**ANNOUNCEMENT**

CALL FOR LOCALLY LED DEVELOPMENT CONCEPTS ON **STRENGTHENING MATERNAL, NEWBORN, AND CHILD HEALTH CARE IN SENEGAL**

ADDENDUM # 25 TO
LOCALLY LED DEVELOPMENT ANNUAL PROGRAM STATEMENT
**APS No.: 7200AA19APS00007**

**APPLICANTS - PLEASE NOTE**: This is an addendum to an existing announcement. All interested organizations must carefully review both this addendum AND the full announcement, which can be found here**:** https://www.grants.gov/search-results-detail/314757
Important information contained in the full worldwide announcement is not repeated in this specific addendum.

This program is authorized in accordance with the Foreign Assistance Act of 1961, as amended.

Through this Addendum to the Locally Led Development Annual Program Statement (APS) No. 7200AA19APS00007 USAID/Senegal is making a special call to local actors for the submission of concepts focused on strengthening maternal, newborn, and child health care in Louga, Matam, and Saint-Louis regions of Senegal. The deadline for concept submissions is May 6, 2024.

The purpose of the Strengthening Maternal, Newborn, and Child Health Care Activity is to reinforce the quality of the health care provided in health facilities in the three regions, including supporting the functionality of obstetrical surgical units (*blocs* in French) and neonatal care services and improving the quality of family planning, maternal and child health (MCH), and nutrition services available in health facilities.

The anticipated mechanism is one fixed amount “renewal” award for specific programmatic activities and milestones. Eligibility is limited to local organizations in Sénégal per the eligibility criteria requirements and definition in Section 3 of this addendum. The anticipated overall funding for the initial three-year Strengthening Maternal, Newborn, and Child Health Care Activity is $3 to $6 million. Should USAID pursue a renewal award to extend the award beyond three years, it will conduct a programmatic review in the third year. Following the programmatic review, USAID will request a renewal application including a technical and cost

application. The total period of performance covered by both the initial award period and the renewal award period may be up to a maximum of five years.

The funding breakdown by program area is approximately as follows:

- 60 percent for maternal and child health
- 25 percent for family planning
- 15 percent for nutrition

The Locally Led Development APS (link to French version: https://www.grants.gov/search-results-detail/314757 ) and this addendum (provided in French as attachment) have been translated into French for the convenience of local partners**.** If there are discrepancies between the English language version and the French version of either document, the English language version will control.

Unless otherwise stated herein, all terms and conditions of the Locally Led Development APS apply (https://www.grants.gov/search-results-detail/314757).

**Section 1: Background**

Maternal health is one of the Senegalese government's priorities, as stated in the National Health and Social Development Plan (PNDSS 2019-2028). Since 2010, significant efforts have been made, leading to the maternal mortality ratio dropping from 392 to 236 per 100,000 live births (Demographic Health Survey (DHS) 2017). The World Health Organization (WHO) found that as countries increase their cesarean section rates up to 10 percent, maternal and neonatal mortality decrease. In Senegal, the cesarean rate is four to five percent. Immediate postpartum hemorrhage (IPH) is the most serious complication of childbirth. In Senegal, it occurred in 3.1 percent of deliveries and represented 32 to 37 percent of direct causes of maternal death. Hemostasis hysterectomy, often unexpected during a cesarean section, remains the essential maternal life-saving procedure in cases of IPH that have not responded to medical and surgical techniques. Health providers must be equipped to provide cesarean section and hysterectomy and to detect, prevent, and manage postpartum hemorrhage and other complications.

The neonatal mortality rate remains high at 21 per 1000 live births (Continuous DHS (cDHS) 2019) and represents around 40 percent of the under-five mortality. Basic neonatology units (unites legeres de neonatologie) in health centers with maternity wards and obstetric units manage mild to moderate neonatal pathologies and provide pre-referral care in more serious situations. The functioning of neonatal units requires well-trained medical personnel under the supervision of a pediatrician as well as adequate equipment.

Contraceptive prevalence rate has risen from 16 percent to 26 percent (cDHS 2019), but unmet need for family planning (FP) remains high (21.7 percent, cDHS 2019), especially for long-acting FP methods and permanent voluntary methods (tubal ligation and vasectomy), as well as FP in the postpartum period. To increase contraceptive prevalence rate and reduce unmet need, obstacles to the provision of quality FP services, including postpartum and post-abortion FP must be addressed, including implementing high-impact practices in family planning (https://www.fphighimpactpractices.org/fr/).

In Senegal, nearly two million girls and women have undergone female genital mutilation (FGM) (UNICEF report). The prevalence of FGM is 24 percent and highly influenced by ethnicity (DHS 2017). Of women aged 15 to 49 in Senegal, 27 percent report experiencing domestic violence since the age of 15 (cDHS 2017). Health providers can increase access to key support services for FGM and gender-based violence (GBV) survivors', including adolescent-friendly reproductive health and rights information and services, and legal, psychosocial, and medical support.

Senegal has made progress in reducing stunting and anemia in women of reproductive age from 72 percent in 2010 to approximately 49 percent in present days. However, one of the top nutritional concerns is micronutrient deficiency, including iron, vitamin A, and zinc, affecting 60 percent of children under five years old and 54 percent of women of reproductive age. Deficiencies are partly attributed to diets that do not provide sufficient micronutrients. In Senegal, only 20 percent of children aged six to 23 months meet the minimum dietary diversity score, and 31 percent meet the minimum meal frequency score. Regional Health Directorates and districts implement nutrition interventions such as the clinical prevention and management of acute malnutrition in children and nutritional support to pregnant and breastfeeding women.

## Section 2: Objectives

The purpose of the Strengthening Maternal, Newborn, and Child Health Care Activity is to reinforce the quality of the healthcare provided in health facilities in the three regions through three Intermediate Results (IRs):

- IR1: Obstetrical surgical units (*blocs* in French) and neonatal care services in three regions are functional per Policies, Norms, and Protocols document
    - 1.1: Adequate staffing for surgical blocs to function
    - 1.2: Train, coach, and supervise providers to improve obstetrical and neonatal care services
    - 1.3: Equipment maintenance plans are implemented
    - Note: The procurement of equipment necessary for surgical blocs and neonatal care facilities will be done through another USAID mechanism.

- IR2: Improve the quality of family planning, maternal and child health (MCH), and nutrition services available in health facilities
    - 2.1: Train, coach, and supervise providers in maternal and child health, nutrition, and reproductive health/family planning services
    - 2.2: Ensure a well-functioning referral system between the community and health facilities
    - 2.3: Increase the quality of interpersonal communication skills of health providers to ensure respectful maternity and health care
    - 2.4: Analyze and use data to improve health service provision

Building on the approaches suggested above, applicants are encouraged to suggest other creative approaches that are important to local stakeholders in support of the IRs.

USAID would like the organization to coordinate with other partners (USG and non-USG) and build upon investments made by USAID. The recipient is expected to work closely with the Ministry of Health, with the regional health directions and health districts.

Local actors are <u>not</u> required to propose a fully designed activity for this addendum -- a concept is requested that suggests a process to identify and then act on solutions from the local context and is fully supported by the Locally Led Development APS.

**<u>Section 3: Eligibility Criteria</u>**

USAID welcomes concepts from a wide variety of local actors who bring an understanding of the development challenges facing their communities, country, or regions or who demonstrate a way to determine local priorities in their approach. Eligible applicants:

1. Must be local entities in Senegal. When determining if an entity is a "local entity" for the purposes of this APS, USAID will consider:
    a. Whether the entity is legally organized under the laws of Senegal;
    b. Whether the entity has its principal place of business or operations in Senegal;
    c. Whether the entity is majority owned and controlled by individuals who are citizens or lawful permanent residents of Senegal; and
    d. Whether the entity is managed by a governing body, the majority of whom are citizens or lawful permanent residents of Senegal.
2. Cannot have received more than $5 million in direct funding (as a prime awardee) from USAID in the previous five fiscal years.
3. Cannot be a U.S.-based organization. U.S.-based organizations are not eligible as prime awardees under this APS.

Note: For purposes of this definition, “majority-owned’ and “-managed by” include, without limitation, beneficiary interests and the power, either directly or indirectly, whether exercised or exercisable, to control the election, appointment, or tenure of the organization's managers or a majority of the organization's governing body by any means.

USAID understands that individual applicants may not have every skill and capacity to achieve the full range of objectives alone. Teaming arrangements and partnerships are therefore encouraged with one primary applicant and one or more sub-applicants to ensure successful performance.

**Section 4: Locally Led Development Approaches**

Applicants are encouraged to incorporate one or more of the following approaches in their proposed activities or propose a different approach(es) that reflects the Applicant’s own locally led development learning goals.

1. **Mechanisms** that improve the flow of information among the applicant and its own constituents, partners, and USAID to strengthen accountability to local constituents for achieving and sustaining results.
2. **Participatory analytical approaches**, which may provide a better understanding of the complex environments in which the program will operate.
3. **Participatory decision-making**, which includes locally led priority-setting, collaborative design, and other means of shifting decision-making power and control to local actors, including people who have traditionally been marginalized, such as women, youth, religious and ethnic minorities, and gender diverse people, ensuring inclusive local leadership.
4. **Mobilizing local resources**, which includes local philanthropy; partnerships that leverage resources from the local private sector, faith-based organizations, government, civil society, and academia; and other sources of local skills and finances to replace those of international donors.
5. **Strengthening local networks**, which may include understanding and supporting existing and emerging networks of local actors, supporting the work of local organizations, market facilitation, collective action, collective impact, and other demand-driven approaches to connecting local needs with local resources.
6. **Locally/community-led approaches to design, monitoring, evaluation, and learning** that prioritize local/community definitions of success and enhance local actors’ role in managing and using data and learning related to development solutions, the development process, and the sustainability of results achieved.

7. **Strengthening local capacity**, which includes strengthening the role of local institutions and actors to sustain development outcomes with an eye toward ending the need for foreign assistance.
8. **Adapting and problem solving in non-permissive environments**, where uncertainty, instability, inaccessibility, or insecurity constrain the ability to operate safely and effectively. This may include environments such as those affected by natural disasters, inaccessible physical geographies, active conflict, corruption, closing political spaces, criminality, and pandemics, where local approaches are essential for long-term resilience and sustainability.

For further information on USAID's Locally Led Development Initiatives and locally led approaches, please visit the Local, Faith, and Transformative Partnerships Hub website.

## Section 5: Budget Considerations

As stated in its Local Capacity Strengthening Policy, USAID must consider the potentially disruptive role that foreign assistance plays in local systems and support these systems to eventually move beyond the need for international donor funding. It is not USAID's intention to temporarily flood a local organization with funding, artificially expanding its size beyond what can reasonably be supported through local resources after an award ends. As part of concept submissions, Applicants must propose a budget that reasonably reflects their existing resources and capacity to grow in a sustainable way (sometimes referred to as "absorptive capacity").

## Section 6: Merit Review Criteria

Concepts meeting the eligibility criteria (see Section 3, Eligibility Criteria) will be evaluated based on the merit review criteria below:

### A. Locally Led Development

The Applicant demonstrates a strong understanding of the local context and priorities and is transparent, accountable, and responsive to the people they serve. The proposed approach and any teaming arrangements effectively shift priority-setting and decision-making power to diverse local actors, including people who have traditionally been marginalized, such as women, youth, religious and ethnic minorities, and gender diverse people. The Applicant demonstrates a strong commitment to learning that advances the practice of locally led development for themselves, their constituents, and the wider development community. USAID's investment in this work is expected to strengthen the capacity of local organizations, networks, and/or communities to deliver results beyond the end of the funded activities.

In addition, the following evaluation criteria specific to USAID/Senegal will be used:

**B. Technical Approach**

How well the concept paper proposes strong and sound approaches to achieve the objectives and results described in Section 2: Objectives.

**C. Organizational Capacity**

How well the Applicant (and its sub-awardees if applicable) demonstrate the institutional capacity to achieve the expected outcomes detailed in the Technical Approach.

While merit criteria are paramount, cost considerations may also be a factor for award. The U.S. Government is not obligated to make an award on the basis of lowest proposed cost or to the Applicant with the highest merit evaluation score.

## Section 7: Submission Instructions

Concepts are to be sent to USAID**/**Senegal at **SenegalHealthAPS@usaid.gov** . Concepts must be submitted by **May 6, 2024** to be considered.

Concepts must be submitted as a concept paper not exceeding five pages in total length (excluding the summary information).

Concepts must be submitted in English or in French**.**

Applicants must provide the following information in concept submissions:

**A. SUMMARY INFORMATION (not included in five pages)**

1. Name and contact information of the Applicant
2. Organization type and country of legal registration
3. Statement that the Applicant is a "local entity" per the definition in Section 3, Eligibility Criteria.
4. Statement that the Applicant has not received more than $5 million in funding from USAID in the previous five fiscal years as a prime recipient.
5. Title of proposed activity
6. Location of proposed activity
7. Name, contact information, and country of legal registration for other partner organizations collaborating on concept (if any)
8. Overall objective and locally led development approach of activity (2-3 sentences)
9. Amount of funding requested from USAID $ _____

10. Explanation of how the requested funding amount reasonably reflects the organization's/consortium's existing resources and capacity to grow in a sustainable way. (Consider: your organizations' current budget, existing human resources, whether/how you'd like your organization(s) to grow over the next several years, and what local resources are available to support your growth after USAID funding ends). (2-3 sentences for each prime organization and any sub-partners)

**B. NARRATIVE DESCRIPTION**

Successful narrative descriptions will include a clear and logical overview of the applicant's proposed technical approach. They will include discussion of the components below. Please note that each component aligns with a specific merit review criterion in Section 6, Merit Review Criteria.

**B.1. Locally Led Development (One Page):**

- What are the local challenge(s) that this concept addresses? How do local people experience the challenge(s), and what is important to them? How do you know?
- How will you enable diverse local actors, including marginalized people and any partners, to lead priority-setting and decision-making?
- What is your approach to learning? How will you share what you learn? With whom?
- How will you strengthen the capacity of local organizations, networks, and/or communities to deliver results beyond the end of the funded activities?

**B.2. Technical Approach (Three pages):**

- What strategies and activities do you propose to achieve the objectives outlined in section two?
- How will your approach improve the health status of participants, including women, men, newborns, children, youth, and disadvantaged populations?
- How does the proposed technical approach support or relate to the *Plan National de Développement Sanitaire et Social* (PNDSS) 2019-2028?
- What is your approach to monitoring and evaluating the project?

**B.3. Organizational Capacity (One Page):**

- Describe the organizational capacity – technical, managerial, financial, etc. – the organization (and any collaborating organizations, if any) has to carry out the proposed activities in the three focus regions of Louga, Matam, and Saint-Louis.
- Briefly describe programs or projects of similar size or scope that the organization (and any collaborating organizations, if any) has implemented.
- If proposing a partnership, describe and define the role of other entities/organizations.

**Section 8: Selection Process and Co-Creation**

USAID/Senegal is responsible for the selection process and management of any awards issued under this Addendum. USAID/Senegal will confirm receipt of the concept within one week of submission.

USAID/Senegal will use the following selection process:

**Step 1** - Concept review: All merit review criteria are weighted equally in each phase of the selection process. USAID/Senegal will first review each concept submission and provide a pass/fail rating. Concepts will receive a pass rating if they adequately address the merit review criteria and a fail rating if they do not adequately address the merit review criteria. USAID/Senegal will then review and rate the "passing" concepts with an adjectival rating system (exceptional, very good, satisfactory, marginal, and unsatisfactory) to select the applicant(s) for the co-creation process.

Prior to award, USAID/Senegal and the Applicant will have significant interaction in-person, via phone, and/or electronically. If selected to co-create an activity with USAID/Senegal, the Applicant will be contacted by an Agreement Officer (AO) from USAID/Senegal and will be given instructions for the co-creation period and pre-award requirements. Applicants not selected to advance will also be notified.

Step 2 - Pre-award Assessment: USAID/Senegal will work with the selected applicants to conduct an Organizational Capacity Assessment (OCA) and an eligibility checklist after selection.

Step 3 - Co-creation: USAID/Senegal may decide to invite more than one Applicant to enter a period of individual (one-on-one) or multi-stakeholder co-creation. In a multi-stakeholder co-creation exercise, they will collaborate on and refine approach(es) with one another and USAID for award consideration. USAID/Senegal anticipates that the co-creation process may begin on/about **July 22, 2024** and last approximately two weeks.

Step 4 - Award: Depending on the results of the co-creation process and the OCA, USAID/Senegal may issue Request(s) for Application to the entity submitting the accepted concept or decide to enter directly into negotiations and award development.

Section 9, Federal Award Information of the Locally Led Development APS includes the requirements that an applicant must meet if they are requested to co-create an activity and receive an award from USAID. Please note that **these requirements do not have to be met in order to submit a concept under the APS.**

**Section 9: Sharing of Concepts**

If USAID identifies opportunities to strengthen or fund a concept or application by connecting it with other USAID mechanisms, other potential funders, and/or external partners, USAID may make that concept or application available internally or externally for up to one year from receipt of the concept for appropriate consideration.

**Section 10: Questions and Further Assistance**

Questions regarding this addendum may be directed to SenegalHealthAPS@usaid.gov no later than **March 25, 2024**. USAID/Senegal intends to hold a pre-concept submission conference in French on **March 28, 2024** at 10:00 am local time. The conference will be held on the Google Meet platform at this link: https://meet.google.com/eym-ezss-hyw. After a presentation of the funding opportunity and application process, including the concept note submission instructions and a complete description of a final award document and all of its elements, prospective Applicants may ask questions via the chat function on Google Meet. All questions must be submitted in writing via the chat function. In addition to oral responses provided during the conference, USAID will respond to all questions in writing. Responses will be posted on the Grants.gov web page for the Locally Led Development APS.

Before submitting a concept, applicants are highly encouraged to read through USAID's resources for organizations seeking funding and partnership opportunities, including How to Work with USAID and workwithusaid.org. The first link contains various "how to" modules with which your organization should familiarize itself. We would like to draw your attention to Module 8 and the Quick Reference Resources PDF which includes multiple links that address compliance as it relates to applicable laws, regulations and award conditions. Additionally, USAID's Automated Directives System Chapters 303 (Grants and Cooperative Agreements to Non-Governmental Organizations), 310 (Source and Nationality Requirements for Procurement of Commodities and Services Financed by USAID), 320 (Branding and Marking) and ADS 303mat (Standard Provisions for Fixed Amount Awards to Nongovernmental Organizations) are key references that would guide implementation should your organization become a USAID recipient (https://www.usaid.gov/about-us/agency-policy/series-300).

For additional information on the Locally Led Development APS objectives and requirements, please refer to the Locally Led Development APS, which can be found at the following website: https://www.grants.gov/search-results-detail/314757.