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SBU: Limpopo Province OVC Activity

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RFI No: Ext-RFI-674-23-Limpopo OVC Activity

Date Issued: November 15, 2022

Revised Response Date: December 13, 2022 (09:00am Pretoria, SA Time)

Responses to be submitted to: pretoriaapplications@usaid.gov

Subject: USAID Limpopo Province Orphans and Vulnerable Children Activity – RFI

Referring to FAR Part 10, FAR 15.201(e) and ADS 201.mba_080222 Section A.5, the United States Government, represented by the United States Agency for International Development (USAID) at its Mission in Southern Africa, is publishing the subject Request for Information (RFI).

This RFI intends to:

1. Allow stakeholders and interested organizations to provide information and suggestions for orphans and vulnerable children (OVC) programming in Limpopo.
2. Conduct market research about the capabilities and expertise of organizations currently working in support of achieving HIV epidemic control in Limpopo.

I. BACKGROUND:

The conceptual goal of the USAID Limpopo Province OVC Activity is to improve the health, well-being, and protection of children and adolescents (and their families) living with, affected by, and vulnerable to HIV through high-impact service delivery and district-level social service system strengthening to sustain an effective response for children, adolescents, and their families through locally led solutions. The Activity will contribute to the achievement of 95-95-95, reaching and sustaining epidemic control in South Africa by helping to reduce lifetime risk of HIV acquisition and achieve durable viral suppression among children, adolescents, and their families. In line with the South African Government and U.S. Government Partnership Framework Implementation Plan, the Activity's priorities include long-term sustainability with health and social system strengthening to bolster an efficient, locally-led response. The Activity aims to standardize a robust model of care that can ultimately be replicated and scaled up by the Department of Social Development. The Activity will include a combination of high-impact service delivery for Comprehensive, Preventive, and DREAMS Family Strengthening activities targeting children, adolescents, and their families in the HIV epidemic; Non-Profit Organizations (NPOs) capacity strengthening; and district-level social service system strengthening for long-term sustainability. The

Activity will be tailored to address the development challenges at the provincial level.

This Activity aims to

- i. Increase access to and utilization of comprehensive, preventive, and family strengthening services among children and adolescents 0-19 years and their families;
- ii. Improve Non-Profit Organizations (NPOs) capacity for implementation of evidence-based interventions and program monitoring, evaluation, and reporting (MER); and
- iii. Strengthen district-level social service capacity to sustain an effective response for children, adolescents, and their families in high HIV burden districts.

The Activity's conceptual results framework is found in Attachment 1.

The following describes the three conceptual objectives under the Activity.

Objective 1: Increase access to and utilization of comprehensive, preventive, and family strengthening services among children and adolescents 0-19 years and their families.

South Africa has the largest HIV epidemic in the world, with an estimated 7.8 million people living with HIV (PLHIV)¹ and 5.2 million on anti-retroviral therapy (ART), including 126,274 children (<15 years)². This reflects an overall HIV prevalence of 13.2% of its population of 59 million people and an adult HIV prevalence of 18.5%. Nationally, there are approximately 200,000 new HIV infections each year, including an estimated 50,000 new HIV infections among children and adolescents 0-19 years³. While incidence is declining each year, the HIV burden in South Africa continues to grow and has not reached epidemic control, particularly for children and adolescents. While only 174,295 children and adolescents living with HIV (C/ALHIV) know their status; 54% are on treatment; and 38% are virally suppressed⁴.

In Limpopo Province, of those people living with HIV, 91% know their status, of those who know their status, **only 68%** are on antiretroviral therapy (ART) and of those on ART, 89% are virally suppressed (91-68-89) performance against the UNAIDS 95-95-95 targets).⁵ Of the C/ALHIV in Limpopo, 74% know their status; of those, 69% are on treatment; and of those, 61% are virally suppressed.⁶

To close the gap for C/ALHIV, comprehensive support directly addressing complex household-level barriers to health and social services, including inadequate nutrition, transportation, and other socio-economic constraints, is needed. There is also an urgent need for expanding primary prevention, and family strengthening activities among adolescents living in high HIV prevalence areas, as well as among those with known risk factors for HIV acquisition. While poverty alone is not correlated with increased HIV risk, consumption of alcohol or drugs, as well as low school attendance, orphanhood, and weak family structures (e.g., child-headed families, displacement, etc.) are all associated with increased risk behaviors for HIV and early pregnancy. This objective aims to increase access to and utilization of high quality comprehensive, preventive, and family strengthening services among children and adolescents 0-19 years and their families through evidence-based interventions with fidelity and the delivery of high-impact services.

¹ Thembisa 4.5 2022 model outputs as described in: Johnson LF, May MT, Dorrington RE, Cornell M, Boule A, Egger M and Davies MA. (2017) Estimating the impact of antiretroviral treatment on adult mortality trends in South Africa: a mathematical modeling study. *PLoS Medicine*. 14(12): e1002468.

² Statistics South Africa [StatsSA], Mid-year population estimates report table, 2021 Statistical Release P0302, Statistics South Africa: Pretoria Accessed March 14, 2022 at <http://www.statssa.gov.za/publications/P0302/P03022021.pdf>

³ <https://data.unicef.org/country/za/>

⁴ COP22 SDS PEPFAR South Africa April 19, 2022

⁵ Thembisa 4.5 2022 model outputs as described in: Johnson LF, May MT, Dorrington RE, Cornell M, Boule A, Egger M and Davies MA. (2017) Estimating the impact of antiretroviral treatment on adult mortality trends in South Africa: a mathematical modeling study. *PLoS Medicine*. 14(12): e1002468.

⁶ Ibid.

Objective 2: Improve non-profit organization (NPO) capacity for implementation of evidence-based interventions and program monitoring, evaluation, and reporting (MER).

To maximize the impact for children, adolescents and their families in Limpopo Province, implementation of evidence-based interventions through non-profit organizations requires robust local expertise, locally led solutions and effective monitoring systems. This objective will address the delivery of high-quality care and support interventions for children, adolescents and their families in Limpopo Province. The objective will focus on applying robust monitoring systems as demonstrated through quantitative results captured and analyzed at the individual and household level.

Objective 3: Strengthen district-level social service capacity to sustain an effective response for children, adolescents, and their families in high HIV burden districts in Limpopo Province.

To contribute towards long-term sustainability in collaboration with the Provincial Department of Social Development, the Activity aims to advance district-level social service capacity to deliver high-quality child and family-focused services, improve clients' well-being outcomes. A key aspect of district social service system strengthening in Limpopo will be reinforcing coordination among health, social development, and education sectors and service points to ensure holistic service delivery and an effective continuum of response that meets the needs of children, adolescents, and their families.

II. SPECIFIC QUESTIONS INTO WHICH USAID SEEKS INPUT:

The following are questions to solicit information to refine the design of the Activity, to validate USAID's current assumptions, and gain a better understanding of what is needed to close the gap to epidemic control while building a resilient health and social service system and leveraging community, civil society and private sector partnerships in Limpopo Province. When preparing your response to the following questions, please ensure comments are concise and specific to the question asked.

1. Which interventions are most effective and efficient with a direct impact on improving the health, well-being, and protection of children and adolescents (and their families) living with, affected by, and vulnerable to HIV in Limpopo? What would be the measure(s) of success?
2. Which current interventions would be recommended to be maintained and/or scaled up to advance sustainable epidemic control in Limpopo?
3. Which innovative (new) interventions should be considered for contributing towards sustainable epidemic control for children and adolescents in Limpopo? What would be the measures of success?
4. What are the impediments for including more community-based, indigenous partners in the program for contributing towards epidemic control and a sustainable social service system in the Province?
5. How can this Activity support building capacity of community and locally based organizations to play a bigger role in providing a sustainable HIV response for children and adolescents in the Province?
6. What is the role of civil society in contributing towards epidemic control for children and adolescents in the Province?
7. How can USAID support civil society for success?

III. INSTRUCTIONS FOR RESPONDING TO THE RFI:

Respondents are encouraged to answer any or all questions in a manner that will add value to USAID/Southern Africa's quest to achieve its purpose regarding this RFI.

In addition to answering the questions above, respondents are requested to submit a Capabilities Statement which describes their experience specifically in the Limpopo Province, indicating their institutional capacity to implement a program or components of a program as conceptually described in this RFI. **The Capabilities Statement should not exceed 2-pages and must include the following information:**

- Technical capacity to successfully provide assistance in one or more component(s) of the RFI;
- Recent projects and results in any/all of the components listed above, noting location of performance, funding sources, program focus, and total amount;
- Organizational capacity to oversee human resources, finances, subcontracts, logistics and donor relations; and
- Existing or potential associations, consortiums, and partnerships (local, regional, or global) in the HIV/AIDS/TB health sector.

USAID welcomes all segments of the public (in the U.S. and abroad) to reply to the RFI. Small businesses are encouraged to respond. Interested organizations must respond in accordance with instructions below.

Responses to this notice must be received by no later than the due date and time specified in this notice. All information provided will become the property of USAID and will not be returned. USAID reserves the right to use information provided by respondents for its purposes. Proprietary information must not be sent.

A. Cover Page

The cover page (one page maximum) must include the following information:

- Organization name and address
- Organization points of contact name,
- UEI number (if applicable),
- telephone number and email address
- *Organization type A*: local entity, international, regional
 - A local entity is defined as an individual, a corporation, a nonprofit organization, or another body of persons that— (1) is legally organized under the laws of South/Southern Africa; (2) has as its principal place of business or operations in South/Southern Africa; (3) is majority owned by individuals who are citizens or lawful permanent residents of South/ Southern Africa; and (4) managed by a governing body the majority of who are citizens or lawful permanent residents of South/Southern Africa.
- *Organization type B*: commercial, public sector, educational institution, non-profit, etc.
- If applicable, socioeconomic status, e.g., other than small business, small business, woman owned, veteran-owned, etc.

B. Technical Response

Please provide comments and responses to any of the questions listed above, not to exceed five (5) pages.

The subject RFI does not constitute a Request for Proposals (RFP) or Notice of Funding Opportunity (NOFO). Responses to this RFI shall not be portrayed as proposals or applications and will not be accepted by the U.S. Government (USG) to form a binding agreement. This RFI is not to be construed as a commitment by the USG to issue any solicitation or ultimately award of any types of contract/agreement based on this RFI, or to pay for any information submitted as a result of this request. Respondents are solely responsible for all expenses associated with responding to this RFI. If a NOFO is issued, it will be announced on <https://www.grants.gov>. It is the respondent's responsibility to monitor the site for the release of any further information. Responding to this RFI will not give an advantage to any organization in subsequent procurements. USAID/Southern Africa will not provide answers to any questions submitted in response to this RFI.

Please do not submit applications, resumes or marketing material as they will be discarded and your broader RFI responses will not be considered. Responses will be held confidential. Proprietary information should not be sent. Submissions will not be acknowledged, nor will responses be returned. USAID/SA may use any information provided for planning purposes. Telephone calls, postal mail and hand-carried documents will not be accepted

Responses to this RFI must be sent to the following email address: pretoriaapplications@usaid.gov, with a subject line: "Response to RFI-674-23-Limpopo OVC Activity " no later than the date and time shown above.

We appreciate your contribution and look forward to receiving your comments.

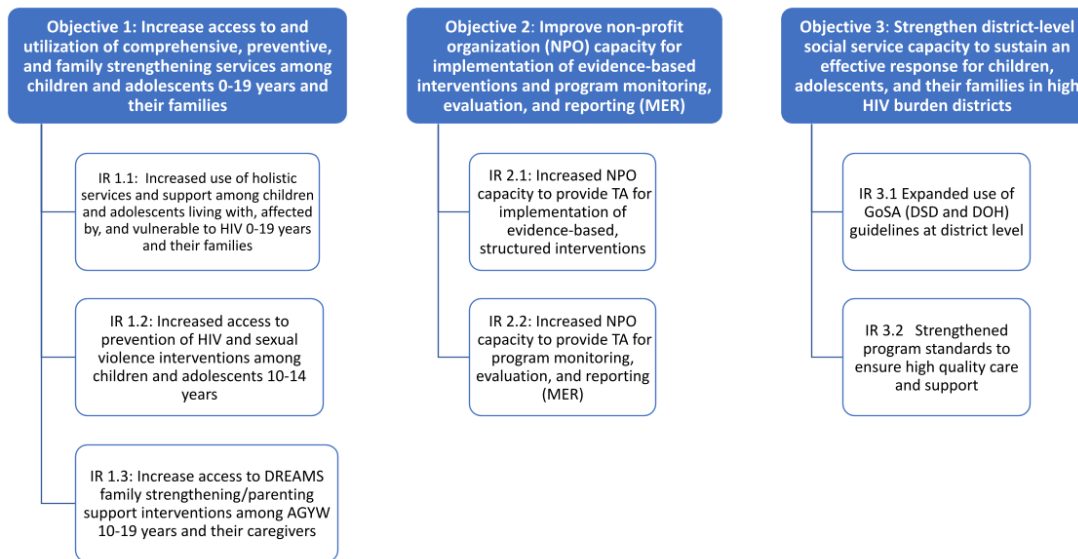
Mei Mei Peng



Contracting and Agreement Officer

Attachment 1: Draft Conceptual Results Framework for the USAID Limpopo OVC Activity

Activity Goal: to improve the health, well-being, and protection of children and adolescents (and their families) living with, affected by, and vulnerable to HIV through high-impact service delivery and district-level social service system strengthening to sustain an effective response for children, adolescents, and their families in Limpopo Province.



(END OF REQUEST FOR INFORMATION – RFI-674-23-Limpopo OVC Activity)