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NOFO Issue Date: May 13, 2022
Deadline for Questions: May 23, 2022
Closing Date and Time: June 16, 2022, 15:00 Pakistan Standard Time

Subject: Notice of Funding Opportunity (NOFO) Number: 72039122RFA00003

Activity Title: BUILDING HEALTHY FAMILIES ACTIVITY

Federal Assistance Listing Number: 98.001

Dear Prospective Applicants:

The United States Agency for International Development (USAID) is seeking applications for a Cooperative Agreement from qualified entities to implement the Building Health Families Activity. Eligibility for this award is not restricted. The authority for the NOFO is found in the Foreign Assistance Act of 1961, as amended.

USAID intends to make an award to the responsible applicant whose application best meets the requirements of this NOFO and the Merit Review Criteria contained herein. While one award is anticipated as a result of this Notice of Funding Opportunity (NOFO), USAID reserves the right to fund any or none of the applications submitted with a maximum of $40,000,000 to be allocated over a five-year period. Applicants under consideration for an award that have never received funding from USAID may be subject to a pre-award audit to determine fiscal responsibility, ensure adequacy of financial controls, and establish an indirect cost rate.

For the purposes of this NOFO the term "Grant" is synonymous with "Cooperative Agreement"; "Grantee" is synonymous with "Recipient"; and "Grant Officer" is synonymous with "Agreement Officer". Eligible organizations interested in submitting an application are encouraged to read this funding opportunity thoroughly to understand the type of program sought, application submission requirements and evaluation process. The successful applicant will be responsible for ensuring the achievement of the program objectives.

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

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

Please send any questions to the point(s) of contact identified in Section D. 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.

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,

[S]

Bruce Gelband
Agreement Officer

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# SECTION A: PROGRAM DESCRIPTION

## 1. SUMMARY

The Building Healthy Families Activity aims to expand access to and utilization of essential health care in Pakistan, including quality family planning (FP) and maternal, newborn, and child health (MNCH) services, in order to improve health outcomes for some of its most vulnerable populations. The Activity will utilize a health systems strengthening (HSS) approach to strengthen FP/MNCH services, focusing on supporting interventions such as policy, advocacy, human resources, and leadership and governance. It aims to address Pakistan's high fertility and low contraceptive prevalence rates (CPR) within the context of a rapidly growing population. New FP and MNCH funding presents opportunities to re-engage with key stakeholders to address persistent gaps in FP/MNCH utilization and service delivery; while ambitious targets recently set by the Government of Pakistan (GoP) have also created a renewed focus for FP programming. This activity will be also critical in addressing new challenges in FP/MNCH brought on by the COVID-19 pandemic, notably disruptions in service provision, the contraceptive supply chain, and staffing, and the urgent need to build resilient health systems able to face new public health threats. Lockdowns have also reduced purchasing power and access to food markets, impacting overall food security and nutrition. This activity will support an integrated approach to health system strengthening that enables the health system to prevent and respond to the on-going COVID-19 pandemic and emerging infectious diseases within the broader health system.

The Building Healthy Families Activity will provide technical assistance and support to the GoP to accelerate efforts in meeting the country's 10x10 Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Agenda and FP2030 goals as well as help to mitigate the secondary health impacts of COVID-19. Pakistan is committed to working towards achieving universal access to reproductive health and to raising the CPR to 55 percent. The proposed five-year Activity intends to build the capacity of public and private sector institutions at both national and provincial levels primarily in Khyber Pakhtunkhwa (KP) and Sindh. Target populations for engagement include youth, newly married couples, and men and women in the reproductive age (WRA) group (15-49). A secondary target group will be government officials and health providers at the national and provincial levels. This Activity will also contribute to the Mission's Country Development Cooperation Strategy (CDCS) goal by strengthening the ability of Pakistan's government institutions to provide improved FP and MNCH services, fostering a more prosperous and stable Pakistan.

## 2. PROGRAM DESCRIPTION

### 2.1. Background

Pakistan has the highest population growth and birth rates in South Asia and is the fifth most populous country in the world. The United Nations Population Division (UNFPA) estimates that Pakistan's population will reach 263 million by 2030 and 383 million by 2050 -a 75 percent

increase over current figures. Pakistan has the lowest overall CPR at 34 percent compared to South Asian countries at 53 percent (World Bank, 2019). Fewer than one-third of Pakistani women are currently using modern contraceptives, despite the desire of 70 percent of married women to delay their next pregnancy or not have additional children. One result of nearly universal marriage and low contraceptive prevalence is that Pakistan has one of the highest abortion rates in the world with 48 percent of pregnancies unintended, of which 54 percent are terminated, mostly in an unsafe way. (Pakistan Report 2020). These FP challenges are a major contributor to Pakistan's devastating maternal, child, and infant mortality rates, which constitute the largest share of preventable deaths. There are an estimated 4.7 million births annually with more than 8,000 maternal deaths, 248,000 newborn deaths, 184,000 stillbirths and 405,000 under-five deaths (Pakistan Report 2020). Women of reproductive age (WRA) bear the double burden of malnutrition. One in seven are undernourished, while 38 percent are considered overweight or obese. Pregnant women require a diverse diet rich in vitamins and minerals though this is rarely the case in Pakistan. Forty-two percent of WRA are anemic, while 27 percent and 21 percent are deficient in vitamin A and zinc, respectively. On top of that, over 40 percent of children under five years are stunted and 18 percent are wasted – 2.5 million children are currently estimated to be severely wasted (Pakistan National Nutrition Survey 2018). Child malnutrition is the biggest contributor to under-five mortality due to greater susceptibility to infections and slow recovery from illness. These statistics not only negatively impact the health of Pakistan's population, but also have grave implications for climate change, environmental impact, and social stability.

Similar health trends can also be observed more starkly at the provincial level. Immunization rates in Sindh have deteriorated, stalling at around 52 percent, and the total fertility rate (TFR) is higher in Sindh (3.6) than in other provinces and for Pakistan overall (3.4). While Sindh ranks second for any (26 percent) and modern (22 percent) contraceptive use by married women aged 15-49, modern CPR is lower than the national average of 25 percent. In KP, two-thirds of women have a skilled health professional present at delivery and the immunization rate is 69 percent. (PSLM District Key Finding Report 2019-20)

One in six women in Pakistan has an unmet need for contraception [Pakistan Demographic and Health Survey (PDHS) 2017-2018]. COVID-19 has exacerbated the situation by decreasing access to critical health services including FP, MNCH and nutrition as public health infrastructure has shifted to support COVID-19 response efforts. Women have been disproportionately impacted by the pandemic because of state regulations like stay-at-home orders, financial concerns, or a higher perception of COVID-19 related health risks. COVID-19 vaccine efforts in Pakistan have been successful, with about 45 percent of the total population fully vaccinated as of February 2022 since the country's vaccination drive began in February 2021. However, vaccine rollout has been slow in hard-to-reach and rural communities with the need to address misinformation and vaccine hesitancy critical to not only increasing vaccine uptake but also resuming demand for essential care. This combination of factors has exacerbated the need to integrate COVID-19 care into routine healthcare delivery in Pakistan. Strong primary and community health care—the frontline of all health systems—is essential. Strengthening this frontline by expanding the role of primary and community health care can reduce the pressure on Pakistan's health systems, alleviating the burden on higher-level facilities, and protecting people against the indirect threats of pandemics or other public health crises. This priority is tied closely

to the Mission's CDCS Special Objective of "Strengthening Global Health Security Capacities in Pakistan".

Government of Pakistan

Pakistan Vision 2025 promotes the importance of health to economic and social development. The GoP has subsequently made a number of health commitments related to reproductive, maternal, newborn, adolescent and child health (RMNACH) including its 10x10 RMNACH Agenda and implementation of a basic package of universal health care. In addition, Sindh and KP also have developed their own Provincial Health Plans. The GoP's Current Council of Common Interests (CCI) has also committed to achieving ambitious FP goals, including increasing CPR from 30 percent to 46 percent by 2025 and to 56 percent by 2030; and decreasing the TFR from 4.1 to 3.6 by 2025 and to 3.2 by 2030. These measures will contribute to the larger objective of reducing the Population Growth Rate (PGR) from 2.8 to 1.8 percent by 2025 and further to 1.7 percent by 2030. To achieve this, the GoP has established eight priorities for its FP2030 Action Plan: 1) adapt and implement progressive policy reform; 2) improve universal access to services to lower fertility rates; 3) address information and service needs in remote areas; 4) generate momentum for the National Narrative 2020-2021; 5) ensure contraceptive commodity security; 6) utilize legislation mechanisms to protect and steer FP goals; 7) institutionalize human development; and 8) establish and maintain an effective monitoring and evaluation system to serve FP. The Provincial Governments of KP and Sindh have adopted these and additional goals, including the integration of FP/MNCH services, strengthening of FP/MNCH legislation and implementation (notably, the Child Marriage Restraint Act); and improving access to FP services for youth and adolescents.

FP/MNCH Challenges and Opportunities

Low utilization of FP/MNCH services can be attributed to socio-cultural barriers, high discontinuation rates for modern contraceptives, poor quality FP counseling, lack of integration of FP services with MCH services, minimal public sector investment in FP/MNCH, and weak health systems. To address this, strategic areas of investment include:

*Universal Health Coverage (UHC) and Governance*: Pakistan's National Health Vision 2016–2025 and National Action Plan for Health (2019- 2023) recognize UHC as critical and the Prime Minister of Pakistan has lauded UHC as an explicit policy objective with the expansion of the Sehat Sahulat Program in KP. The GoP has since developed a national Essential Package of Health Services (EPHS) based on the Disease Control Priorities 3 (DCP-3) framework. Implementation will require greater provincial engagement, district leadership, and inter-sectoral coordination. The latter includes improving coordinated and integrated FP/MNCH service delivery between public health and population departments. A planned $300M World Bank National Health Support program (2022-2027) aimed at strengthening primary health care (PHC) in priority provinces, may provide additional partnership opportunities and support for strengthening governance in FP and MNCH.

*Scale-up of the Female Health Workforce*: A significant public health strength for Pakistan's public health services are the more than 96,000 Lady Health Workers (LHWs) and increasing numbers of Community Midwives (CMWs) (Pakistan Report 2020). In recent years, however, inconsistent oversight and funding compounded by ongoing COVID-19 responsibilities have

reduced the quality and consistency of FP counseling and service delivery. There has been a substantial decline in the number of women who were visited by an LHW to discuss FP (29 percent to 19 percent) since 2012. Three out of ten contraceptive users discontinue use within 12 months, with 19 percent of respondents citing side effects. A key reason for discontinuation is often due to inadequate or poor counseling. LHW and CMWs have the potential to play critical roles in both maintaining and expanding consistent use of all methods of contraceptives. The GoP's commitment to expand the number of LHWs from 96,000 to 160,000 can provide an additional opportunity for strengthening FP and MNCH community outreach (National Action Plan for Health).

*Private Sector Regulation*: Non-governmental organizations (NGOs) and the private sector provide approximately 65 percent of FP services, 90 percent of birthing, and 80 percent of medical outpatient services. Nevertheless, the private sector remains heavily unregulated. One way to address this involves a mix of strategies: tax breaks, subsidies, branding, accreditation, consumer awareness, and penalties to bring compliance and encourage private providers to self-volunteer for regulation. Another means is strategic purchasing of healthcare by the government from private providers to fill the gaps in health coverage in underserved areas or specialty services where it cannot deliver well. This is being attempted to an extent in Sindh. In order to meet the GoP's commitment to expand UHC through the EPHS, it will be important to develop streamlined approaches for engaging with, financing and regulating private health sector providers.

*Mitigation and Response to COVID-19 and Emerging Public Health Threats:* The ongoing COVID-19 pandemic reinforces the need for an integrated approach to HSS. As Pakistan moves towards UHC, this provides an opportunity to reinforce global health security efforts (e.g. preventing outbreaks through high immunization coverage) to avert health crises that prevent accessing health services (e.g. diversion of health workers from regular health services to focus on crisis response). A resilient health system has the capacity to effectively prevent, prepare, respond, and adapt to public health emergencies while maintaining routine health systems functions.

## 2.2. Geographic Focus

The geographic focus of the proposed activity will be limited to the federal level and two provinces, KP and Sindh, with the possibility of extending coverage nationwide (see map below).

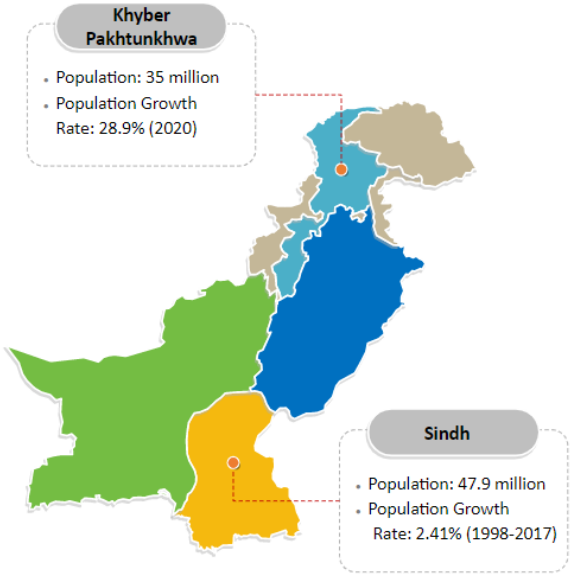
***Sindh***

Sindh has a population of more than 47 million inhabitants with diverse economic and human development challenges. It is a major center of economic activity and has a highly diversified economy ranging from heavy industrial and financial sectors, based in Karachi, to a substantial agricultural base along the Indus River. However, the incidence of poverty is much higher in rural areas (76 percent) than in urban areas (11 percent). Sindh's overall human development outcomes are negatively impacted by its severely disadvantaged rural—and often drought-stricken—population. The female literacy rate in rural Sindh is 24 percent, compared to 70 percent in urban Sindh and 38 percent in rural areas nationwide.

KP

KP has a population of 35 million, making it the smallest province in the northwestern region of Pakistan. Over 80 percent of the population resides in rural areas, with a few densely populated urban centers including Peshawar. More than 1.5 million Afghan refugees are estimated to be residing in the province. KP is the third most literate province of the country, with a literacy rate of 53 percent.

In 2018, the Government of Pakistan decided to merge the Federally Administered Tribal Areas (FATA) with KP and renamed them as the Newly Merged Districts (NMDs). This area along the Pakistan-Afghanistan border has remained in isolation for many decades with limited social development. This region is now moving towards stability, following the peace establishment, rehabilitation, and resettlement of FATA (NMDs). The integration of the NMDs with KP has ushered in a new era of development and growth, including reform of the health and education sectors.




## 2.3. Summary* of Relevant USG and Donor Activities

**A more detailed description of USG and donor activities can be found in Attachment A.*

USG Activities

The Mission's CDCS Goal is a "More peaceful, prosperous, and stable Pakistan." A key line of effort includes helping Pakistan to provide equitable basic services. This new activity will contribute to the Mission's CDCS goal by strengthening Pakistan's governmental institutions to provide improved family planning and maternal, newborn, and child services. This new activity also aligns with the Pakistan Integrated Country Strategy Mission Objective 3.2 "Pakistani society is better educated, more skilled, inclusive, and healthy."

This activity will complement other Mission activities and programs, such as the Integrated Health Systems Strengthening - Service Delivery Activity (IHSS-SD) ($64M; 2017-2023), the Human Development Activity (HDA) ($15M; 2021-2024); and the Global Health Supply Chain – Procurement and Supply Management Activity (GHSC-PSM) ($52.5M; 2016-2023). Together

with these USAID health activities, the Building Healthy Families Activity will contribute to improving access, quality, and uptake in health services, with a focus on KP and Sindh provinces and other regions in the country.

Donor Activities

Key development partners in the FP/MNCH space include the World Bank, Bill and Melinda Gates Foundation (BMGF), United Kingdom Foreign Commonwealth and Development Office (FCDO), Australian AID and UNFPA. The World Bank will soon be the largest development partner in the health sector when it launches its $300M National Health Support Program (2020-2027) aimed at strengthening systems and services supporting equitable provincial delivery of integrated PHC in KP, Sindh, Balochistan, Punjab, and at the Federal level. The Program will focus on: (i) improving PHC service delivery through implementation of EPHS in selected "accelerated" districts at the community levels and union councils (rural health centers and basic health units); and (ii) supporting innovations and policy reforms to improve the financial sustainability, efficiency and effectiveness of the provincial health sectors as a whole (health financing and financial management, management information systems, and functional integration of vertical programs). An important aspect of this project will be building department and district level senior human resources (HR) capacity, continuity and management.

UNFPA is an influential development partner in Pakistan's FP space and leads FP coordination in Pakistan, working across multiple areas such as advocacy, policy change, capacity building, and service delivery. BGMF has awarded two FP projects in Pakistan in the last eight years. Most recently, BGMF awarded the $5M Health and Nutrition Development Society (HANDS) project (2017-2021) to improve access to quality FP counseling and services in underserved rural areas in Sindh through the social franchise model of Marvi workers. The FCDO will be launching a new HSS program in 2022 while Australian AID will continue to support activities focused on nutrition outcomes while working in Balochistan to improve maternal newborn and child health.

## 2.4. Lessons Learned

Over the years, USAID has partnered with the GoP to support reproductive, maternal, newborn, and child health as key elements of an overall USG strategy of stabilization, economic strengthening, and development. USAID's current and past HSS activities have demonstrated that governance, capacity building and other systems approaches can effectively improve Pakistan's public and private healthcare sectors at both the provincial and federal levels. USAID health programs such as the Family Planning and Reproductive Health (FPRH) Project have also shown that community-based interventions working with LHWs to develop private sector approaches such as social franchising, are extremely effective for reaching remote rural populations. Findings from the FPRH and Momentum activities have shown that male engagement continues to be an essential approach for increasing uptake of FP services. (Please see Attachment A)

More recently, the August 2021 Consultation Workshop with the Government of KP for USAID's HDA identified areas of need including: enhancing FP/MNCH coverage and access, improving human resource management, governance, regulation and accountability and health financing to support efficient service delivery. A diverse group of government and civil society stakeholders further identified eight measures to address imbalanced and high population growth including: 1)

establishment of National and Provincial Task Forces; 2) ensuring universal access to reproductive Healthcare; 3) increased mobilization of financial resources; 4) targeted legislation; 5) advocacy and communication; 6) curriculum and training; 7) contraceptive commodity security; and 8) support of "*ulema*" (Muslim scholars) to help increase mass awareness on the importance and benefits of FP. Stakeholders requested further support to expand initiatives such as *ulema* engagement, building capacity of health care professionals, technology-based FP/MNCH, and development of FP/MNCH Models. Similarly, considerable efforts are needed to adequately address the health needs of Sindh's growing population—tackling HR shortages and making services more accessible is critical. In Sindh, over half of women face challenges in accessing healthcare. Among women in rural Sindh, distance is a challenge for 68 percent of women and transportation is a challenge for 76 percent of women, highlighting the urgent need to make health services more accessible. Further, despite high regard for the LHW program, which is intended to provide basic health services, including FP, just over half of women are aware of LHWs in their area.

## 2.5. Results/Logical Framework and Intended Results

The purpose of the activity is to improve family health outcomes through increased uptake and continuation of voluntary FP/MNCH services and through mitigating the secondary health impacts of the COVID-19 pandemic and other public health threats. As such, the following Development Hypothesis was developed:

**Development Hypothesis**

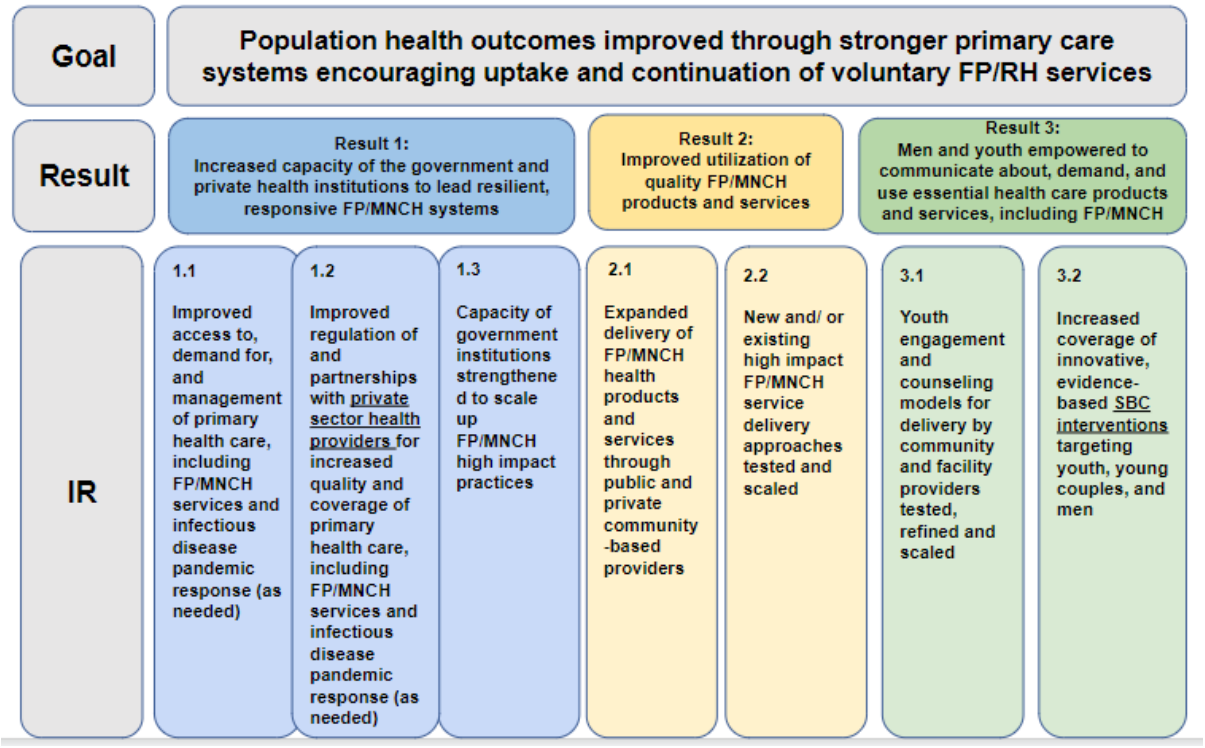
***IF***:

- National and provincial governments lead resilient health systems that expand access to essential health care (including quality FP/MNCH products and services); and
- If public and private organizations deploy evidence-based social and behavior change (SBC) interventions and services that respond to the primary health care needs (including FP/MNCH) of youth, young couples, and men; and
- If young people and couples are supported by peers, adults, providers, communities and leaders to communicate effectively around their reproductive intentions and **use** quality FP/MNCH services

***THEN***:

- Pakistan will achieve more inclusive and equitably distributed improvements in FP/MNCH outcomes

The following framework describes the anticipated direct and indirect results of the proposed activity:




The Building Healthy Families Activity focuses on building the capacity of public and private sector institutions at the national and provincial levels to strengthen and expand access to and utilization of quality FP/MNCH services across the public and private sectors. *The funding may vary from year to year and the implementer will need to design flexible programs that can accommodate different funding streams with the goal of building public and private sector capacity to offer integrated FP/MNCH services.*

**Table 1** below shows a general framework (outcomes and indicators) for quantifying measurable progress. Indicators with an asterisk (*) are required by USAID/Washington. At this time, each of the Activity's expected outcomes will also be linked to quantifiable targets based on the province and existing epidemiological data. The Recipient will need to collect data on the indicators at the frequency and level of disaggregation required by USAID; indicators may increase in number and/or levels of disaggregation over time as the program expands FP/MNCH coverage. Quantitative and qualitative approaches to measure systems change should be used to guide interventions and test results chain hypotheses.

*Table 1- General Framework (Outcomes and Indicators)*

| Activity Summary | Illustrative Indicators |
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| **Goal:**<br>Population health outcomes improved through stronger primary care systems encouraging uptake and continuation of voluntary FP services | TFR in USG supported sites<br><br>*Couple Years Protection in USG supported programs (HL.7.1-1)<br><br>*Estimated potential beneficiary population for maternal and child survival program, disaggregated by pregnant women (estimated number of live births) and children under 5 (HL 6.0) |
| **Results:**<br>1. Increased capacity of national and (selected) provincial governments to lead resilient, responsive primary health care systems | Number of legislative and policy frameworks developed to integrate MNCH and FP services in KP and Sindh with USG support<br><br>Number of new government decrees/coordination bodies implementing FP 2030 commitment plans<br><br>*Number of people trained on COVID-19 vaccine-related topics and public health threats with USG support<br><br>* Number of vaccination sites established as a result of USG direct support |
| 2. Improved utilization of quality FP/MNCH products and services | *Percent of USG supported service delivery sites providing FP counseling and/or services (HL.7.1-2)<br><br>*Number of USG assisted community health workers providing FP referrals, information, or services (HL.7.2-2)<br><br>Number of trained LHWs offering consistent quality FP counseling and services in project sites<br><br>Number of new clients of modern contraceptive methods<br><br>*Overall service utilization rate among USAID-supported facilities implementing quality improvement (QI) (HL.1.13-3)<br><br>Percent of USG-assisted facilities with improved performance<br><br>*Number of women giving birth who received a uterotonic in the third stage of labor (or immediately after birth) through USG-supported programs (HL.6.2-1)<br><br>*Number of newborns not breathing at birth who were resuscitated in USG-supported program (HL.6.3-1)<br><br>*Average service gaps between: a) ANC1 and ANC4; b) DPT1 and |

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| | DPT3*, in USAID-supported sites (HL.1.13-1) |
| 3. Men and youth empowered to communicate about, demand, and use essential health care products and services, including FP/MNCH. | Number of information, counseling and service delivery models to support youth and young married couples designed, tested and expanded in partnership with public and private organizations<br><br>Percent of men and youth that recalls hearing or seeing a FP message, campaign or communication initiative<br><br>Cost per person reached by FP SBC Activities<br><br>Number of service providers trained in IPC for FP counseling.<br><br>Percentage of men and youth who talked about FP with their spouse/partner<br><br>Percentage of men and youth with favorable attitudes of modern FP methods<br><br>Percentage of men and youth that believes most people in their community approve of people using FP.<br><br>* Number of people reached through USAID-supported mass media and social media with COVID-19 vaccine-related messaging<br><br>* Number of people who received a first dose of an approved COVID-19 vaccine (COV-1) with USAID direct support<br><br>* Number of people who received a last recommended dose of an approved COVID-19 vaccine (COV-c) with USAID direct support |
| **Cross-cutting*:**<br><br>1. Private sector engagement<br><br>2. Gender, social inclusion, and equitable access to services**<br><br>3. Access to gender-based violence services<br><br>4. Climate resilience | Level and nature of resources mobilized from the private sector<br><br>*Number of training and capacity building activities conducted with USG assistance that are designed to promote the participation of women or the integration of gender perspectives in social sector institutions or activities. (GNDR-9)<br><br>Number of facilities reached by a USG-funded intervention adopting eco-friendly initiatives (including best practices in waste management, water conservation, reduced energy consumption)<br><br>**Most indicators must be disaggregated by age, sex and geography and analyzed to identify inequity in progress towards the Activity's outcomes; Applicants are encouraged to consider additional indicators |

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| | to ensure progress towards gender equality, discrimination reduction, and equitable access |

## 2.6. Activity Results

The purpose of the Building Healthy Families Activity is to improve family health outcomes through increased uptake and continuation of FP/MNCH services; and mitigate the secondary health impacts of the COVID-19 pandemic and other public health threats by strengthening national and select provincial level health systems. This activity will increase utilization of quality voluntary FP/MNCH services primarily among young and newly married couples in order to improve healthy timing and spacing of pregnancies. This will be accomplished through targeted technical assistance that improves the capacity of public and private sector institutions and legal frameworks to deliver primary health services, including FP/MNCH services; seeks new approaches to expand quality FP/MNCH products and services; and develops evidence-based behavior change interventions focused on youth and men. The new activity will build on evidence and lessons learned from previous USAID/Pakistan health programs to address low utilization of FP services by addressing the key social and behavioral determinants of modern contraceptive use, and improving the quality and resilience of FP/MNCH service delivery for scaling up FP and MNCH interventions.

Key interventions will consist of:

***Result 1: Increased capacity of the government and private health institutions to lead resilient, responsive FP/MNCH systems***. Pakistan's public and private sector institutions must be mobilized and capacitated as they are responsible for achieving FP/MNCH results. By assisting the national and provincial governments to strengthen coordination between and implementation of population and health programs, Pakistan will improve the performance and resilience of its health system. Resilient health systems combined with commitment to a rights-based FP approach will also help the GoP to meet its goals to combat climate change and pandemics such as COVID-19 and other emerging public health threats. Pakistan's commitment to FP 2030, which affirms political will and effective ownership of FP, relies on working closely with climate change professionals to remove barriers to FP for both environmental and human health.

In addition, strengthening the health care system to provide life-saving integrated MNCH care packages along the continuum of care is linked to increased utilization of services for critical MNCH practices. The MNCH continuum offers multiple opportunities to reach women and men with FP information and services, and increase provider interaction with pregnant and postpartum women and their families. The integrated service delivery approach covers the spectrum of health services women and couples seek for themselves (before, during and after pregnancy) and for their children, which is cost-effective, ensures equitable delivery, and can be scaled up through integrated packages at every stage of the continuum of care.

In order to implement key activities under the National Action Plan and in the FP2030 pledge, the National government may require assistance developing and finalizing policy and legal frameworks, such as scaling up pre-marital counseling. Technical assistance to provincial governments could bolster their capacity to lead regional FP and MNCH bodies such as Regional

Training Institutes, Population Sector and Research Committees, FP2030 forums, Midwifery Association of Pakistan (MAP), and the Society of Gynecologists Pakistan (SoGP). Provincial governments also need assistance to liaise with and incentivize private health sector providers and hospitals to boost their roles in preventing and addressing public health threats and primary healthcare functions (FP/MNCH).

**Intermediate Result 1.1:** Improved access to, demand for and management of FP/MNCH services

**Intermediate Result 1.2:** Improved regulation of and partnerships with private sector health providers for increased quality and coverage of FP/MNCH services

**Intermediate Result 1.3:** Capacity of government institutions strengthened to scale up FP/MNCH high impact practices

Increased integration of high quality FP counseling and services during skilled birth attendance and facility deliveries in Pakistan is a huge opportunity. However, only 11 percent of women were given information regarding contraception during postnatal check-up (PDHS 2017-18).

Illustrative interventions may include:

- Building capacity of national and provincial governments to strengthen and scale up FP high impact practices such as postpartum FP, improved FP counseling and outreach, premarital counseling programs to meet the needs of young married couples and men
- Bolstering capacity of the Health Care Commission to improve regulation of private sector health providers to increase and expand quality FP service delivery
- Exploring opportunities for government's strategic purchasing of health care services through private sector providers
- Strengthening provincial level systems to expand quality FP services through community based providers, i.e. LHW, CMW
- Empowering local institutions to advocate for expanded commitment for FP/MNCH as an approach to combat the climate crisis
- Promoting strategies to deliver integrated FP/MNCH services, including managing and delivering services together, to maximize efficiency and increase service access and quality (for example integrating FP messaging with antenatal care, immunization, and other services).
- Building capacity of national provincial governments to strengthen and scale up MNCH high impact practices such as skilled birth attendance, kangaroo mother care, and newborn resuscitation; treatment for postpartum hemorrhage, eclampsia, and maternal anemia; and interventions to promote early and exclusive breastfeeding, improve infant and young child nutrition and prevent and treat diarrhea.
- Embedding technical experts at the federal/provincial levels to build FP/MNCH capacity
- Providing technical assistance at the federal level to understand the quantifiable linkages between population growth (including the unmet demand for FP) and climate change to take policy action accordingly.

***Result 2: Improved utilization of quality FP/MNCH products and services.*** The 2017-2018 PDHS identified male condoms (9 percent) and female sterilization (9 percent) as the most popular methods of contraception. Expanding the contraceptive method mix is one way to increase choice as well as contraceptive prevalence. Expanding the provider base (including drug shops, chemists, and other small retail points) and utilizing mobile service units, community midwives and outreach workers are proven strategies that can increase access to new and existing methods. This, when complemented by WHO-supported task sharing and task shifting strategies, has the potential to contribute to increased uptake of health services including FP. This allows for more efficient use of available human resources working in overburdened health systems during the COVID-19 pandemic and in emerging public health emergencies. The USAID-supported Randomized Control Trial on DMPA-SC (Sayana Press) in Sindh provides strong local evidence on the effectiveness of task sharing in administering new methods of injectable contraceptives for both intramuscular and subcutaneous forms of depot medroxyprogesterone acetate (DMPA). Further analysis is required to better understand and implement increased uptake of underutilized contraceptive methods as well as expand access to quality FP services.

**Intermediate Result 2.1:** Expanded delivery of FP/MNCH health products and services through public and private community-based providers

**Intermediate Result 2.2:** New and/or existing high impact FP/MNCH service delivery approaches tested and scaled

Illustrative interventions may include:

- Testing new or strengthening existing FP/MNCH service delivery approaches (i.e. digital innovations, FP counseling and follow up) for scale up
- Investigating new contraceptive options including research/scientific trial providing critical evidence for scale up
- Supporting efforts to improve contraceptive security by leveraging the joint expertise of the private and public sectors to ensure a total market approach to supply chain management
- Engaging outreach workers to promote a more diverse method mix (i.e. traditional family planning -Standard Days Method (SDM), Sayana Press, female condoms, etc.)
- Working with the Population and Welfare Department to increase awareness and uptake of male contraceptive methods (i.e. vasectomy) through the use of male mobilizers and trained providers
- Promoting digital health tools to enhance use and uptake of contraceptives and FP services. For example, Sehat Kahani and doctHERs are both telemedicine platforms operating in Pakistan that virtually connect female doctors out of the workforce with patients, often in remote communities, to provide healthcare service.
- Exploring the use of digital tools such as chatbots, hotlines, and telehealth to support information dissemination and service provision for FP
- Expanding FP outlets through partnerships with GP clinics and pharmacies
- Establishing mobile outreach clinics, complementing the FP services provided by the public sector to serve vulnerable populations.

***Result 3: Men and youth empowered to communicate about, demand, and use essential health care products and services.*** There will be an opportunity to overturn the impact of the COVID-19 pandemic and transform its growth trajectory if Pakistan adopts inclusive policies, supports innovative solutions, and encourages multi-stakeholder collaboration in the service of its adolescents and youth. With 64 percent of the population under age 30, there is an urgent need to engage young people by developing tailored FP/MNCH SBC strategies to meet the specific needs of this demographic. Male engagement and involvement is another critical high impact practice that can lead to increased utilization of and support for FP/MNCH services and products. Premarital counseling has been identified in the National Action Plan (NAP) as a priority intervention as it can facilitate couples communication around reproductive health and the role of FP and other essential health services in achieving a healthy and happy family. Additional research and analysis may be needed to identify other evidence-based SBC approaches that result in favorable attitudes towards and increased acceptance of FP/MNCH services by youth and men. Men and youth may also be engaged through social media to promote sharing of household responsibilities, gender equitable norms and to better understand their role in COVID-19 vaccine promotion efforts. Gender-related factors have a strong influence on FP/RH behaviors, as well as vaccine hesitancy, confidence, and acceptability.

**Intermediate Result 3.1:** Youth engagement and counseling models for delivery by community and facility providers tested, refined and scaled

**Intermediate Result 3.2:** Increased coverage of innovative, evidence-based SBC interventions targeting youth, young couples, and men

Illustrative interventions may include:

- Developing or strengthening youth-focused FP engagement and counseling models for LHWs and public and private sector health providers
- Testing new and/or and scaling up existing communication and empowerment approaches for youth and young couples
- Testing new and/or scaling up existing high impact practices that engage men (i.e. use of social media, community mobilizers, religious leaders)
- Developing approaches to address fears/rumors related to FP use, as well as vaccine safety and side effects in order to expand COVID-19 vaccine coverage to pregnant women and children.

*Key Principles*

Interventions supported by the Building Healthy Families Activity will focus on the following guiding principles and expectations:

- Focus on strategic technical assistance with key government and private sector institutions in order to build capacity and long-term sustainability
- Emphasis on proven (evidence-based) high impact FP practices that will achieve immediate results to increase modern contraceptive prevalence at scale
- Strategic implementation using data, knowledge of country system, and environment to select innovative and high-impact interventions

- Using innovative SBC interventions to change behavior and enable positive social norms that address important health needs, including protection during the pandemic, seeking care, discussing FP and what pregnant women and their families should do to deliver safely
- Country-led design and implementation using local and international partners to both build capacity and assure sustainability
- Commitment to feedback and accountability loops to engage local partners, beneficiaries and communities and apply diversity, equity and inclusion principles to achieve more inclusive, sustainable and lasting health results
- Designing FP/MNCH interventions that will also address and mitigate climate impacts
- Including clearly defined phase-out plans and exit strategies in the multi-year proposal, as well as systems to refine these plans on an annual basis. The Building Healthy Families Activity is intended to complement and not replace, compete with, or duplicate similar support provided by other development partners within Pakistan.

# 3. STRATEGIC CONSIDERATIONS

## 3.1. Gender

Promoting gender equality and advancing the status of women and girls is vital to achieving USAID's development objectives. It is USAID policy that all implementing partners mainstream, and integrate gender issues into their interventions. Therefore, the Recipient will be expected to demonstrate compliance with USAID's Gender Equality and Female Empowerment Policy and ADS 205 and explicitly state how this Activity will work towards achieving gender equality while supporting the gender policies and strategies of the United States Government and the GoP.

Findings from the Gender Analysis undertaken for this activity design note that institutional, cultural, and social norms have left women at a disadvantage. Boys are favored at birth. Early marriage further deepens the inequality as it predisposes women to early pregnancy and high fertility, placing women and newborns at risk of death from birth complications. Additional social dogmas further limit women's rights and access to FP services. Women lack decision-making power to decide on their own reproductive behavior. Instead, it is either the husband or the mother-in-law that decides. The consequences of COVID-19—which at its peak led to a 30 percent decline in utilization of routine FP services—illustrate the particular disadvantages women face in accessing health care due to lack of control over family resources. Men are usually the primary decision makers, exercising decisions about medical expenditures, and investment in and use of contraception, skilled delivery and child healthcare.

In order to promote equity in access to healthcare and other services, USAID/Pakistan expects the Recipient to conduct a Gender Analysis to further pinpoint gender inequalities and barriers to health, then determine the programmatic implications. This will help inform decisions about how to design, implement, and scale up health programs that meet the differential needs of women and men. SBC interventions targeting young men and women, will focus on facilitating overall health, as well as voluntary FP use; encouraging their active roles in supporting their own well-being, and defining and monitoring the quality of health services in their communities. For example, encouraging men and women to support their partners to get health care services will

result in increased participation of women and men receiving health care, including COVID vaccinations, in a timely manner.

### 3.2. Local Systems

USAID assistance is designed to align with the priorities of local actors; leverage local resources; and increase local implementation over time to sustain positive changes. USAID support includes building the capacity of partner government service providers or local NGOs, leveraging USAID's influence and convening power, facilitating local service delivery, and mobilizing domestic resources, among other tactics.

The Recipient is expected to engage closely with local systems across KP and Sindh, focusing on supporting continued capacity strengthening of provincial health ministries to assure quality and performance of key health services by all facilities in supported program areas; outreach and engagement with NGOs, private sector entities, local officials and community leaders; and exploring means to expand quality FP services through community based providers, such as LHWs and CMWs. The Activity should explore means of shifting more leadership, ownership, decision making, and implementation to the local people and institutions who possess the capability, connectedness, and credibility to drive change in the country and communities. The Activity is encouraged to seek ways to diversify and broaden USAID's partner base by working with local and locally established organizations when appropriate. It will be important to align and target efforts to support sustained results and facilitate the transfer of responsibility to these institutions.

### 3.3. Youth

Youth is a cross-cutting issue identified in the Mission's CDCS, and is considered a key focus group for USAID/Pakistan. Building on existing efforts by HDA and the Pakistan Reading Project, one objective of this Activity is to create an enabling environment and expand youth access to quality health information and services. Per the USAID Youth in Development Policy, it is pivotal that youth friendly and gender-sensitive approaches be applied in all health services that are provided to young people, regardless of marital status or parity. The idea is to enable all youth to progress through adolescence and young adulthood to become healthy, engaged, and successful adults. The health and social benefits of contraceptive use for healthy timing and spacing of pregnancy for young women and their children need to be well understood among (young) couples, first time parents, extended family, and the community, to include the community health system as well as key influencers, such as traditional and religious leaders. Pre-marital FP counseling is an excellent opportunity to provide useful information and counseling to young couples and adolescents. Mobile technology and social media can be utilized to provide information, create virtual support networks, and link young couples to health services. The Recipient is encouraged to conduct an independent youth analysis at the activity level.

### 3.4. Climate Change Integration

Climate change is a cross cutting issue that can have significant impacts on regional, national, and local development efforts in all sectors. In recognition of that fact, in 2014, the former President

of the United States signed Executive Order (EO) 13677 which requires all U.S. Agencies to factor climate change into their foreign assistance planning and manage the associated climate risks. Heat worsens maternal and neonatal health outcomes, with research suggesting that an increase of one degree celsius in the week before delivery corresponds with a six per cent greater likelihood of stillbirth. Increased poverty and food insecurity driven by climate-related loss of livelihoods will also impact maternal mortality. Climate-related emergencies cause major disruptions in access to health services and life-saving commodities including contraception. The activity design team used USAID's "Climate Risk Screening Tool" to assess the potential climate risks for the activity. Activity components will take place in many different parts of Pakistan, and activities are largely focused on technical assistance and capacity building. The assessment considered the potential impacts of climate (temperature, drought, precipitation and flooding, sea level rise, storm surges, and other storms), in the focused geographical areas, over a 10-year time frame. The climate risk analysis concluded that this activity poses low to moderate risk for all the listed components of the activity. A summary of the conclusions from the analysis is presented in Table 1: "Activity-Level Climate Risk Management Summary Table" under Section 4, *'Climate Change Integration"* of the IEE.

### 3.5. Science Technology Innovation and Partnerships (STIP)

USAID/Pakistan is one of 20 Missions recognized as a "Lead Mission" in applying Science, Technology, Innovation and Partnership (STIP) to enhance its development impact. As a Lead Mission for STIP, USAID Pakistan will collaborate closely with the Global Development Laboratory (GDL) as it moves through the Program Cycle, integrating STIP approaches and operationalizing STIP partnerships in strategy development, project design or implementation and evaluation. STIP related efforts often focus on making investments more cost-effective, reaching many more beneficiaries at little or no additional cost, accelerating the timeline for obtaining results, and/or bringing ground-breaking innovations to scale. The implementation of STIP approaches are encouraged through this Activity. For one, digital health tools can increase the effectiveness of FP service delivery and campaigns and they have the potential to address gender barriers that restrict FP access and use among hard-to-reach populations. Not only do they have the potential to improve users' knowledge of FP methods and services, they are often able to modify users' or potential users' behaviors by integrating features related to service provision. From the provider perspective, digital tools have served as job aids and supported cross-provider communication, data collection, and training for FP providers, including LHWs. The use of digital tools such as chatbots, hotlines, and telehealth to support information dissemination and service provision for FP has also seen a boost during the COVID-19 pandemic, as more health systems globally have shifted to new, remote service delivery modalities.

### 3.6. Transparency and Accountability

Fostering transparency and accountability is a new focus area for the U.S. Mission in Pakistan and will be pivotal to the success of this activity. In order to build resilient health systems, public institutions that will be supported through USAID technical assistance will be required to explain and make understandable their performance in achieving goals and addressing the needs of the public, in comparison to standards and commitments made. Accountability requires visible, responsive action if standards and commitments are not met. Where governance is transparent and

data is available, and where citizens are engaged and have an opportunity to interact with public officials and participate in governance activities, it is more likely that officials and leaders can be held accountable, and there is less space for malfeasance or corruption.

## 4. COLLABORATING, LEARNING AND ADAPTING (CLA)

This activity is expected to contribute to USAID/Pakistan's commitment to a multi-faceted Collaborating, Learning and Adapting (CLA) approach to development. The CLA approach is based on the understanding that development efforts yield more effective results if they are coordinated and collaborative and test promising, new approaches to generate improvements and efficiencies, and build on what works and eliminate what doesn't.

CLA creates the conditions for fostering broader development success by:

- Collaborating: Facilitating collaboration internally and with external stakeholders to promote increasingly national-led socio-economic development; e.g. enhancing existing stakeholder engagement into learning platforms, substantially coordinating with other U.S. Government- or other complementary activities to ensure complementarity and reduce overlap, while also facilitating learning among activities (to reduce the collective cost while enhancing shared results faster); programs that are complementary to this activity
- Learning: Generating and feeding new learning, innovations, and performance information back into the system to inform program management, design, U.S. Government - Government of Pakistan policy dialogue opportunities and funding allocations; (e.g. creating pauses for reflection within the activity implementation scheme, engaging stakeholders for shared "learning moments," conducting analytical review of existing and/or new evidence that may support or contradict common understanding);
- Adapting: translating learning (from within the implementation experience or external sources) and considering changing conditions, along the lines of the risks, assumptions and game changers, into strategic and programmatic adjustments. (e.g. adjusting work plans to account for contextual shifts or tacit learning from a team's experience, while clearly and explicitly capturing and sharing the rationale for adjustments along the way).

## 5. MONITORING AND EVALUATION

### 5.1. Monitoring

A detailed Activity Monitoring, Evaluation and Learning Plan (AMELP) will be developed for each component of the activity once implementing mechanisms are in place. USAID will provide a template for AMELP which includes theory of change, performance monitoring, indicators for each result with baseline and targets, tools for collecting feedback from beneficiaries.

Performance-based monitoring is essential for ensuring management and results achievement of this project, and therefore, the implementing partner will be required to work closely with USAID Pakistan to develop and maintain a performance monitoring system to track tangible, measurable progress toward the results under this Statement of Work. The AMELP should include clearly defined indicators, baselines, and targets for outputs and outcomes over the implementation period. Gender specific/sensitive indicators should be considered for the activity to better capture

and report on gender sensitive information. The AMELP should also contain metrics for the sustainability of successful interventions introduced with program support. During implementation, the Recipient will be using the M&E Plan to track and report on progress against jointly agreed-upon quarter, annual, and end-of-program performance targets.

The Agreement Officer's Representative (AOR) will monitor Activity Progress through a Multi-Tiered Monitoring approach which includes regular contact with the Recipient, Document Review, site visits, and independent monitoring. Partners will also be given access to USAID's database, Pak Info, a web-based mission information management tool. Pak Info will allow the Recipient to report against assigned indicators, uploading quarterly performance reports and adding/updating its site location(s). The partner will be given comprehensive training on usage of Pak info. USAID has developed a standardized template for Quarterly Performance Reports which partners are required to use.

The MEL plan will describe monitoring at three levels:

- by the implementing partner,
- by the independent monitoring contractor,
- by the USAID Health office.

The USAID Health Office will coordinate monitoring efforts and ensure that monitoring information is used to inform and make necessary adjustments to interventions, reporting on progress, and gathering and applying lessons learned.
In addition, the AOR will ensure:

- Regular meetings with the implementing partner
- Regular report reviews
- Site visits
- Participation in and review of key stakeholder meetings

### 5.2. Use of Geographic Information Systems (GIS)

Geographical information on program sites will be collected via Pak Info site option. Information will be entered by implementing partners on a quarterly basis. The AOR will be responsible for checking the information for accuracy and completeness. The USAID Program Office will provide any necessary training on the system and conduct periodic quality checks.

### 5.3. Evaluation

The USAID/Pakistan Mission wide monitoring and evaluation contract will be utilized for conducting a mid-year program evaluation. This will help the Building Healthy Families Activity to identify its successes and gaps to-date and inform any strategic shifts in programming to meet program goals. Evaluation findings will be shared with USAID and the partner.

**[END OF SECTION A]**

# SECTION B: FEDERAL AWARD INFORMATION

## 1. Estimate of Funds Available and Number of Awards Contemplated

USAID intends to award one (1) Cooperative Agreement pursuant to this notice of funding opportunity. USAID reserves the right to fund any one or none of the applications submitted. Subject to funding availability and at the discretion of the Agency, USAID intends to provide $TBD in total USAID funding.

## 2. Period of Performance

The anticipated period of performance is (05) five years, starting from [actual date to be filled in at the time of award].

## 3. Substantial Involvement

Consistent with ADS 303.3.11, USAID/Pakistan anticipates a close working partnership with the successful Applicant for this activity to assist in achieving the objectives. The specific areas of USAID involvement will include, but are not limited to:

1. Approval of the Recipient's Annual Implementation Plans during performance by the designated Agreement Officer's Representative (AOR);

2. Approval of selection of Recipient Key Personnel: The Recipient shall request prior approval from the USAID Agreement Officer's Representative (AOR) for the replacement of key personnel or changes in the key personnel positions; The following positions have been designated as key to the successful implementation of the program objectives of this Cooperative Agreement:

a) Chief of Party (COP): The COP will be the direct link with the AOR and other relevant stakeholders and accountable for achieving project results. S/he will be based in Islamabad, Pakistan. The COP must have at least a master's degree in a relevant discipline and at least seven years of demonstrated experience working internationally, preferably in Pakistan, managing progressively complex health programs (at least three years of which must be as COP or similar capacity). Experience implementing complex and multi-faceted projects is required, with demonstrated skill in organizing resources and establishing priorities. The COP is expected to have the strategic vision, leadership qualities, depth and breadth of technical expertise and experience, professional reputation, management experience, interpersonal skills and written and oral presentation skills to fulfill the diverse technical managerial requirements of the program description. S/he will have exceptional communication and collaboration skills and a proven track record of interacting with other projects, high-level host country governments and international agencies. The candidate must have a proven track record of working effectively with government counterparts at various levels. Given the complexity and scope of this project, it is critical that the COP exhibit effective personnel management, coordination, and decision-making skills along with an ability to troubleshoot.

b) Deputy Chief of Party/Senior Technical Advisor: The Deputy Chief of Party/Senior Technical Advisor will be located in the Recipient's Islamabad office, but will travel extensively among the provinces. S/he must have at least a Master's degree in a relevant discipline and at least 10 years of demonstrated experience in successfully advising on the management of FP/MNCH programs in developing countries. S/he must have a proven track record of building teams and fostering collaboration in order to achieve goals, meet milestones, and produce high quality written qualitative, quantitative, and narrative deliverables. The DCOP must also demonstrate effective personnel management, coordination, and decision-making skills, with an ability to be accountable for all aspects of this project. In the absence of the COP, s/he is expected to be the direct link with the AOR.

c) Senior SBC Advisor: The Senior SBC Advisor will oversee the design, implementation and monitoring of SBC interventions in close coordination with the COP and DCOP. S/he will lead SBC capacity building, partnership development, and integration of behavioral interventions across the project, with key responsibility for Result 3. S/he must have at least a Master's degree in a relevant discipline and at least 10 years of demonstrated experience in design, implementation and monitoring of large-scale development programs. Superior verbal and written communication skills and experience establishing robust partnerships with the private sector and local government organizations to support SBC are required. Prior experience in strengthening the capacity of government health system staff and CSOs is desired.

d) Senior Monitoring and Evaluation Advisor: The Senior Monitoring and Evaluation Advisor will oversee the monitoring and evaluation system for reporting progress, and maintain reporting procedures and guidelines in compliance with USAID systems. S/he must have at least a Master's degree in a relevant discipline and at least 10 years of demonstrated experience in monitoring and evaluation of large-scale development programs. Previous experience managing a rigorous M&E system, including a strong focus on gender, is necessary. Knowledge of data collection protocols to ensure accurate data collection and verification is essential, as well as an ability to identify data trends and communicate this information to allow for changes in program implementation. Superior verbal and written communication skills to manage project communications and disseminate project information are required. Past experience leading and building the capacity of M&E officers, including remote, field-based staff, to meet program needs and deliverables is desired.

e) Director of Finance and Operations: The Director of Finance and Operations must possess at least a Master's Degree in Business Administration, Finance, Accounting. S/he must have at least six years' experience managing finances for large NGO programs. Knowledge of USAID policies and business practices and with direct experience managing the finances and administration of a USAID-funded project is preferred. The Director of Finance and Operations must have extensive experience with project financial

management, including financial controls, accounting, and audit, as well as reporting on accruals, pipeline, and expense validation and reimbursement to service providers.

3. Subaward approval: The Recipient must request prior review and written concurrence from the Agreement Officer's Representative (AOR) and obtain review and written approval from the Agreement Officer (AO) before entering into any sub-awards under the performance of this agreement;

4. Approval of the Recipient's Monitoring, Evaluation and Learning (MEL) Plan by the Agreement Officer's Representative (AOR); and

5. Technical Participation and Consultations: USAID may monitor and participate to permit specific directions or redirections in technical discussions with the Recipient and provide technical guidance during the development of technical materials/documents and/or the provision of technical interventions. USAID will review and approve final versions of all print or electronic publications before release for publication. USAID may engage in discussion with the Recipient and/or provide technical guidance to the Recipient to ensure the quality of the activity and that the activity is aligned with the policies and strategies of the USAID and the US Government.

**4. Authorized Geographic Code**

The geographic code for the procurement of commodities and services under this program is 937.

**5. Nature of the Relationship between USAID and the Recipient**

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

**[END OF SECTION B]**

# SECTION C: ELIGIBILITY INFORMATION

## 1. ELIGIBLE APPLICANTS

Eligibility for this NOFO is not restricted.

While for-profit firms may participate, pursuant to 2 CFR 200.400(g), it is USAID policy not to award profit to prime recipients and subrecipients under assistance instruments. However, while profit is not allowed for sub-awards, the prohibition does not apply when the recipient acquires goods and services in accordance with 2 CFR 200.317 -326, "Procurement Standards." Forgone profit does not qualify as cost-share.

Each applicant must be found to be a responsible entity before receiving an award. The Agreement Officer (AO) may determine that a pre-award survey is required in accordance with ADS 303.3.9.1 to determine whether the applicant has the necessary organization, experience, accounting and operational controls, and technical skills – or ability to obtain them – in order to achieve the objectives of the program and comply with established U.S. Government standards, laws, and regulations. Applicants who do not currently meet all USAID requirements for systems and controls may still be eligible under special award considerations and should not be discouraged from applying. USAID welcomes applications from organizations that have not previously received financial assistance from USAID. The prime recipient is encouraged to promote involvement of "underutilized" partners and local organizations in the implementation of this activity.

## 2. COST SHARING OR MATCHING

USAID has established a minimum required cost share of **5%** of the total estimated cost for this activity, which is approximately US$ [exact amount to be inserted by the time of award] to be contributed throughout the life of the activity. Such funds may be mobilized from the recipient; other multilateral, bilateral, and foundation donors; host governments; and local organizations, communities and private businesses that contribute financially and in-kind to implementation of activities at the country level, but not from other USG funding sources. This may include contribution of staff level of effort, office space or other facilities or equipment which may be used for the activity, provided by the partner. For guidance on cost sharing in grants and cooperative agreements, please see the ADS 303.3.10 and 2 CFR 200.306 for U.S. NGOs. For non-US NGOs, all cost sharing would be subject to the Required as Applicable Provision "Cost Sharing" in the Mandatory Reference for ADS Chapter 303, Standard Provisions for Non-U.S. Nongovernmental Organizations.

## 3. ELIGIBILITY OF GOODS AND SERVICES FOR USAID FINANCING

- **Applicable Rules**

The recipient must comply with USAID's Rules for Procurement of Commodities and Services Financed by USAID in 22 CFR 228 in the procurement and long-term lease (as defined in 22 CFR 228.01) of goods and services with USAID funds. These rules govern the

source of USAID-financed commodities and the nationality of suppliers of USAID-financed commodities and services, which must be in a country that is included in the authorized geographic code. These rules apply to the recipient's procurement contracts (as defined in 2 CFR 200) with vendors and to subcontracts at all tiers under the recipient's procurement contracts.

- **Sub-Awards**

These rules do not apply to sub-awards (as defined in 2 CFR 200.92) but do apply to the procurement and long-term lease of goods and services by sub-recipients (as defined in 2 CFR 200.93) at all tiers, and to those sub-recipients' procurement contracts and subcontracts with vendors at all tiers. These rules do not apply to procurement or long-term lease of goods and services with cost-sharing or program income funds.

- **Restricted Commodities**

"Restricted Commodities" are certain agricultural commodities, motor vehicles (excluding driver service), pharmaceuticals, condoms and contraceptives, pesticides, used equipment, and non-local purchase of fertilizer. Special rules apply to restricted commodities and are described in ADS 312.3.3.

## 4. ELIGIBILITY OF ACTIVITIES UNDER USAID'S ENVIRONMENTAL REGULATIONS

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 (http://www.usaid.gov/policy/ADS/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.

No activity funded under this CA will be implemented unless an environmental threshold determination, as defined by 22 CFR 216, has been reached for that activity, as documented in a Request for Categorical Exclusion (RCE), Initial Environmental Examination (IEE), or Environmental Assessment (EA) duly signed by the Bureau Environmental Officer (BEO). (Hereinafter, such documents are described as "approved Regulation 216 environmental documentation.").

An Initial Environmental Examination (IEE) Asia 22-009 (See Attachment E) has been approved for Building Healthy Families Activity, which covers activities expected to be implemented under this agreement. The interventions with Negative Determination with Conditions (NDC) determination will require development of an Environmental Mitigation and Monitoring Plan (EMMP).

As part of its initial Implementation Plan, and all Annual Implementation Plans thereafter, the recipient, in collaboration with the COR and Mission Environmental Officer or Bureau Environmental Officer, as appropriate, shall review all ongoing and planned activities under this Cooperative Agreement (CA) to determine if they are within the scope of the approved Regulation 216 environmental documentation.

If the recipient plans any new activities outside the scope of the approved Regulation 216 environmental documentation, 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.

## 5. LIMITATIONS ON SUBMISSIONS

Each applicant is limited to one application submission under this NOFO as the prime Applicant. There is no limitation on being included as a potential sub-awardee across multiple applications. The use of exclusive teaming arrangements is discouraged.

**[END OF SECTION C]**

# SECTION D: APPLICATION AND SUBMISSION INFORMATION

## D.1 AGENCY POINT OF CONTACT

Only the Agreement Officer is authorized to make commitments on behalf of USAID. The Agreement Officer is listed below:

Bruce Gelband
Agreement Officer
USAID/Pakistan
Ramna 5, Diplomatic Enclave
Islamabad - Pakistan
Email: bgelband@usaid.gov

The point of contact for information about this NOFO is:

Mr. Faisal Jawad
Acquisition and Assistance Specialist
USAID/Pakistan
Ramna 5, Diplomatic Enclave
Islamabad - Pakistan
Email: fjawad@usaid.gov

The above contact information is only for informational purposes. The NOFO itself and any subsequent amendments can be found at www.grants.gov. All applications must be submitted according to instructions contained in this NOFO.

In order to maintain a fair and transparent funding opportunity, USAID maintains strict guidelines on who within USAID may be contacted regarding applications or questions about the opportunity. Applicants may only contact USAID via the email address provided above in this NOFO. Failure to comply with the USAID points of contact guidance mandated in the NOFO may disqualify the Applicant(s).

## D.2 QUESTIONS AND ANSWERS

Questions and requests for clarification regarding this NOFO should be submitted via email to the Agency Points of Contact above no later than the date and time indicated on the cover page.

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 on www.grants.gov, if that information is necessary in submitting applications or if the lack of it would be prejudicial to any other prospective Applicant. Please check www.grants.gov for any amendments.

## D.3 SUBMISSION DATE AND TIME

Applications must be submitted by email to points of contact stated in section D.1 before the respective due dates and times on the cover page. Applicants must ensure that the applications are received at USAID/Pakistan in their entirety. No additions or modifications to submitted applications will be accepted after the closing date and time. Late applications will be considered only if the Agreement Officer determines it is in the Government's interest. Each email submission may not exceed 15 MB in size.

Hard copies, whether hand delivered or by postal mail, will not be accepted.

If you do not receive an email confirmation for receipt of applications, please contact the point of contact at the email address noted above.

## D.4 APPLICANTS RESPONSIVENESS

All applications received by the closing date and time will be reviewed for responsiveness to the specifications outlined in these guidelines and the application format. Section E: Application Review Information addresses application review criteria. **Applicants must review, understand, and comply with all aspects of this NOFO. Failure to do so may lead to the disqualification of an application.** It is the Applicant's responsibility to ensure that all necessary documentation is complete and received on time.

## D.5 APPLICATION SUBMISSION PROCEDURES

### Submission of Applications

a. The subject line of application submissions must reference the NOFO No. 72039122RFA00003 and the title of the activity: Building Healthy Families Activity. The applicant must indicate in the subject line of the email if multiple emails are sent (e.g. "1 of 4").

b. Applications in response to this NOFO must be in English, and in U.S. dollars.

c. Applications must be submitted in two separate parts: the Technical Application and the Business (Cost) Application.

### Restriction on Disclosure and Use of Data

a. Applicants that include in their applications data that they do not want disclosed to the public for any purpose, or used by the Government except for evaluation purposes shall:

i. Mark the title page with the following legend: "This application includes data that shall not be disclosed outside the Government and shall not be duplicated, used, or disclosed - in whole or in part - for any purpose other than to evaluate this application. If, however, a grant or cooperative agreement is awarded to this Applicant as a result of - or in connection with - the submission of this data, the Government shall have the right to duplicate, use, or disclose the data to the extent provided in the resulting

award. This restriction does not limit the 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 numbers or other identification of sheets*]"; and

ii. Mark each page containing restricted data with the following legend: "Use or disclosure of data contained on this sheet is subject to the restriction on the title page of this application."

b. Applicants are advised that it is anticipated that the successful program narrative, submitted as part of the technical application, will become the Program Description of the cooperative agreement awarded as a result of this NOFO. Pursuant to the Freedom of Information Act of 1981, the public is entitled to request information from Agency award files. As a general rule, information will be disclosed except:

i. Information submitted in response to this NOFO, prior to award of the grant, or modifications or revisions thereto.
ii. Information properly classified or administratively controlled by USAID.
iii. Information specifically exempted from disclosure under the Freedom of Information Act.

c. Upon award of the cooperative agreement resulting from this NOFO, USAID will disclose, use, or duplicate any information submitted in response to this NOFO to the extent provided in the award, and as required by the Freedom of Information Act.

**Pre-Award Audits/Surveys and Discussions**

USAID reserves the right to perform a pre-award audit/survey which may include, but is not limited to: (1) interviews with individuals to establish their ability to perform award duties under project conditions; (2) a review of the Applicant's financial condition, business and personnel policies and procedures, etc.; and (3) site visits to the Applicant's institution. However, it must be understood that USAID undertakes no obligation to perform any of the foregoing elements. Accordingly, Applicants should submit their best and most complete application initially.

**Authority to Commit USAID**

The Agreement Officer (AO) is the only individual who may legally commit USAID to the expenditure of public funds. No costs allocable to the proposed award will be reimbursed by USAID before receipt of either a fully executed grant or cooperative agreement, or a specific written authorization from the Agreement Officer (AO).

## D.6 TECHNICAL APPLICATION

### (a) General

Applicants must organize the application to follow the review criteria specified in Section E. The page length for the application shall not exceed seventeen (17) pages. Within these pages, the executive summary shall not exceed one (1) page. The only annexes to be evaluated are listed hereunder and are not subject to the page limitation.

Technical application must be organized in the following manner:

I. Executive Summary – not to exceed one (01) page
II. Proposed Program
III. Staffing and Management Plan
IV. Institutional Experience and Past Success
V. Annexes - See below
    - Logical Framework
    - Staffing Pattern / Organizational Chart
    - Resume and Letter of Commitment of the key personnel (Chief of Party Only)
    - Partner Letters of Commitment

### (b) Limitations

USAID will not evaluate information submitted in excess of the above stated page limits. The technical application shall be submitted via Microsoft Word or PDF formats. The Technical Application shall be written in Time New Roman Font, 12-point size and should be single-spaced. The 12-point size requirement does not apply to text boxes, footnotes, tables, graphs and charts, though these should be used sparingly and not in place of basic text. Applicants shall use only 8.5 inch by 11-inch (210mm by 297mm) paper, with margins no less than one inch on each border. Number each page consecutively.

Note: A page in the Technical Application that contains a table, chart, graph, etc., not otherwise explicitly excluded per the instruction, is subject to the page limitation.

Not included in this page limitation are the following:

- Cover Page – the Applicant must provide with the following information on the Cover Page:

    a. Name of the organization submitting the application;
    b. 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);
    c. Activity Title;

d. Notice of Funding Opportunity number;
e. 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 303.6).
f. DUNS number / SAM Unique Entity ID (UEI)

- Table of Contents
- Acronym List
- Annexes (as specified in D.6(a) above)

Information from annexes should be summarized in the narrative of the Technical Application, as appropriate.

**(c) Content of the Technical Application**

Technical applications should include the sections and content below and should be directed at the program as described in Section A. Funding Opportunity Description. The technical application will be the critical item of consideration in selection of an Applicant for an award. The information provided in the technical application must be specific, complete, and presented concisely. The technical application must demonstrate the Applicant's capabilities and expertise with respect to achieving the goals of this program and specify the specific results to be achieved. The merit review criteria set forth in Section E. Application Review Information of this NOFO indicate the relative importance of each criterion so that Applicants will know which areas require emphasis in the preparation of the technical application. Applicants are advised that lack of completeness or superficiality of the application may constitute grounds for excluding it from consideration.

Please be aware that the applicant must comply with the USAID statutory and policy requirements related to restrictions on abortion, and voluntary and informed family planning while framing proposed programs.

The Technical Application includes the information set forth below:

1. **Executive Summary (maximum 1 page)**

   A succinct summary of the Applicant's overall implementation approach.

2. **Proposed Program [See Section E.2.1]**

   The Proposed Program should convincingly articulate the Applicant's proposed activities to accomplish each of the three results presented in the Funding Opportunity Description, focusing on what is technically feasible within the life of the Activity and resources available. The Applicant should not merely repeat what is already described in the Program Description but should convincingly describe clear, specific, evidence-based and sustainable outcomes, preferably qualitative and quantitative, that contribute directly to the accomplishment of the three results. Also, the Applicant will include a log frame. The

log frame must clearly and convincingly demonstrate the logic of how the activities will lead to the outputs, then to the outcomes, and ultimately to the goal.

**3. Staffing and Management Plan [See Section E.2.2]**

Key Personnel:

USAID/Pakistan determined five (5) key personnel positions for this award, including the Chief of Party. For this NOFO, the Applicant need only identify the Chief of Party (COP) by name in the application. No other individual should be identified nor will be evaluated at the application stage, but all positions, including each key personnel position must be included in the overall staffing plan as described below.

Please see SECTION B: FEDERAL AWARD INFORMATION regarding the qualification requirements for the position of Key Personnel - Chief of Party (COP) that the applicant must take into consideration.

Staffing Plan:

Applicants must propose a staffing plan that convincingly demonstrates the Applicant's ability to successfully implement the Activity. The Applicant must describe how the proposed Staffing Plan (including Key Personnel) will ensure successful implementation and the approach by which local Pakistani labor and expertise will be maximized. If more than one full-time expatriate is proposed, the Applicant must justify using more than one expatriate, as opposed to local Pakistani professionals.

The Applicant must describe the division of roles and responsibilities between the applicant, sub awardees and other resource organizations, if any, in implementing the activity. The Applicant shall describe staffing roles for any proposed sub-awardees with defined lines of management, supervisory authority, and technical responsibility. The staffing plan shall clearly and logically address how consultants will be used to complement full-time project staff and whether they will be local or expatriate staff.

**4. Institutional Experience and Past Success [See Section E.2.3]**

The prime Applicant and its major subrecipient(s)*, if any, combined must demonstrate experience in (i), (ii), and (iii) below;

* *For the purpose of this section, the term "major subrecipient" includes only those subrecipient(s) budgeted in excess of $5,000,000 in the cost application over the entirety of the performance period.*

In providing examples of work as outlined in (i), (ii), and (iii) below, the Applicant must precisely describe its (or major subrecipients) specific role(s) in implementing the experiences described. Also, the Applicant must articulate how the described institutional experience, the results/successes achieved in carrying out the described experience, and how the described experience will enhance the likelihood of successful implementation of this activity.

**i. Experience in capacity building of the government and private health institutions to lead resilient, responsive family planning and maternal, newborn, and child health (FP/MNCH) systems. This includes:**

- Working with national and provincial governments and private sector to strengthen and scale up FP high impact practices
- Embedding technical experts at the host government departments to build FP/MNCH capacity
- Strengthening government systems to expand quality FP services through community based providers, i.e. LHW, CMW etc.
- Developing and implementing an integrated FP/MNCH service delivery model to maximize efficiency and increase service access and quality.
- Responding to, and adapting to outbreaks like COVID-19 and other emerging public health threats within the broader health system to ensure delivery of routine healthcare services.

**ii. Experience in successfully implementing activities leading to men and youth empowered to communicate about, demand, and use essential health care products and services. This includes:**

- Testing new or strengthening existing FP/MNCH service delivery approaches (i.e. digital innovations, FP counseling and follow up) for scale up.
- Investigating new contraceptive options including research/scientific trial providing critical evidence for scale up
- The use of digital tools/technology such as chatbots, hotlines, and telehealth to support information dissemination and service provision for FP.
- Establishing mobile outreach clinics, complementing the FP services provided by the public sector
- Increasing male engagement and uptake of male contraceptive methods
- Expanding FP outlets through partnerships to serve vulnerable populations

**iii. Experience in successfully implementing activities that improve utilization of quality FP/MNCH products and services. This includes:**

- Developing or strengthening youth-focused FP engagement and counseling models for Lady Health Workers (LHWs) and public and private sector health providers
- Developing and implementing approaches to address fears/rumors related to FP use
- Testing and scaling SBC interventions that change behavior and enable positive social norms that support women, men and young couples to use quality FP/MNCH services and products.

**5. Annexes**

5.1 Staffing Pattern / Organizational Chart - The Applicant must provide an organizational chart depicting its staffing plan including the chain of command among staff. The chart must specify which personnel, if any, are employed by a sub-awardee, if any. The title and position description of each of the key personnel positions (including the Chief of Party) must be included in this Annex.

5.2 Resume and Letter of Commitment of the key personnel (Chief of Party only) - This information is only required for the Chief of Party (COP) position. The resume must include a minimum of five references with current email and telephone number contact information. It should be noted that USAID reserves the right to solicit references beyond those submitted. The resume may not exceed five pages and must, at a minimum, identify the start year and month and end year and month for each former/current employment listed. Also, a signed letter of commitment must be submitted for the Chief of Party proposed, indicating (a) his/her intention to serve for a stated term of the service [state the period in the letter], and (b) agreement to the compensation level which corresponds to the levels set forth in the cost application.

5.3 Partner Letters of Commitment - Applicants who intend to propose teaming arrangements must include Letters of Commitment for all proposed major subrecipients included in the application, indicating their anticipated roles in the activity.

5.4 Logical Framework - The Applicant must submit a logical framework that clearly and convincingly demonstrate the logic of how the activities will lead to the outputs, then to the outcomes, and ultimately to the goal.

## D.7 BUSINESS (COST) APPLICATION

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

Prior to award, applicants may be required to submit additional documentation deemed necessary for the Agreement Officer to assess the applicant's risk in accordance with 2 CFR 200.206. Applicants should not submit any additional information with their initial application.

The Cost Application must contain the following sections:

**a. Cover Page -** (with same details as listed in Section D.6 (b)

**b. SF 424 Form(s)**

The applicant must sign and submit the cost application using the SF-424 series. Standard Forms can be accessed electronically at www.grants.gov or using the following links:

| | |
|---|---|
| **Instructions for SF-424** | http://www.grants.gov/web/grants/form-instructions/sf-424-instructions.html |
| **Application for Federal Assistance (SF-424)** | https://www.grants.gov/web/grants/forms/sf-424-family.html |
| **Instructions for SF-424A** | http://www.grants.gov/web/grants/form-instructions/sf-424a-instructions.html |
| **Budget Information (SF-424A)** | https://www.grants.gov/web/grants/forms/sf-424-family.html |
| **Instructions for SF-424B** | http://www.grants.gov/web/grants/form-instructions/sf-424b-instructions.html |
| **Assurances (SF-424B)** | https://www.grants.gov/web/grants/forms/sf-424-family.html |

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

### c. Required Certifications and Assurances

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

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

### d. 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 project year, including itemization of the federal and non-federal (cost share) amount. Files must not contain any hidden or otherwise inaccessible cells. Budgets with hidden cells lengthen the cost analysis time required to make award, and may result in a rejection of the cost application. The Budget Narrative must contain sufficient detail to allow USAID to understand the proposed costs. The applicant must ensure the budgeted costs address any additional requirements identified in Section F. The Budget Narrative must be thorough, including sources for costs to support USAID's determination that the proposed costs are fair and reasonable.

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 activities implemented by the applicant and any potential sub-applicants for the entire period of the program. See Attachment B: Summary Budget Template

- Detailed Budget, including a breakdown by year, sufficient to allow the Agency to determine that the costs represent a realistic and efficient use of funding to implement the applicant's program and are allowable in accordance with the cost principles found in 2 CFR 200 Subpart E.
- Detailed Budgets for each sub-recipient, for all federal funding and cost share, broken out by budget category and by year, for the entire implementation period of the project.

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

1) Salaries and Allowances – Must be proposed consistent with 2 CFR 200.430 Compensation - Personal Services. The applicant's budget must include position title, salary rate, level of effort, and salary escalation factors for each position. Allowances, when proposed, must be broken down by specific type and by position. Applicants must explain all assumptions in the Budget Narrative. The Budget Narrative must demonstrate that the proposed compensation is reasonable for the services rendered and consistent with what is paid for similar work in other activities of the applicant and as per their established written policies on personnel compensation. If the applicant's written policies do not address a specific element of compensation that is being proposed, the Budget Narrative must describe the rationale used and supporting market research.

2) Fringe Benefits – (if applicable) If the applicant has a fringe benefit rate approved by an agency of the U.S. Government, the applicant must use such rate and provide evidence of its approval. If an applicant does not have a fringe benefit rate approved, the applicant must propose a rate and explain how the applicant determined the rate. In this case, the Budget Narrative must include a detailed breakdown comprised of all items of fringe benefits (e.g., superannuation, gratuity, etc.) and the costs of each, expressed in U.S. dollars and as a percentage of salaries.

3) Travel and Transportation – Provide details to explain the purpose of the trips, the number of trips, the origin and destination, the number of individuals traveling, and the duration of the trips. Per Diem and associated travel costs must be based on the applicant's normal travel policies. When appropriate please provide supporting documentation as an attachment, such as company travel policy, and explain assumptions in the Budget Narrative.

4) Procurement or Rental of Goods (Equipment & Supplies), Services, and Real Property – Must include information on estimated types of equipment, models, supplies and the cost per unit and quantity. The Budget Narrative must include the purpose of the equipment and supplies and the basis for the estimates. The Budget Narrative must support the necessity of any rental costs and reasonableness in light of such factors as: rental costs of comparable property, if any; market conditions in the area; alternatives available; and the type, life expectancy, condition, and value of the property leased.

5) Subawards – Specify the budget for the portion of the program to be passed through to any subrecipients. See 2 CFR 200 for assistance in determining whether the sub-tier entity is a

subrecipient or contractor. The subrecipient budgets must align with the same requirements as the applicant's budget, including those related to fringe and indirect costs.

6) Other Direct Costs – This may include other costs not elsewhere specified, such as report preparation costs, passports and visas fees, medical exams and inoculations, as well as any other miscellaneous costs which directly benefit the program proposed by the applicant. The applicant should indicate the subject, venue and duration of any proposed conferences and seminars, and their relationship to the objectives of the program, along with estimates of costs. Otherwise, the narrative should be minimal.

   In addition to the above, the applicants should consider any costs foreseen for security. The security costs shall be clearly identified as a separate budget sub line item under "Other Direct Costs" and must be included as part of the overall applicant's cost application.

8) Indirect Costs – Applicants must indicate whether they are proposing indirect costs or will charge all costs directly. In order to better understand indirect costs please see Subpart E of 2 CFR 200. The application must identify which approach they are requesting and provide the applicable supporting information. Below are the most commonly used Indirect Cost Rate methods:

   Method 1 - Direct Charge Only
   Eligibility: Any applicant
   Initial Application Requirements: See above on direct costs

   Method 2 - Negotiated Indirect Cost Rate Agreement (NICRA)
   Eligibility: Any applicant with a NICRA issued by a USG Agency must use that NICRA
   Initial Application Requirements: If the applicant has a current NICRA, submit your approved NICRA and the associated disclosed practices. If your NICRA was issued by an Agency other than USAID, provide the contact information for the approving Agency. Additionally, at the Agency's discretion, a provisional rate may be set forth in the award subject to audit and finalization. See USAID's Indirect Cost Rate Guide for Non Profit Organizations for further guidance.

   Method 3 - De minimis rate of 10% of modified total direct costs (MTDC)
   Eligibility: Any applicant that does not have a current NICRA
   Initial Application Requirements: Costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate an indirect rate, which the non-Federal entity may apply to do at any time. The applicant must describe which cost elements it charges indirectly vs. directly. See 2 CFR 200 for further information.

   Method 4 - Indirect Costs Charged As A Fixed Amount
   Eligibility: Non U.S. non-profit organizations without a NICRA may request, but approval is at the discretion of the AO

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

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

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

9) Cost Sharing – As outlined in Section C.2, there is a minimum required cost share of 5% of the total estimated cost for this activity. The applicant should estimate the amount of cost-sharing resources to be provided over the life of the agreement and specify the sources of such resources, and the basis of calculation in the budget narrative. Applicants should also provide a breakdown of the cost share (financial and in-kind contributions) of all organizations involved in implementing the resulting award.

10) Leveraged funds, if any - Leverage funding as defined in ADS 303 is not required. However, there is no prohibition on proposing leverage funding. If applicable, the applicant must use the relevant section of "Attachment B: Summary Budget Template" to reflect the leverage funding and the budget narrative must explain the source of funding.

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

Inclusion of an item of cost in the detailed application budget does not satisfy any requirements for prior approval by the Agency. If the applicant would like the award to reflect approval of any cost elements for which prior written approval is specifically required for allowability, the applicant must specify and justify that cost. See 2 CFR 200.407 for information regarding which cost elements require prior written approval.

**f. Approval of Subawards**

The applicant must submit information for all subawards that it wishes to have approved. For each proposed subaward the applicant must provide the following:

- Name of organization

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

**g. 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 and incorporated into any resulting award.

**Branding Strategy – Assistance (June 2012)**

a. Applicants recommended for an assistance award must submit and negotiate a "Branding Strategy," describing how the program, project, or activity is named and positioned, and how it is promoted and communicated to beneficiaries and host country citizens.

b. The request for a Branding Strategy, by the Agreement Officer from the applicant, confers no rights to the applicant and constitutes no USAID commitment to an award.

c. Failure to submit and negotiate a Branding Strategy within the time frame specified by the Agreement Officer will make the applicant ineligible for an award.

d. The applicant must include all estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth, in the budget portion of the application. These costs are subject to the revision and negotiation with the Agreement Officer and will be incorporated into the Total Estimated Amount of the grant, cooperative agreement or other assistance instrument.

e. The Branding Strategy must include, at a minimum, all of the following:

(1) All estimated costs associated with branding and marking USAID programs, such as plaques, stickers, banners, press events, materials, and so forth.

(2) The intended name of the program, project, or activity.

(i) USAID requires the applicant to use the "USAID Identity," comprised of the USAID logo and brandmark, with the tagline "from the American people" as

found on the USAID Web site at **http://www.usaid.gov/branding**, unless Section VI of the RFA or APS states that the USAID Administrator has approved the use of an additional or substitute logo, seal, or tagline.

(ii) USAID prefers local language translations of the phrase "made possible by (or with) the generous support of the American People" next to the USAID Identity when acknowledging contributions.

(iii) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.

(iv) If branding in the above manner is inappropriate or not possible, the applicant must explain how USAID's involvement will be showcased during publicity for the program or project.

(v) USAID prefers to fund projects that do not have a separate logo or identity that competes with the USAID Identity. If there is a plan to develop a separate logo to consistently identify this program, the applicant must attach a copy of the proposed logos. Section VI of the RFA or APS will state if an Administrator approved the use of an additional or substitute logo, seal, or tagline.

(3) The intended primary and secondary audiences for this project or program, including direct beneficiaries and any special target segments.

(4) Planned communication or program materials used to explain or market the program to beneficiaries.

(i) Describe the main program message.

(ii) Provide plans for training materials, posters, pamphlets, public service announcement, billboards, Web sites, and so forth, as appropriate.

(iii) Provide any plans to announce and promote publicly this program or project to host country citizens, such as media releases, press conferences, public events, and so forth. Applicant must incorporate the USAID Identity and the message, "USAID is from the American People."

(iv) Provide any additional ideas to increase awareness that the American people support this project or program.

(5) Information on any direct involvement from host-country government or ministry, including any planned acknowledgement of the host-country government.

(6) Any other groups whose logo or identity the applicant will use on program materials and related materials. Indicate if they are a donor or why they will be visibly acknowledged, and if they will receive the same prominence as USAID.

f. 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.

g. If the applicant receives an assistance award, the Branding Strategy will be included in and made part of the resulting grant or cooperative agreement.

**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, audio- visual productions, public service announcements, Web sites/Internet activities, promotional, informational, media, or communications products funded by USAID;
(iii) Commodities, equipment, supplies, and other materials funded by USAID, including commodities or equipment provided under humanitarian assistance or disaster relief programs; and
(iv) It is acceptable to cobrand the title with the USAID Identity and the applicant's identity.
(v) Events financed by USAID, such as training courses, conferences, seminars, exhibitions, fairs, workshops, press conferences and other public activities. If the USAID Identity cannot be displayed, the recipient is encouraged to otherwise acknowledge USAID and the support of the American people.

(2) A table on the program deliverables with the following details:

(i) The program deliverables that the applicant plans to mark with the USAID Identity;
(ii) The type of marking and what materials the applicant will use to mark the program deliverables;
(iii) When in the performance period the applicant will mark the program deliverables, and where the applicant will place the marking;
(iv) What program deliverables the applicant does not plan to mark with the USAID Identity, and
(v) The rationale for not marking program deliverables.

(3) Any requests for an exemption from USAID marking requirements, and an explanation of why the exemption would apply. The applicant may request an exemption if USAID marking requirements would:

(i) Compromise the intrinsic independence or neutrality of a program or materials where independence or neutrality is an inherent aspect of the program and materials. The applicant must identify the USAID Development Objective, Interim Result, or program goal furthered by an appearance of neutrality, or state why an aspect of the award is presumptively neutral. Identify by category or deliverable item, examples of material for which an exemption is sought.
(ii) Diminish the credibility of audits, reports, analyses, studies, or policy recommendations whose data or findings must be seen as independent. 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.

**h. Funding Restrictions**

Profit is not allowable for recipients or subrecipients under this award. See 2 CFR 200.331 for assistance in determining whether a sub-tier entity is a subrecipient or contractor.

Construction will not be authorized under this award.

Except as may be specifically approved in advance by the AO, all commodities and services that will be reimbursed by USAID under this award must be from the authorized geographic code specified in Section B.4 of this NOFO and must meet the source and nationality requirements set forth in 22 CFR 228.

**i. Conflict Of Interest Pre-Award Term (August 2018)**

a. Personal Conflict of Interest

1. An actual or appearance of a conflict of interest exists when an applicant organization or an employee of the organization has a relationship with an Agency official involved in the competitive award decision-making process that could affect that Agency official's impartiality. The term "conflict of interest" includes situations in which financial or other personal considerations may compromise, or have the appearance of compromising, the obligations and duties of a USAID employee or recipient employee.

2. The applicant must provide conflict of interest disclosures when it submits an SF-424. Should the applicant discover a previously undisclosed conflict of interest after submitting the application, the applicant must disclose the conflict of interest to the AO no later than ten (10) calendar days following discovery.

b. Organizational Conflict of Interest

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

**j. Pre-Award Costs**

In accordance with 2 CFR 200.458 - Pre-award costs, Pre-award costs are those incurred prior to the effective date of the Federal award directly pursuant to the negotiation and in anticipation of the Federal award where such costs are necessary for efficient and timely performance of the scope of work. Such costs are allowable only to the extent that they would have been allowable if

incurred after the date of the Federal award and only with the written approval of the Federal awarding agency. Pre-Award costs may be authorized at the discretion of the Agreement Officer.

**[END OF SECTION D]**

# SECTION E: APPLICATION REVIEW INFORMATION

## E.1 CRITERIA

The merit review criteria prescribed herein are tailored to the requirements of this 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.

As outlined in section C.2, there is a minimum required cost share for this activity. Applications that do not meet the minimum cost share requirement may not be eligible for award consideration. While it is a minimum requirement for eligibility, cost share will not be considered in the merit review criteria.

## E.2 MERIT REVIEW

Technical applications will be evaluated by a selection committee using the criteria shown in this Section. The criteria below are presented by major categories. The merit review criterion-1 (Proposed Program) is more important than merit review criterion-2 (Staffing and Management Plan ) or merit review criterion-3 (Institutional Experience and Past Success). Criterion-2 and criterion-3 are equally important.

### E.2.1 Proposed Program (See Section D.6.(c).2)

The extent to which the proposed program provides clear, specific, evidence-based and sustainable outcomes that contribute directly to the accomplishment of each of the three Activity results as also convincingly demonstrated by the log frame.

### E.2.2 Staffing and Management Plan (See Section D.6.(c).3)

The extent to which the proposed staffing plan and proposed key person convincingly demonstrate the ability to effectively manage and implement the proposed Activity successfully.

### E.2.3 Institutional Experience and Past Success (See Section D.6.(c).4)

The extent to which the application convincingly demonstrates the Applicant's successful past experience and the degree to which the Applicant will leverage this experience to enhance the likelihood of successful implementation of this activity.

## E.3 COST/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.

Proposed cost share, if provided, will be reviewed for compliance with the standards set forth in 2 CFR 200.306, 2 CFR 700.10, and the Standard Provision "Cost Sharing (Matching)" for U.S. entities, or the Standard Provision "Cost Share" for non-U.S. entities.

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

## E.4 DETERMINATION OF AWARD

The submitted technical information will be evaluated by a selection committee using the criteria shown above. The cost/business application will be reviewed by the Agreement Officer/Agreement Specialist. As a result of this process, USAID intends to select the apparently successful recipient based upon the initial application submission. Once the selection is made, the Government may address any concerns to the selected recipient for resolution. However, the Government reserves the right to negotiate with all applicants prior to selection of the successful recipient if in the best interest of the 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 Cost 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.

**[END OF SECTION E]**

# SECTION F: FEDERAL AWARD ADMINISTRATION INFORMATION

## F.1 FEDERAL 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, potential Applicant is hereby notified of these requirements and conditions for the award. The Agreement Officer is the only individual who may legally commit the Government to the expenditure of public funds. No costs chargeable to the proposed Agreement may be incurred before receipt of either a fully executed Agreement or a specific, written authorization from the Agreement Officer.

## F.2 ADMINISTRATION

Awards will be made under relevant federal regulations and agency policy. For U.S non-governmental organizations, awards must be administered according to 2 CFR 200 and 2 CFR 700, and USAID Standard Provisions will apply (https://www.usaid.gov/ads/policy/300/303maa). For non U.S. non-governmental organizations, USAID provisions for non U.S. non-government organizations will apply (https://www.usaid.gov/ads/policy/300/303mab).

## F.3 PAYMENT AND FINANCIAL REPORTING

Financial reporting requirements will depend on the method of payment. Recipients will comply with the financial reporting requirements set forth in the USAID standard provisions. If advance payments are provided, reporting periods are calendar quarters or parts thereof. Quarterly financial reports are due not later than 30 days after the end of each calendar quarter. If payment is on a reimbursement basis, financial reports may be submitted monthly, but not less frequently than 30 days after the end of each calendar quarter. Regardless of whether payments are on an advance or reimbursement basis, the final financial report is due not later than 90 days after the estimated completion date of the award. The Recipient shall also comply with the USAID standard provision entitled “Reporting Host Government Taxes.”

## F.4 REPORTING REQUIREMENTS

Program Reports shall be in accordance with applicable USAID Standard Provisions.

All written documentation must be submitted in professional-level English. The reports listed below are the initial reports required by the recipient. Based on the evolving nature of the agreement, USAID may provide modified reporting requirements.

Note: USAID’s fiscal year starts on October 1 and ends on September 30. Four fiscal quarterly periods begin on October 1, January 1, April 1, and July 1.

| Reports and Deliverables | Due Dates | Delivery |
|---|---|---|
| 1. Project Approval | Immediately following the award, the Recipient shall initiate the process to obtain the NOC/Registration approval from the host government to fully implement the activity in Pakistan. | Electronically - AOR |
| 2. Annual Implementation Plan | First plan will be submitted within 60 calendar days after the award. Subsequent annual implementation plans due September 1 of each subsequent Agreement year | Electronically - AOR |
| 3. Activity Monitoring, Evaluation and Learning (MEL) Plan | 30 calendar days after the finalization of the first year implementation plan. | Electronically - AOR |
| 4. Environmental Management & Mitigation Plan (EMMP) | within 60 calendar days after the award and thereafter submitted with the annual implementation plan. | Electronically - AOR |
| 5. Gender Analysis and a Gender Action Plan. | 30 calendar days after the finalization of the first year implementation plan. | Electronically - AOR |
| 6. Quarterly Performance Reports | By March 31st, June 30th, September 15th and December 31st of each year | Electronically - AOR |
| 7. Annual Performance Report | October 30th of each year | Electronically - AOR |
| 8. Ad Hoc reports by USAID | Ad-hoc reports periodically per USAID's request | Electronically - AOR |
| 9. Property Disposition Plan | Property Disposition Plan 60 calendar days prior to the end of the Award. | Electronically - AO |
| 10. Final Report | 30 calendar days prior to the end of the Agreement | Electronically - AOR |
| 11. Financial reports | Quarterly financial report: 30 calendar days after the end of each USG fiscal quarter Final financial report: 90 days following the expiration of the award | Electronically - AOR Financial Analyst Team |
| 12. Security Plan | Within 45 calendar days of the effective date of the agreement. | Electronically - AOR |

1. **Project approval - -** In order to fully implement the activity in Pakistan, the Recipient is required to comply with host government registration/No-Objection Certificate (NOC) requirements. Registration/NOC approval is expected to take time, as such the Recipient is requested to initiate the process immediately following award. While seeking approval, in close consultation with the AOR, the Recipient shall consider staffing and related consequences impacting implementation to ensure an efficient use of resources.

2. **Annual Implementation Plan -** The annual implementation plan details how the Recipient will use the implementation plan year effectively to achieve the activity objectives and strategic approaches. The implementation plan serves as a guide to program implementation and, once approved, represents an agreement as to the objectives and timing of specific tasks and interventions. The implementation plan is intended to be an annual roadmap for USAID and the Recipient. It should be closely aligned with the overall program objectives, and clearly explain how the actions and outputs will lead to the expected outcomes. More details on the format of the implementation plan will be provided after the award.

3. **Activity Monitoring and Evaluation (MEL) Plan** - In accordance with USAID policy, the Recipient is required to submit an Activity Monitoring, Evaluation and Learning Plan (MEL) within 30 days after the finalization of the first-year implementation plan. The MEL reflects the award progress over the life of the Activity and is a critical tool for planning, managing, documenting, evaluating performance and learning. The MEL plan should demonstrate the activity's monitoring approach and relevant performance indicators of activity's expected results; plans for collaborating on external evaluations; proposed internal evaluations and learning activities; and the Recipient's proposed roles for MEL actions. Findings from the MEL should be reviewed and validated in sessions with USAID staff (and relevant stakeholders), and revised when appropriate in consultation with the AOR. More details and additional support on the MEL plan development, review, and approval will be provided after award.

4. **Environmental Management & Mitigation Plan (EMMP)** - This plan will be describing how the Recipient will, in specific terms, implement all IEE conditions that apply to proposed activity interventions. The EMMP shall include monitoring the implementation of the conditions and their effectiveness, making any necessary adjustments to activity implementation in order to minimize adverse impacts to the environment. An annotated EMMP template can be found at http://www.usaidgems.org.

5. **Gender Analysis and a Gender Action Plan** - Gender Analysis is a tool for examining the differences between the roles that women and men play in communities and societies, the different levels of power they hold, their differing needs, constraints and opportunities, and the impact of these differences on their lives. The gender analysis should identify root causes of existing gender inequalities or obstacles to female empowerment in the context of the activity, so that the Recipient can seek out opportunities to promote women's leadership and participation. The gender analysis should also identify potential adverse impacts and/or risks of gender -based exclusion that could result from planned activities, including: (a) Displacing women from access to resources or assets; (b) Increasing the unpaid work or caregiver burden of females relative to males; (c) Conditions that restrict the participation of women or men in

project activities and benefits based on pregnancy, maternity/paternity leave, or marital status; and (e) Marginalizing or excluding women in political and governance processes.

Because males and females are not homogenous groups, the gender analysis should also to the extent possible disaggregate by income, province/geography, race, ethnicity, disability, and other relevant social characteristics and explicitly recognize the specific needs of young girls and boys, adolescent girls and boys, adult women and men, and older women and men.

The Recipient must also prepare a Gender Action Plan to outline how the the gaps and issues identified in the gender analysis will be addressed by the Activity

6. **Quarterly Performance Reports -** The Recipient will submit quarterly performance reports to reflect progress, the activities of the preceding three months and lessons learned. The report must describe the tasks completed in the last three months relative to what was anticipated in the approved implementation plan, and will assess the overall activity impact to date relative to the performance indicator targets and results. The report shall also consist of a section on Success Stories, highlighting the role of USAID and the American people in improving opportunities for Pakistanis. Success stories must be no longer than 1 page and include quality photos that will be shared for public outreach purposes. More details on the format of the quarterly performance reports will be provided after the award.

7. **Annual Performance Report** - Annual performance reports will summarize actions, progress and results during the year in relation to the approved implementation plan and the activity theory of change it supports. The report should include lessons learned, proposed adaptive management shifts, and proposed updates to the theory of change. The annual performance report will be used by USAID to assess the status of activity implementation. Each annual performance report will include an assessment as to whether the activity's strategic approaches and actions are leading to the activity objectives. The annual performance report will cover all of the items included in the quarterly performance report, with a focus on the Activity results over the entire year. More details on the format of the annual performance report will be provided after award.

8. **Ad-hoc Reports:** USAID ad-hoc requests may include periodical updates or other reporting taskers per USAID's request.

9. **Property Disposition Plan -** In accordance with 2 CFR 200.311(c) the recipient must obtain disposition instructions from the Agreement Officer when real property is no longer needed. The property disposition plan must include all property purchased/financed under this award as per the award's provisions and propose a plan for its disposition.

10. **Final Report -** The Final Report must discuss all strategic approaches and results from the start of the award through its completion. More details on the format of the final report will be provided after award.

11. **Financial Reports:** Financial Reports shall be in accordance with applicable USAID Standard Provisions.

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 90 days following the expiration of the award. Financial Reports shall be in accordance with 2 CFR 700. USAID requires recipients to use the Standard Form 425 or Standard Form 425a, Federal Financial Report, or such other forms authorized for obtaining financial information as may be approved by OMB.

Other Reports

On a quarterly basis, the AOR may require additional information related to financial accruals and pipeline of funds. This information will help to ensure that the activity has an adequate pipeline to conduct its programs. These reports/forms will be submitted when requested within 30 calendar days from the end of each quarter. In addition to this, Awardee will submit accruals reports to the AOR as well as respond to the AOR's ad hoc financials related information requests as required by the Mission.

12. **Security Plan:** The recipient must submit the Security Plan following the sample security plan template (See Attachment F). For additional information on security reporting requirements please see section F.6(II).

## F.4 PROGRAM INCOME

Program Income earned under the resultant award will be added to the Total Estimated Amount (exclusive of cost share) in accordance with 2 CFR 200.307(e)(2).

## F.5 SUBMISSION OF DEVELOPMENTAL EXPERIENCE DOCUMENTATION

USAID recipients must submit one electronic copy of development experience documentation to the Development Experience Clearinghouse. Development experience documentation may be submitted online: http://dec.usaid.gov. Or by mail (for pouch delivery):

USAID Development Experience Clearinghouse
M/CIO/ITSD/KM/DEC
RRB M.01-010
Washington, DC 20523-6100
Phone: (202) 712-0579
Email: docsubmit@usaid.gov

In addition, the recipient must submit one electronic copy of development experience documentation to the AOR for the award.

## F.6 SPECIAL AGREEMENT PROVISIONS:

### I. EXECUTIVE ORDER ON TERRORISM FINANCING (FEB 2002)

The Recipient is reminded that U.S. Executive Orders and U.S. law prohibits transactions with, and the provision of resources and support to, individuals and organizations associated with terrorism. It is the responsibility of the contractor/recipient to ensure compliance with these Executive Orders and laws. This provision must be included in all subcontracts/sub awards issued under this contract/agreement.

### II. SECURITY REPORTING REQUIREMENT

a) Security Conditions

The Recipient must be aware of security conditions in Pakistan, and by entering into an agreement, assumes full responsibility for the safety of its employees. Prior to commencing work, the Recipient shall ensure that it has adequate procedures in place to advise its employees of situations or changed conditions that could adversely affect their security. In order to keep abreast of security conditions in Pakistan, the Recipient shall seek information from all available sources, including the USAID Pakistan EXO/Safety & Security Office (SSO), for all areas in which its employees work or travel.

The Recipient acknowledges that security conditions are subject to change at any moment, that USAID cannot guarantee the accuracy of any information that it may provide to the Recipient and that USAID assumes no responsibility for the reliability of such information. The Recipient has sole responsibility for anticipating, scheduling, budgeting, receiving country clearance and securing required AOR and AO approvals for all travel for its employees and/or his/her dependents traveling to post if accompanied by dependents is allowed by the Recipient's personnel internal policies. The Recipient shall also be responsible for immediately notifying USAID Pakistan and the U.S. Embassy American Citizen Services section in the event a U.S. citizen employee does not return from travel as expected or does not report to work. In the event that USAID requests the Recipient to do so, the Recipient's Project Director/Chief of Party (COP) shall assume responsibility for contacting all of its employees. The Recipient shall provide to the USAID Pakistan EXO/SSO the name, current address, and current home and/or cellular telephone number of the COP and of an alternate designated employee. The Recipient shall be responsible for ensuring that the information on file in the USAID Pakistan EXO/SSO is up-to-date so that in an emergency, the COP or alternate representative can be reached immediately and he/she can rapidly contact all other affected employees.

The Recipient will be requested to notify the AOR and EXO/SSO about any changes of the individual listed in the security plan as in charge of security.

Once the Agreement is awarded, the Recipient shall be required to submit a list of all personnel involved in the implementation of the project, including sub awardees' personnel. The required list shall be submitted to the AOR and EXO/SSO no later than 30 days after the effective date of the Agreement and must be updated every quarter after the start date of the agreement and/or if a change of personnel happens.

b) Security Plan

The Recipient shall develop a security plan to safeguard all project operations and to comply with all United States Government regulations and Pakistani law. The plan is to be implemented and maintained also by all subcontractors (and/or sub-grantees). The security plan will be reviewed by the Agreement Officer in consultation with USAID/Pakistan's EXO/SSO.

The plan shall include:

- Procedures for reporting and addressing security threats
- Procedures for reporting any deaths related to the project
- Procedures for reporting and addressing any persons missing or kidnapping incidents
- Name and contact information of security contact person for the head office and regional office(s)
- An internal "cascade" list for communicating with staff, which shall be updated/, maintained by the Recipient. The Recipient shall provide the name, address and telephone numbers of the COP and their designee to USAID as principal contacts in case of security situations/emergencies. The Recipient shall be responsible for passing information to their staff.

c) Life Support and Security Services

The Recipient shall be responsible for maintaining the security of its personnel, materials and equipment. All employees of the Recipient must meet the requirements of their work-site, which may include, but not limited to background checks, security/restricted area clearances, drug-free workplace, safety training and/or any other company safety and security requirements.

d) Security Threat Reporting

As part of the overall security requirements, the Recipient shall report any security threats and/or incidents verbally / by telephone, immediately to the following USAID/Pakistan representatives:

- Security & Safety Specialist and any other USAID/Pakistan EXO designated official(s)
- Executive Officer (EXO)
- AOR

Subsequently, a written report shall be submitted in accordance with approved procedures. The Recipient shall develop a list of specific steps to track any potential/identified threats, which will be part of its overall security system. All subcontractors will be required by the Recipient to report any threats/incidents to the Recipient, who will immediately after, notify the above listed USAID/Pakistan representatives.

USAID requires appropriate Security reports be submitted to the Islamabad Safety & Security Specialist, Executive Office, AOR and other USAID/Pakistan officials as directed by USAID Executive Office. The type and frequency of these reports may vary with the project scope, location, and criticality. The Recipient shall report an Initial Threat Assessments and subsequent changes as often as the situation requires (weekly, bi-weekly, monthly etc.). The Recipient is also required to notify USAID of any security related incident in a timely manner according to the following guidelines:
There are various types of Incident Reporting: Serious Incident Report (SIR); Incident Report (IR); Situation Report (SITREP); and any other security related report that may be required by USAID.

Serious Incident Report (SIR)

- An incident that involves the death, injury, kidnapping of partner personnel and/or damage to partner's property.
- An incident that has critically damaged the funded program, such as fire, catastrophic flood, etc.
- Initial SIR must be reported verbally immediately, and within 4 hours of the incident occurrence/discovered
- A Complete SIR must be filed in writing within 24 hours of the incident
- Updated SIR will continue to be filed in a timely basis (daily, weekly) as long as the situation exists. The timeline will be adjusted as required by USAID.
- Final Report SIR will summarize the incident, the subsequent happenings and the final resolution.

Incident Report (IR)

- An incident involving accidents, potential harm, suspicious persons or acts, threats or harassing actions against personnel or the program.
- IR should be filed as soon as possible (within 24 hours) after the incident is evaluated, and a complete report not later than 72 hours after the incident.

Situation Report (SITREP)

- A report that a significant, but not critical action or activity, has taken place that has impacted, or may impact, on the wellbeing of the personnel or the success of the program.
- This report may describe trends, second hand information that may have bearing on the project, or impact on future operations.

Telephonic communication is the preferred method to provide the initial information of an incident. A written report by e-mail must follow as soon as possible within above described guidelines and it shall be as detailed as possible. The report shall follow the format approved in the original Security Plan but at a minimum it shall contain the name of the company, name of the victim(s), date, time, a description of what happened, where the incident occurred, and any other relevant details surrounding the incident. If this is an ongoing incident, progress reports should be submitted in accordance with the guidelines provided in order to keep USAID-Islamabad Security personnel apprised of the situation.

## III. PAKINFO REPORTING REQUIREMENT

USAID/Pakistan utilizes a management information system (MIS), currently called PakInfo, to track activities for all mission-funded projects at the national, provincial, district, and village levels. The purpose of this database is to map the location of project implementation sites to the nearest village or geospatial coordinates, monitor the use of funds at the district and tehsil level and the performance of projects to meet timely information requirements for USAID/Pakistan and several interested parties. These interested parties are USAID/Washington, Congress, implementing partners, the Government of Pakistan (GOP), other donors, and stakeholders. This reporting process supports the bilateral agreement between the U.S. Government and GOP by sharing information on USAID/Pakistan's Mission-funded activities. The Recipient shall provide a quarterly update of information (including, but not limited to, performance results, geospatial coordinates, and photographs) on the activities under the acquisition or assistance agreement by entering this information into the USAID/Pakistan's MIS. The Recipient shall enter information via an Internet website or a Microsoft (MS) Access Database; USAID will provide the URL address or Access Database, and a user ID/password. A comprehensive user manual will be provided by USAID/Pakistan. Upon receipt of the manual, the Recipient will enter and manage the data accordingly.

## IV. OFFICE OF INSPECTOR GENERAL (OIG) HOTLINE

The USAID Office of the Inspector General's (OIG) mission is to protect the integrity of USAID programs and awards. Additionally, the Office of Inspector General provides independent oversight that promotes the efficiency, effectiveness, and integrity of foreign assistance programs and operations under USAID OIG's jurisdiction. The purpose of the OIG Hotline is to receive complaints of fraud, waste, or abuse in our client agencies' programs and operations, including mismanagement or violations of law, rules, or regulations by employees or program participants. Fraud, waste and abuse are defined as:

Fraud is defined as the wrongful or criminal deception intended to result in financial or personal gain. Fraud includes false representation of fact, making false statements, or by concealment of information.

Waste is defined as the thoughtless or careless expenditure, mismanagement, or abuse of resources to the detriment (or potential detriment) of the U.S. government. Waste also includes incurring unnecessary costs resulting from inefficient or ineffective practices, systems, or controls.

Abuse is defined as excessive or improper use of a thing, or to use something in a manner contrary to the natural or legal rules for its use. Abuse can occur in financial or non-financial
settings.

Complainants can reach the USAID OIG Hotline in the following different methods to report fraud, waste and abuse including:

By completing an online form on our website https://oig.usaid.gov/report-fraud
By email: ig.hotline@usaid.gov
By telephone: 1-800-230-6539 (Toll-Free) or 202-712-1023
By mail:

U.S. Agency for International Development
Office of Inspector General
P.O. Box 657
Washington, DC 20044-065

## V. PARTNER VETTING

Prior to award, the highest rated applicants will be notified to fulfill vetting requirements.

(a) The recipient must comply with the vetting requirements for key individuals under this award.

(b) Definitions: As used in this provision, "key individual," "key personnel," and "vetting official" have the meaning contained in 22 CFR 701.1.

(c) The Recipient must submit within 15 days a USAID Partner Information Form, USAID Form 500-13, to the vetting official identified below when the Recipient replaces key individuals with individuals who have not been previously vetted for this award. Note: USAID will not approve any key personnel who are not eligible for approval after vetting.

The designated vetting official is:

Vetting official: Chad Johnson
Address: USAID/Pakistan, U.S. Embassy Islamabad, Diplomatic Enclave, Ramna 5
Islamabad, Pakistan 44000
Email: pakaidvsu@usaid.gov (for inquiries only)

(d) (1) The vetting official will notify the Recipient that it—

(i) Is eligible based on the vetting results,
(ii) Is ineligible based on the vetting results, or

(iii) Must provide additional information, and resubmit the USAID Partner Information Form with the additional information within the number of days the vetting official specifies.

(2) The vetting official will include information that USAID determines releasable. USAID will determine what information may be released consistent with applicable law and Executive Orders, and with the concurrence of relevant agencies.

(e) The inability to be deemed eligible as described in this award term may be determined to be a material failure to comply with the terms and conditions of the award and may subject the recipient to suspension or termination as specified in the subpart "Remedies for Noncompliance" at 2 CFR part 200.

(f) Reconsideration:

(1) Within 7 calendar days after the date of the vetting official's notification, the recipient or prospective subrecipient or contractor that has not passed vetting may request in writing to the vetting official that the Agency reconsider the vetting determination. The request should include any written explanation, legal documentation and any other relevant written material for reconsideration.

(2) Within 7 calendar days after the vetting official receives the request for reconsideration, the Agency will determine whether the recipient's additional information merits a revised decision.

(3) The Agency's determination of whether reconsideration is warranted is final.

(g) A notification that the Recipient has passed vetting does not constitute any other approval under this award.

Alternate I. When sub-recipients will be subject to vetting, add the following paragraphs to the basic award term:

(h) When the prime recipient anticipates that it will require prior approval for a subaward in accordance with 2 CFR 200.308(c)(6) the subaward is subject to vetting. The prospective subrecipient must submit a USAID Partner Information Form, USAID Form 500-13, to the vetting official identified in paragraph (c) of this provision. The Agreement Officer must not approve a subaward to any organization that has not passed vetting when required.

(i) The recipient agrees to incorporate the substance of paragraphs (a) through (i) of this award term in all first tier subawards under this award.

## VI. PROHIBITION ON PROVIDING FEDERAL ASSISTANCE TO ENTITIES THAT REQUIRE CERTAIN INTERNAL CONFIDENTIALITY AGREEMENTS – REPRESENTATION (APRIL 2015)

(a) In accordance with section 743 of Division E, Title VII, of the Consolidated and further Continuing Resolution Appropriations Act, 2015 (Pub. L. 113-235), Government agencies are not permitted to use funds appropriated (or otherwise made available) under that or any other Act for providing federal assistance to an entity that requires employees, sub awardees or contractors of such entity seeking to report fraud, waste, or abuse to sign internal confidentiality agreements or statements prohibiting or otherwise restricting such employees, sub awardees, or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information.

(b) The prohibition in paragraph (a) of this provision does not contravene requirements applicable to Standard Form 312, Form 4414, or any other form issued by a Federal department or agency governing the non-disclosure of classified information.

(c) By submission of its application, the prospective recipient represents that it does not require employees, sub awardees, or contractors of such entity seeking to report fraud, waste, or abuse to sign internal confidentiality agreements or statements prohibiting or otherwise restricting such employees, sub awardees, or contractors from lawfully reporting such waste, fraud, or abuse to a designated investigative or law enforcement representative of a Federal department or agency authorized to receive such information.

## VII. SPECIAL AWARD REQUIREMENT RELATING TO THE PROHIBITION ON CERTAIN TELECOMMUNICATION AND VIDEO SURVEILLANCE SERVICES OR EQUIPMENT (NOVEMBER 2020)

FOR U.S. ORGANIZATIONS
Special Award Requirement Relating to the Prohibition on Certain Telecommunication and Video Surveillance Services or Equipment (November 2020)

USAID has been granted a temporary waiver under Section 889(d)(2) that will allow the recipient to use award funds through September 30, 2022, to procure certain telecommunications and video surveillance services or equipment as specified in 2 CFR 200.216. Based on this waiver, all costs incurred for covered telecommunications and video surveillance services or equipment will be allowable through September 30, 2022, without regard to the cost principle at 2 CFR 200.471. Procurements made on or after October 1, 2022, will be unallowable in accordance with 2 CFR 200.471.

[End of Special Award Requirement]

FOR NON-U.S. ORGANIZATIONS
Special Award Requirement Relating to the Prohibition on Certain Telecommunication and Video Surveillance Services or Equipment (November 2020)

USAID has been granted a temporary waiver under Section 889(d)(2) that will allow the recipient to use award funds through September 30, 2022, to procure certain telecommunications and video surveillance services or equipment as specified in the

standard provision "Prohibition on Certain Telecommunication and Video Surveillance Services or Equipment (AUGUST 2020)." Based on this waiver, all costs incurred for covered telecommunications and video surveillance services or equipment will be allowable through September 30, 2022, without regard to the standard provision "Allowable Costs" and the cost principle at 2 CFR 200.471. Procurements made on or after October 1, 2022, will be unallowable in accordance with the standard provision "Allowable Costs" and 2 CFR 200.471.

**[END OF SECTION F]**

## ATTACHMENT A: REFERENCES

A. USAID Gender Equality and Female Empowerment Policy

B. USAID CDC

C. USAID's Democracy & Governance Strategy

D. USAID COVID-19 Strategy

E. USAID's Evaluation Policy.

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- The High Impact Practices Partnership. (2019). High Impact Practices in Family Planning (HIPs). Family Planning High Impact Practices list.
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- Sundaram A et al. (2019). Adding It Up: Costs and Benefits of Meeting the Contraceptive and Maternal and Newborn Health Needs of Women in Pakistan, New York: Guttmacher Institute. https://www.guttmacher.org/ report/adding-it-up-meeting-contraceptive-mnh-needs-pakistan. https://doi.org/10.1363/2019.30703
- United Nations Population Fund. (2019). (rep.). Pakistan's Commitment ICPD25 Nairobi Summit.
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**[END OF ATTACHMENT A]**

## ATTACHMENT B: SUMMARY BUDGET TEMPLATE

| **Line Item** | **Year 1** | **Year 2** | **Year 3** | **Year 4** | **Year 5** | **Total Amount (USD)** |
|---|---|---|---|---|---|---|
| Salary and Allowances | | | | | | |
| Fringe Benefits | | | | | | |
| Travel and Transportation | | | | | | |
| Equipment & Supplies | | | | | | |
| Subawards | | | | | | |
| Other Direct Costs | | | | | | |
| **Total Direct Charges** | | | | | | |
| Indirect Charges, if any | | | | | | |
| **Total Costs** | | | | | | |
| Cost Share | | | | | | |
| **Total Costs plus Cost Share** | | | | | | |
| Leveraged funds, if any | | | | | | |
| **Total Activity Costs Plus Leveraged funds** | | | | | | |

**[END OF ATTACHMENT B]**

## ATTACHMENT C: PLANNED PRE-AWARD SCHEDULE

| **Pre-Award Milestone** | **Anticipated Date** |
|---|---|
| NOFO Posted on grants.gov | May 13, 2022 |
| Due date for Receipt of Q&A | May 23, 2022 |
| Due date for Submission of Applications | June 16, 2022,<br>15:00 Pakistan Standard Time |
| USAID Reviews Applications | June/July 2022 |
| Discussions with Finalist completed | August 2022 |
| Anticipated Award Date | September 2022 |

**[END OF ATTACHMENT C]**

# ATTACHMENT D: STANDARD PROVISIONS

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

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

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

| Required | Not Required | Standard Provision |
|---|---|---|
| TBD | | RAA1. NEGOTIATED INDIRECT COST RATES - PREDETERMINED (NOVEMBER 2020) |
| | | RAA2. NEGOTIATED INDIRECT COST RATES - PROVISIONAL (Nonprofit) (NOVEMBER 2020) |
| | | RAA3. NEGOTIATED INDIRECT COST RATE - PROVISIONAL (Profit) (DECEMBER 2014) |
| | | RAA4. INDIRECT COSTS – DE MINIMIS RATE (NOVEMBER 2020) |
| | | RAA5. EXCHANGE VISITORS AND PARTICIPANT TRAINING (JUNE 2012) |
| | | RAA6. VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (JANUARY 2009) |
| | | RAA7. PROTECTION OF THE INDIVIDUAL AS A RESEARCH SUBJECT (APRIL 1998) |
| | | RAA8. CARE OF LABORATORY ANIMALS (MARCH 2004) |
| | | RAA9. TITLE TO AND CARE OF PROPERTY (COOPERATING COUNTRY TITLE) (NOVEMBER 1985) |
| | | RAA10. COST SHARING (MATCHING) (FEBRUARY 2012) |
| | | RAA11. PROHIBITION OF ASSISTANCE TO DRUG TRAFFICKERS (JUNE 1999) |
| | | RAA12. INVESTMENT PROMOTION (NOVEMBER 2003) |
| | | RAA13. REPORTING HOST GOVERNMENT TAXES (DECEMBER 2014) |
| | | RAA14. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JUNE 2012) |
| | | RAA15. CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) (FEBRUARY 2012) |
| | | RAA16. CONDOMS (ASSISTANCE) (SEPTEMBER 2014) |
| | | RAA17. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING (ASSISTANCE) (SEPTEMBER 2014) |
| | | RAA18. USAID DISABILITY POLICY - ASSISTANCE (DECEMBER 2004) |
| | | RAA19. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004) |

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

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

| Required | Not Required | Standard Provision |
|---|---|---|
| TBD | | RAA1. ADVANCE PAYMENT AND REFUNDS (NOVEMBER 2020) |
| | | RAA2. REIMBURSEMENT PAYMENT AND REFUNDS (DECEMBER 2014) |
| TBD | | RAA3. INDIRECT COSTS – NEGOTIATED INDIRECT COST RATE AGREEMENT (NICRA) (NOVEMBER 2020) |
| | | RAA4. INDIRECT COSTS – CHARGED AS A FIXED AMOUNT (NONPROFIT) (JUNE 2012) |
| | | RAA5. INDIRECT COSTS – DE MINIMIS RATE (NOVEMBER 2020) |
| | | RAA6. UNIVERSAL IDENTIFIER AND SYSTEM OF AWARD MANAGEMENT (NOVEMBER 2020) |
| | | RAA7. REPORTING SUBAWARDS AND EXECUTIVE COMPENSATION (NOVEMBER 2020) |
| | | RAA8. SUBAWARDS (DECEMBER 2014) |
| | | RAA9. TRAVEL AND INTERNATIONAL AIR TRANSPORTATION (DECEMBER 2014) |
| | | RAA10. OCEAN SHIPMENT OF GOODS (JUNE 2012) |
| | | RAA11. REPORTING HOST GOVERNMENT TAXES (JUNE 2012) |
| | | RAA12. PATENT RIGHTS (JUNE 2012) |
| | | RAA13. EXCHANGE VISITORS AND PARTICIPANT TRAINING (JUNE 2012) |
| | | RAA14. INVESTMENT PROMOTION (NOVEMBER 2003) |
| | | RAA 15. COST SHARE (JUNE 2012) |
| | | RAA16. PROGRAM INCOME (AUGUST 2020) |
| | | RAA17. FOREIGN GOVERNMENT DELEGATIONS TO INTERNATIONAL CONFERENCES (JUNE 2012) |

| | | |
|---|---|---|
| | | RAA18. STANDARDS FOR ACCESSIBILITY FOR THE DISABLED IN USAID ASSISTANCE AWARDS INVOLVING CONSTRUCTION (SEPTEMBER 2004) |
| | | RAA19. PROTECTION OF HUMAN RESEARCH SUBJECTS (JUNE 2012) |
| | | RAA20. STATEMENT FOR IMPLEMENTERS OF ANTI-TRAFFICKING ACTIVITIES ON LACK OF SUPPORT FOR PROSTITUTION (JUNE 2012) |
| | | RAA21. ELIGIBILITY OF SUBRECIPIENTS OF ANTI-TRAFFICKING FUNDS (JUNE 2012) |
| | | RAA22. PROHIBITION ON THE USE OF ANTI-TRAFFICKING FUNDS TO PROMOTE, SUPPORT, OR ADVOCATE FOR THE LEGALIZATION OR PRACTICE OF PROSTITUTION (JUNE 2012) |
| | | RAA23. VOLUNTARY POPULATION PLANNING ACTIVITIES – SUPPLEMENTAL REQUIREMENTS (JANUARY 2009) |
| | | RAA24. CONSCIENCE CLAUSE IMPLEMENTATION (ASSISTANCE) (FEBRUARY 2012) |
| | | RAA25. CONDOMS (ASSISTANCE) (SEPTEMBER 2014) |
| | | RAA26. PROHIBITION ON THE PROMOTION OR ADVOCACY OF THE LEGALIZATION OR PRACTICE OF PROSTITUTION OR SEX TRAFFICKING(ASSISTANCE) (SEPTEMBER 2014) |
| | | RAA27. LIMITATION ON SUBAWARDS TO NON-LOCAL ENTITIES (JULY 2014) |
| | | RAA28. CONTRACT PROVISION FOR DBA INSURANCE UNDER RECIPIENT PROCUREMENTS (DECEMBER 2014) |
| | | RAA29. CONTRACT AWARD TERM AND CONDITION FOR RECIPIENT INTEGRITY AND PERFORMANCE MATTERS (April 2016) |
| | | RAA30. RESERVED |
| | | RAA31. NEVER CONTRACT WITH THE ENEMY (NOVEMBER 2020) |

**[END OF ATTACHMENT D]**

## ATTACHMENT E: INITIAL ENVIRONMENTAL EXAMINATION (IEE)

Initial Environmental Examination (IEE) is attached separately with this NOFO as ATTACHMENT E

**[END OF ATTACHMENT E]**

## ATTACHMENT F: SAMPLE SECURITY PLAN TEMPLATE

Sample Security Plan Template is attached separately with this NOFO as ATTACHMENT F.

**[END OF ATTACHMENT F]**

# ATTACHMENT G: ABBREVIATIONS AND ACRONYMS

## ACRONYMS

| | |
|---|---|
| BMGF | Bill and Melinda Gates Foundation |
| CDCS | Country Development Cooperation Strategy |
| CPR | Contraceptive prevalence rate |
| DCP3 | Disease Control Priorities 3 |
| DLI | Disbursement Linked Indicators |
| KP | Khyber-Pakhtunkhwa |
| FCDO | United Kingdom Foreign Commonwealth and Development Office |
| FP | Family planning |
| GHSC-PSM | Global Health Supply Chain – Procurement and Supply Management Activity |
| GoP | Government of Pakistan |
| HDA | Human Development Activity |
| IHSS-SD | Integrated Health Systems Strengthening - Service Delivery Activity |
| KP | Khyber Pakhtunkhwa |
| LHW | Lady health worker |
| MAP | Midwifery Association of Pakistan |
| MNCH | Maternal, newborn, and child health |
| PHC | Primary Health Care |
| PDHS | Pakistan Demographic and Health Survey |
| SoGP | Society of Gynecologists Pakistan |
| TFR | Total Fertility Rate |
| UNFPA | United Nations Population Division |

**[END OF ATTACHMENT G]**

## ATTACHMENT H: GENDER ANALYSIS

Gender Analysis is attached separately with this NOFO as ATTACHMENT H

**[END OF ATTACHMENT H]**