AMENDMENT 0009

FUNDING OPPORTUNITY ANNOUNCEMENT (FOA)
Number N00244-17-S-FO02

"FY17 – FY18 Department of Defense HIV/AIDS Prevention Program: Military Specific HIV/AIDS Prevention, Care, and Treatment Program for PEPFAR (President's Emergency Plan for AIDS Relief) Funded Countries"

The purpose of this Amendment 0009 is to incorporate the following:

DHAPP is accepting "Concept Papers" for Ethiopia as described below through 25 May 2018.

NOTE: Each narrative is a standalone effort and should not be combined with another narrative and all the program elements (tasks) in each specific narrative must be addressed in that concept paper submission.

E-mail address for submission of Concept Papers: usn.nhrc.dhapp@mail.mil

The full solicitation is available at: http://www.grants.gov/

Eligible Applicants are requested to submit **Concept Papers** following the guidelines and format provided in the N00244-17-S-FO02, Section IV.

All respondents must demonstrate the active support of the in-country military and the DoD representative in the corresponding U.S. Embassy in the planning and execution of their proposals. The selected Grantee is the Implementing Partner and will be referred to as IP in this document.

Ethiopia: Voluntary Male Medical Circumcision for HIV Prevention

	Phase 1	Phase 2	Phase 3	Phase 4
CIRC	$213,000	$213,000	$213,000	$213,000

Proposals are requested to support Ethiopia to reduce the number of new HIV infections and other sexually transmitted diseases among members of the Ethiopia National Defense Force (ENDF), their families, and the civilian communities served by the ENDF. The TBD partner will work directly with the ENDF to increase the scale of the ENDF President's Emergency Plan for AIDS Relief (PEPFAR) Voluntary Male Medical Circumcision (VMMC) program targeting the age band of 15-29 year olds.

The TBD partner's program should emphasize capacity building across all activities and technical areas. All proposals should detail how the partner will engage the ENDF leadership as well as ENDF personnel at all levels in this work. Specifically the partner should describe utilization of the ENDF organizational structure to strengthen ENDF internal capacity to conduct HIV programmatic activities. Within the proposal, the partner will need to demonstrate transition of programmatic capabilities and capacity to the military over the life of the grant.

The partner must work in complete coordination with the ENDF's HIV prevention and health services, as well as the DHAPP Program Manager based at the US Embassy in Ethiopia and the DHAPP Headquarters Team. The Grantee is the Implementing Partner and will be referred to as the IP in this document. All phase dollar amounts, budget codes, and implementing strategies are subject to change in alignment with the annual Country Operational Plan (COP) process conducted by President's Emergency Plan for AIDS Relief (PEPFAR) each year.

Voluntary Medical Male Circumcision

Technical Area Targets, Year 1				
Indicator	**Label**	**Military Only**	**Other**	**Total**
VMMC_CIRC	The number of males circumcised as part of the voluntary medical male circumcision (VMMC) for HIV prevention program within the reporting period	3,831	1,169	5,000

The IP will ensure that the ENDF is following all national guidelines for conducting VMMC. Clients receiving VMMC should receive a comprehensive service delivery package as specified by WHO (https://www.malecircumcision.org/resource/pepfars-best-practices-voluntary-medical-male-circumcision-site-operations-service-guide) and PEPFAR

(https://www.malecircumcision.org/resource/pepfars-best-practices-voluntary-medical-male-circumcision-site-operations-service-guide) . VMMC will only be offered through surgical methods; no device methods will be used.

The IP will follow all PEPFAR adverse event reporting protocols for any notifiable adverse events (NAE) occurring during the VMMC procedure or within 30 days following circumcision. This includes notifying the PEPFAR Funding Agency POC and the Ethiopia PEPFAR Coordinator within 24 hours of AE.

VMMC commodities will be procured through the USAID central funding mechanism and will be distributed to the ENDF directly. Reusable kits will be used in static facilities including the recruit bases where sterile instrument processing is available. Disposable instrument kits may be used in mobile and other settings where sterile instrument processing is not available.

Re-usable dorsal-slit procedure kits are being procured for VMMC services associated with the 10-14 year old age group and Re-usable forceps-guided procedure kits are being procured for VMMC services associated with the 15+ age group.

The IP will provide ongoing technical support for VMMC service delivery including: 1) training of VMMC service providers; 2) clinical mentoring and supportive supervision of military health care workers at VMMC sites; 3) support of VMMC service-related data collection, reporting, and data quality assessments (DQA); and 4) support Site Improvement through Monitoring System (SIMS) and other Continuous Quality Improvement (CQI) of VMMC services at point of service delivery.

VMMC Strategy:

1. Recruits: In an effort to offer 100% VMMC coverage in the ENDF in an efficient manner, the IP will support the ENDF to routinize the offering of voluntary medical male circumcisions (VMMC) to ENDF recruits within the recruit training period. The IP will coordinate visits of other militaries to aid them in successfully integrating VMMC services in their recruit period.

2. Other active duty military: Although VMMC activities are part of the new recruit process; the ENDF has a back log of approximately 4,000 soldiers that missed the new recruit VMMC campaigns. The IP will organize outreach campaigns to reach those who missed the VMMC services at the training center. Each command and division will make an assessment of the number of uncircumcised military members within their division. Trained ENDF personnel will organize mini campaigns to identify and circumcise clients.

3. 10-18 year old military dependents: These clients are not specifically targeted through this program, but IP should provide ongoing technical support to military health care providers to ensure quality service delivery and ensure that the appropriate procedure kits have been distributed and being used. Clients in this age group should receive

VMMC services at their closest military hospital. Expected number of VMMC procedures for the fiscal year is 700.

4. <60 day infant dependents: These clients are not targeted through this program but IP should provide ongoing technical support to military health care providers to ensure quality service delivery and ensure the appropriate technique is being used in accordance with national guidelines. Clients in this age group should receive VMMC services at their closest military hospital. Expected number of VMMC procedures for the fiscal year is 469.

WORK PLANS

Grantee must submit annual programmatic and financial work plans to the DHAPP Program Manager and DHAPP HQ (Budget breakdown per activity and for program management is required). Work plans include activities, implementation timeline, including M&E.

REPORTING

- Quarterly Fiscal Reports: Grantee must submit quarterly programmatic and financial reports to DHAPP in order to monitor expenditures according to the program area(s) [HVAB; HVOP; etc]. The report template will be provided by DHAPP. Submit 30 calendar days after each reporting period (3/31, 6/30, 9/30, and 12/31).

- Interim Progress: Indicator Report: This report shall summarize progress in relation to the approved Work Plan as well as monitor grant deliverables. The Grantee shall submit quarterly indicator reports in accordance with the format provided by the Program Office within 45 calendar days following the end of the reporting period: 12/31, 3/31, 6/30 and 9/30. The Recipient shall provide reports in accordance with the template provided by NHRC.

- Reports will follow DHAPP Headquarters and Country Team Templates. Reports will also be entered into the PEPFAR data base system (DATIM)
  Grantee staff will be trained and oriented on how to use this data base.