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CAMBODIA

REQUEST FOR INFORMATION (RFI)

RFI Number: RFI-442-25-001

Issuance Date: October 10, 2024

Responses Due Date: October 28 at 11:00 am, Phnom Penh time

Child Protection and Care (CPC)

USAID/Cambodia is developing a Program Description for a prospective initiative called Child Protection and Care (CPC), which is intended to strengthen the child protection and care system in Cambodia so the most underserved and marginalized children can thrive in safe, loving, nurturing, and permanent family-based care with birth, kin, or local adoptive families.

This Request for Information (RFI) serves as a vital platform for USAID to gather insights from stakeholders, including local partners, enhancing our understanding of sector-specific needs within our scope of influence. This approach is integral to USAID's commitment to improving the Child Protection sector in Cambodia, leveraging local expertise and insights for long-term, sustainable impact. The anticipated value of this planned activity is between \$5-\$7.5 million.

DISCLAIMER

This RFI is issued solely for information and planning purposes. This is not a Notice of Funding Opportunity (NOFO) and is not to be construed as a commitment by the U.S. Government to issue a NOFO. Responses to this RFI shall not be portrayed as an application and will not be accepted by the Government to form a binding agreement. Issuance of this notice 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 the preparation of comments. Responders are solely responsible for all expenses associated with responding to this RFI.

Responses to this RFI are strictly voluntary and USAID will not pay respondents for information provided in response to this RFI. Responses to this RFI will not be returned and respondents will not be notified of the result of the review. If a NOFO is issued, it will be announced on the [grants.gov](https://www.grants.gov) website at a later date, and all interested parties must respond to that NOFO announcement separately from any response to this announcement.

Businesses should identify any proprietary information in their responses. Proprietary materials will neither be distributed, nor discussed with any other organization. Information submitted in response to this notice will be used at the discretion of the U.S. Government¹. Further, the information submitted will remain confidential insofar as permitted by law, including the Freedom of Information and Privacy Acts.

INSTRUCTIONS

Responses (comments, suggestions, and enhancements) to this RFI are due to USAID/Cambodia's Office of Acquisition and Assistance (OAA) at the identified e-mail address(es) below by the deadline mentioned above. Please forward your responses to Ms. Honey Sokry at hsokry@usaid.gov with a copy to Mr. Vann Rolfson at vrolfson@usaid.gov with the subject title **"Response to Child Projection and Care (CPC) Activity RFI"**. The responses to the questions are limited to **4 pages** maximum using 12-point Calibri font.

¹ FAR 52.215-3 Request for Information or Solicitation for Planning Purposes (Oct 1997)

ATTACHMENT 1: DRAFT PROGRAM DESCRIPTION

Child Protection and Care (CPC)

I. PURPOSE

USAID proposes to develop a new five-year activity entitled the Child Protection and Care (CPC) activity, to be implemented through one or more awards in Cambodia from 2025-2029. The purpose of the CPC activity is to strengthen the child protection and care system in Cambodia so the most underserved and marginalized children can thrive in safe, loving, nurturing, and permanent family-based care with birth, kin, or local adoptive families.

U.S. Congress directs USAID to elevate child development, care, and protection needs as part of foreign assistance programs. Two key U.S. Government (USG) strategies outline priorities for a whole-of-government, multi-sectoral approach: the [Assistance for Orphans and Other Vulnerable Children in Developing Countries Act](#) and the more recent [Global Child Thrive Act](#). The *Advancing Protection and Care for Children in Adversity: A U.S. Government Strategy for Children to Thrive (2024-2029)* ([Thrive Strategy](#)) calls for USG investments to promote early childhood development; to support children who are at risk of, or already are, living outside of family-based care; and to protect children from violence, exploitation, abuse, and neglect.

USAID's proposed CPC activity will promote the Thrive Strategy in Cambodia by supporting the implementation of services that strengthen families to prevent unnecessary family separation, support family reintegration, and support the transition from residential to family-based care.

The five-year CPC activity will build on USAID's previous and current investments in child protection by helping to consolidate the past and current best practices to further develop, test and scale an evidence-based model and approach to support the most marginalized and underserved children and families.

II. Background

A. Country Context

Cambodia has experienced significant economic and social transformation in recent decades. With a population exceeding 16 million, the country's demographic profile is youth-oriented, presenting both opportunities and challenges. Despite robust economic growth driven by sectors such as garment manufacturing and tourism, income inequality remains an issue, particularly between urban and rural populations. Many Cambodians live at or near the poverty line; 15 percent of the population is estimated as eligible for government support through the IDPoor social protection program, and half of all children are considered multidimensionally poor or deprived in at least three areas of life such as health and education. Access to education and healthcare has improved significantly over the past decade, but disparities persist, especially among marginalized communities. Additionally, access to quality education and healthcare services varies widely across

the country. Vulnerable children and families, especially children with disabilities and their families, are particularly susceptible to the effects of economic and social inequalities.

Prior to 2015, Cambodia experienced rapid growth in the population of children outside family-based care, with a 75 percent increase in the number of facilities and institutions in Cambodia providing residential care for children facing difficult life circumstances between 2005 and 2010. Though it has since decreased with concerted efforts of the Cambodian government and partners, the number of children in residential care settings in Cambodia remains high and is driven by a range of factors. Children in vulnerable family situations—including those experiencing poverty, parental death or illness, lack of access to education and work opportunities, violence in the home, substance abuse, etc.--are at high risk for unnecessary separation from their families. This separation often takes the form of residential care, but also includes living on the streets, domestic servitude, and other forms of exploitation. Among children who do require temporary or long-term placement away from their family of origin, many have lacked access to appropriate alternative options, such as kinship or foster care (i.e., alternative family-based care) and domestic adoption. Where services are available, they are often heavily reliant on non-governmental organizations and external donors, underscoring a need to strengthen services through, and linkages with, the Royal Government of Cambodia (RGC).

In the last decade, USAID has invested over \$30 million in Cambodia in programs supporting child protection, development and care, including through USAID's [Family Care First](#) (FCF) and Integrated Early Childhood Development ([IECD](#)) activities that are due to end in 2025, and through USAID's continuing partnership with UNICEF. With USAID support during these past years, Cambodia has made significant advances in child protection and care in developing supportive policies, increasing and strengthening the social service workforce to better support children and families, developing and implementing holistic case management and referral mechanisms, providing family support services to keep families together, identifying and providing alternative family-based care (including kinship and foster care for children who cannot live with their parents), and increasing access to social protection schemes. However, a range of barriers persist to ensure the effective protection and care of all children in need, in particular the most marginalized children including children with disabilities:

- **Unnecessary family separation:** While there has been a significant reduction in the number of children living in residential care, supported through USAID's long-term partnership with UNICEF and through the FCF project, there are 12,260 children living in residential care unnecessarily (Ministry of Social Affairs, Veterans and Youth Rehabilitation [MoSVY], 2023). Approximately 80 percent of these children have at least one living parent and could live with their parents or other family members with the appropriate support.
- **Children with disabilities:** This population is at higher risk of family separation due to a lack of availability and access to services, and stigma. Late identification of developmental delays and/or physical disabilities leads to delayed interventions and a lack of policy, appropriate knowledge, and support for families to care for children with disabilities increases their vulnerability.
- **Violence against children:** In Cambodia, 66 percent of children between ages 1-14 years old report they have been exposed to violent discipline at home according to the most

recent Cambodia Demographic and Health Survey (CDHS) (CDHS, 2021-2022). The CDHS also highlighted the pervasive belief from adults that a child needs physical punishment to be raised or educated properly.

- **Social protection needs:** Cambodia's sustained strong economic growth has contributed to declining monetary poverty rates and its attainment of lower middle-income country (LMIC) status (UNICEF, 2019). Yet, this progress has been uneven across urban and rural areas, and among children with disabilities, poorer households, and children in kinship and foster care families. Many Cambodians live at or near the poverty line. Fifteen percent of the population is estimated as eligible for government support through its IDPoor programme and nearly half of all children are considered multidimensionally poor (Asian Development Bank, 2022; UNICEF, 2019b), in which a culture of poverty is associated with poor health, education, and economic circumstances.

The USG's Thrive Strategy and global best practices support nurturing, loving, protective, and permanent family-based care for all children instead of the institutionalization of children including residential care institutions (RCIs), residential care facilities and orphanages. These settings are known to have negative effects on children's physical growth, neurological development, and mental health well beyond childhood. The USG strategy highlights the need to assist countries to transition from relying on residential care settings for children by strengthening policies and practices to prevent family separation, supporting family-based care, and increasing domestic oversight, regulation, and monitoring of all formal alternative care settings, including national and external funding sources. This is consistent with MoSVY's "Action Plan on Improving Alternative Care for Children, 2023-27" that aims to reintegrate 25 percent (1,230 children) of children from RCIs to family-based care and reduce the number of RCIs to 50 by 2027.

B. Problem Statement

Evidence shows that a lack of safe and nurturing family-based care in childhood and adolescence can lead to immense loss of cognitive, economic, and social potential for individuals, communities and national development. In addition to delayed development, institutionalization places children at risk of physical and/or emotional abuse and can have long-term negative physical and mental health effects, including higher risks of heart disease and suicide. These risks are more prominent in those children who enter residential care at an early age or who stay for an extended period of time. Children with disabilities are over-represented in residential care settings and are also more vulnerable to abuse than other children in these settings. Despite having the same rights to participation, inclusion, and family life that all children do, children with disabilities are often segregated, have fewer interactions with caregivers and others, and have limited to no access to education. In addition, children in poorly managed residential care are at increased risk of experiencing sexual exploitation, forced labor, forced criminality, orphan tourism, or illegal adoption.

Traditionally, support for children and families made vulnerable by poverty or other adversities in Cambodia has been undertaken by communities and local leaders. Conflict, and other social and economic disruptions (most recently, COVID-19) have disrupted many of these informal networks,

coinciding with a gradual shifting of responsibility for social services to the government, with non-governmental organizations (NGOs) and civil society organizations filling gaps in government service provision. In Cambodia, an estimated 3,400 national and international agencies of different sizes are involved in social service provision (Data for Impact, 2024). Although there has not been a formal mapping or census of the non-governmental workforce, it is likely sizeable in comparison to the 3,764 national and subnational social work positions identified across the government in 2019 and 4,272 reported in 2020 (MoSVY, n.d.; UNICEF East Asia Pacific Regional Office, 2019).

The RGC recognizes the need for additional trained government social service workers, but has allocated little funding from the national budget for this amidst other competing priorities. With approximately 0.8 percent of gross domestic product spent on social assistance, child protection and care programs through MoSVY are underfunded in comparison with other ministries such as Health (approx. 1.7 percent) and Education (approx. 2.2 percent) (World Bank, 2020). However, the government has made tremendous progress in strengthening the policy environment and systems for coordination nationally and sub-nationally. Engagement of civil society in child protection and care needs to be further strengthened to effectively participate in existing government-led coordination structures. Increased engagement would also support the RGC in operationalizing their current policies and guidelines at provincial, district and commune levels, and enable civil society organizations to more effectively dialogue as one voice with the government.

Although the RGC aims to reduce the number of children in residential care, more concerted effort is needed to provide strong community-based family strengthening services, especially for children with disabilities and their families, in order to prevent family separation, support sustainable family reintegration and increase the availability of other local permanent family-based care options for children who cannot return to their families. Older care leavers who depart residential care and cannot or do not want to return to their families also need holistic support to ensure a proper and smooth transition to independent living within their communities.

C. Proposed Solution

Decades of research confirm the importance of safe and nurturing family-based care for a child's physical, social, emotional and cognitive development. Stable and protective family relationships are a child's best chance to receive individualized care and attention that is matched to their developmental needs, to avoid violence and exploitation, and to develop lifelong social connections that promote resilience. Further, family relationships are widely considered central to the rights of the child. Therefore, efforts to provide protective and nurturing family-based care for all children are critical to child development and international development.

There is a supportive policy environment in Cambodia with over 20 action plans, guidelines, strategies, sub-decrees, and prakas supporting safe and nurturing family-based care, but widespread gaps in implementation capacity. At the sub-national levels, there is a clear opportunity to build on this progress to further bridge the gap between policies and implementation by increasing coordinated inclusive service provision supported by a strengthened

social service workforce. Civil society has a central role to play to ensure that children and families have access to the support they need, to support the government to bridge the gap between policies and implementation, and to help meet gaps in social services at the community, district and provincial levels where public services are not yet available or not yet adequate to meet the need.

Building on USAID's previous and current investments in child protection and care and past and current best practices, CPC will support family-based care by providing immediate inclusive child protection and care support, filling existing service gaps in close collaboration with government to prevent unnecessary family separation, support safe family reintegration or placement in other local permanent family-based care, support young people leaving care to transition to independent living in their communities, and support the transition of residential care to family support services.

CPC will focus on strengthening families and communities for children to thrive. The activity will find feasible options in increasing family resilience and strengthening inclusive community structures and services. CPC will focus on strengthening inclusive community-based services that support families to stay together or be reintegrated if separated. This will also include supporting the transition from residential to family-based care through reintegrating children coming out of residential care, increasing the availability of alternative family-based care for children who cannot return to their parents, accompanying young people leaving care to transition to independent living in their communities, and supporting RCI service providers to transition their model of care from residential to family-based care.

This activity will target children 0-17 years old and their families at risk of family separation or that have been separated, adolescents and young people 15-29 years old (specifically young people who have grown up in residential care (care leavers)), as well as birth, kin, foster, and local adoptive families. The activity will include a particular focus on children with disabilities and their families.

III. Theory of Change

The theory of change for CPC is based on the context and problems identified. It also takes into consideration political stability and commitment, availability of resources and community willingness to participate. It builds on the investments by the RGC, USAID and other development partners over the past decade to bring about sustainable changes for vulnerable children and their families.

The theory of change is that:

IF families are strengthened with improved knowledge, skills, resources, livelihood opportunities and access to inclusive services to prevent family separation and support family reintegration,

AND coordinated, inclusive community services are strengthened at the community, district and provincial levels to bridge the gap between policy and implementation,

AND residential care service providers are supported to transition their model of care from residential to family support and family-based care - including the redirection of funding to alternative family-based care and family support services, with special considerations for children with disabilities,

THEN the most underserved and marginalized children, with special considerations for children with disabilities, will thrive in safe, loving and nurturing permanent birth, kin or local adoptive families.

IV. Results Framework

The overarching objective of CPC is to improve child protection, care, and development, and encourage the development of social services, so that the most underserved populations of at-risk children remain with loving, caring families, whether those are birth, kin, foster or local adoptive families. The Results Framework (RF) reflects the importance of strengthening social norms that are supportive of safe and nurturing family-based care and raising awareness of the harm of family separation and placement in residential care. Through strategic partnerships and a commitment to evidence-based practices, this activity aims to contribute to long-lasting positive changes in the lives of at-risk Cambodian children, ensuring they grow up in safe, nurturing, and loving families.

Specific Objective 1: Strengthen families to prevent unnecessary child-family separation and support family reintegration

The CPC activity will strengthen families by improving positive parenting practices, increasing economic resilience and strengthening inclusive community structures and services, linked wherever possible to local and national systems and supportive services for sustainability. The activity will link to and strengthen the implementation of the Ministry of Women's Affairs' (MoWA) Positive Parenting Strategy particularly for those families experiencing violence or risk of separation (Level 3). With poverty as one of the main drivers to family separation and violence against children, the activity will strengthen families' economic resilience with a range of [global](#) and in-country evidence-based approaches. This will include ensuring families have access to existing social assistance programs, such as DisabilityPoor.

Building on the progress and learning over the past decade, especially from models and approaches developed and tested through [IECD](#) and [FCF](#), the activity will provide immediate inclusive child protection and development support via direct, innovative services to fill existing gaps and inform their integration and scale up through child protection and care systems strengthening efforts underway. The activity will have a strong focus on strengthening community structures and services for children with disabilities and their families as well as address stigma through behavior change activities.

The activity will support the implementation of existing policies by working closely with government structures and workforce at provincial, district and community levels to ensure the

provision of coordinated services by a harmonized social service and allied workforce with clear roles and responsibilities.

Illustrative Results:

- **Intermediate Result 1:** Positive parenting practices increased.
- **Intermediate Result 2:** Increase family economic resilience.
- **Intermediate Result 3:** Inclusive community structures and services strengthened to identify and respond to child protection, care and development concerns, including for children with disabilities.

Specific Objective 2: Support the transition from residential to family-based care

The CPC activity will support the transition from residential to family-based care through the reintegration of children living in residential care into families, increasing the availability of alternative family-based care for children who cannot return to their parents, and supporting the transition of residential care services to community-based family support services.

The activity will ensure children separated from their families and living in residential care, including children with disabilities, are effectively supported to be reintegrated into families whether it is birth, kin, foster or local adoptive families. The activity will ensure that families where children are being reintegrated are strengthened to address the drivers of family separation and prevent secondary separation. Based on a comprehensive case management approach with government stakeholders, this will include a combination of services and support ranging from strengthening families' economic resilience, positive parenting practice, and access to inclusive services including education, health, mental health and psychosocial support, among other support. The activity will also provide support to young people leaving care including livelihood, education and economic opportunities, supported independent living if they don't want to live in a family, mental health and psychosocial support including peer support and access to basic services.

Building on the policy framework and models and [learnings from FCF](#), the activity will continue to increase the availability of alternative family based care such as kinship and foster care, as well as permanency planning through local adoption for children who cannot return to their families, in particular for children with disabilities.

Building on learnings from FCF and the [Better Care Network](#), the activity will support the transition of residential care services to community based family support services. The activity will support the engagement and redirection of donor funding including donors in high income countries in close collaboration with the Better Care Network and Faith to Action among other global networks. The recent uptake in tourism since the pandemic, aside from the promise of improved economic conditions for many Cambodians, also presents the potential to increase orphanage tourism and child trafficking. The activity will identify and implement strategies to curb orphanage

tourism building on past learnings and in close coordination with the Better Care Network and [Rethink Orphanages](#).

The activity will support networks of people with lived experience including networks of young people; associations of birth, kin, foster and adoptive families; and organizations of people with disabilities to inform the design, implementation and monitoring of policies and services.

The activity will also strengthen social norms that are supportive of safe and nurturing family-based care and raise awareness of the harm of family separation and placement in residential care.

Illustrative Results:

- **Intermediate Result 1:** Children living in residential care reintegrated into appropriate protective, and permanent families
- **Intermediate Result 2:** Availability of alternative family-based care (kin, foster and domestic adoptive families) increased
- **Intermediate Result 3:** Increased number of residential care institutions and facilities transitioned to provide family support services.
- **Intermediate Result 4:** Increased awareness of the harm of residential care and perception of families as the best place for children, including for children with disabilities among at-risk families and service providers.

V. Coordination and Complementarity

The activity will leverage the work of other USAID programs as well as the efforts of other development partners working in the child protection space in Cambodia. Among USAID/Cambodia programs, CPC will build on the work of current FCF, IECD and the upcoming Sustainable Outcomes through Primary Healthcare Integration (SOPHI) activity. Specifically, this activity will leverage SOPHI and related efforts where feasible at sub-national and community level to raise awareness of positive parenting practices that help prevent family separation as well as efforts to strengthen systems for early identification and intervention for children with disabilities. The activity will also build on the models, approaches and learning from FCF. Additionally, CPC will collaborate with USAID activities focused on mental health services and support for Khmer Rouge survivors and their families, implemented in partnership with the Ministry of Health's Department of Mental Health and Substance Abuse (DHMSA), in order to leverage resources that could support mental health services for children, young people leaving care and caregivers.

When relevant, the activity will engage with USAID/Cambodia programs in other sectors related to employment, economic growth and agriculture.

The activity will also collaborate with other development partners like UNICEF, whose work - also supported by USAID - focuses on child protection systems strengthening and supporting the social service workforce. CPC will also collaborate closely with and support the RGC-led coordination

efforts in the sector, and leverage and strengthen coordination among local NGOs to engage with a collective voice - through existing government led coordination structures. A key expected outcome of CPC is to strengthen NGO and development partners' collaboration with the MoSVY. It is therefore very crucial that the engagement with MoSVY is taken into consideration at the earliest stage of the activity to ensure effective collaboration and alignment with national priorities.

The relationship among USAID-supported activities related to child protection and/or children with disabilities is further highlighted below:

- **CPC:** aims to offer immediate child protection and care support via **direct, innovative services** to fill existing gaps and inform their integration and scale up through the child protection and care systems in Cambodia, linked to RGC efforts and support through activities like SOPHI and UNICEF.
- **SOPHI:** focuses on **stronger policy and services for children with disabilities and their families**, and strengthening **social protection systems** to be more child and family sensitive and address drivers of child protection and care issues.
- **UNICEF:** supports strengthening of the child protection and care system with a focus on the **implementation of existing and forthcoming laws and policies**, strengthening the **social service workforce**, and working with RGC to **improve coordination and accountability mechanisms and increase public budget allocations**.

VI. Localization:

USAID defines localization as the set of internal reforms, actions, and behavior changes that ensure our work puts local actors in the lead, strengthens local systems, and is responsive to local communities. The USAID CPC activity will adhere to these principles by prioritizing local leadership in all aspects of the program, from design to implementation and evaluation. This approach integrates the priorities and expertise of local stakeholders and ensures that their knowledge and aspirations drive sustainable and impactful development. It is also critical for the activity to engage and support networks of people with lived experience including networks of young people; associations of birth, kin, foster and adoptive families; and organizations of people with disabilities.

Where possible, USAID CPC will channel assistance directly to credible local partners while ensuring accountability, in ways that support strengthening of local capacities and promote sustainable development outcomes.

[END OF ATTACHMENT 1]

ATTACHMENT 2: QUESTIONS

USAID seeks to solicit feedback (comments, suggestions, and enhancements) on the design of the program as laid out in Attachment 1 above and information on the following specific questions to inform the design of the planned activity. Please ensure comments are concise and specific to the information requested.

Special consideration should be given to the following:

1. What do you anticipate as the major opportunities and risks in achieving the intended results listed in the Results Framework? Are any major components missing from the approach described in this concept note that USAID should consider?
2. What are the best practices or the most promising entry points for preventing family separation and supporting children and young people in Cambodia, including children and young people with disabilities, to transition back into family-based care (birth, kin, foster and local adoptive families) or to independent living for young people leaving care?
3. What have been effective practices or entry points for supporting the transition of residential care to family support services in Cambodia?
4. For local organizations, provide a brief statement of capability that include:
 - Name of organization, address, general information,
 - Three references that highlight the following:
 - Former projects, technical description and project value in the last ten years
 - Information about sub-award management experience, including: sub awards distributed and managed, amount of sub-award managed, financial management processes and procedures, experiencing working in or managing a consortium, technical expertise and experience in capacity building, and
 - Geographical areas covered in Cambodia

Note: The brief statement of capability from local organization is not included in the page limit.