



# USAID | MADAGASCAR

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**Deadline for Questions** : January 10, 2025  
**Closing Date** : February 10, 2025  
**Closing Time** : 23:59, GMT+3 (Madagascar Time)  
**Subject** : Notice of Funding Opportunity (NOFO) Number: 72068724RFA00008  
**Program Title** : Surveillance, Operational Research, and Optimization of Knowledge-sharing for Action activity, SOROKA Activity  
**Federal Assistance Listing Number** : 98.001

Greetings,

The United States Agency for International Development (USAID) is seeking applications for a Cooperative Agreement from qualified entities to implement the “USAID Soroka” Activity. Eligibility for this award is restricted to Local Entities.

USAID intends to make one award to the applicant who best meets the objectives of this funding opportunity based on the merit review criteria described in this NOFO subject to a risk assessment. Eligible parties interested in submitting an application are encouraged to read this NOFO 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 NOFO and meet eligibility standards in Section B of this NOFO. This funding opportunity is posted on [www.grants.gov](http://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 NOFO and to ensure that it has been downloaded 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](http://www.grants.gov) or accessing the NOFO, please contact the Grants.gov Helpdesk at 1-800-518-4726 or via email at [support@grants.gov](mailto:support@grants.gov) for technical assistance or if you need assistive technology and are unable to access any material on this site.

Unless an exception in 2 CFR 25.110 applies, applicants must comply with 2 CFR 25 requirements to obtain a Unique Entity Identifier (UEI) and register in the System for Award Management (SAM.gov), as applicable. See Section E, Submission Requirements and Deadlines, for more information. The registration process may take many weeks to complete. Therefore, applicants are encouraged to begin registration early.

Please send any questions to the point(s) of contact identified in Section A.4. The deadline for questions is shown above. Responses to questions received prior to the deadline will be furnished to all potential applicants through an amendment to this notice posted to [www.grants.gov](http://www.grants.gov).

English is the official language of all award documents. In the event of inconsistency between any terms of this NOFO and any translation into another language, the English language version will control.

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,

Orion Yeandel  
Agreement Officer

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## **SECTION A: BASIC INFORMATION**

### **1. Executive Summary**

SOROKA is a Malagasy word which constitutes the root of the verb “misoroka”, meaning “to prevent”, corresponding to the aim of surveillance. SOROKA can be the acronym of the specific objectives of the project: Surveillance, Operational Research, and Optimization of Knowledge-sharing for Action activity.

The SOROKA activity is expected to be a \$7.5 million award for five years from March 2025 to March 2030. SOROKA's main objective is to advance the health of the Malagasy people through improvements in capacity-building and coordination and execution of data collection, management, synthesis, and use for public health action. Following the RISE project, SOROKA will enhance local capacity and expand leadership within the Ministry of Public Health (MOPH) to detect threats to global health security, and to plan and conduct emergency outbreak response. It will reinforce the country's capacity to plan, implement, and disseminate locally led research and evaluations, and increase public sector capacity to use epidemiologic and surveillance data for public health action.

SOROKA will be the main activity of USAID/Madagascar's Health Office for research on malaria, MNCH (mother, neonatal, and child health), WASH (water, sanitation, and hygiene), and GHS (global health security), for program evaluation, biological surveillance including AMR (antimicrobial resistance), emergency responses to health threats and institutionalization of epidemiology and laboratory data use for decision making. SOROKA will also provide targeted and need-based cross-sectorial training for the MOPH staff throughout its implementation. In general, SOROKA is intended to cover all HPN program elements, particularly malaria, MNCH, GHS and WASH.

### **2. Estimate of Funds Available and Number of Awards Contemplated**

USAID intends to award one Cooperative Agreement(s) pursuant to this notice of funding opportunity (NOFO).

Subject to funding availability and at the discretion of the Agency, USAID intends to provide \$7,500,000.00 in total USAID funding over a five (5) year period.

### **3. Start Date and Period of Performance for Federal Awards**

The anticipated period of performance is five (5) years. The estimated start date is March 17, 2025.

### **4. Agency Points of Contact**

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### **5. 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)

## **6. Authorized Geographic Code**

The geographic code for the procurement of commodities and services under this program is **935**. Except as may be specifically approved in advance by the Agreement Officer, all commodities and services that will be reimbursed by USAID under this award must be from the authorized geographic code specified in this NOFO, and must meet the source and nationality requirements set forth in 22 CFR 228.

## **SECTION B: ELIGIBILITY**

### **1. Eligible Applicants**

Eligibility is restricted to Local entities and organizations that have received less than \$25 million in USAID funding, at any tier, over the past five years; or for global health awards the organization has received less than \$25 million in U.S. Government funding at any tier, over the past five years. As defined in Section 7077 of Public Law 112-74, the Consolidated Appropriations Act, 2012 (P.L. 112-74), as amended by Section 7028 of the Consolidated Appropriations Act, 2014 (P.L. 113-76), and included by reference in subsequent appropriations acts, 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."

Faith-based organizations are eligible to apply for federal financial assistance on the same basis as any other organization and are subject to the protections and requirements of Federal law.

Additionally, USAID welcomes applications from organizations that have not previously received financial assistance from USAID.

Interested and eligible applicants may submit no more than one (1) application under this NOFO.

### **2. Cost Sharing**

Cost Sharing is not required for this activity.

## **SECTION C: PROGRAM DESCRIPTION (Please see the French translation of this section in Annex 8)**

This funding opportunity is authorized under the Foreign Assistance Act (FAA) of 1961, as amended. The resulting award will be subject to 2 CFR 200 – Uniform Administrative Requirements, Cost

Principles, and Audit Requirements for Federal Awards, and USAID's supplement, 2 CFR 700, as well as the additional requirements found in Section F.

## **I. Project Summary**

SOROKA is a Malagasy word which constitutes the root of the verb “misoroka”, meaning “to prevent”, corresponding to the aim of surveillance. SOROKA can be the acronym of the specific objectives of the project: Surveillance, Operational Research, and Optimization of Knowledge-sharing for Action activity.

The SOROKA activity is expected to be a \$7.5 million award for five years from Oct 2024 to Sept 2029. SOROKA's main objective is to advance the health of the Malagasy people through improvements in capacity-building and coordination and execution of data collection, management, synthesis, and use for public health action. Following the RISE project, SOROKA will enhance local capacity and expand leadership within the Ministry of Public Health (MOPH) to detect threats to global health security, and to plan and conduct emergency outbreak response. It will reinforce the country's capacity to plan, implement, and disseminate locally led research and evaluations, and increase public sector capacity to use epidemiologic and surveillance data for public health action.

SOROKA will be the main activity of USAID/Madagascar's Health Office for research on malaria, MNCH (mother, neonatal, and child health), WASH (water, sanitation, and hygiene), and GHS (global health security), for program evaluation, biological surveillance including AMR (antimicrobial resistance), emergency responses to health threats and institutionalization of epidemiology and laboratory data use for decision making. SOROKA will also provide targeted and need-based cross-sectorial training for the MOPH staff throughout its implementation. In general, SOROKA is intended to cover all HPN program elements, particularly malaria, MNCH, GHS and WASH.

## **II. Background and Problem Statement**

### **II.1. Country and Health situation**

Madagascar is the world's fifth largest island, situated in the Indian Ocean off the coast of southern Africa. Despite considerable natural resources, its population of 27 million [1] has one of the world's highest poverty rates with a GDP per capita of \$ 516. About 3/4 of the population lives on less than \$1/day. Its development is negatively impacted by enormous social and economic challenges due to recurrent political crises, weak governance, inadequate human and physical capital development. Climate crises and extreme vulnerability to external shocks are increasing and exacerbating poverty. These situations and slow economic growth have halted development and investments.

The Ministry of Public Health's (MOPH) budget is 5.5% of the government budget in 2023, far below the Abuja convention target of 15%. This budget is mainly dedicated to the management costs, while the vertical programs are inadequately funded and are primarily supported by external donors; therefore, the health budget is heavily dependent on donors. The MOPH runs 23 Regional Health Offices and 115 District Offices. The Madagascar health system is organized in 4 tiers for service delivery: 1) the first tier is composed of more than 40,000 community health workers (CHWs), providing services in accordance with the recent Community Health Strategy (USAID currently supports around 18,000 CHWs in 12 of the 23 regions); 2) the second tier is made of 2,812 public basic health centers (CSB), offering basic health care packages that are complementary and more comprehensive than those offered by CHWs; 3) the third tier is composed of level 1 and level 2 district referral hospitals (CHRD), and 4) the fourth tier is composed of regional referral hospitals and university hospitals (CHU). The frequent turn-over at all levels of the MOPH constitutes a challenge for

the continuity of engagement and for knowledge management.

**MNCH:** Maternal mortality has stagnated at 426 maternal deaths per 100,000 live births over the past twenty plus years. Maternal deaths are mainly due to complications of pregnancy or birth-related complications. Alarmingly, a third of this maternal mortality occurs among adolescents. In 2018/2019, the country faced one of the world's worst measles outbreaks, with 244,569 cases and 1,080 deaths; Certified polio free in 2018, weaknesses in Madagascar's service coverage have resulted in an upsurge of vaccine-derived poliovirus type 1 (cVDPV1).

**Malaria:** 100% of the Malagasy population is at risk for malaria, which was the second most frequent reason for health facility visits and the second most reported cause of in-hospital mortality in Madagascar in 2022 (NMP, 2023). Since 2017, Madagascar has been experiencing increasing malaria incidence, despite increased coverage of malaria prevention activities and expansion of case management. The number of facility-reported malaria cases increased from 1.95 million in 2020 to 2.34 million in 2021 before decreasing to 1.67 million in 2022 and then increased to over 3 million in 2023. *Anopheles gambiae* s.l. is the predominant vector. First-line antimalarial drugs are still very effective as revealed by drug efficacy studies in 2018, 2020, and 2022, but the risk of resistance to first line antimalarial drugs is high, given emerging evidence of partial artemisinin resistance in nearby countries.

**Global Health Security:** Madagascar is highly vulnerable to infectious diseases, including plague. More than half of the infectious diseases are zoonotic (spread between animals and people), and deforestation is one of the main culprits for the growing risk of zoonotic diseases from increased human-animal contact. Madagascar lacks the proper workforce to respond to emerging infectious diseases and health emergencies. Madagascar's overall health security preparedness is below average as measured by multiple reporting tools. For instance, Madagascar's average score was 48% for the State Part -Self Assessment Annual Reporting Tool (SPAR) and only 34% for the last Joint External Evaluation (JEE). The country struggles with endemic zoonotic diseases, such as plague, and is vulnerable to emerging infectious diseases and threats.

## **II.2. Prior USAID investments**

Since 2013, USAID has invested over \$13.5 million to support surveillance, research, infection prevention and control in Madagascar. The Surveillance and Data Management activity (SDM) was a \$5.5 million award over six years (October 01, 2013– September 30, 2019) that supported the MOPH's fever sentinel sites (FSS), operational research (OR) related to malaria and MNCH, and the MOPH's infectious disease response for emergencies including the pneumonic plague outbreak of 2017. In 2019, a \$8 million Research, Innovation, Surveillance, and Evaluation activity (RISE) was awarded and will end in 2024. The goal of RISE is to foster public health decision-making based on scientific evidence. Three main tasks were chosen that were of public health relevance to Madagascar: reduce malaria deaths and cases under the U.S. President's Malaria Initiative (PMI); prevent child and maternal deaths; and combat infectious diseases including plague surveillance and disease outbreak response. RISE provided training related to epidemiology and research to 901 participants, including 675 MOPH staff. RISE conducted several operational research (OR) projects related to malaria and MCH, as well as several program evaluations and surveillance activities, the therapeutic efficacy study (TES) of first-line antimalarial medications used in Madagascar (TES 2020 and 2022), the bio-efficacy of insecticide-treated mosquito nets (ITNs) distributed during the mass distribution campaigns (2018 and 2021), and an assessment of the quality of drinking water sources in 281 sites located at health facilities and communal water sources in 13 regions, to determine the primary chemical contaminants and levels of fecal pollution. Monitoring WASH quality has generated data about water quality in

USAID/ACCESS and USAID/RANO WASH intervention areas, as well as some JIRAMA (jirama sy rano malagasy, national society for electricity and water) facilities. These data have proven useful in understanding water quality in general in these regions and offering the Ministry of Water and Hygiene, the MOPH, and USAID the opportunity to reflect on how to approach water source selection and water treatment, both in small decentralized water sources, and in medium or larger sized water supply systems.

RISE supported biological surveillance systems (BSS) in 21 basic health facilities for an early detection and prompt disease control outbreak in accordance with international health regulations. Illnesses under surveillance include malaria, plague, influenza, COVID-19, arboviruses, febrile diarrhea, acute flaccid paralysis, febrile skin rashes, and foodborne illness. During the COVID-19 pandemic, RISE has performed more than 68,000 COVID-19 PCR tests (12 percent of national tests) and is the main partner of the MOPH on their public health response to plague. As part of GHS, RISE continued to support plague season preparedness, surveillance, diagnosis and comprehensive management, and initiated AMR and tick borne disease surveillance in 2024.

The USAID-funded SDM and RISE projects preceding the SOROKA project have significantly contributed to the reinforcement of surveillance and research and capacity building, with the implementation of the CSB-R (health facilities that perform biological surveillance), the mobilization of the mobile laboratory, the reinforcement of the laboratory testing capacity during the plague and COVID outbreak, the completion of operational research, the surveillance of water quality, and the training of MOPH staff.

### **II.3. Problem statement**

Madagascar continues to face significant infectious disease threats, including vaccine preventable disease outbreaks, and emergency response draws resources away from building a functional health system.

**Surveillance:** In addition to the COVID-19 pandemic, Madagascar has recently been affected by various epidemics including pneumonic plague, dengue fever, and rift valley fever (RVF), which underscore the importance of an early warning notification system, detection, and prompt decision-making. The Direction de la Veille Sanitaire, de la Surveillance Épidémiologique et Riposte (DVSSER) is the MOPH's directorate in charge of surveillance. DVSSER's national strategic plan for surveillance dated 2021-2023 has not been revised and approved. DVSSER implements comprehensive surveillance for the Integrated Disease Surveillance and Response (IDSR) system, which collects and analyzes weekly reports from about 2,000 CSBs throughout the country to identify unusual events, though few of the CSBs utilize tablets for electronic reporting. USAID is supporting DVSSER to implement biological surveillance on malaria, arthropod-borne diseases, and influenza-like illness (ILI) in 26 CSB-R, though not enough to cover the entire country. Good laboratory functionality is an integral part of the infection surveillance and prevention system, allowing effective epidemiological surveillance and rapid intervention. The MOPH has just approved the laboratory development strategy, which will be led by the LA2M (Laboratoire d'Analyse Médical de Madagascar) in charge of coordinating the biological surveillance. However, with only seven hospitals in its network, the LA2M's geographical coverage is limited. USAID has trained about 600 of MOPH's staff on surveillance-linked topics, and the CDC and the IOC-funded FETP (field epidemiology training program) have trained hundreds of MOPH technicians, which is highly appreciated by the Minister of Public Health for concretely reinforcing disease surveillance and investigation.

However, insufficient human resources, particularly during epidemics; insufficient financial resources including for rapid outbreak investigation and response; infrastructure and logistics; weakness in governance, leadership and coordination of epidemiological surveillance activities; weakness in the

collection, management and integration of information; and weak laboratory capacities (infrastructure, human resources, equipment and technical platform) negatively affect the system performance. Some technical programs have their own surveillance system, whose data are not integrated into the DVSSER's systems.

**One-Health and Emergency Response:** The One Health approach (integration between human, animal, and environment health) is nascent in Madagascar. The Decree n°2023-1356 signed in October 2023 which formalized the one-health platform is evidence of the Government's commitment and engagement to Global Health Security. Among the priorities is AMR (antimicrobial resistance) surveillance, due to misuse and overuse of antibiotics in humans and animals. In addition, there is a broad lack of capacity for zoonotic disease and AMR surveillance, and the response to health emergencies is not adequate. The ISAVET (veterinary epidemiology and surveillance), implemented by a USAID/FAO project is an opportunity to leverage surveillance using the One Health approach.

**Research:** In general, scientific research receives limited funding and engagement in Madagascar. The budget allocated to research is far below the expected 2% of the health budget programming and the 5% of development assistance in health. The MOPH has just appointed the INSPC (Institut National de Santé Publique et Communautaire) to coordinate research at MoPH, based on its role in training on public health. However, the MoPH research strategy is outdated (2016) and the lack of capacity to govern, coordinate and implement research, frequent turn-over at MOPH (including researchers) and lack of human resources negatively impact the capacity to implement high quality research. This stands in contrast to the Ministry of Higher Education that has developed a new research policy 2023-2023 and has dedicated research bodies like the CNARP (Centre National de Recherche Pharmacologique) and the Universities. The Ministry of Livestock also maintains the FOFIFA (Centre National de Recherche Appliquée au Développement Rural), the entity in charge of research.

Overall, the capacity for data management, quality, and use for policy and programming is sub-optimal. Previous training on surveillance, research and outbreak investigation lacked systematic training follow-up to ensure that newly acquired skills and competencies have been used. In addition, pre-service training has not been adapted to the local context.

### **III. Project Relationship to USAID and Country Strategy**

#### **III.1. Relationship with the Country Development Collaboration Strategy (CDCS)**

This activity will contribute to the Development Objective 1 of the Country Development Collaboration Strategy (CDCS) which is "Improved Human Capacity to Contribute to the Country's Journey to Self-Reliance" and the intermediate result 1-1 "Sustainable Health Impacts Accelerated."

#### **III.2. Integrated Country Strategy (ICS)**

This activity also contributes to the Integrated Country Strategy, specifically to the Mission Goal 3 "Madagascar and Comoros' human capacity strengthened as a foundation for country-owned democratic governance, security, and development", the Mission Objective 1.2 "Fundamental human rights promoted and protected, particularly for marginalized populations", and the Management Objective 2 "Support services expanded to protect the health and safety of personnel, strengthen host country relationships, and allow for program monitoring".

#### **III.3. Relationship with global strategies**

This activity will contribute to USAID's Global Health goals of combating infectious disease and preventing child and maternal deaths (PCMD).

- USG assistance for malaria control in Madagascar is funded through the U.S. President's Malaria Initiative, PMI, which combats malaria through four major interventions: indoor residual spraying (IRS); promotion and distribution of long-lasting insecticide-treated bed nets (ITNs); intermittent preventive treatment of malaria in pregnancy (IPTp); and malaria diagnosis and treatment, with cross-cutting support for supply chain and health systems strengthening, social and behavior change, surveillance, monitoring and evaluation, and operational research. PMI's global objective is to, by 2026, reduce malaria mortality by 33% and morbidity by 40% percent as compared to 2015 levels. PMI supports all four key interventions in Madagascar, and the four cross-cutting areas noted above. In addition, PMI has supported elimination-related activities and will soon support testing and treatment of Plasmodium vivax (Pv) cases in select districts with high Pv burden.
- The Maternal and Child Health and Nutrition Technical Roadmap is a framework that guides USAID's maternal and child survival programs to meet SDG 2030 targets. It serves as the foundation of USAID's commitment to Prevent Child and Maternal Deaths alongside the Agency's investments in family planning, malaria, and health systems strengthening. The strategy's global performance is measured by six key indicators: (1) contraceptive prevalence rate; (2) contraceptive security; (3) under-five mortality; (4) births attended by skilled birth attendants; (5) Diphtheria, Pertussis and Tetanus final (DPT3) vaccination by age 12 months; and, (6) people protected from malaria with an insecticide-treated net (ITN).
- USAID's GHS program fills critical gaps in building sustained and coordinated One Health capacities that incorporate linkages between human, animal, and environmental health. It works with countries to identify and address their highest priority gaps, with a special focus on specific JEE technical areas (Disease Surveillance, National Laboratory System, Human Resources, Antimicrobial Resistance, Zoonotic Disease, Biosafety and Biosecurity, Infection Prevention and Control, and Risk Communication and Community Engagement). In collaboration with countries and working with a unique set of multi-sectoral partners, the GHS Program strengthens preparedness and ensures capacities are in place to 1) prevent avoidable disease outbreaks, 2) detect threats early, and 3) respond rapidly and effectively when outbreaks occur.
- In support of the White House Action Plan on Global Water Security and the U.S. Government Global Water Strategy, USAID programs notably on strategic objectives #2 "Increase equitable access to safe, sustainable, and climate-resilient water and sanitation services and adoption of key hygiene behaviors".

## **IV. Technical Approach and Scope**

### **IV.1. Guiding principles**

- Use of innovative and audience-appropriate approaches for data and information-sharing:  
The timely availability, accessibility, and utilization of surveillance, evaluation and research findings across the key technical areas (malaria, PCMD, GHS, WASH) by the Government, donors, and USAID implementing partners (IPs) is critical to ensure high-quality, evidence-based health programming. To capture data from various sources, it is important to develop a platform for research data repositories, sharing and access among diverse audiences (e.g., USAID, PMI, MoPH, donors, implementing partners, and academic institutions). SOROKA will contribute to these efforts and will emphasize data use, analysis, sharing, dissemination, outbreak responses, and policy design.
- Balance the needs of stakeholders (including MOPH, USAID/PMI, academic institutions) and the applicant with a profile of a research institution:

Research to address identified knowledge gaps and opportunities to improve services is essential for decision making. The Recipient will focus on research questions informed by stakeholders (e.g., MOPH, USAID, PMI, IPs, academic institutions) to increase their use for decision making by the MoPH. The Recipient should also prioritize scientific publication and sharing, led by Malagasy authors, at national and international levels and ensure results are disseminated throughout the country. Finally, close collaboration and partnership with Donors (USAID and PMI) and MOPH including their direct involvement into the planning, execution and dissemination of research findings is key and will ensure the quality and compliance with USG and MOPH research policy.

- Self-reliance, localization, and sustainability plan:

For USAID, self-reliance entails a capacity to plan, finance, and implement solutions to foster local development. This activity, which will be implemented by local partners, will contribute to USAID's localization priorities. By prioritizing local capacity building, the program aims to progressively reduce dependency on external aid, ultimately creating a pathway toward community-driven development where international assistance becomes increasingly unnecessary. Programs must measure their work by how far every investment moves them closer to that goal and the use of local solutions. While local leadership remains the cornerstone of this approach, short-term technical assistance from external partners may be utilized as needed to maintain high technical and programmatic standards..

- Leveraging funds

As funding constraints continue in the context of competing needs and priorities, this activity should develop strategies and tools to expand its resources and work with other donors to produce greater results. This requires a strong coordination and collaboration with the MOPH and Stakeholders working in technical areas targeted by this activity.

#### **IV.2. Theory of change**

If high-quality and context-appropriate surveillance, research, and evaluation activities are implemented with engagement and ownership of national institutions,  
AND

If local capacity to coordinate, conduct, and use data from high-quality surveillance, operational research, and program evaluation activities is improved,  
THEN

Surveillance, research, and evaluation data will be effectively leveraged by local actors to advance meaningful improvements in programming and policy for disease prevention and control.

#### **IV.3. Activity Goal and Objectives**

The activity goal is to advance the health of the Malagasy people through improvements in capacity-building for and coordination and execution of data collection, management, synthesis and use for public health action. This goal will be met through accomplishing four specific objectives:

1. Improve national surveillance capacity to rapidly and accurately detect outbreaks and priority health threats
2. Improve national capacity (human and organizational) to plan, implement and disseminate research and evaluations
3. Increase public sector capacity to use epidemiologic and laboratory data for public health action.
4. As a cross-cutting objective, the fourth objective is to sustainably improve human resource and institutional technical capacity for the surveillance of malaria and other conditions linked to global health security, maternal and child health, and WASH.

#### IV.4. Intermediate Results & Illustrative Interventions

##### **OS 1: Improve national surveillance capacity to rapidly and accurately detect outbreaks and priority health threats**

SOROKA will support the Government of Madagascar (GoM) to improve the quality and availability of surveillance data by building a center of excellence at MOPH level, for surveillance of human, zoonotic and environmental conditions which includes water quality assessment. In particular, it will focus on the following GHS goals:

1) Health Emergency Management as outlined by the WHO Joint External Evaluation (JEE) and the WHO IHR Benchmarks (international health regulation), and ensuring an exchange, analysis, and sharing of disease data for mapping, strategic planning, and decision making and

2) on building the GoM capacity to respond effectively and on time to infectious disease outbreaks. SOROKA will continue to support biological surveillance of Arboviroses, arthropod-borne diseases, malaria (parasitology including pfhrp2/3 gene deletions, therapeutic efficacy studies [TES]), respiratory infections (ILI), measles, AFP (acute flaccid paralysis), and other health and environmental conditions as appropriate. Every activity planned should respond to country needs, fill critical gaps, and ensure GoM leadership and ownership, donor coordination and USAID and PMI access to data.

Illustrative activities per each intermediate result are presented in the table below:

|                             |                                                                                                                                                                         |                                                                                   |                                                                                        |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| <b>Intermediate Results</b> | <b>1.1</b> Improve quality and availability of surveillance data to answer key questions about human, zoonotic, and environmental conditions (including water quality). | <b>1.2</b> Reinforce coordination across surveillance stakeholders in Madagascar. | <b>1.3</b> Bolster laboratory surveillance capacity at national and peripheral levels. |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|

|                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Illustrative Activities</b> | <ul style="list-style-type: none"> <li>-Promote institutionalization of data quality in the organizational culture</li> <li>-Conduct integrated data quality/ regular monitoring.</li> <li>-Update/develop data governance policies including data ownership, storage, security, network of surveillance data/sites.</li> <li>-Training on data quality</li> <li>-Operationalize two-way feedback-mechanisms (quality of data and use)</li> <li>-Strengthen event verification systems.</li> <li>-Build on the experience of previous USAID activities WASH Quality monitoring to generate water quality data from a sampling of water sources in the previous and current USAID WASH activities regions.</li> </ul> | <ul style="list-style-type: none"> <li>-Leverage existing resources to build the DVSSER leadership in surveillance (strategy, methods, training, data modeling, platform/logistic for weekly data analysis with regions and districts)</li> <li>-Mapping of entities involved in the surveillance including roles, responsibility and technical/geographic scope.</li> <li>-Support the coordination between MoPH specific programs and DVSSER.</li> <li>-Collaborate with the Ministry of Livestock, Ministry of environment, and Ministry of Higher Education for the surveillance of GHS priorities diseases.</li> </ul> | <ul style="list-style-type: none"> <li>Support development of national policy, guideline, training, and supply chain management for adequate secured specimen collection</li> <li>-Maintain /Expand the quality and scope, coverage, and capacity of surveillance sites including CSB-R, LA2M network, entomological surveillance, AMR, water quality, environment impact on health (climate change).</li> <li>-Digitization of surveillance systems (CSB-R, entomological surveillance, climate change and health) and networks</li> </ul> |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## **OS 2: Improve national capacity (human and organizational) to plan, implement and disseminate research and evaluations**

Supporting the MOPH's institutional and government capacity to plan and implement locally led research/evaluations will advance USAID's localization strategy. Activities should ensure that both the MOPH's research/evaluation governance and coordinating structures are in place and functional, local researchers are trained and have the tools and procedures to implement research and they are connected to other research institutions for learning. Some of these research questions have informed the Malaria Operational Plan (MOP) and Health Operational Plan (OP). Other research questions will be identified through establishing an MOH research agenda per technical area and input from Stakeholders.

Illustrative activities per each intermediate result are presented in the table below:

|                             |                                                                                                                                                        |                                                                                                  |                                                                                                                                                                               |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Intermediate Results</b> | <b>2.1</b> Improve institutional and governance capacity to develop public health research policies and coordinate and disseminate research activities | <b>2.2</b> Improve the capacity of local actors to conduct high-quality research and evaluation. | <b>2.3</b> Conduct high quality, locally-led research and evaluation activities with national institution engagement, including testing or evaluating new tools/technologies, |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                       | testing alternative deployment strategies of existing tools, to help address knowledge gaps.                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Illustrative Activities</b> | <ul style="list-style-type: none"> <li>-Improve the Leadership and organizational capacity of INSPC and/or other relevant MOPH entities in charge of research coordination.</li> <li>-Development of strategic plans, SOPs, policies, and coordination committees related to conduct of research and dissemination of findings</li> <li>-Build research project management systems including capacity to respond to research funding opportunities.</li> <li>-Support Webinar, Scientific conferences, Websites/social media and other relevant learning approaches.</li> </ul> | <ul style="list-style-type: none"> <li>-Provide training of researchers and support research managers on planning, conducting, analyzing, and disseminating research finds.</li> <li>-Facilitate collaboration with national or international research institutions and learned societies.</li> </ul> | <ul style="list-style-type: none"> <li>-Develop/refine/update research questions and evidence-based policies &amp; interventions needed especially for MCH, malaria, ID</li> <li>-Develop general and study-specific SOPs to ensure high-quality research.</li> <li>-Effective research implementation</li> <li>-Apply appropriate analytical approaches (e.g., statistical methods, qualitative data analysis, other) to relevant data</li> <li>-Support post-emergency response evaluation</li> <li>-Conduct bio-efficacy of LLINs</li> </ul> |

**OS 3: Increase public sector capacity to use epidemiologic and laboratory data for public health action.**

SOROKA will support the MOPH to improve its capacity to interpret and disseminate data, develop tools, mechanisms and workforce to plan public health/emergency response. SOROKA is the USAID platform for timely outbreak response that addresses new/emerging challenges identified by USAID, MOH, PMI, and GHS. SOROKA will help the MOH to institutionalize joint (MOH and Partners) data (from surveillance, research, and epidemiology) analysis and review to inform policy.

Illustrative activities per intermediate result are presented in the table below:

|                             |                                                                                                                                                                   |                                                                                                                                                  |                                                                                                                                        |                                                                                                     |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <b>Intermediate Results</b> | <b>3.1</b> Improve capacity among local actors for data analysis and interpretation, including interpretation of surveillance and research data and assessment of | <b>3.2</b> Improve logistical and management capacity and readiness of health personnel and response teams to address public health emergencies. | <b>3.3</b> Support local actors to Implement appropriate public health responses to human, zoonotic, and environmental health threats. | <b>3.4</b> Engage national institutions in joint-data analysis to improve data use to inform policy |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|

|                                |                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                   |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                | emergency risk and readiness                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                   |
| <b>Illustrative Activities</b> | <ul style="list-style-type: none"> <li>-Support innovative approaches (including new technology) and platform for data analysis, visualization, exchange and sharing (including for plague) for better use.</li> <li>-Support elaboration and dissemination of risk maps.</li> <li>-Support development and dissemination of weekly/monthly SITREP (situational report).</li> </ul> | <ul style="list-style-type: none"> <li>-Support the developing and coordination of preparedness plans.</li> <li>-Establish/support early warning systems.</li> <li>-Develop/ support emergency response plan, and SOP</li> </ul> | <ul style="list-style-type: none"> <li>-Support implementation of response plans and operations.</li> <li>-Support implementation of after-action review.</li> <li>-Emergency funds mobilization and management skills</li> <li>-Optimize the mobile laboratory during emergency response</li> </ul> | <ul style="list-style-type: none"> <li>-Conduct knowledge transfer training (shift from scientific to operational language)</li> <li>-Policy brief development and dissemination</li> <li>-Promote culture of data use</li> </ul> |

**OS 4: Sustainably improve human resource and institutional technical capacity for the surveillance of malaria and other conditions linked to global health security, maternal and child health, and WASH.**

There is still a significant shortage of health workers working in surveillance, epidemiologic research, and data analysis and use. The approach will be pre-service training (in collaboration with and support to the Universities) and per-service training. The Recipient will develop a need-based training plan, conduct training and follow-up through a consultative approach with key MOH stakeholders.

|                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Intermediate Result</b>     | <b>4.1</b> Improve quality of training on surveillance, research, and evaluation, based on local needs and in partnership with local experts:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <b>Illustrative Activities</b> | <p><b>General</b></p> <ul style="list-style-type: none"> <li>● Support to the Universities to update training curriculum</li> <li>● Epidemiology and Biostatistics related training</li> <li>● FETP</li> </ul> <p><b>Malaria</b></p> <ul style="list-style-type: none"> <li>● Malaria surveillance</li> <li>● Malaria course (Paludologie)</li> </ul> <p><b>ID-GHS</b></p> <ul style="list-style-type: none"> <li>● Training related to the infection prevention and control</li> <li>● Operational research training</li> </ul> <p><b>WASH:</b></p> <ul style="list-style-type: none"> <li>● Training of the regional MOH and MoWASH officials to implement national water quality monitoring plan</li> </ul> |

#### **IV.5. Key Personnel**

The following positions are designated as Key Personnel. The proposed Key Personnel should reflect the communities SOROKA will serve and represent a diverse, gender balanced team. The roles and responsibilities and minimum qualifications for each Key Personnel position are described below:

Chief of Party: The Recipient must designate a Chief of Party who will serve as the main point of contact for the contract, providing vision, direction, leadership, and management for the project. S/he will serve as the project representative for all issues, concerns, or problems.

Chief of Party's Qualifications:

- Master's degree or higher in Public health, medicine or other relevant fields
- At least ten years of professional experience in the management of health-related activities, with at least three years of providing senior-level leadership (e.g., Project Director, Deputy Director)
- Fluent French oral and written communication skills is required; proficient Malagasy oral and written communication is required; proficient English oral and written communication skills is preferred
- Knowledge of U.S. Government or international development organization policies and procedures as they relate to international development is preferred.

Scientific Coordinator: The Recipient must designate a Scientific Coordinator who will manage the day to day coordination of the technical aspect of the project. S/he will facilitate tracking of milestones and deliverables, coordinate technical sessions with key stakeholders and ensure high technical standards for project products.

Scientific Coordinator's Qualifications:

- Master's degree in Public health, medicine or other relevant fields. A PhD is an asset.
- At least five years of professional experience in scientific research and publication
- At least five years of professional experience in management of health-related project, including data management
- Fluent French oral and written communication skills is required; proficient Malagasy oral and written communication is required; proficient English oral and written communication skills is preferred

Finance and Administration Specialist: The Recipient must designate a Finance and Administration Specialist responsible for overseeing all aspects of budgeting, financial management, and financial reporting; sub-contract management and procurements; human resources management; asset management; logistics; and compliance with terms and conditions of the contract. This individual will be responsible for preparing financial reports for submission to USAID, ensuring funds expended are compliant with the U.S. Government regulations and policies, and ensuring systems and processes are implemented effectively to support implementation of the contract, including fraud and risk mitigation practices.

Finance and Administration Specialist's Qualifications:

- Minimum of five years of experience in financial and administrative management for development projects is required.
- At least three years of experience in risk management and implementation of internal controls is preferred.
- Fluent French oral and written communication skills is required; proficient Malagasy oral and written communication is required; proficient English oral and written communication skills is preferred.
- Demonstrated familiarity with U.S. Government or international donors financial reporting and

compliance requirements are required.

## **V. Implementation Requirements**

### **V.1 Geographical coverage**

All regions are prone to outbreaks and have weak and vulnerable response systems. SOROKA activities on surveillance, scientific research, program evaluation, and training will cover all 115 health districts in Madagascar, prioritizing the highest vulnerability and risk.

### **V.2 Timeline**

The activities will start upon award. All of the activities will be implemented during the first year. The outbreak investigation and response will take place based on the needs. The scientific research will be reinforced during the preparation of scientific events, like conferences. As the SOROKA is the follow-on of the RISE project, no major challenges are expected for the first year of transition.

### **V.3 Collaboration**

SOROKA will build on the achievements of the previous USAID-funded projects, like RISE, Impact Malaria, IDDS (infectious diseases detection and surveillance), etc. SOROKA also will have close collaboration with USAID-funded bilateral activities, such as ACCESS Miahly for the community surveillance, the MAHENIKA for the commodities and reagents, the Rano Maharitra for the WASH-related topics, and the One Health project for the technical complementarity. It will have as well collaboration with centrally-managed projects, like ARAKISA for the data use, the USAID-STRIDES for the coordination on laboratory development, the PMI EVOLVE for the entomology, and the PMI-REACH for the malaria elimination. The SOROKA activity will collaborate and coordinate with other entities outside USAID and some strategic Ministries within the GoM like the Ministry of livestock and the Ministry of Higher education and key development partners: the UN, Global Fund, World Bank, local NGOs, and the private sector.

### **V.4 Mechanism: Cooperative agreement**

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 Health Service Delivery. Additionally, the specific research questions, the types and magnitudes of epidemics, and the type of outbreak response are undetermined at this time of design, leaving the flexibility for the Implementation Partner to refine activities, which will be feasible through an assistance instrument.

The mechanism for this activity will be a Cooperative agreement, as we anticipate substantial involvement of USAID and PMI.

### **V.5 Substantial involvement**

-Approval of the Recipient's Annual Implementation Plan: The Annual Implementation Plan is the agreement that details the specific activities that will operationalize the broader framework agreement of the award. It is through the Annual Implementation Plan that USAID can ensure that the Recipient is in fact implementing the program that USAID agreed to assist. The Annual Implementation Plan is therefore a key management tool that USAID needs to approve to ensure that project activities are consistent with the program that the Recipient proposed.

-Approval of Key Personnel: The Chief of Party and two additional key positions are identified as key personnel. All changes to these individuals must be submitted for the approval of the Agreement

Officer or the AOR (if delegated by the AO to the AOR in writing). Any change to the key personnel positions requires the approval of the Agreement Officer. Any change to the key personnel roles and responsibilities requires consultation with USAID.

-Approval of Monitoring and Evaluation Plans, the second USAID's key management tools. Whereas the Annual Implementation Plan details how the Recipients activities will be operationalized, this plan measures if in fact the results sought through program implementation have in fact been achieved. This plan is therefore an essential tool for USAID to hold the recipient accountable, to allow for adjustments where implementation challenges occur and to allow USAID program managers to report to USAID management on results achieved.

-Access to data and involvement in analysis: Data generated through surveillance systems, research studies, program evaluations, and other activities supported by SOROKA will be made available to the MOPH, USAID, and PMI in a timely manner. These stakeholders may also work closely with the Recipient on data analysis and drafting of key study findings.

-Agency monitoring to permit specific kinds of direction or redirection of the work. USAID monitoring to authorize specified kinds of direction or redirection due to performance issues, site-visit feedback, or interrelationships with other projects. Any involvement that results in a change in the Program Description or approved budget must be approved by the Agreement Officer.

-Approval of Construction: No USAID funds under this award will be used to carry out or support construction and infrastructure activities without the express written consent and approval of the Agreement Officer.

-Approval of Subawards: The Recipient must submit the required information for all subawards.

-Ability to halt an activity: If the recipient does not meet detailed performance specifications

## **VI. Program principals**

### **DEIA & Inclusive Development**

DEIA will be considered across all project components: research questions, protocol data collection, team (research, outbreak investigation, surveillance), implementation, finding dissemination, training. The marginalized groups will be encouraged to apply as investigators, and the remote districts will be prioritized during implementation.

### **Gender**

In alignment with the U.S. National Strategy on Gender Equity and Equality, the recipient is responsible for integrating gender into all relevant aspects of design and implementation. Advancing gender equality between females and males, and empowering women and girls to participate fully in and benefit from the development of their societies is vital to achieving USAID's development objectives. As per USAID's ADS Chapter 205: Integrating Gender Equality and Female Empowerment in USAID's Program Cycle, it is important that the awardees of this contract work with USAID/Madagascar, its implementers, and the GOM to ensure the needs of women and girls are met, and that women and men are provided equal opportunities to prosper. The Recipient will be required to address gender and inclusive development concerns in its proposal, in compliance with recommendations provided by the USAID Madagascar CDCS.

The activity will contribute indirectly to address challenges faced by women and youth and marginalized groups through capacity building, economic empowerment and GBV reduction. Targeted beneficiaries will be identified through an inclusive development approach. During the elaboration of

CDCS, the gender analysis was conducted, whose results will be considered in this project. The HPN has also conducted a gender discussion group with Implementing Partners, MOPH, and Ministry of Population for the three ongoing designs (MIAHY, MAHENIKA, SOROKA). The three SOROKA key personnel will take USAID Gender 101 training. The recipient must ensure women constitute at least 50% of beneficiaries of the training. Gender approach will be considered for staff and for beneficiaries. This will be reflected in the work plan and reports.

### **Youth**

Youth will be considered in training and internship. During recruitment of researchers and investigators. The project will develop specific questions related to youth and enable youth development environments by providing opportunities in research and training. As mentioned earlier, the collaboration with the Ministry of education.

### **Localization**

The activity emphasizes a co-creation approach involving local entities to ensure alignment with national priorities and resources. The involvement of capable and committed local organizations, confirmed during the co-creation workshop, highlights the presence of national expertise in areas such as human resources, laboratories, and research centers, despite limited opportunities. The recipient will collaborate with local entities to implement activities and regularly incorporate local perspectives, particularly from marginalized populations, while framing activities within national strategies to ensure relevance.

To promote sustainability, the recipient will support partner institutions in developing training plans to enhance their institutional capacity and outreach to youth and women, addressing cultural constraints. Training will aim to create a qualified workforce and strengthen the institutional capacities of the Ministry of Public Health (MOPH) and the private sector, fostering greater autonomy and long-term impact. The recipient will ensure that the activity's benefits continue beyond the activity end date by linking and scaling existing resources and promoting partnerships among learned societies, businesses, and universities.

The recipient will work with capable local partners to support their sustainability rather than perform their duties, fostering self-reliance and institutional development. Partnerships with leading institutions will be prioritized, leveraging existing expertise and resources to maximize results. Where necessary, the recipient will build capacity for local organizations, encouraging the appropriate expansion of existing institutions to sustain and scale impact..

### **Climate Integration and environment compliance**

Compliance with USAID's Environmental Regulations is a legal requirement as well as Agency policy. The recipient shall be responsible for ensuring that all environmental mitigation/adaptation measures, proposed in the Initial Environmental Examination (IEE) or developed as a result of environmental screening of activities during implementation, are adhered to and that grants and subcontracts comply with the IEE. This project is covered under the Madagascar Health Sector Strengthening (HSS) Project IEE expiring 11/30/2027. The recent climate risk management screening as part of the CDCS has identified potential impacts linked to climate risks for Health sector Strengthening IEE. Climate risk assessment (HSS) activities are ranked as low or moderate and this is also stated in the IEE. The HPN has ongoing approaches to climate risk mitigation that will be considered under this new award.

### **Private Sector Engagement**

Since the design of this project, the private sector has been engaged. They will be also engaged for its implementation. The implementing partner will explore further opportunities for implementation (eg: mobile telephone, drone,...)

### **Flexibility of Scale and Adaptability:**

The recipient is expected to build adaptive learning into activity implementation to ensure systems and processes for iterative learning are in place to inform activity decisions, customize interventions and make course corrections, if necessary.

### **Transparency and Accountability:**

The recipient is expected to consider how to contribute to improved transparency and accountability within the scope of the activity. This can range from small-scale activities, such as sharing of monitoring data with local participants, to much larger-scale programs that focus on policy-level changes. The recipient should describe how the activity is expected to contribute to improved transparency and accountability in this section.

### **Science Technology Innovation and Partnerships (STIP):**

The recipient will consider the MOPH priorities in terms of digitalization of the health system. STIP-related efforts often focus on making investments more cost-effective, accelerating the timeline for obtaining results, and/or bringing ground-breaking innovations to scale.

The recipient will also explore innovative solutions, such as mobile and ICT-based solutions, to expand outreach via technology.

### **Branding and Marking:**

In this activity, the recipient must ensure compliance with USAID's ADS 320 Branding and Marking as well as USAID's Graphic Standard Manual. The USG is committed to a long term partnership with Madagascar that is built on a foundation of mutual interest, respect, and trust. Communications and outreach are essential elements of the USG public diplomacy strategy to ensure the Malagasy public is well-informed about USG civilian assistance programs in Madagascar. The recipient's communication and scientific publication activities will be consistent with the public diplomacy strategy as implemented by the U.S. Embassy Antananarivo.

### **Language and Translation:**

Appropriate translation into French or local languages is critical to the success of this activity. However, the vast majority of the activities under the award will be in English; these will be dictated by the target audiences. The recipient must have access to the necessary resources to ensure timely and quality English translation; all translations need to be thoroughly vetted by the recipient prior to submission to USAID Madagascar.

### **Cultural Norms:**

The recipient must remain culturally sensitive during the implementation of this project and attend to both change and resistance to shifting gender norms.

## **VII. Plans**

### **VII.1 MEL plan**

The recipient will design and implement a MEL plan based on the logic frame and theory of change to ensure measure of progress to the objectives. The Recipient must work closely with USAID to finalize indicators and set performance targets based on USAID guidance and requirements. The Recipient is responsible for data collection, analysis, and performance reporting required by USAID per defined monthly, quarterly and annual results reporting cycle. The Recipient must submit a final Performance Monitoring and Evaluation Plan for USAID approval no later than 90 days after award.

### **VII.2 Annual Work Plan**

The first annual Implementation Work Plan must be submitted to the AOR and is subject to AOR approval as soon as practicable following award, but no later than 30 days after the award is ratified.

### **VII.3 Closeout plan**

Ninety (90) days prior to the end of the Agreement, the recipient shall submit a closeout plan to the AOR and the Acquisition and Assistance Office. The closeout plan shall include: brief program summary; brief program timeline; financial status report; final Financial Status Report timeline; latest NICRA or indirect cost rates; anticipated balance of federal funds after expiration of the instrument; final inventory of residual non-expendable property, which was acquired or furnished under the instrument; status of all program audit reports per the instrument's provisions; final audit report timeline; final report timeline and job descriptions for personnel anticipated to serve during the closeout phase.

## **VIII. Acronyms:**

AO: agreement officer  
AOR: agreement officer representative  
ADS: automated directive system  
CDCS: Country Development Cooperation Strategy  
CHISU: Country Health Information Systems and Data Use  
CHW: community health worker  
CSB: primary health care facility  
CHRD: district reference hospital  
CHU: university hospital  
CSB-R: primary health care facility, practicing lab surveillance  
DEIA: Diversity, Equity, Inclusion and Accessibility  
DO: development objective  
DVSSER: directorate of surveillance and response  
FETP: field epidemiology training program  
GBV: gender-based violence  
GHS: global health security  
HSS: Health system strengthening  
HPN: office of health-Population-Nutrition  
HR: human resource  
FAO: food and agriculture organization  
INSPC : national institute for public and community health  
ID: infectious diseases  
IEE: Initial Environmental Examination

ICS: integrated country strategy  
IOC: Indian Ocean Commission  
IP: implementing partner  
IR: intermediate result  
JEE: join external evaluation  
MEL plan: monitoring, evaluation and learning plan  
MOPH: ministry of public health  
MNCH: mother, neonatal, and child health  
NGO: non-government organization  
OS: specific objective  
PMI-REACH: Reaching Every At-Risk Community and Household with Malaria Services  
SOP: standard operating procedure  
UN: united nations  
USAID: united states agency for international development  
USAID-STRIDES: STrengthening Infectious Disease DEtection System  
USAID-RISE: research-innovation-surveillance-evaluation  
USG: US government  
WASH: water, sanitation and hygiene

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## SECTION D: APPLICATION CONTENT AND FORMAT

### 1. General Content and Form of Application

#### Preparation of Applications:

Each applicant must furnish the information required by this NOFO. Applications must be submitted in two separate parts: the Technical Application and the Business Application. This subsection addresses general content requirements applying to the full application. Please see subsections 2 and 3, below, for information on the content specific to the Technical and Business Applications. The Technical Application must address technical (e.g., programmatic) aspects only while the Business Application must present the budget and budget narrative, address risk, and include required standard forms and certifications.

Both the Technical and Business 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
- Notice of Funding Opportunity number (please see Page #1)
- 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).

Any erasures or other changes to the application must be initialed by the person signing 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. Applications must comply with the following:

- 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.
- Unless otherwise noted, the Technical and Business Applications and all supporting documents must be submitted in English and/or in French.
- Use standard 8 ½" x 11", single sided, single-spaced, 12 point Calibri font, 1" margins, left justification and headers and/or footers on each page including consecutive page numbers, date of submission, and applicant's name.
- 10 point font can be used for graphs and charts. Tables however, must comply with the 12 point Calibri requirement.
- Submitted via Microsoft Word or PDF formats, except budget files which must be submitted in Microsoft Excel.
- The estimated start date identified in Section A of this NOFO must be used in the Business Application.
- The Technical Application must be a searchable and editable Word or PDF format as appropriate.
- The Budget (submitted as part of the Business 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 Budget submission is the unlocked Excel version.

Applicants should retain a copy of the Technical and Budget Applications and all enclosures for their records.

## **2. Technical Application Format**

The Technical Application should be specific, complete, and presented concisely. The application must demonstrate the applicant's capabilities and expertise with respect to achieving the goals of this program. The application should take into account the requirements of the program and merit review criteria found in this NOFO.

- a- Cover Page** (See Section D.1 above for requirements)
- b- Table of Contents** (Include major sections and page numbering to easily cross-reference and identify merit review criteria)
- c- Executive Summary (One page)** (The Executive Summary must provide a high-level overview of key elements of the Technical Application.)
- d- Technical Approach (no more than 30 pages)**

## **3. Business Application Format**

The Business Application must be submitted separately from the Technical Application. While no page limit exists for the full Business application, applicants are encouraged to be as concise as possible while still providing the necessary details. The Business Application must reflect the entire period of performance, all costs associated with activities included in the Technical application (including those to be financed by cost share, or any other non-Federal funding source), and include the required and completed SF-424 Standard Forms. Applicants should ensure that any required supporting documentation identified in the Budget and Budget Narrative instructions below is included in an annex.

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 Business Application must contain the following sections:

- Cover Page (See Section D.1 above for requirements)
- SF 424 Application and Budget Form

The applicant must sign and submit the following forms from the Standard Form (SF- 424) series. Standard Forms and their accompanying instructions can be accessed electronically at <https://www.grants.gov/forms/forms-repository/sf-424-family> (use the "Grants.gov" forms).

This includes the submission of the:

- Application for Federal Assistance (SF-424)
- Budget Information for Non-Construction Programs (SF-424A).

Applicants should carefully review the official Grants.gov instructions for completing each Standard Form. Failure to accurately complete these forms could result in the rejection of the application.

### **a. 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) found at <https://www.grants.gov/forms/forms-repository/sf-424-family> (use the "Grants.gov" form)
- (3) Certificate of Compliance: If applicable, U.S. NGOs may submit a copy of the Certificate of Compliance if the organization's systems have been certified by USAID/Washington's Office of Acquisition and Assistance (M/OAA).

#### **b. Budget and Budget Narrative**

The Budget must be submitted as one unprotected Excel file (MS Office 2000 or later versions) with visible formulas and references and must be broken out by program year, including itemization of the federal and non-federal (e.g., cost share, matching, or leverage) amounts. 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 Business Application.

The Budget Narrative must be submitted as a separate Word or PDF file and must contain sufficient detail to allow USAID to understand the proposed costs. The applicant must ensure the budgeted costs address all programmatic and administrative activities described in the Technical Application and specifically address any additional requirements identified in the solicitation (e.g., Branding and Marking, PSEA compliance, etc.). The Budget Narrative must be thorough, including sources, descriptions, and rationales for costs to support USAID's determination that the proposed costs are reasonable, allocable, and allowable in accordance with the Cost Principles in 2 CFR 200, Subpart E. Applicants should ensure the Budget and Budget Narrative are consistent with and reflect all activities included in the Technical Application.

The Budget must include the following worksheets or tabs, and contents, at a minimum:

- Summary Budget, inclusive of all program costs (federal and non-federal), broken out by major budget category and by year for the entire period of the program. The Summary Budget should reflect all proposed activities to be implemented by the applicant and any potential subrecipients and should facilitate completion of the SF-424A (i.e., the Summary Budget and SF 424A major budget categories must match). See Annex 1 for Summary Budget Template.
- Detailed Budget, including a breakdown of each major budget category by year for the entire period of the program, sufficient to allow the Agency to determine that the costs accurately reflect the proposed program activities and represent a realistic and efficient use of funding.
- Detailed Budgets for each subrecipient, inclusive of all program costs (federal and non-federal), broken out by major budget category and by year for the entire period of the program,

The Detailed Budget must contain the following major budget categories and information, at a minimum:

- 1) Personnel – Costs of employee salaries and wages must be proposed consistent with 2 CFR 200.430 Compensation - Personal Services and the applicant's established policies and

practices for similar work. The applicant's Budget must include position title, base salary rate, level of effort, and salary escalation factors for each position. The AO may request an apparently successful applicant's established written policies on personnel compensation. Applicants must explain all assumptions in the Budget Narrative. 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.

Applicants should not include the personnel costs of consultants, contractors, or subrecipients under this category.

- 2) Fringe Benefits – Costs of employee fringe benefits must be proposed consistent with 2 CFR 200.431 Compensation - Fringe Benefits, as required by applicable law, and in accordance with the applicant's established policies and practices. Fringe benefits include allowances and services provided by employers to their employees in addition to regular salaries and wages (e.g., paid leave, health insurance, retirement, etc.). The applicant's Budget and Budget Narrative must include a detailed breakdown of all proposed fringe benefits along with a description of how costs are calculated (e.g., as a percentage of salary, as a per-person expense, etc.). Only fringe benefits that will be recovered as direct costs should be included in this category.
- 3) Travel – Travel and transportation costs must be proposed consistent with 2 CFR 200.475 Travel Costs and in accordance with the applicant's established policies and practices. Travel costs may include program-related transportation, lodging, or subsistence for applicant employees (e.g., flights, hotels, per diem, etc.). The applicant's Budget must breakdown individual travel costs and the Budget Narrative must provide details to explain the travel costs (e.g., purpose and number of trips, mode of transportation, the origin and destination, the number of individuals traveling, the duration of the trips, estimated unit costs, etc.). The AO may request an apparently successful applicant to provide supporting documentation (e.g., company travel policy, quotation, etc.).
- 4) Equipment - Costs must be proposed consistent with the definitions of equipment, capital assets, and personal property (tangible) in 2 CFR 200.1, with 2 CFR 200.313 Equipment and 200.439 Equipment and Other Capital Expenditures, and with the applicant's established accounting practices (e.g., capitalization level for financial statement purposes). The applicant's Budget must provide a breakdown of individual equipment costs, including type, quantity, and unit cost. The Budget Narrative must include information on models/specifications, the purpose of the equipment, and the basis for the quantity and cost estimates. The Budget Narrative must support the necessity of any equipment purchase in light of such factors as: rental costs of comparable equipment, if any; market conditions in the area; alternatives available; and the type, life expectancy, condition, and value of the equipment.
- 5) Supplies - Costs must be proposed consistent with the definitions of supplies and personal property (tangible) in 2 CFR 200.1 and the applicant's established accounting practices. Supplies are defined as all tangible personal property other than those described in the definition of equipment. The applicant's Budget must provide a breakdown of individual supplies, including type, quantity, and unit cost. The Budget Narrative must include information on specifications, the purpose of the supplies, and the basis for the quantity and cost estimates. The Budget Narrative must support the necessity and reasonableness of any supply purchases.

- 6) Contractual – Costs in this category must include all contracts (except those for individual consultants and those already included under “Equipment,” “Supplies,” or “Construction”) and all subawards. This includes rental and lease agreements for equipment or real property. See 2 CFR 200.331 for assistance regarding subrecipient and contractor determinations. Contractor and subrecipient budgets should reflect the same major budget categories and include budget narratives with the same required information as detailed in this Budget and Budget Narrative section of the Business Application Format instructions. Applicants should not include the costs for individual consultants in this category; consultant costs should be included under “Other”.
- 7) Construction – is not anticipated under this award.
- 8) Other – Applicants should include any other direct costs associated with the proposed program that are not already captured under another cost category (e.g., costs related to individual consultants, report publication/printing costs, training/event/activity costs, staff development, or administrative expenses not recovered via “Indirect Charges”). The applicant’s Budget must provide a breakdown of all other expenses in this category, including type, quantity, and unit cost. The Budget Narrative must provide supporting information on the rationale and reasonableness for each proposed expense and the basis for the proposed quantity and unit cost estimates. For applicants electing to recover all administrative costs directly (i.e., to follow “Method 1” described below to allocate a portion of shared “overhead” or “indirect” costs directly to the program), these cost elements must be itemized under this category and the applicant must explain the allocation basis for each.
- 9) Indirect Charges – Applicants must include all indirect costs under this category. Applicants may recover indirect costs via one of the Methods listed below, depending on applicant preference, eligibility, and the approval of the AO. The applicant must identify the selected Method and reflect this in the Budget and Budget Narrative, providing the applicable supporting information, as required. For more information on indirect costs and cost recovery, see [2 CFR 200 Subpart E](#) and refer to [USAID’s Indirect Cost Rate Guide for Non Profit Organizations](#) for further guidance. Options for indirect cost recovery include:
  - Method 1 - Direct Charge Only (i.e., direct cost allocation)  
*Eligibility:* Any applicant that does not have or intend to propose a NICRA (see Method 2) or use a de minimis rate on U.S. Federal awards (Method 3).  
*Application Requirements:* **All costs must be reflected under the “Other” cost category.** See the instructions above on how to reflect allocated “administrative/indirect” costs in the Budget and what supporting information must be provided as part of the Budget Narrative.
  - Method 2 - Negotiated Indirect Cost Rate Agreement (NICRA)  
*Reserved.*
  - Method 3 - De minimis rate of up to 15 percent of modified total direct costs (MTDC)  
*Eligibility:* Any applicant, except applicants with a NICRA  
*Application Requirements:* Applicants may determine the appropriate rate up to the 15 percent limit. The de minimis rate does not require documentation to justify its use and may be used indefinitely. Organizations electing to use the de minimis rate must ensure the same rate (up to 15 percent) is used for all Federal awards until and unless the organization

chooses to apply for a NICRA. The applicant must describe in the Budget Narrative which cost elements it will charge directly vs. indirectly and reflect this in the budget. Costs must be consistently charged as either direct or indirect costs and may not be double charged or inconsistently charged as both. See 2 CFR 200 for further information.

- **Method 4 - Indirect Costs Charged as a Fixed Amount**

*Eligibility:* Non-U.S. nonprofit organizations without a NICRA electing not to use direct cost allocation (Method 1) or the de minimis rate (Method 3)

*Application Requirements:* Applicants must provide the proposed fixed amount and a supporting worksheet that includes the following:

- Total costs (i.e., direct and indirect) incurred by the organization for the previous fiscal year and estimates for the current year.
- Total indirect costs incurred (e.g., costs necessary for the day-to-day operations of the organization that were not recovered directly as cost line items under awards) for the previous fiscal year and estimates for the current year. Review [USAID's Indirect Cost Rate Guide for Non Profit Organizations](#) for more information on indirect costs.
- Proposed method for prorating total estimated indirect costs equitably and consistently across all programs and activities. This includes describing the allocation base for each indirect cost element that reasonably corresponds to the benefits of that particular cost element to each program or activity. Review [USAID's Indirect Cost Rate Guide for Non Profit Organizations](#) for more information on approaches to allocating indirect costs equitably across multiple programs/cost objectives.

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.

**c. Prior Approvals in accordance with 2 CFR 200.407**

Cost principles specifically require Agency written prior approval for certain items of cost. For these items, simply including the item in the detailed budget does not satisfy the requirement for Agency prior approval. To request that such an item be approved in an award, the applicant must include an explicit request for its approval in the Budget Narrative.. Note that any such approval is at the Agreement Officer's discretion and such approval may not be granted at the time of award. See 2 CFR 200.407 for information regarding which cost elements require prior written approval.

**d. Approval of Subaward Activities**

The applicant must submit the following information for each subaward that it wishes to have approved at the time of award:

- Name of prospective subrecipient organization
- Subrecipient organization's UEI, unless exempted under 2 CFR 25.110 (see Section E – Submission Requirements and Deadline for more information).
- Confirmation that the subrecipient does not have active exclusions in the System for Award Management ([www.SAM.gov](http://www.SAM.gov))

- Confirmation that the subrecipient does not appear on the U.S. Treasury Department's Office of Foreign Assets Control (OFAC) Specially Designated Nationals (SDN) and Blocked Persons list (<https://sanctionslist.ofac.treas.gov/Home/SdnList>)
- Confirmation that the subrecipient is not listed in the United Nations Security Council Consolidated list (<https://main.un.org/securitycouncil/en/content/un-sc-consolidated-list>)
- Confirmation that the applicant has completed a risk assessment of the subrecipient, in accordance with 2 CFR 200.332(c); including any negative findings as a result of the risk assessment and the applicant's plan for mitigation.

#### **e. History of Performance**

The applicant must provide information regarding its recent history of performance for all its cost-reimbursement or fixed price contracts, grants, or cooperative agreements, including any fixed amount awards involving similar or related programs, not to exceed 3 years, as follows:

- Name of the awarding organization (e.g., funder);
- Award number, if any;
- Type of Award;
- Activity title;
- Period of award (including extensions);
- Type and Extent of Subawards;
- A brief description of the activity, location, and relevancy of work;
- Period of performance (e.g., start and end dates);
- Award amount;
- Reports and findings from any audits performed in the last three years; and
- Names and contact information (including current telephone number and e-mail address) of at least two (2) professional contacts who most directly observed the work performed.

If the applicant encountered problems when implementing any of the awards listed, it may provide a short explanation and the corrective action taken. The applicant should not provide general information on its performance. USAID reserves the right to obtain relevant information concerning an applicant's history of performance from any sources and may consider such information in its review of the applicant's risk. The Agency may request additional information and conduct a pre-award survey if it determines that it is necessary to inform the risk assessment.

#### **f. Branding Strategy & Marking Plan**

The apparently successful applicant will be asked to provide a Branding Strategy and Marking Plan to be evaluated and approved by the Agreement Officer. This plan may be submitted after the award is issued, but it must be provided to USAID within 30 days after the award start date. To ensure compliance, the Agreement Officer will include a special condition in the award specifying this requirement..

### **1. Branding Strategy – Assistance (June 2012)**

- 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.
- 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 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 announcements, 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. Applicants 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 the 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

## **2. 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, 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, audiovisual 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. 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.

#### **g. Funding Restrictions**

Profit is not allowable for recipients or subrecipients under this award.

Construction is not authorized under this award.

USAID will not allow the reimbursement of pre-award costs under this award without the explicit written approval of the Agreement Officer

#### **h. Conflict of Interest Pre-Award Term (October 2024)**

##### *Personal Conflict of Interest*

1. An actual or appearance of a conflict of interest exists when an applicant organization or an employee, officer, agent, board member 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 or interest may compromise, or have the appearance of compromising, the obligations and duties of a USAID employee or applicant 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.

#### *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.

#### **i. 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, should mark the cover page with the following:

"This application includes data that must not be disclosed, duplicated or 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."

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## **SECTION E: SUBMISSION REQUIREMENTS AND DEADLINES**

### **1. Questions and Answers**

Applicants must submit questions regarding this NOFO, if any, to Johanesa Rakotoniaina [jrakotoniaina@usaid.gov](mailto:jrakotoniaina@usaid.gov) and Orion Yeandel [oyeandel@usaid.gov](mailto:oyeandel@usaid.gov) no later than the date and time indicated on the NOFO cover letter, as amended. Any information given to a prospective applicant concerning this NOFO will be furnished promptly to all other prospective applicants as an

amendment to this NOFO, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective applicant.

## **2. Submission Requirements**

Applications in response to this NOFO must be submitted no later than the closing date and time indicated on the cover letter, as amended. Late applications will not be reviewed nor considered **OR** may be considered at the discretions of the Agreement Officer. Applicants must retain proof of timely delivery in the form of system generated documentation of delivery receipt date and time **OR** confirmation from the receiving office/certified mail receipt. Additionally, applicants should retain a copy of the application and all enclosures for their records.

Applications in response to this NOFO must be submitted by email to [jrakotoniaina@usaid.gov](mailto:jrakotoniaina@usaid.gov) and [oyeandel@usaid.gov](mailto:oyeandel@usaid.gov). Email submissions must include the NOFO 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: "72068724RFA00007,[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, e.g. 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 or indicate in the file name if submitted via grants.gov 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.

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 NOFO, 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 Madagascar cannot guarantee their acceptance by the internet server.

## **3. Unique Entity Identifier (UEI) and SAM.gov Registration**

Each applicant, that does not have an exemption under [2 CFR 25.110](#), is required to:

- (1) Be registered in SAM.gov before submitting an application.
- (2) Maintain a current and active registration in SAM.gov at all times during which it has an active Federal award as a recipient or an application under consideration by USAID. The applicant or recipient must review and update its information in SAM.gov annually from the date of initial registration or subsequent updates to ensure it is current, accurate, and complete. If applicable, this includes identifying the applicant's or recipient's immediate and highest-level owner and

subsidiaries, as well as providing information on all predecessors that have received a Federal award or contract within the last three years; and

- (3) Include its UEI in each application it submits to USAID. A UEI is a unique, alpha-numeric 12-character identifier issued and maintained by SAM.gov that verifies the existence of an entity globally. The UEI is the official government-wide identifier used for Federal awards.

UEI is required for all subrecipients. Obtaining a UEI and registering in SAM are separate actions, both completed in SAM.gov. It is possible for an entity to obtain a UEI without completing full SAM registration; SAM.gov only requires basic information to conduct the entity validation process that results in a UEI. Full registration in SAM.gov is required for prime. Full SAM registration is not required for subrecipients.

The SAM registration process may take many weeks to complete. Therefore, applicants are encouraged to begin the process early. If an applicant is unable to obtain a UEI and complete SAM registration before submitting an application, the applicant may request an exemption in accordance with the instructions below. 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. Applicants can find additional resources for obtaining a UEI and registering in SAM on a blog post on [WorkwithUSAID.gov](https://www.usaid.gov/working-with-usaid/blog/2018/04/04/obtaining-a-unique-entity-identifier-uei).

Note: First-tier subrecipients (i.e., direct subrecipients) must obtain a UEI in order to receive a subaward, but are not required to complete full SAM registration.

Requests for UEI/SAM exemptions: An applicant may include in its application (or separately in writing to the Agreement Officer) a request to be exempted from the above UEI and/or SAM registration requirements, if the criteria for one of the exceptions in [2 CFR 25.110](https://www.ecfr.gov/current/title-2/chapter-I/subchapter-B/part-25/subpart-1/section-25.110) apply. The applicant may be required to submit additional justification or information in support of the request for an exemption. In certain cases where an exemption is approved, the selected applicant may still be required to obtain a UEI and/or register in SAM.gov within thirty (30) days after receiving the award.

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## **SECTION F: APPLICATION REVIEW INFORMATION**

### **1. Responsiveness Review**

Applicants must review, understand, and comply with all aspects of this NOFO. Failure to comply with the NOFO may be considered as being non-responsive and may be evaluated accordingly.

### **2. Merit Review Criteria**

USAID will establish a Merit Review Committee (MRC), see Section F.3 for more information. The MRC will conduct a merit review of all applications received that comply with the instructions in this NOFO, as per the Responsiveness Review. Applications will be reviewed and evaluated in accordance with the following criteria shown in :

#### **A. Technical Evaluation**

##### **I. Technical Approach – 50 points**

- a. The extent to which the approach demonstrates the ability to achieve measurable and sustainable results and is logical, technically sound, and feasible with the capacity to execute state of the art and international best practices, evidence-based interventions and lessons learned.
- b. The extent to which the overall five-year implementation-plan and the detailed first year implementation plan demonstrate how the performance objectives/outputs will be achieved and validates the technical approach.
- c. The extent to which the application reflects the Programming Principles described in the NOFO as follows: country ownership and sustainability; learning and innovation; gender, adolescents, youth; localization, and environment.
- d. The extent to which the applicant demonstrates a good understanding of the opportunities that currently exist in terms of building the capacity of local organizations in order to prepare them to be recipients of a direct USAID award. The quality of the application's Localization strategy, methodologies and activities in order to implement an effective, diverse and realistic Localization Capacity Development Plan over the course of the activity.
- e. The extent to which the approach describes collaborative approaches and systematic partnerships among institutions, including within the GOM, other development partners, the private (nonprofit and commercial) sector, and CSOs to execute interventions and related capacity building to enhance achievement of the interrelated and interdependent IRs.
- f. The extent to which demonstrated expertise and comprehensive knowledge in the technical areas of research, surveillance, and the application of data for informed decision-making, with a specific focus on malaria, maternal, newborn, and child health (MNCH), health security, and other relevant topics outlined in the NOFO.

## **II. Management Approach and Key Personnel – 30 points**

- a. The extent to which the proposed management approach shows the clear potential to facilitate the achievement of activity objective and results including a sound, realistic management structure and staffing plan; the complementarity of skills of all long-term, short-term, home office and sub-contractor technical personnel; a sound approach and management of partnerships and sub-awards; and clear mechanisms for implementing adaptive management.
- b. The extent to which the proposed long term technical and key personnel possess complementary, relevant and demonstrated qualifications, experience, and skills.

## **III. Activity Monitoring, Evaluation, and Learning Plan (AMELP)– 10 points**

- a. The extent to which the Applicant's approach to Monitoring, Learning and Evaluation, (AMELP) identifies sound methods for collecting, analyzing and using data; and demonstrates how the Applicant will rigorously evaluate progress, facilitate adaptive management, include effective performance indicators for measuring progress toward all required results, and

implement an effective communications strategy for sharing information, knowledge and lessons learned to key stakeholders.

#### **IV. History of Performance – 10 points**

- a. Past history information will be used for both the responsibility determination and best value decision. USAID may use past history information obtained from other than the sources identified by the Applicant. USAID will utilize existing databases of applicant past history information and solicit additional information from the references provided in Section D.3.e. History of Performance of this NOFO and from other sources if and when the Agreement Officer finds the existing databases to be insufficient for evaluating an Applicant's past history.
- b. USAID will initially determine the relevance of similar past history information as a predictor of probable performance under the subject requirement. USAID may give more weight to past history information that is considered more relevant and/or more current. Evaluation under this sub-factor will be based on the following considerations (the information below simply explains the issues that are included within the past history sub-factor and do not have specific points assigned to them):
  - 1) Technical, including quality of product or service and consistency in meeting goals and targets.
  - 2) Cost control, including forecasting costs as well as accuracy in financial reporting.
  - 3) Schedule, including the timeliness against the completion of the contract or cooperative agreement, task orders, milestones, delivery schedules, and administrative requirements (e.g., efforts that contribute to or affect the schedule variance).
  - 4) Management or business relations, addressing the history of professional behavior and overall business-like concern for the interests of the customer, including the applicant's history of reasonable and cooperative behavior (to include timely identification of issues in controversy), customer satisfaction, timely award and management of subcontracts, cooperative attitude in remedying problems, and timely completion of all administrative requirements.
  - 5) Management of key personnel, including appropriateness of personnel for the job and prompt and satisfactory changes in personnel when problems with clients were identified.

Total: 100 points

#### **B. Business 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.

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.

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).

### **3. Review and Selection Process**

The merit review criteria prescribed above are tailored to the requirements of this particular NOFO. 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.

Technical and other factors will be evaluated relative to each other, as described here and prescribed in Section D, Application Content and Format. A USAID Merit Review Committee (MRC) will conduct a merit review of all applications received that comply with the instructions in this NOFO and make the recommendation on which should be considered for award. The Business Application will be reviewed by the Agreement Officer.

As a result of this process, USAID intends to select the apparently successful applicant based upon the application submission. Once the selection is made, USAID may address any concerns to the selected applicant for resolution. However, USAID reserves the right to negotiate with all applicants prior to selection of the successful applicant if in the best interest of the U.S. Government.

If USAID and the apparently successful applicant cannot come to a mutual understanding during the course of discussions, or if the apparently successful applicant is unable to provide satisfactory Technical and Business Applications, or does not meet deadlines for submissions, or presents an unacceptable risk as a result of the risk assessment, then the Agreement Officer may designate the next highest-evaluated applicant as the apparently successful applicant. This decision is at the sole discretion of the Agreement Officer. The Agreement Officer’s decision regarding funding of an award is final and not subject to review.

The Agreement Officer will make the final determination whether the award will be made to the applicant. Award may be made with or without a request for clarifications/additional detail on an application.

#### **a. Business Application Review**

The Agency will evaluate the Business Application of the applicant(s) under consideration for an award as a result of the merit criteria review. As part of the review of the Business Application, the Agency will review the budget and budget narrative to determine whether the costs are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E and accurately reflect the proposed activities in the Technical Application.

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.

#### **4. Risk Review**

The Agreement Officer will perform a risk assessment ([2 CFR 200.206](#)) of the apparently successful applicant. The Agreement Officer may determine that a pre-award survey is required to inform the risk assessment in determining whether the applicant 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](#)).

Before making an award with a total amount of USAID share greater than the simplified acquisition threshold, USAID must review and consider any information about the applicant that is in the responsibility/qualification records available in SAM.gov (see 41 U.S.C. 2313). An applicant can review and comment on any information in the responsibility/qualification records available in SAM.gov. USAID will consider any comments by the applicant in determining whether the applicant is qualified for an award.

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## SECTION G: AWARD NOTICES

Award of the agreement contemplated by this NOFO 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, applicants are hereby notified of these requirements and conditions for the award. Notice of Federal award signed by the Agreement Officer is the official document that obligates funds, and will be provided to the authorized official of the selected applicant by electronic means as identified in the application. The Agreement Officer is the only individual who may legally commit the U.S. Government to the expenditure of public funds.

Unsuccessful applicants will be notified by electronic means within 90 days of the Agreement Officer's selection.

Pre-award costs are only allowed when specifically included in the award terms, or otherwise approved in writing by the Agreement Officer. Without such written authorization, any costs incurred for application development or program performance prior to an award period of performance start date are at the applicant's own risk; do not assume that the AO will approve them as pre-award costs in the award.

## SECTION H: POST-AWARD REQUIREMENTS AND ADMINISTRATION

### 1. Administrative & National Policy Requirements

The resulting award from this NOFO will be administered in accordance with the following:

For Non-U.S. organizations: 2 CFR 200 Subpart E and [Standard Provisions for Non-U.S. Non-governmental Organizations](#)

See Annex 2, for a list of the Standard Provisions that will be applicable to awards resulting from this NOFO

### 2. Nature of the Relationship between USAID and the Recipient

The principal purpose of the relationship between USAID and the recipient is to transfer funds to accomplish a public purpose of support or stimulation of the program, as 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.

### 3. Reporting Requirements

- **Financial Reporting:**

The Standard Form 425 (SF-425) must be submitted via electronic format to the U.S. Department of Health and Human Services (DHHS) via <https://pms.psc.gov/>. The Recipient must also submit a copy of SF-425 to the Agreement Officer, Agreement Officer's Representative, and *insert relevant parties and contact information*. Electronic copies of the SF-425, along with instructions, can be found at <https://www.grants.gov/forms/forms-repository/post-award-reporting-forms>.

Quarterly Financial Report: Quarterly Financial Reports shall be due within 30 days following the end of each quarter corresponding to USAID's fiscal year from October 1 through September 30.

Final Financial Report: The Final Financial Report shall be due within 120 days following the

expiration of the award. Financial Reports shall be in accordance with [2 CFR 700](#).

If the AO determines that an award will be a fixed amount award, financial reporting will not be required; however, the resultant award may specify that recipients submit certain Standard Forms to request an advance payment, if any.

- **Performance Reporting and plans**

- ❖ **Quarterly Performance Reporting**

The Recipient must submit quarterly and annual performance reports to the AOR within 30 days after the end of the performance period. The quarterly performance reports must include the following information:

- (i) a summary of activities and key achievements;
- (ii) a description of progress made during the reporting period and actual achievements; and
- (iii) an assessment of overall progress to date against performance indicators, and the planned outputs for the reporting period in the annual implementation plan. The reports should also highlight key accomplishments and any issues that are affecting the timing or quality of activities, steps being taken or proposals being made to resolve issues, plans and intended outputs for the following quarter.

- ❖ **Annual Progress Report and Final Report**

The annual progress report and final report is a review of the previous year's accomplishments relative to the Monitoring, Evaluation and Learning Plan, including challenges and success stories. Problems or issues encountered and how they were resolved must be presented in the report. The annual report must be submitted 30 calendar days after the end of fourth quarter, or the end of the USG fiscal year (September 30). It must be submitted in lieu of the fourth quarterly performance report. If this Award expires during the reporting period, the Recipient must submit a final report not later than 90 days after the estimated completion date. The annual report and final report must include a discussion, supported with quantitative and qualitative evidence, (which evidence will remain auditable under the terms of the agreement and USAID program implementation procedures), of progress against indicators and/or impacts achieved to date. This must include clear identification of which impacts achieved were within the manageable interests of the recipient and which were likely catalyzed by recipient-supported initiatives, leading to substantial, sustained achievement of results.

- ❖ **Annual Implementation Work Plan**

The Recipient must submit annual implementation work plans per USAID/Madagascar guidance. Annual work plans begin on October 1 of each year and are submitted along with a work plan budget in writing to the USAID Agreement Officer's Representative (AOR) for approval. A standardized template for annual work plans is used by USAID partners and will be provided to the Recipient(s) upon award. Drafts of annual work plans for the subsequent years must be submitted by the Recipient to the AOR no later than August 31, prior to the start of the subject year.

- ❖ **Activity Monitoring, Evaluation and Learning Plan (AMELP)**

A rigorous monitoring and evaluation system for the Activity, including adequate staffing, technical support and information systems for routine data collection and analytics, is required. The Recipient will work closely with USAID to finalize indicators and set performance targets based on USAID guidance and requirements. The Recipient is responsible for data collection, analysis, and performance reporting required by USAID per defined monthly, quarterly and annual results reporting cycle. Data will be used to evaluate Recipient performance, drive decisions, guide course corrections as needed, and determine future funding. Performance indicators to be incorporated into the award will be established in consultation with USAID. The recipient is required to submit a final Performance Monitoring and Evaluation Plan for USAID approval after the start of the award.

#### **4. Program Income**

Program income means gross income earned by the non-Federal entity that is directly generated by a supported activity or earned as a result of the Federal award during the period of performance. (See 2 CFR 200.1 Definitions.) Program income includes but is not limited to income from fees for services performed, the use or rental of real or personal property acquired under Federal awards, the sale of commodities or items fabricated under a Federal award, license fees and royalties on patents and copyrights, and principal and interest on loans made with Federal award funds. Interest earned on advances of Federal funds is not program income. Except as otherwise provided in Federal statutes, regulations, or the terms and conditions of the Federal award, program income does not include rebates, credits, discounts, taxes, special assessments, levies, and fines raised by a grantee and subgrantee, and interest earned on any of them.

If it is expected that program income might be generated under this activity, then program income earned under the resulting award shall be added to the project and used to further eligible project objectives as agreed upon by USAID. Applicants should describe how program income might be generated under the proposed activities and how it envisions program income being utilized to successfully accomplish project objectives. The successful applicant will be required to progressively report earned program income and its proposed use. Program Income will be accounted for in accordance with 2 CFR 200.307 (or the Standard Provision RAA16, entitled Program Income for non-U.S. organizations).

#### **5. Environmental Compliance**

The Foreign Assistance Act of 1961, as amended, Section 117 requires that the impact of USAID's activities on the environment be considered, and that USAID include environmental sustainability as a central consideration in designing and carrying out its development programs. This mandate is codified in Federal Regulations (22 CFR 216) and in USAID's Automated Directives System (ADS) Parts 201.5.10g and 204 (<https://www.usaid.gov/who-we-are/agency-policy/series-200>), which, in part, require that the potential environmental impacts of USAID-financed activities are identified prior to a final decision to proceed and that appropriate environmental safeguards are adopted for all activities. Recipient environmental compliance obligations under these regulations and procedures are specified in the following paragraphs of this NOFO.

In addition, the recipient must comply with host country environmental regulations unless otherwise directed in writing by USAID. In case of conflict between host country and USAID regulations, the latter shall govern.

An Initial Environmental Examination (IEE) has been approved for project funding under this NOFO. The IEE encompasses the activities anticipated to be carried out under this Cooperative Agreement (See IEE in Annex 3).

As part of its initial Work Plan, and all Annual Work Plans hereafter, the recipient, in collaboration with the USAID Cognizant Technical Officer and Mission Environmental Officer shall review all ongoing and planned activities under this cooperative agreement to determine if they are within the scope of the IEE.

If the recipient plans any new activities outside the scope of the approved IEE, it shall prepare an amendment to the documentation for USAID review and approval. No such new activities shall be undertaken prior to receiving written USAID approval of environmental documentation amendments.

Any ongoing activities found to be outside the scope of the approved Regulation 216 environmental documentation shall be halted until an amendment to the documentation is submitted and written approval is received from USAID.

The recipient shall prepare an Environmental Mitigation and Monitoring Plan (EMMP) describing how the recipient will, in specific terms, implement all IEE conditions that apply to proposed project activities within the scope of the award. The EMMP shall include monitoring the implementation of the conditions and their effectiveness.

The recipient shall integrate a completed EMMP in the initial work plan and subsequent annual work plans, making any necessary adjustments to activity implementation to minimize adverse impacts to the environment.

Sub-awardees are anticipated under this award; therefore, the recipient will be required to use an Environmental Review Form (ERF) checklist using impact assessment tools to screen grant proposals to ensure the funded proposals will result in no adverse environmental impact, to develop mitigation measures, as necessary, and to specify monitoring and reporting. Use of the ERF checklist is called for when the nature of the grant proposals to be funded is not well enough known to make an informed decision about their potential environmental impacts, yet due to the type and extent of activities to be funded, any adverse impacts are expected to be easily mitigated. Implementation of sub-grant activities cannot go forward until the ERF checklist is completed and approved by USAID.

The recipient is responsible for ensuring that mitigation measures specified by the ERF checklist process are implemented.

The recipient will be responsible for periodic reporting to the USAID Agreement Officer Representative.

## **6. Climate Risk Management**

The ADS 303.1, ADS 303.2 and USAID ADS 201 mal require that the potential climate risks for negative consequences on an activity's objectives and/or outcomes of USAID-financed activities are identified prior to a final decision to proceed and that appropriate mitigation measures are adopted for all activities.

In addition, the recipient must comply with host country climate change regulations unless otherwise directed in writing by USAID. In case of conflict between host country and USAID regulations, the latter shall govern.

A Climate Risk Management (CRM) has been approved for project funding under this NOFO. The

CRM encompasses the activities anticipated to be carried out under this Cooperative Agreement (See CRM in Annex 3 within the IEE).

As part of its initial Work Plan, and all Annual Work Plans hereafter, the recipient, in collaboration with the USAID Climate Integration Lead (CIL) shall review all ongoing and planned activities under this cooperative agreement to determine if they are within the scope of the CRM.

If the recipient plans any new activities outside the scope of the approved CRM, it shall prepare an amendment to the documentation for USAID review and approval. No such new activities shall be undertaken prior to receiving written USAID approval of CRM documentation amendments.

Any ongoing activities found to be outside the scope of the approved ADS 303.1, ADS 303.2 and USAID ADS 201mal shall be halted until an amendment to the documentation is submitted and written approval is received from USAID.

The recipient shall prepare a Climate Risk Management Plan (CRMP) describing how the recipient will, in specific terms, implement all CRM conditions that apply to proposed project activities within the scope of the award. The CRMP shall include monitoring the implementation of the conditions and their effectiveness.

The recipient shall integrate a completed CRMP in the initial work plan and subsequent annual work plans, making any necessary adjustments to activity implementation to mitigate adverse impacts of climate risks to the activity.

Also, the recipient shall issue a Climate Risk Management Report (CRMR) annually, describing how the recipient have, implemented the CRMP that apply to proposed project activities within the scope of the award.

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## **SECTION I : 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.

### **ANNEX 1 - BUDGET TEMPLATE (See attached)**

This budget template is mandatory. Budget format must be in an excel sheet, not a pdf. Hidden cells are not accepted. The budgets and other supporting budgetary information of any proposed sub-recipients must utilize the identical format being used by the prime applicant.

### **ANNEX 2 - STANDARD PROVISIONS**

The actual Standard Provisions included in the award will be dependent on the organization that is selected (or the type of award, in the case of a fixed amount award). The award will include the latest Mandatory Provisions for either U.S. or non-U.S. Nongovernmental organizations, as appropriate. 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 which may be found at: <https://www.usaid.gov/ads/policy/300/303maa>, <https://www.usaid.gov/ads/policy/300/303mab>, and <https://www.usaid.gov/ads/policy/300/303mat>.

Note: French version of Standard provisions and other relevant documents are available at <https://www.workwithusaid.gov/resource-library?categories=ads-resource&languages=french>

### **REQUIRED STANDARD PROVISIONS FOR NON-U.S. NONGOVERNMENTAL ORGANIZATIONS**

#### **MANDATORY STANDARD PROVISIONS FOR NON-U.S. NONGOVERNMENTAL ORGANIZATIONS**

##### **MANDATORY STANDARD PROVISIONS FOR NON-U.S. NONGOVERNMENTAL ORGANIZATIONS**

- M1. ALLOWABLE COSTS (AUGUST 2024)
- M2. ACCOUNTING, RECORD RETENTION AND ACCESS, AND AUDITS (AUGUST 2024)
- M3. AMENDMENT OF AWARD, REVISION OF BUDGET AND PROGRAM PLANS (AUGUST 2024)
- M4. NOTICES (JUNE 2012)
- M5. PROCUREMENT POLICIES (AUGUST 2024)
- M6. USAID ELIGIBILITY RULES FOR PROCUREMENT OF COMMODITIES AND SERVICES (MAY 2020)
- M7. TITLE TO AND USE OF PROPERTY (AUGUST 2024)
- M8. SUBMISSIONS TO THE DEVELOPMENT EXPERIENCE CLEARINGHOUSE AND DATA RIGHTS (JUNE 2012)
- M9. MARKING AND PUBLIC COMMUNICATIONS UNDER USAID-FUNDED ASSISTANCE (DECEMBER 2014)
- M10. AWARD SUSPENSION AND TERMINATION (AUGUST 2024)

- M11. RECIPIENT AND EMPLOYEE CONDUCT (OCTOBER 2023)
- M12. DEBARMENT AND SUSPENSION (JUNE 2012)
- M13. DISPUTES AND APPEALS (DECEMBER 2022)
- M14. PREVENTING TRANSACTIONS WITH, OR THE PROVISION OF RESOURCES OR SUPPORT TO, SANCTIONED GROUPS AND INDIVIDUALS (MAY 2020)
- M15. TRAFFICKING IN PERSONS (AUGUST 2024)
- M16. VOLUNTARY POPULATION PLANNING ACTIVITIES - MANDATORY REQUIREMENTS (MAY 2006)
- M17. EQUAL PARTICIPATION BY FAITH-BASED ORGANIZATIONS (JUNE 2024)
- M18. NONDISCRIMINATION (AUGUST 2024)
- M19. USAID DISABILITY POLICY - ASSISTANCE (JUNE 2012)
- M20. LIMITING CONSTRUCTION ACTIVITIES (AUGUST 2023)
- M21. USAID IMPLEMENTING PARTNER NOTICES (IPN) PORTAL FOR ASSISTANCE (JULY 2014)
- M22. ENHANCEMENT OF GRANTEE EMPLOYEE WHISTLEBLOWER PROTECTIONS (AUGUST 2024)
- M23. SUBMISSION OF DATASETS TO THE DEVELOPMENT DATA LIBRARY (OCTOBER 2014)
- M24. PROHIBITION ON REQUIRING CERTAIN INTERNAL CONFIDENTIALITY AGREEMENTS OR STATEMENTS (MAY 2017)
- M25. SAFEGUARDING AGAINST EXPLOITATION, SEXUAL ABUSE, CHILD ABUSE, AND CHILD NEGLECT (OCTOBER 2023)
- M26. MANDATORY DISCLOSURES (AUGUST 2024)
- M27. NONDISCRIMINATION AGAINST BENEFICIARIES (NOVEMBER 2016)
- M28. CONFLICT OF INTEREST (AUGUST 2024)
- M29. PROHIBITION ON CERTAIN TELECOMMUNICATION AND VIDEO SURVEILLANCE EQUIPMENT OR SERVICES (AUGUST 2024)
- M30. EXCHANGE VISITORS VISA REQUIREMENTS (DECEMBER 2022)
- M31. CONTRACT AWARD TERM AND CONDITION FOR RECIPIENT INTEGRITY AND PERFORMANCE MATTERS (AUGUST 2024)
- M32. OMB APPROVAL UNDER THE PAPERWORK REDUCTION ACT (OCTOBER 2023)
- M33. SYSTEM FOR AWARD MANAGEMENT (SAM.GOV) AND UNIQUE ENTITY IDENTIFIER (UEI) REQUIREMENTS (AUGUST 2024)

**REQUIRED AS APPLICABLE (RAA) STANDARD PROVISIONS FOR NON-U.S.  
NONGOVERNMENTAL ORGANIZATIONS**

- RAA1. ADVANCE PAYMENT AND REFUNDS (AUGUST 2024)
- RAA2. REIMBURSEMENT PAYMENT AND REFUNDS (AUGUST 2024)
- RAA3. RESERVED
- RAA4. INDIRECT COSTS – CHARGED AS A FIXED AMOUNT (NONPROFIT) (AUGUST 2024)

RAA5. INDIRECT COSTS – DE MINIMIS RATE (AUGUST 2024)

RAA6. RESERVED

RAA7. REPORTING SUBAWARDS AND EXECUTIVE COMPENSATION (AUGUST 2024)

RAA8. SUBAWARDS (AUGUST 2024)

RAA9. TRAVEL AND INTERNATIONAL AIR TRANSPORTATION (DECEMBER 2014)

RAA10. OCEAN SHIPMENT OF GOODS (JUNE 2012)

RAA11. REPORTING HOST GOVERNMENT TAXES (DECEMBER 2022)

RAA12. PATENT RIGHTS (DECEMBER 2022)

RAA13. RESERVED

RAA14. INVESTMENT PROMOTION (DECEMBER 2022)

RAA15. COST SHARING (AUGUST 2024)

RAA16. PROGRAM INCOME (AUGUST 2024)

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 2022)

RAA29. RESERVED

RAA30. RESERVED

RAA31. NEVER CONTRACT WITH THE ENEMY (AUGUST 2024)

### **ANNEX 3 - INITIAL ENVIRONMENTAL EXAMINATION**

Follow this link: [Environmental Compliance Database - Record Details](#)

## **ANNEX 4 - GENDER ANALYSIS**

[See attached](#)

Applicants should use this gender analysis tool for reference to inform the technical design.

## **ANNEX 6. USAID Madagascar updated Country Development and Cooperation Strategy (CDCS)**

Follow this link [Country Development Cooperation Strategy \(CDCS\) | Madagascar | U.S. Agency for International Development](#)

## **ANNEX 7. REVISED IN-COUNTRY PER DIEM, LODGING, AND TRANSPORTATION PAYMENTS TO GOVERNMENT OF MADAGASCAR OFFICIALS, CIVIL SOCIETY ORGANIZATIONS, AND PRIVATE SECTOR STAFF AND STIPENDS FOR COMMUNITY HEALTH VOLUNTEERS**

[See attached](#)

## **ANNEX 8 TRADUCTION FRANÇAISE DUFRENCH VERSION OF THE PROGRAM DESCRIPTION**

**L'anglais est la langue officielle de tous les documents relatifs à l'accord de financement. En cas d'incohérence entre les termes de cet avis de financement (NOFO) et toute traduction dans une autre langue, la version en anglais prévaudra.**

I. Résumé du projet

II. Contexte et énoncé du problème

III. Relation du projet avec l'USAID et la stratégie nationale

IV. Approche technique et teneur de l'activité

V. Exigences de mise en œuvre

VI. Principaux éléments du programme

VII. Plan SEA

VIII. Acronymes

1. **Résumé du projet**

SOROKA est un mot malagasy qui correspond au radical du verbe « *misoroka* » dont le sens est « prévenir », indiquant ainsi l'objectif de surveillance du projet. Il peut servir d'acronyme aux objectifs spécifiques du projet (en anglais) : *Surveillance* (surveillance), *Operational Research* (recherche opérationnelle), and *Optimization of Knowledge-sharing* (et optimisation du partage de connaissances) *for Action* (pour l'action).

L'activité SOROKA devrait être mise en œuvre dans le cadre du financement d'une valeur de 7,5 millions USD, sur une période de cinq ans allant d'octobre 2024 à septembre 2029. Elle a pour objectif principal de promouvoir la santé de la population malagasy en améliorant le renforcement des capacités, la coordination et l'exécution de la collecte, de la gestion, de la synthèse et de l'utilisation de données aux fins d'actions de santé publique. Faisant suite au projet RISE, SOROKA renforcera les capacités locales et le leadership au sein du Ministère de la Santé Publique (MinSanP) en vue de promouvoir la détection des menaces à la sécurité sanitaire mondiale, et de planifier et mener des ripostes d'urgence en cas d'épidémie. L'activité renforcera la capacité du pays à planifier, à mettre en œuvre et à diffuser des recherches et des évaluations menées au niveau local, et rehaussera la capacité du secteur public à utiliser les données épidémiologiques et de surveillance pour des actions de santé publique.

SOROKA sera l'activité principale du Bureau de la Santé de l'USAID/Madagascar en ce qui concerne la recherche sur le paludisme, la santé de la mère, du nouveau-né, et de l'enfant (SMNE), l'eau, l'assainissement et l'hygiène (WASH) et la sécurité sanitaire mondiale (SSM), ainsi qu'en ce qui concerne l'évaluation de programmes, la surveillance biologique, y compris la résistance aux antimicrobiens (RAM), les ripostes d'urgence aux menaces à la santé et l'institutionnalisation de l'épidémiologie et l'utilisation de données laboratoires pour la prise de décision. Au titre de cette activité, des formations intersectorielles ciblées et basées sur les besoins au personnel du MinSanP seront dispensées tout au long de la mise en œuvre. De manière générale, SOROKA a pour vocation de couvrir tous les éléments du programme de Santé, Population et Nutrition (HPN), notamment le paludisme, la SMNE, la SSM et WASH.

## **2. Contexte et énoncé du problème**

### **II.1. Contexte du pays et situation sanitaire**

Madagascar est la cinquième île du monde par sa taille, située dans l'océan Indien, au large des côtes de l'Afrique australe. Alors qu'il dispose de ressources naturelles considérables, sa population de 27 millions d'habitants [1] présente l'un des taux de pauvreté les plus élevés au monde, le PIB par habitant se chiffrant à 516 USD. Environ trois quarts de la population vit avec moins d'1 USD par jour. Le développement du pays se heurte à d'énormes défis sociaux et économiques dus à des crises politiques récurrentes, à la faiblesse de la gouvernance et à l'insuffisance du développement de son capital humain et physique. Les crises climatiques et la

vulnérabilité extrême aux chocs extérieurs sont en train d'accroître et d'exacerber cette pauvreté. Ce contexte et la lenteur de la croissance économique ont mis le développement et les investissements à l'arrêt.

La part du budget de l'État allouée au MinSanP en 2023 était de 5,5%, ce qui est bien en deçà de l'objectif de 15% fixé dans le Protocole d'accord d'Abuja. Ce budget sert principalement à financer les frais de gestion, alors que de leur côté, les programmes verticaux manquent de financement et sont principalement appuyés par des bailleurs de fonds extérieurs. Le budget de la santé dépend donc fortement des bailleurs de fonds. Le MinSanP gère 23 Bureaux régionaux de la santé et 115 Bureaux de district. Le système de santé de Madagascar est organisé en quatre niveaux de prestation de services : 1) le premier niveau est composé de plus de 40 000 agents de santé communautaires (ASC) qui fournissent des services conformément à la récente Stratégie de santé communautaire (l'USAID appuie actuellement environ 18 000 ASC dans 12 des 23 régions) ; 2) le deuxième niveau est constitué de 2 812 centres de santé de base (CSB) publics, offrant des paquets de soins de santé de base complémentaires et plus complets que ceux offerts par les ASC ; 3) le troisième niveau est composé des centres hospitaliers de référence de district (CHRD) de niveau 1 et 2 ; et 4) le quatrième niveau est composé des hôpitaux de référence régionaux et des centres hospitaliers universitaires (CHU). Le renouvellement fréquent du personnel à tous les niveaux du MinSanP pose un défi particulier pour la continuité des interventions et la gestion des connaissances.

**SMNE** : Cela fait plus de 20 ans que la mortalité maternelle stagne à 426 décès maternels pour 100 000 naissances vivantes à Madagascar. Les décès maternels sont principalement dus à des complications de la grossesse ou de l'accouchement. Il est alarmant de constater qu'un tiers de ces décès surviennent chez des adolescentes. En 2018/2019, le pays a été confronté à l'une des pires épidémies de rougeole au monde, enregistrant 244 569 cas et 1 080 décès. Certifié exempt de la polio en 2018, Madagascar a connu une recrudescence du poliovirus dérivé d'une souche vaccinale de type 1 (PVDVc1) à cause des faiblesses de la couverture des services.

**Paludisme** : La totalité (100%) de la population malagasy est à risque de paludisme, deuxième motif le plus fréquent de consultation dans les formations sanitaires et deuxième cause la plus signalée de mortalité hospitalière à Madagascar en 2022 (PNLP, 2023). Depuis 2017, Madagascar a connu une incidence grandissante de paludisme malgré l'élargissement de la couverture des activités de prévention du paludisme et de la prise en charge des cas. Le nombre de cas signalés par les formations sanitaires est passé de 1,95 million en 2020 à 2,34 millions en 2021, avant de retomber à 1,67 million en 2022 pour ensuite remonter à plus de 3 millions en 2023. Le vecteur prédominant est *Anopheles gambiae s.l.* Les médicaments antipaludiques de première intention continuent d'être très efficaces, comme l'ont montré les études d'efficacité des médicaments menées en 2018, 2020 et 2022. Néanmoins, le risque de résistance à ces médicaments est élevé

étant donné la résistance partielle à l'artémisinine que les données factuelles montrent dans les pays voisins.

**Sécurité sanitaire mondiale** : Madagascar est fortement vulnérable aux maladies infectieuses, y compris la peste. Plus de la moitié des maladies infectieuses sont des zoonoses (maladies qui se transmettent des animaux aux êtres humains) et la déforestation est l'une des principales causes d'augmentation du risque de zoonose du fait qu'elle accroît la fréquence des contacts entre les êtres humains et les animaux. Madagascar ne dispose pas de suffisamment de main-d'œuvre pour pouvoir riposter aux maladies infectieuses émergentes et aux urgences sanitaires. Plusieurs outils de reporting indiquent que le degré de préparation global de Madagascar en matière de sécurité sanitaire est inférieur à la moyenne. Ainsi, Madagascar a obtenu un score moyen de 48% à l'outil de rapport d'auto-évaluation de l'État Partie (SPAR) et seulement 34% à la dernière évaluation externe conjointe (EEC). Le pays est aux prises avec des zoonoses endémiques telles que la peste, et est vulnérable aux maladies infectieuses et aux menaces émergentes.

## **II.2. Investissements de l'USAID par le passé**

Depuis 2013, l'USAID a investi plus de 13,5 millions USD pour appuyer la surveillance, la recherche, la prévention et la lutte contre les infections à Madagascar. L'activité de Surveillance et gestion des données (SGD) a été mise en œuvre dans le cadre de financement d'une valeur de 5,5 millions USD sur une période de 6 ans (allant du 1<sup>er</sup> octobre 2013 au 30 septembre 2019) dans le but d'appuyer les sites sentinelles de la fièvre (SSF) du MinSanP, la recherche opérationnelle (RO) en matière de paludisme et de SMNE, et la riposte du MinSanP aux maladies infectieuses en situations d'urgence, notamment l'épidémie de peste pulmonaire de 2017. En 2019, un financement pour une activité de Recherche, Innovation, Surveillance et Évaluation (RISE) d'une valeur de 8 millions USD a été conclue et celle-ci prendra fin en 2024. L'objectif de RISE est de promouvoir la prise de décision en matière de santé publique sur la base d'éléments scientifiques. Trois tâches principales ayant une pertinence pour la santé publique à Madagascar ont été retenues, à savoir réduire la mortalité et la morbidité associées au paludisme dans le cadre de l'Initiative du Président des États-Unis contre le paludisme (PMI) ; prévenir les décès infantiles et maternels ; et lutter contre les maladies infectieuses, notamment par la surveillance de la peste et la riposte aux épidémies. RISE a dispensé une formation en épidémiologie et en recherche à 901 participants, dont 675 sont des membres du personnel du MinSanP. Il a mené plusieurs projets de recherche opérationnelle (RO) en matière de paludisme et de SME, ainsi que plusieurs activités d'évaluation de programmes et de surveillance, l'étude d'efficacité thérapeutique (EET) des médicaments antipaludiques de première intention utilisés à Madagascar (TES 2020 et 2022) ; l'étude de bio-efficacité des moustiquaires imprégnées d'insecticide (ITN) distribuées lors des campagnes de distribution de masse (2018 et 2021) ; et une évaluation de la qualité des sources d'eau potable au niveau de 281 sites situés dans des formations sanitaires et de sources d'eau

collectives dans 13 régions afin de déterminer les principaux contaminants chimiques et les niveaux de pollution fécale. Le suivi de la qualité de WASH a permis de générer des données sur la qualité de l'eau dans les zones d'intervention d'USAID/ACCESS et d'USAID/RANO WASH, ainsi que dans certains établissements de la JIRAMA (société nationale d'électricité et d'eau). Ces données se sont avérées utiles pour comprendre la situation en termes de qualité de l'eau en général dans ces régions et donnent au Ministère de l'Eau et de l'Hygiène, au MinSanP et à l'USAID l'occasion de réfléchir sur les approches à adopter pour la sélection des sources d'eau et le traitement de l'eau, à la fois au niveau des petites sources d'eau décentralisées et des systèmes d'approvisionnement en eau de taille moyenne ou plus grande.

RISE a appuyé les systèmes de surveillance biologique (SSB) dans 21 centres de santé de base en vue de détecter les épidémies suffisamment tôt et de lutter contre celles-ci, conformément au Règlement sanitaire international. Les maladies qui font l'objet de surveillance comprennent le paludisme, la peste, la grippe, la COVID-19, les arbovirus, la diarrhée fébrile, la paralysie flasque aiguë, les éruptions cutanées fébriles et les maladies d'origine alimentaire. Pendant la pandémie de COVID-19, RISE a effectué plus de 68 000 tests PCR de la COVID-19 (12% des tests nationaux) et est le principal partenaire du MinSanP dans sa riposte de santé publique à la peste. Dans le cadre de la SSM, RISE a continué d'appuyer la préparation, la surveillance, le diagnostic et la gestion globale de la saison de la peste, et a lancé la surveillance de la RAM et des maladies transmises par les tiques en 2024.

Les projets SDM et RISE, financés par l'USAID et prédécesseurs du projet SOROKA, ont contribué de manière significative au renforcement de la surveillance et de la recherche, et au renforcement des capacités avec la mise en place des CSB-R (formation sanitaire qui fait de la surveillance biologique), la mobilisation du laboratoire mobile, le renforcement des capacités de dépistage en laboratoire pendant les épidémies de peste et de COVID, la réalisation de recherche opérationnelle, la surveillance de la qualité de l'eau et la formation du personnel du MinSanP.

### **II.3. Énoncé du problème**

Madagascar continue d'être exposé à d'importantes menaces de maladies infectieuses, y compris des épidémies de maladies évitables par la vaccination, et les ressources destinées à l'édification d'un système de santé fonctionnel se retrouvent ainsi détournées par les ripostes d'urgence.

**Surveillance :** En plus de la pandémie de COVID-19, Madagascar a récemment été affecté par diverses épidémies, y compris la peste pulmonaire, la dengue et la fièvre de la vallée du Rift (FVR), une situation qui souligne l'importance d'avoir un système de notification d'alerte précoce, de détection et de prise de décision rapide. La Direction de la Veille Sanitaire, de la Surveillance Épidémiologique et Riposte (DVSSER) est la direction du MinSanP responsable de la surveillance.

Le plan stratégique national de surveillance de la DVSSER datant de 2021-2023 n'a pas fait l'objet d'aucune révision ou d'approbation. La DVSSER met en œuvre une surveillance complète dans le cadre du système de Surveillance intégrée de la maladie et réponse (SIMR), qui collecte et analyse les rapports hebdomadaires d'environ 2 000 CSB à travers le pays, en vue de détecter les événements inhabituels. Les CSB sont toutefois peu nombreux à utiliser des tablettes pour les rapports électroniques. L'USAID appuie la DVSSER dans la mise en œuvre d'une surveillance biologique du paludisme, des maladies transmises par les arthropodes et du syndrome pseudo-grippal (SG) dans 26 CSB-R, mais cet appui ne suffit pas pour couvrir l'ensemble du pays. Le bon fonctionnement des laboratoires est un élément clé du système de surveillance et de prévention des infections, permettant une surveillance épidémiologique efficace et une intervention rapide. Le MinSanP vient d'approuver la stratégie de développement des laboratoires, qui sera dirigée par le Laboratoire d'Analyses Médicales de Madagascar (LA2M) chargé de coordonner la surveillance biologique. Cependant, parce qu'il ne compte que sept hôpitaux dans son réseau, la couverture géographique du LA2M est faible. L'USAID a formé environ 600 agents du MinSanP sur des thèmes relatifs à la surveillance, et le Centre pour la lutte et la prévention des maladies (CDC) et le Programme de formation épidémiologique sur le Terrain (FETP) financé par la COI ont formé des centaines de techniciens du MinSanP. La contribution concrète de ces efforts au renforcement de la surveillance et de l'investigation des maladies est très appréciée par le MinSanP.

Cependant, la performance du système souffre du manque de ressources humaines, notamment en période d'épidémie ; du manque de ressources financières, notamment pour les investigations et les ripostes rapides en cas d'épidémie ; de l'inadéquation des infrastructures et de la logistique ; de la faiblesse de la gouvernance, du leadership et de la coordination des activités de surveillance épidémiologique ; de la faiblesse de la collecte, de la gestion et de l'intégration des informations ; et de la faiblesse des capacités de laboratoire (infrastructures, ressources humaines, équipements et plateforme technique). Certains programmes techniques ont leur propre système de surveillance dont les données ne sont pas intégrées dans les systèmes de la DVSSER.

**Une seule santé et réponse aux situations d'urgence** : L'approche Une seule santé (intégration de la santé humaine, animale et environnementale) en est encore à ses débuts à Madagascar. Le décret n°2023-1356, signé en octobre 2023, portant formalisation de la plateforme Une seule santé, est la preuve de l'engagement du Gouvernement envers la Sécurité Sanitaire Mondiale et de sa mobilisation pour les efforts en sa faveur. La surveillance de la RAM résultant de l'utilisation abusive et excessive d'antibiotiques chez les êtres humains et les animaux figure parmi ses priorités. En outre, il y a un manque général de capacités de surveillance des zoonoses et de la RAM, et la riposte face aux urgences sanitaires n'est pas adéquate. Le Programme de formation continue en épidémiologie vétérinaire appliquée à Madagascar (ISAVET), mis en œuvre par un

projet de l'USAID/FAO, offre l'occasion de mettre la surveillance à profit à l'aide de l'approche Une seule santé.

**Recherche :** De façon générale, la recherche scientifique à Madagascar ne bénéficie que de peu de financement et de mobilisation. Le budget alloué à la recherche est de loin inférieur aux 2% attendus de la programmation budgétaire de la santé et aux 5% attendus de l'aide au développement en matière de santé<sup>[1]</sup>. Le MinSanP vient de nommer l'Institut National de Santé Publique et Communautaire (INSPC) à la coordination de la recherche au MinSanP, en s'appuyant sur le rôle qu'il joue dans la formation en matière de santé publique. Cependant, la stratégie de recherche du MinSanP est obsolète (2016) et sa capacité à mettre en œuvre une recherche de qualité souffre de son manque de capacité à assurer la gouvernance, la coordination et la mise en œuvre de la recherche, du renouvellement fréquent du personnel du MinSanP (y compris les chercheurs) et du manque de ressources humaines. Sa situation contraste avec celle du Ministère de l'Enseignement Supérieur qui a élaboré une nouvelle politique de recherche 2023-2023 et dispose d'organismes de recherche dédiés tels que le Centre National de Recherche Pharmacologique (CNARP) et les Universités. Le Ministère de l'Élevage maintient également le Centre National de Recherche Appliquée au Développement Rural (FOFIFA), l'entité responsable de la recherche.

Dans l'ensemble, les capacités de **gestion, de qualité et d'utilisation des données** à des fins de politique et de programmation sont sous-optimales. Les formations passées sur la surveillance, la recherche et l'investigation des épidémies n'ont pas fait l'objet d'un suivi systématique qui aurait permis de vérifier l'application effective des compétences nouvellement acquises. En outre, la formation initiale n'a pas été adaptée au contexte local.

## **Relation du projet avec les stratégies de l'USAID et du pays**

### **III.1. Relation avec la Stratégie de collaboration de développement du pays (CDCS)**

Cette activité contribuera à l'Objectif de développement 1 de la CDCS qui est d'« Améliorer les capacités humaines de manière à contribuer à l'avancement du pays vers l'autonomie » et au résultat intermédiaire 1-1 « Impacts durables sur la santé accélérés ».

### **III.2. Stratégie intégrée pays (ICS)**

Cette activité contribue également à la Stratégie intégrée Pays, en particulier l'Objectif 3 de la Mission « Renforcer les capacités humaines de Madagascar et des Comores en vue d'asseoir les bases d'une gouvernance démocratique, de la sécurité et du développement du pays » ; à l'Objectif 1.2 de la Mission « Promouvoir et protéger les droits humains fondamentaux, en

particulier ceux des populations marginalisées » ; et à l'Objectif 2 de la Direction « Appuyer les services élargis afin de protéger la santé et la sécurité du personnel, renforcer les relations avec le pays hôte et permettre le suivi du programme ».

### III.3. Relation avec les stratégies mondiales

Cette activité contribuera aux objectifs de Santé mondiale de l'USAID de lutte contre les maladies infectieuses et de prévention de la mortalité de l'enfant et de la mère (PMEM).

- L'aide du Gouvernement des États-Unis à la lutte contre le paludisme à Madagascar est financée par l'Initiative du Président des États-Unis contre le paludisme (PMI) qui lutte contre le paludisme à travers quatre grandes interventions : la pulvérisation intradomiciliaire d'insecticide à effet rémanent (PID) ; la promotion et la distribution de moustiquaires imprégnées d'insecticide à longue durée d'action (MILD) ; le Traitement préventif intermittent du paludisme pendant la grossesse (TPIg) ; et le diagnostic et le traitement du paludisme, comprenant un appui transversal au renforcement de la chaîne d'approvisionnement et des systèmes de santé, au changement social et comportemental, à la surveillance, au suivi et à l'évaluation, et à la recherche opérationnelle. L'objectif mondial de la PMI est de réduire la mortalité et la morbidité associées au paludisme de respectivement 33% et de 40% par rapport aux niveaux de 2015, d'ici à 2026. La PMI appuie l'ensemble de ces quatre interventions clés à Madagascar, ainsi que les quatre domaines transversaux susmentionnés. De plus, elle a appuyé des activités relatives à l'élimination du paludisme et appuiera bientôt le dépistage et le traitement des cas de *Plasmodium vivax* (Pv) dans certains districts à forte charge de Pv.
- La **Feuille de route technique sur la santé et la nutrition de la mère et de l'enfant** est un cadre qui guide les [programmes de survie de la mère et de l'enfant](#) de l'USAID vers la réalisation des cibles des ODD à l'horizon 2030. Elle jette les bases de l'engagement de l'USAID envers la [Prévention des décès infantiles et maternels](#), parallèlement aux investissements de l'Agence dans la [planification familiale](#), le [paludisme](#) et le [renforcement des systèmes de santé](#). La performance globale de la stratégie est mesurée au moyen de six indicateurs clés : (1) le taux de prévalence contraceptive ; (2) la sécurité contraceptive ; (3) la mortalité infanto-juvénile ; (4) les naissances avec assistance d'une personne qualifiée ; (5) la vaccination finale contre la diphtérie, la coqueluche et le tétanos (DPT3) à l'âge de 12 mois au plus tard ; et (6) les personnes protégées du paludisme par une moustiquaire imprégnée d'insecticide (MII).
- Le programme **SSM** de l'USAID comble des lacunes critiques dans le renforcement de capacités pérennisées et coordonnées en matière de l'approche « Une seule santé » qui intègre les liens entre la santé humaine, animale et environnementale. Il collabore avec

les pays pour cerner leurs lacunes les plus pressantes et y remédier en se concentrant sur des domaines techniques spécifiques de l'EEC (surveillance des maladies, système national de laboratoires, ressources humaines, résistance aux antimicrobiens, zoonoses, biosécurité et biosûreté, prévention et lutte contre les infections, communication sur les risques et mobilisation communautaire). En collaboration avec les pays et un ensemble exceptionnel de partenaires multisectoriels, le programme SSM renforce la préparation et veille à ce que les capacités nécessaires soient en place pour 1) prévenir les épidémies de maladies évitables, 2) détecter les menaces suffisamment tôt, et 3) déployer des ripostes rapides et efficaces aux épidémies qui éclatent.

- En appui au [Plan d'action de la Maison Blanche sur la Sécurité mondiale de l'eau](#) et à la [Stratégie mondiale de l'eau du Gouvernement des États-Unis](#), l'USAID prévoit des programmes en rapport à l'Objectif stratégique n°2 « Élargir l'accès équitable à des services d'eau et d'assainissement sûrs, durables et résilients au changement climatique et l'adoption de comportements d'hygiène clés ».

#### **4. Approche technique et teneur de l'activité**

##### **IV.1. Principes directeurs**

- *Utilisation d'approches innovantes et adaptées au public pour le partage de données et d'informations :*

La disponibilité, l'accessibilité et l'utilisation au moment voulu des résultats de la surveillance, de l'évaluation et de la recherche dans l'ensemble des principaux domaines techniques (paludisme, PDIM, SSM, WASH) par le Gouvernement, les bailleurs de fonds et les partenaires d'exécution de l'USAID (PE) sont essentielles pour garantir une programmation en matière de santé qui soit de qualité et basé sur des données factuelles. Pour rassembler des données de diverses sources, il est important de développer une plateforme pour les référentiels de données de recherche, le partage entre divers publics et l'accès pour ces publics (exemple : USAID, PMI, MinSanP, bailleurs de fonds, partenaires d'exécution et institutions universitaires). SOROKA contribuera à ces efforts et mettra l'accent sur l'utilisation, l'analyse, le partage et la diffusion de données, les ripostes aux épidémies et la conception de politiques.

- *Établir un équilibre entre les besoins des parties prenantes (y compris le MinSanP, l'USAID/la PMI, les institutions universitaires) et ceux du candidat dont le profil est celui d'une institution de recherche :*

La recherche visant à combler les lacunes de connaissances et à mettre à profit les opportunités d'amélioration des services est essentielle à la prise de décision. Le Récipiendaire se concentrera sur les questions de recherche établies sur la base des éclairages apportés par les parties prenantes (tels que le MinSanP, l'USAID, la PMI, PMO, institutions universitaires) pour accroître

leur utilisation à des fins de prise de décision par le MinSanP. Il doit également prioriser les publications scientifiques et le partage d'informations scientifiques, sous la direction d'auteurs malagasy, aux niveaux national et international, et doit veiller à ce que les résultats soient diffusés dans l'ensemble du pays. Enfin, il est essentiel de garantir une collaboration et un partenariat étroits avec les bailleurs de fonds (USAID et PMI) et le MinSanP, notamment à travers leur implication directe dans la planification, l'exécution et la diffusion des résultats de recherche pour garantir la qualité et la conformité avec la politique de recherche du Gouvernement des États-Unis et du MinSanP.

- *Plan pour l'autonomie, la localisation et la pérennité :*

Pour l'USAID, être autonome implique d'avoir la capacité de planifier, de financer et de mettre en œuvre des solutions pour promouvoir le développement local. Cette activité, qui sera mise en œuvre par des partenaires locaux, contribuera aux priorités de localisation de l'USAID, en particulier l'objectif d'allouer un quart de son financement directement aux partenaires locaux, d'ici à 2025. Elle contribuera également au programme de localisation en renforçant les capacités locales et en veillant à ce que chacun des programmes de l'USAID soit un pas en avant vers un stade où l'aide étrangère ne serait plus nécessaire. Les programmes doivent évaluer leur travail en se demandant dans quelle mesure chaque investissement les rapproche de cet objectif et du recours aux solutions locales. Cependant, l'assistance technique de partenaires externes à court terme pourra être acceptée si elle est nécessaire pour garantir une qualité technique et programmatique élevée.

*Mobilisation de fonds*

Alors que des contraintes financières continuent de peser dans un contexte de concurrence entre besoins et entre priorités, il faudrait, au titre de cette activité, élaborer des stratégies et des outils pour accroître les ressources et collaborer avec d'autres bailleurs de fonds en vue de produire de meilleurs résultats. Cela exige une coordination et une collaboration étroites avec le MinSanP et les parties prenantes œuvrant dans les domaines techniques ciblés par l'activité.

## **IV.2. Théorie du changement**

Si des activités de surveillance, de recherche et d'évaluation de grande qualité et adaptées au contexte sont mises en œuvre dans un contexte de mobilisation des institutions nationales et d'appropriation par celles-ci,

ET

Si la capacité locale à coordonner des activités de surveillance, de recherche opérationnelle et d'évaluation de programmes de grande qualité, à mener de telles activités et à utiliser les données qui en sont issues est améliorée,

ALORS

Les acteurs locaux exploiteront les données de surveillance, de recherche et d'évaluation avec efficacité, de manière à apporter des améliorations significatives à la programmation et aux politiques de prévention et de lutte contre les maladies.

#### **IV.3. But et objectifs de l'activité**

L'objectif de l'activité est de promouvoir la santé de la population malagasy en améliorant le renforcement des capacités, la coordination et l'exécution de la collecte, de la gestion, de la synthèse et de l'utilisation de données aux fins d'actions de santé publique. Cet objectif sera atteint à travers la réalisation de quatre objectifs spécifiques :

1. Améliorer la capacité nationale de surveillance pour une détection rapide et exacte des épidémies et des menaces sanitaires prioritaires,
2. Améliorer les capacités nationales (humaines et organisationnelles) à planifier, à mettre en œuvre et à diffuser la recherche et les évaluations,
3. Accroître la capacité du secteur public à utiliser les données épidémiologiques et de laboratoire pour les actions de santé publique.
4. De nature transversale, le quatrième objectif est d'améliorer durablement les ressources humaines et les capacités techniques institutionnelles pour la surveillance du paludisme et d'autres maladies liées à la sécurité sanitaire mondiale, à la santé de la mère et de l'enfant, et à WASH.

#### **IV.4. Résultats intermédiaires et interventions à titre d'exemples**

##### **OS 1 : Améliorer la capacité nationale de surveillance pour une détection rapide et exacte des épidémies et des menaces sanitaires prioritaires**

SOROKA appuiera le Gouvernement de Madagascar (GdM) à améliorer la qualité et la disponibilité des données de surveillance, en créant un centre d'excellence au niveau du MinSanP pour la surveillance des maladies humaines, zoonotiques et environnementales, y compris l'évaluation de la qualité de l'eau. L'activité sera axée sur les objectifs de SSM suivants : 1) Assurer la gestion des urgences sanitaires, telle que décrite dans l'EEC de l'OMS et les Benchmarks du Règlement sanitaire international (RSI) de l'OMS, et l'échange, l'analyse et le partage de données sur les maladies à des fins de cartographie, de planification stratégique et de prise de décision, et 2)

Renforcer la capacité du GdM à riposter aux épidémies de maladies infectieuses avec efficacité dans les meilleurs délais. SOROKA continuera d'appuyer la surveillance biologique des arboviroses, des maladies transmises par les arthropodes, du paludisme (parasitologie, y compris les délétions de gène *pfhrp2/3*, les études d'efficacité thérapeutique [EET]), des infections respiratoires (SG), de la rougeole, de la paralysie flasque aiguë (PFA) et d'autres problèmes sanitaires et environnementaux, selon le cas. Chaque activité planifiée devrait répondre aux besoins du pays, combler des lacunes critiques et garantir le leadership du GdM et l'appropriation par celui-ci, la coordination des bailleurs et l'accès de l'USAID et de la PMI aux données.

Des activités sont présentées dans le tableau ci-dessous à titre d'exemples pour chaque résultat intermédiaire :

|                                 |                                                                                                                                                                                                                     |                                                                                                 |                                                                                                         |                                                                                                                                                |
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| <b>Résultats intermédiaires</b> | <b>1.1</b> Améliorer la qualité et la disponibilité des données de surveillance pour répondre aux questions clés relatives aux maladies humaines, zoonotiques et environnementales (y compris la qualité de l'eau). | <b>1.2</b> Renforcer la coordination de l'ensemble des acteurs de la surveillance à Madagascar. | <b>1.3</b> Renforcer la capacité de surveillance des laboratoires aux niveaux national et périphérique. | <b>1.4</b> Transférer graduellement les capacités et la responsabilité de la surveillance épidémiologique et de laboratoire au secteur public. |
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| <b>Activités à titre d'exemples</b> | <ul style="list-style-type: none"> <li>- Promouvoir l'institutionnalisation de la qualité des données dans la culture organisationnelle.</li> <li>- Effectuer un contrôle intégré de la qualité des données/un suivi régulier.</li> <li>- Mettre à jour/élaborer les politiques de gouvernance des données, y compris la propriété des données, le stockage, la sécurité, le réseau de données/les sites de surveillance.</li> <li>- Former sur la qualité des données.</li> <li>- Opérationnaliser les mécanismes bidirectionnels de feedback (qualité et exploitation des données).</li> <li>- Renforcer les systèmes de vérification des événements.</li> <li>- S'appuyer sur l'expérience des activités WASH précédentes de l'USAID</li> </ul> | <ul style="list-style-type: none"> <li>- Mobiliser les ressources existantes de manière à renforcer le leadership de la DVSSER en matière de surveillance (stratégie, méthodes, formation, modélisation de données, plateforme/logistique pour l'analyse hebdomadaire des données avec les régions et les districts).</li> <li>- Cartographier les entités impliquées dans la surveillance, y compris leurs rôles, leurs attributions et la couverture technique/géographique de leur travail.</li> <li>- Appuyer la coordination entre les programmes spécifiques du MinSanP et de la DVSSER.</li> <li>- Collaborer avec le Ministère de l'Élevage, le Ministère de l'Environnement et le Ministère de l'Enseignement Supérieur dans la surveillance des maladies prioritaires dans le cadre de la SSM.</li> </ul> | <ul style="list-style-type: none"> <li>- Appuyer l'élaboration de politiques nationales, de lignes directrices, de formations et de gestion de la chaîne d'approvisionnement pour une collecte d'échantillons sécurisée et adéquate.</li> <li>- Maintenir/Élargir la qualité et l'étendue, la couverture et la capacité des sites de surveillance, notamment pour les CSB-R, le réseau LA2M, la surveillance entomologique, la RAM, la qualité de l'eau, l'impact environnemental sur la santé (changement climatique).</li> <li>- Numériser les systèmes de surveillance (CSB-R, surveillance entomologique, changement climatique et santé) et les réseaux.</li> </ul> | <ul style="list-style-type: none"> <li>- Assurer un approvisionnement durable en matériels de surveillance (équipements, outils) de bonne qualité aux niveaux central et périphérique.</li> <li>- Fournir une formation adéquate aux acteurs de la surveillance biologique.</li> </ul> |
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|  |                                                                                                                                                                                                            |  |  |  |
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|  | <p>- Mener un contrôle qualité en vue de générer des données sur la qualité de l'eau à partir d'un échantillon de sources d'eau dans les régions d'activités WASH précédentes et actuelles de l'USAID.</p> |  |  |  |
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**OS 2 : Améliorer les capacités nationales (humaines et organisationnelles) à planifier, à mettre en œuvre et à diffuser la recherche et les évaluations.**

L'appui aux capacités institutionnelles et de gouvernance du MinSanP à planifier et à mettre en œuvre des recherches/évaluations menées au niveau local contribuera à l'avancement de la stratégie de localisation de l'USAID. Les activités devraient garantir que les structures de gouvernance et de coordination de la recherche/évaluation du MinSanP sont en place et fonctionnelles, que les chercheurs locaux sont formés et dotés des outils et des procédures nécessaires pour mettre en œuvre la recherche, et sont mis en relation avec d'autres institutions de recherche à des fins d'apprentissage. Certaines de ces questions de recherche ont éclairé le Plan opérationnel de lutte contre le paludisme (POLP) et le Plan opérationnel pour la santé (POS). D'autres questions de recherche seront formulées à travers l'établissement d'un programme de recherche du MinSanP décliné par domaine technique et la contribution des parties prenantes.

Des activités sont présentées dans le tableau ci-dessous à titre d'exemples pour chaque résultat intermédiaire :

|                                 |                                                                                                                                                                                      |                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                              |
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| <b>Résultats intermédiaires</b> | <b>2.1</b> Améliorer la capacité institutionnelle et de gouvernance à élaborer des politiques de recherche en santé publique et à coordonner et diffuser les activités de recherche. | <b>2.2</b> Améliorer la capacité des acteurs locaux à mener des recherches et des évaluations de grande qualité. | <b>2.3</b> Mener des activités de recherche et d'évaluation de grande qualité au niveau local avec l'implication des institutions nationales, y compris le test ou l'évaluation des nouveaux outils/technologies, le test des stratégies de déploiement alternatives des outils existants pour contribuer à combler les lacunes en matière de connaissances. |
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| Activités à titre d'exemples | <ul style="list-style-type: none"> <li>- Améliorer le leadership et la capacité organisationnelle de l'INSPC et/ou d'autres entités compétentes du MinSanP chargées de la coordination de la recherche.</li> <li>- Élaborer des plans stratégiques, des procédures opératoires standard, des politiques et des comités de coordination en rapport à la conduite de la recherche et à la diffusion des résultats.</li> <li>- Développer des systèmes de gestion de projets de recherche, y compris la capacité à répondre aux opportunités de financement de la recherche.</li> <li>- Appuyer des webinaires, des conférences scientifiques, des sites web/médias sociaux et d'autres approches d'apprentissage pertinentes.</li> </ul> | <ul style="list-style-type: none"> <li>- Assurer la formation des chercheurs et appuyer les gestionnaires de recherche dans la planification, la conduite, l'analyse et la diffusion des résultats de recherche.</li> <li>- Faciliter la collaboration avec les institutions de recherche nationales ou internationales et les sociétés savantes.</li> </ul> | <ul style="list-style-type: none"> <li>- Développer/affiner/mettre à jour les questions de recherche et les politiques et interventions fondées sur des données factuelles nécessaires, notamment en ce qui concerne la SME, le paludisme et les MI.</li> <li>- Élaborer des procédures opératoires standard générales et spécifiques aux études pour garantir une recherche de grande qualité.</li> <li>- Mettre la recherche en œuvre avec efficacité.</li> <li>- Appliquer des approches d'analyse appropriées (exemple : méthodes statistiques, analyse de données qualitatives, autres) aux données.</li> <li>- Appuyer l'évaluation des interventions post-urgence.</li> <li>- Mener une évaluation de la bio-efficacité des MILD.</li> </ul> |
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### **OS 3 : Accroître la capacité du secteur public à utiliser les données épidémiologiques et de laboratoire pour des actions de santé publique.**

SOROKA appuiera le MinSanP à améliorer sa capacité à interpréter et à diffuser les données, à élaborer des outils et des mécanismes et à développer les ressources humaines pour la planification de ripostes de santé publique/ ripostes aux urgences. SOROKA est la plateforme de l'USAID dédiée aux ripostes rapides aux épidémies qui répond aux défis nouveaux/émergents

constatés par l'USAID, le MinSanP, la PMI et la SSM. SOROKA aidera le MinSanP à institutionnaliser l'analyse et la revue conjointes des données (issues de la surveillance, de la recherche et de l'épidémiologie) (par le MinSanP et les partenaires) afin d'éclairer les politiques.

Des activités sont présentées dans le tableau ci-dessous à titre d'exemples par résultat intermédiaire :

|                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                             |
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| <b>Résultats intermédiaires</b>     | <b>3.1</b> Améliorer les capacités des acteurs locaux en matière d'analyse et d'interprétation de données, y compris l'interprétation des données de surveillance et de recherche, et l'évaluation des risques de situation d'urgence et du niveau de préparation à de telles situations.                                                                                                                                                                     | <b>3.2</b> Améliorer la capacité logistique et de gestion, et le niveau de préparation du personnel de santé et des équipes d'intervention à faire face aux urgences de santé publique.                                                                                                   | <b>3.3</b> Appuyer les acteurs locaux à mettre en œuvre des ripostes de santé publique appropriées aux menaces pour la santé humaine, zoonotique et environnementale.                                                                                                                                                                         | <b>3.4</b> Impliquer les institutions nationales dans une analyse conjointe des données afin d'améliorer l'utilisation des données aux fins d'éclairer les politiques.                                                                                                                      |
| <b>Activités à titre d'exemples</b> | <ul style="list-style-type: none"> <li>- Appuyer les approches innovantes (y compris les nouvelles technologies) et la plateforme d'analyse, de visualisation, d'échange et de partage de données (y compris sur la peste) pour une meilleure utilisation.</li> <li>- Appuyer l'élaboration et la diffusion de cartographies des risques.</li> <li>- Appuyer l'élaboration et la diffusion de rapports de situation (SITREP) hebdomadaire/mensuel.</li> </ul> | <ul style="list-style-type: none"> <li>- Appuyer l'élaboration et la coordination des plans de préparation.</li> <li>- Mettre en place/appuyer des systèmes d'alerte précoce.</li> <li>- Élaborer/appuyer un plan de riposte d'urgence et des procédures opératoires standard.</li> </ul> | <ul style="list-style-type: none"> <li>- Appuyer la mise en œuvre de plans et d'opérations de riposte.</li> <li>- Appuyer la mise en œuvre de revues après action.</li> <li>- Développer des compétences de mobilisation et de gestion de fonds d'urgence.</li> <li>- Optimiser le laboratoire mobile lors des ripostes d'urgence.</li> </ul> | <ul style="list-style-type: none"> <li>- Mener des formations de transfert de connaissances (déclinaison du langage scientifique en langage opérationnel).</li> <li>- Élaborer et diffuser une note d'orientation.</li> <li>- Promouvoir une culture d'exploitation des données.</li> </ul> |

#### **OS 4 : Renforcer durablement les ressources humaines et la capacité technique des institutions pour la surveillance du paludisme et d'autres maladies en rapport à la sécurité sanitaire mondiale, à la santé de la mère et de l'enfant et au WASH.**

Il existe encore une importante pénurie de professionnels de santé exerçant dans la surveillance, la recherche épidémiologique et l'analyse et l'exploitation des données. L'approche consistera en la formation initiale (en collaboration et en appui aux universités) et la formation par service. Le

Réципиентаire élaborera un plan de formation basé sur les besoins, dispensera la formation et assurera le suivi à travers une approche consultative avec les principales parties prenantes du MinSanP.

Des activités sont présentées dans le tableau ci-après à titre d'exemples :

| Résultat Intermédiaire               | 4.1 Améliorer la qualité de la formation en surveillance, recherche et évaluation, en fonction des besoins locaux et en partenariat avec les experts locaux :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
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| Activités données à titre d'exemples | <p><b>Généralités</b></p> <ul style="list-style-type: none"> <li>● Appui aux universités dans la mise à jour des programmes de formation</li> <li>● Formation sur l'épidémiologie et les biostatistiques</li> <li>● PFET (Avancé)</li> </ul> <p><b>Paludisme</b></p> <ul style="list-style-type: none"> <li>● Surveillance du paludisme</li> <li>● Cours sur le paludisme (Paludologie)</li> </ul> <p><b>MI-SSM</b></p> <ul style="list-style-type: none"> <li>● Formation en prévention et lutte contre les infections</li> <li>● Formation en recherche opérationnelle</li> </ul> <p><b>WASH :</b></p> <ul style="list-style-type: none"> <li>● Formation des responsables régionaux du MinSanP et du MEAH devant mettre en œuvre le plan national de surveillance de la qualité de l'eau</li> </ul> |

#### IV.5. Personnel-clé

Les postes suivants sont définis comme postes de Personnel-clé. La composition du Personnel-clé proposé devrait être un reflet des communautés que SOROKA servira et correspondra à une équipe diverse et équilibrée en termes de genre. Les rôles, responsabilités et qualifications minimales pour chaque poste de personnel-clé sont décrits ci-après :

**Chef de mission :** Le Réципиентаire doit désigner un Chef de mission qui sera le contact principal pour le financement. Il/elle définira la vision et assurera l'orientation, le leadership et la gestion du projet. Il/elle agira en qualité de représentant(e) du projet pour toutes les questions, préoccupations ou problèmes.

Qualifications du Chef de mission :

- Diplôme de Master ou supérieur en santé publique, médecine ou autres domaines pertinents

- Au moins 10 ans d'expérience professionnelle dans la gestion d'activités relatives à la santé, dont au moins 3 ans à un poste de leadership en tant que cadre supérieur (tels que Directeur de projet, Directeur adjoint)
- Compétences en communication orale et écrite en français exigées ; bonne capacité de communication orale et écrite en malagasy exigée ; compétences en communication orale et écrite en anglais considérées comme atout supplémentaire.
- Connaissance des politiques et procédures du Gouvernement des États-Unis ou des organisations de développement international en matière de développement international, recommandée.

**Coordinateur scientifique :** Le Récipiendaire doit désigner un Coordinateur scientifique qui assurera la coordination courante des aspects techniques du projet. Il/elle facilitera le suivi des jalons et des livrables, coordonnera les séances techniques avec les principales parties prenantes et veillera à ce que les produits du projet soient conformes à des normes techniques élevées.

Qualifications du Coordinateur scientifique :

- Diplôme de Master en santé publique, médecine ou autres domaines pertinents. Un diplôme de Doctorat est un atout.
- Au moins cinq ans d'expérience professionnelle en recherche et publication scientifiques.
- Au moins cinq ans d'expérience professionnelle dans la gestion de projets relatifs à la santé, incluant la gestion de données.
- Maîtrise des compétences de communication orale et écrite en français exigée; bonne capacité de communication orale et écrite en malagasy exigée; bonnes compétences en communication orale et écrite en anglais considérées comme un atout supplémentaire.

**Spécialiste financier et administratif :** Le Récipiendaire doit désigner un Spécialiste financier et administratif chargé de superviser tous les aspects des domaines suivants : budgétisation, gestion financière et rapports financiers ; gestion des contrats de sous-traitance et passation des marchés ; gestion des ressources humaines ; gestion du patrimoine ; logistique ; et conformité aux conditions du contrat. Cette personne sera chargée de préparer les rapports financiers à soumettre à l'USAID, de s'assurer que les fonds dépensés respectent les réglementations et politiques du Gouvernement des États-Unis, et de veiller à ce que les systèmes et processus soient mis en œuvre en toute efficacité pour appuyer la mise en œuvre du contrat, y compris en ce qui concerne les pratiques de prévention de la fraude et d'atténuation des risques.

Qualifications du Spécialiste Financier et Administratif :

- Un minimum de cinq années d'expérience en gestion financière et administrative de projets de développement, exigé.
- Au moins trois ans d'expérience en gestion du risque et en mise en œuvre de contrôles internes, considérés comme un atout supplémentaire.
- Maîtrise des compétences en communication orale et écrite en français exigée ; une bonne capacité de communication orale et écrite en malagasy exigée ; bonnes compétences en communication orale et écrite en anglais considérées comme un atout.
- Connaissance avérée des exigences de rapports financiers et de conformité du Gouvernement des États-Unis ou des bailleurs internationaux, requise.

## **VI. Exigences en matière de mise en œuvre**

### **VI.1 Couverture géographique**

Toutes les régions sont sujettes à des flambées de maladies et leurs systèmes de riposte sont faibles et vulnérables. Les activités de SOROKA en matière de surveillance, de recherche scientifique, d'évaluation de programmes et de formation couvriront les 115 districts sanitaires de Madagascar et donneront la priorité aux zones les plus vulnérables et les plus à risques.

### **VI.2 Calendrier**

Les activités débiteront dès l'accord de financement. Toutes les activités seront mises en œuvre au cours de la première année. Les investigations sur les flambées de maladie et les ripostes à ces flambées seront organisées en fonction des besoins. La recherche scientifique sera renforcée dans le cadre de la préparation de manifestations scientifiques telles que les conférences. Comme le projet SOROKA vient en prolongement du projet RISE, on ne s'attend à aucun défi majeur dans la première année de transition.

### **VI.3 Collaboration**

SOROKA s'appuiera sur les réalisations des projets précédents financés par l'USAID, tels que RISE, Impact Malaria, IDDS (détection et surveillance des maladies infectieuses), etc. Le projet collaborera également étroitement avec les activités bilatérales financées par l'USAID, telles que ACCESS Miahly pour la surveillance communautaire, MAHENIKA pour les produits et réactifs, Rano Maharitra pour les questions relatives au WASH et le projet One health pour la complémentarité technique. Il collaborera avec des projets gérés au niveau central, tels que le projet de suivi de

CHISU pour l'exploitation des données, l'USAID-STRIDES pour la coordination du développement des laboratoires, le PMI-EVOLVE pour l'entomologie et le PMI-REACH pour l'éradication du paludisme. SOROKA collaborera et coordonnera ses activités avec des entités autres que l'USAID et certains ministères stratégiques du GdM, tels que le Ministère de l'Agriculture et de l'Élevage, et le Ministère de l'Enseignement Supérieur et de la Recherche Scientifique, ainsi qu'avec les principaux partenaires au développement tels que l'ONU, le Fonds mondial, la Banque mondiale, les ONG locales et le secteur privé.

#### **VI.4 Mécanisme : Accord de coopération**

L'objectif principal de la relation avec le Récipiendaire, dans le cadre de ce programme, est de transférer des fonds permettant de réaliser l'objectif public d'appuyer ou encourager la prestation des services de santé.

De plus, les questions de recherche spécifiques, la nature et l'ampleur des épidémies et le type de riposte ne sont pas encore définis à ce stade de la conception, laissant ainsi au Partenaire d'exécution la possibilité d'affiner les activités, ce qui pourra être réalisé à travers un instrument d'assistance.

Le mécanisme de cette activité sera un Accord de coopération, étant donné qu'une participation significative de l'USAID et du PMI est prévue.

#### **VI.5 Implication significative de l'USAID**

- *Approbation du Plan de mise en œuvre annuel du Récipiendaire* : Le Plan de mise en œuvre annuel constitue l'accord qui définit de manière détaillée les activités précises qui permettent d'opérationnaliser l'accord-cadre général du financement. À travers ce Plan de mise en œuvre annuel, l'USAID peut s'assurer que le Récipiendaire met effectivement en œuvre le programme qu'elle a accepté d'appuyer. Le Plan de mise en œuvre annuel est donc un outil de gestion essentiel que l'USAID doit approuver pour garantir que les activités du projet sont en cohérence avec le programme proposé par le Récipiendaire.

- *Approbation du Personnel-clé* : Le Chef de mission et deux autres membres du personnel à des postes-clés sont définis comme étant personnel-clé. Tout changement de personnes à ces postes doit être soumis à l'approbation du Responsable de l'Accord ou de l'AOR (si le pouvoir d'approbation sur cette question a été délégué par écrit de l'AO à l'AOR). Tout changement en ce qui concerne les postes considérés comme personnel-clé nécessite l'approbation du Responsable de l'Accord. Tout changement apporté aux rôles et responsabilités du personnel-clé doit faire l'objet d'une consultation avec l'USAID.

- *Approbation des Plans de suivi et évaluation*, le deuxième outil de gestion essentiel de l'USAID. Alors que le Plan de mise en œuvre annuel détaille la manière dont les activités du Récipiendaire seront opérationnalisées, le Plan de suivi et évaluation mesure si les résultats recherchés à travers la mise en œuvre du programme ont effectivement été réalisés. Ce plan est donc un outil essentiel qui permet à l'USAID d'assurer la redevabilité du Récipiendaire, d'apporter des ajustements en cas de problèmes de mise en œuvre, et de permettre aux gestionnaires de programmes de l'USAID de rendre compte à leur direction des résultats réalisés.

- *Accès aux données et participation à l'analyse* : Les données générées par les systèmes de surveillance, les études de recherche, les évaluations de programmes et autres activités appuyées par SOROKA seront mises à la disposition du MinSanP, de l'USAID et du PMI dans les meilleurs délais. Ces parties prenantes peuvent également collaborer étroitement avec le Récipiendaire dans l'analyse des données et la rédaction des principaux constats des études.

- *Suivi par l'USAID pour permettre des types particuliers d'orientation ou de réorientation des travaux* : L'USAID peut effectuer des suivis en vue d'autoriser des types particuliers d'orientation ou de réorientation suite à des problèmes de performance, à un feedback après des visites sur place ou à des interactions avec d'autres projets. Toute intervention entraînant une modification de la Description du Programme ou du budget approuvé doit être approuvée par le Responsable de l'Accord.

- *Approbation de construction* : Aucun fonds de l'USAID dans le cadre du présent financement ne sera utilisé pour exécuter ou appuyer des activités de construction et d'infrastructure sans le consentement et l'approbation écrites explicites du Responsable de l'Accord.

- *Approbation de sous-réциpiendaires* : Le Récipiendaire doit soumettre les informations exigées pour toutes les sous-réциpiendaires.

- *Capacité à interrompre une activité* : dans le cas où le Récipiendaire ne répond pas aux spécifications de performance détaillées.

## **6. Éléments principaux du programme**

### *DEIA et développement inclusif*

Les dimensions de la DEIA seront prises en compte dans toutes les composantes du projet : questions de recherche, protocole de collecte de données, équipe (recherche, enquête sur la flambée, surveillance), mise en œuvre, diffusion des constats et formation. Les groupes marginalisés seront encouragés à postuler comme enquêteurs et les districts en zones enclavées seront priorités lors de la mise en œuvre.

## *Genre*

En accord avec la [Stratégie nationale des États-Unis pour l'équité et l'égalité des sexes](#), le Récipiendaire est responsable de l'intégration de la dimension genre à tous les aspects pertinents de la conception et de la mise en œuvre. Il est essentiel de promouvoir l'égalité des sexes et de donner aux femmes et aux filles les moyens de participer pleinement au développement de leur société tout en en tirant profit si l'on veut réaliser les objectifs de développement que l'USAID s'est fixés. Conformément au [Chapitre 205 de l'ADS de l'USAID : Intégration de l'égalité des sexes et l'autonomisation des femmes dans le cycle de programmation de l'USAID](#)<sup>[2]</sup>, il est essentiel que le Récipiendaire de cette financement collabore avec l'USAID/Madagascar, ses agents d'exécution et le GdM pour garantir que les besoins des femmes et des filles soient satisfaits, et que femmes et hommes bénéficient de chances égales de se développer. Il sera exigé du Récipiendaire de prendre en compte les questions de genre et de développement inclusif dans sa proposition, conformément aux recommandations fournies par la CDCS de l'USAID Madagascar.

L'activité contribuera indirectement à apporter des réponses aux défis auxquels les femmes, les jeunes et les groupes marginalisés sont confrontés à travers le renforcement de capacité, l'autonomisation économique et la réduction de la VBG. Les utilisateurs finaux ciblés seront sélectionnés à travers une approche de développement inclusif. Lors de l'élaboration de la CDCS, une analyse comparative de genre a été réalisée et les résultats de cette analyse seront pris en compte dans ce projet. Le Bureau HPN a également organisé un groupe de discussion sur le genre avec les partenaires d'exécution, le MinSanP, et le Ministère de la Population et des Solidarités, pour les trois projets dont la conception est en cours (MIAHY, MAHENIKA, SOROKA). Les trois membres du personnel-clé de SOROKA suivront la formation de base en genre de l'USAID. Le Récipiendaire veillera à ce que les femmes représentent au moins 50% des participants à la formation. Une approche au genre prise en compte en ce qui concerne le personnel et les utilisateurs finaux et une telle prise en compte devra se retrouver dans le plan de travail et les rapports.

## *Jeunes*

Les jeunes seront pris en compte dans la formation, les stages et le recrutement de chercheurs et d'enquêteurs. Le projet élaborera des questions spécifiques relatives aux jeunes et favorisera la création de cadres de développement pour les jeunes en offrant des opportunités de recherche et de formation. Comme mentionné précédemment, la collaboration avec le Ministère de l'Éducation Supérieure et de la Recherche Scientifique est envisagée.

## *Localisation*

L'activité met l'accent sur une approche de co-crédation impliquant des entités locales afin de garantir un alignement avec les priorités et les ressources nationales. L'implication d'organisations locales compétentes et engagées, confirmée lors de l'atelier de co-crédation, met en lumière la présence d'expertises nationales dans des domaines tels que les ressources humaines, les laboratoires et les centres de recherche, malgré des opportunités limitées. Le réeipiendaire collaborera avec des entités locales pour mettre en œuvre les activités et intégrer régulièrement les perspectives locales, en particulier celles des populations marginalisées, tout en inscrivant les activités dans les stratégies nationales pour garantir leur pertinence.

Pour promouvoir la durabilité, le réeipiendaire soutiendra les institutions partenaires dans l'élaboration de plans de formation visant à renforcer leur capacité institutionnelle et leur sensibilisation auprès des jeunes et des femmes, en abordant les contraintes culturelles. Les formations auront pour objectif de créer une main-d'œuvre qualifiée et de renforcer les capacités institutionnelles du Ministère de la Santé Publique (MSP) et du secteur privé, favorisant ainsi une plus grande autonomie et un impact à long terme. Le réeipiendaire s'assurera que les avantages de l'activité se poursuivent au-delà de la fin de celle-ci, en reliant et en élargissant les ressources existantes et en promouvant des partenariats entre les sociétés savantes, les entreprises et les universités.

Le réeipiendaire travaillera avec des partenaires locaux compétents pour soutenir leur durabilité plutôt que de se substituer à eux, encourageant l'autonomie et le développement institutionnel. Les partenariats avec des institutions de premier plan seront privilégiés, tirant parti des expertises et ressources existantes pour maximiser les résultats. Lorsque cela s'avère nécessaire, le réeipiendaire renforcera les capacités des organisations locales, favorisant une expansion appropriée des institutions existantes afin de garantir la pérennité et l'ampleur de l'impact.

### *Intégration du changement climatique et conformité environnementale*

La conformité aux Réglementations Environnementales de l'USAID est une exigence juridique qui se pose ainsi qu'une politique de l'Agence. Le Réeipiendaire est chargé de veiller à ce que toutes les mesures d'atténuation environnementale, proposées dans l'Examen Environnemental Initial (EEI) ou élaborées suite à une analyse environnementale des activités durant la mise en œuvre, soient respectées, et que les subventions et les contrats de sous-traitance soient conformes à l'EEI. Ce projet est couvert par l'EEI du Projet de renforcement du secteur de la santé (RSS) de Madagascar à clôturer le 30 novembre 2027. La récente analyse de la gestion des risques climatiques dans le cadre de la CDCS a permis de cerner des impacts potentiels associés aux risques climatiques dans le cadre de l'EEI du [Projet de renforcement du secteur de la santé](#). Lors de l'évaluation, les risques climatiques relatifs aux activités (RSS) sont classés comme faibles ou modérés, tels que l'indique également l'EEI. Le Bureau HPN dispose d'approches permanentes

pour l'atténuation des risques climatiques qui seront prises en compte dans le cadre de ce nouveau contrat.

#### *Mobilisation du secteur privé*

Dès la conception de ce projet, le secteur privé a été mis à contribution. Il sera également mobilisé dans la mise en œuvre. Le partenaire d'exécution étudiera d'autres opportunités pour la mise en œuvre (tels que les téléphones mobiles, les drones, etc.).

#### *Flexibilité d'échelle et adaptabilité :*

Le Récipiendaire devrait intégrer l'apprentissage adaptatif à la mise en œuvre des activités, afin de s'assurer que des systèmes et des processus d'apprentissage itératif sont en place pour éclairer les décisions relatives aux activités, adapter les interventions et ajuster le cap, au besoin.

#### *Transparence et redevabilité :*

Le Récipiendaire devrait étudier comment il peut contribuer à rehausser la transparence et la redevabilité dans le cadre de l'activité. Les moyens pour le faire peuvent aller d'activités à petite échelle, telles que le partage de données de surveillance avec les participants locaux, à des programmes de bien plus grande envergure axés sur les changements au niveau des politiques. Le Récipiendaire devrait décrire dans cette section comment l'activité devrait contribuer à rehausser la transparence et la redevabilité.

#### *Science, Technologie, Innovation et Partenariats (STIP) :*

Le Récipiendaire prendra en compte les priorités du MinSanP en matière de numérisation du système de santé. Les efforts en matière de STIP visent souvent à rehausser la rentabilité des investissements, à accélérer la réalisation de résultats et/ou à mettre à l'échelle des innovations révolutionnaires.

Le Récipiendaire étudiera également les possibilités de recourir à des solutions innovantes, telles que les solutions mobiles et basées sur les TIC, afin d'élargir la couverture des activités à l'aide de la technologie.

#### *Image de marque et marquage:*

Dans cette activité, le Récipiendaire doit garantir la conformité à l'[ADS 320 sur le Marquage de l'USAID](#)<sup>[3]</sup> ainsi qu'au [Manuel des normes graphiques de l'USAID](#)<sup>[4]</sup>. Le Gouvernement des États-Unis s'est engagé dans un partenariat à long terme avec Madagascar qui est fondé sur l'intérêt

mutuel, le respect et la confiance. La communication et la sensibilisation sont des éléments-clés de la stratégie de diplomatie publique du Gouvernement des États-Unis dont le but est de s'assurer que le public malagasy est bien informé sur les programmes d'assistance civile du Gouvernement des États-Unis à Madagascar. Les activités de communication et de publication scientifique du Récipiendaire seront en accord avec la stratégie de diplomatie publique mise en œuvre par l'Ambassade des États-Unis à Antananarivo.

#### *Langue et traduction :*

Une traduction appropriée en français ou dans les langues locales est essentielle à la réussite de cette activité. La grande majorité des activités financées dans le cadre de ce contrat sera menée en langue anglaise ; cela dépendra des publics cibles. Le Récipiendaire doit disposer des ressources nécessaires pour garantir une traduction rapide et de qualité ; toutes les traductions devront être rigoureusement examinées par le Récipiendaire avant leur soumission à l'USAID Madagascar.

#### *Normes culturelles :*

Le Récipiendaire doit tenir compte de la culture dans la mise en œuvre du projet et prêter attention au changement et à la résistance à l'évolution des normes de genre.

## **7. Plans**

### **VII.1 Plan de SEA**

Le Récipiendaire élaborera et mettra en œuvre un plan de SEA basé sur le cadre logique et la théorie du changement pour pouvoir mesurer l'avancement par rapport aux objectifs fixés. Il doit travailler en étroite collaboration avec l'USAID pour finaliser les indicateurs et définir les objectifs de performance, en fonction des orientations et exigences de l'USAID. Il sera responsable de la collecte et de l'analyse des données et de la préparation des rapports de performance exigés par l'USAID conformément au cycle de rapport de résultats établi (mensuel, trimestriel et annuel). Au plus tard 90 jours après la signature du financement, le Récipiendaire doit soumettre à l'approbation de l'USAID un Plan de Suivi et Évaluation de la Performance final.

### **VII.2 Plan de travail annuel**

Le premier Plan de travail annuel de mise en œuvre doit être soumis à l'AOR et est sujet à son approbation dès que possible après du financement, mais au plus tard 30 jours après la ratification du financement.

### **VII.3 Plan de clôture**

Quatre-vingt-dix (90) jours avant la fin de l'Accord, le Récipiendaire doit soumettre un plan de clôture à l'AOR et au Bureau des Acquisitions et de l'Assistance. Le plan de clôture comprend : un bref résumé du programme ; un calendrier succinct du programme ; un rapport sur la situation financière ; le calendrier final du Rapport sur la situation financière ; les taux de coûts indirects ; le solde prévu des fonds fédéraux après l'expiration de l'instrument ; un inventaire final des biens non réutilisables restants, acquis ou fournis dans le cadre de l'instrument ; le statut de tous les rapports d'audit du programme conformément aux dispositions de l'instrument ; le calendrier du rapport d'audit final ; le calendrier du rapport final ; et les descriptions de poste du personnel qui devrait assurer le service durant la phase de clôture

## 8. **Acronymes :**

[ADS](#) : Système de Directives Automatisé

AO : Responsable d'Accord

AOR : Représentant du Responsable de l'Accord

ASC : Agent de Santé Communautaire

CDCS : Stratégie de Coopération pour le Développement du Pays

CHISU : [Exploitation des Systèmes d'Information et des Données Sanitaires du Pays](#)

CHRD : Centre Hospitalier de Référence de District

CHU : Centre Hospitalier Universitaire

COI : Commission de l'Océan Indien

CSB : Centre de Santé de Base

CSB-R : Centres de Surveillance Biologique Référents

DEIA : [Diversité, Équité, Inclusion et Accessibilité](#)

DVSSER : Direction de la Veille Sanitaire, de la Surveillance Épidémiologique et de la Riposte

EEC : Évaluation Externe Conjointe

EI : Examen Environnemental Initial

FAO : Organisation des Nations Unies pour l'Alimentation et l'Agriculture

HPN : Bureau Santé, Population et Nutrition

ICS : Stratégie Intégrée Pays

INSPC : Institut National de Santé Publique et Communautaire

MI : Maladies Infectieuses

MinSanP : Ministère de la Santé Publique

OD : Objectif de Développement

ONG : Organisation Non Gouvernementale

ONU : Organisation des Nations Unies

OS : Objectif Spécifique

PE : Partenaire d'Exécution

PFET : Programme de Formation Épidémiologique sur le Terrain

Plan SEA : Plan de Suivi, d'Évaluation et d'Apprentissage

PMI REACH : Atteindre Chaque Communauté et Ménage à Risque avec des Services de lutte contre le Paludisme

POS : Procédure Opératoire Standard

RH : Ressources Humaines

RI : Résultat Intermédiaire

RSS : Renforcement du Système de Santé

SMNE : Santé de la Mère, du Nouveau-né et de l'Enfant

SSM : Sécurité Sanitaire Mondiale

USAID : Agence des États-Unis pour le Développement International

USAID-RISE : Recherche, Innovation, Surveillance et Évaluation

USAID-STRIDES : [Renforcement du Système de Détection des Maladies Infectieuses](#)

VBG : Violences Basée sur le Genre

WASH : Eau, Assainissement et Hygiène

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[1] Recherche pour la santé : une stratégie pour la Région africaine, 2016-2025 ; OMS 2015

[2] <https://www.usaid.gov/ads/policy/200/205>

[3] <https://www.usaid.gov/ads/policy/300/320>

[4] <https://www.usaid.gov/branding/gsm>