthrough ACTION
BMGF	Bill and Melinda Gates Foundation
BR	Breakthrough RESEARCH
C-Change	Communication for Change
CBO	Community-Based Organization
CFR	Code of Federal Regulations
CSA	Child Survival Action
CSO	Civil Society Organization
EAR	Early Action Review
ENAP	Every Newborn Action Plan
EPMM	Ending Preventable Maternal Mortality
FBO	Faith-Based Organization
FCDO	United Kingdom’s Foreign, Commonwealth, and Development Office
FP/RH	Family Planning and Reproductive Health
FP2030	Family Planning 2030
GBV	Gender-Based Violence
GFF	Global Financing Facility
GH	Global Health
GHS	Global Health Security
GHSA	Global Health Security Agenda
HC3	Health Communication Capacity Collaborative
HCD	Human-Centered Design
HSS	Health Systems Strengthening
ICT	Information and Communication Technology
ID	Office of Infectious Disease
IMNHC	International Maternal Newborn Health Conference



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IPTp	Intermittent Preventive Treatment During Pregnancy
IR	Intermediate Result
JEE	Joint External Evaluation
LMICs	Low- or Middle-Income Countries
MCHN	Office of Maternal and Child Health and Nutrition
MEL	Monitoring, Evaluation, and Learning
ML	Machine Learning
MNCH	Maternal, Newborn, and Child Health
NGO	Non-Governmental Organization
OHA	Office of HIV/AIDS
PBC	Provider Behavior Change
PCMD	Preventing Child and Maternal Deaths
PEPFAR	The U.S. President's Emergency Plan for AIDS Relief
PrEP	Pre-Exposure Prophylaxis
PRH	Office of Population and Reproductive Health
PRO-IP	Policy on Promoting the Rights of Indigenous Peoples
RCCE	Risk Communication and Community Engagement
SBC	Social and Behavior Change
SBCC	Social and Behavior Change Communication
SDGs	Sustainable Development Goals
SIR	Sub-Intermediate Result
SRH	Sexual and Reproductive Health
SSA	Sub-Saharan Africa
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USAID	The United States Agency for International Development
USG	United States Government
VMMC	Voluntary Medical Male Circumcision
WASH	Water, Sanitation, and Hygiene



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WB

World Bank

WHO

World Health Organization