



2025 Call for proposals L'Initiative

CALL FOR PROPOSALS GUIDELINES

Publication date: 20/11/2024

Reference: 24-2025-INIT-RSS-APR-01

Strengthening health systems (HSS) at all levels (Community to National)

"Human resources for health, at the heart of HSS"

 **Please read the full guidelines carefully**

Deadline for call: 21 JANUARY 2025 At 12:00 NOON (UTC+1)

1. OVERVIEW OF L'INITIATIVE

L'Initiative is a funding mechanism implemented by Expertise France launched at the end of 2011, which complements the work of the Global Fund to Fight AIDS, Tuberculosis and Malaria. It provides technical assistance and catalytic funding to around forty Global Fund recipient countries to improve the effectiveness of their grants and strengthen the health impact of funded programs. In this way, L'Initiative contributes to ensuring the effectiveness of pandemic responses and health systems.

L'Initiative is now a key Global Fund impact partner. The funding mechanism places France and stakeholders it works with - research actors, civil society, public agencies, etc. - in an unprecedented position in the response to AIDS, tuberculosis and malaria and supporting health systems. L'Initiative's funding comes from a percentage of France's contribution to the seventh replenishment of Global Fund resources. L'Initiative is managed by a steering committee, chaired by the French Ministry for Europe and Foreign Affairs (MEAE). L'Initiative operates under the supervision of the MEAE.

For the year 2025, L'Initiative is launching **two separate but complementary channels** for project funding:

- 1) The **first channel** is for **new projects across the three standard L'Initiative calls**:
 - This call (24-2025-INIT-HSS-APR-01) on strengthening health systems (HSS) at all levels (from community to national), with a particular focus on capacity strengthening of health personnel.
 - Call for projects 24-2025-INIT-VP-APR-02 on strengthening the role of key and vulnerable populations (VPs) to improve their health and well-being.
 - Call 24-2025-INIT-APR-OR-03 on operational research focused on resistance-related issues.

- 2) The **second channel** is focused exclusively on "**next phase projects**" for **projects previously funded by L'Initiative**, to continue and expand existing successes and/or scale up their interventions. This channel aims to fund projects focused on health systems strengthening (call 24-2025-INIT-HSS-AP0-01) or strengthening the role of key and vulnerable populations (call 24-2025-INIT-VP-AP0-02).

2. OVERVIEW OF THE HSS CALL FOR PROPOSALS

The integrated and cross-cutting approach to the three pandemics, which is set out in the call on Strengthening the Role of Key and Vulnerable Populations (PV) _24-2025-INIT-PV-APR-02 and the Operational Research (RO)_24-2025-INIT-RO-APR-03 call, is complemented in this call through **strengthening health systems at all levels (from community to national), with a particular focus on strengthening the capacities of health workers**, who are often excluded from health systems.

L'Initiative's aim is to achieve universal access to health and to eliminate the HIV and AIDS, tuberculosis and malaria pandemics. L'Initiative's main objective is therefore to support and foster the involvement and enhance the performance of an ecosystem of committed individuals, national authorities and organizations working on responses tailored to all populations affected by the three pandemics.

L'Initiative is fully aware that achieving the pandemic targets set out in SDG3 of the 2030 SDGs, which is central to its mandate, is impossible without strengthening health systems (HSS), especially in the most fragile states.

Strengthening Human Resources for Health (HRH) is a priority area for France's global health interventions and is one of the main targets of L'Initiative's interventions for the current cycle 2023-2025. France's new global health strategy¹ 2023-2027 identifies Human Resources for Health as the cornerstone of all health systems. HRH ensures the availability, continuity, accessibility and quality of services, the resilience of health systems, health security and universal health coverage.

France's interventions align with the World Health Organization (WHO) Global Strategy on Human Resources for Health, which acknowledges that "health workers are essential to build strong and resilient health systems that contribute to the achievement of the Sustainable Development Goals and targets related to nutrition, health, education, gender equality, employment and reducing inequalities". Together with the Global Fund partnership, L'Initiative is committed to making health systems, including community-based systems, more equitable, sustainable, resilient, adaptive and people-centered.

All the more so as all countries currently face difficulties and shortages in human resources for health, due in particular to a lack of investment in health systems and in emergency preparedness and response, which has been further exacerbated by the COVID-19 pandemic. This particularly the case in sub-Saharan Africa, where the number of care providers (doctors, nurses, midwives) does not reach the threshold of 4.45 per 1,000 inhabitants, below which a country cannot provide 80% of basic care, including the provision required to achieve the Sustainable Development Goals on health².

In light of the multiple challenges faced by health systems and the challenge of eliminating the HIV, tuberculosis and malaria pandemics by 2030, **L'Initiative has chosen to make strengthening human resources for health a priority for the 2023-2025 funding cycle.**

1 https://www.diplomatie.gouv.fr/IMG/pdf/a4_strategie_sante_mondiale_v4_cle059d18.pdf

2 WHO Global Strategy on Human Resources for Health: Workforce 2030, p.2 https://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_R19-en.pdf (last accessed: October 2023)

3. AIM OF THIS CALL FOR PROPOSALS

It is against this backdrop that L'Initiative plans to support projects that take a systemic approach to sustainably strengthening health systems, health systems policy and regulation, organizational structure and the behaviors and practices of key stakeholders, including taking a "One Health" approach. This approach prioritizes strengthening human resources for health and integrates a human rights and gender equality approach into all activities³.

Under this call for proposals, L'Initiative will therefore be particularly focused on the promotion and prioritization of measures aimed at:

1. Strengthening human resources for health through, in particular:

L'Initiative's definition of human resources for health (HRH) refers to all medical, paramedical and non-medical staff, including all community health workers, who carry out different roles in the health system, making it possible to address health issues and respond as a priority to Sustainable Development Goal 3 ("good health and well-being").

- **Interventions to strengthen initial and ongoing training for human resources for health** as a key catalyst to ensure effective provision to the population, i.e. having sufficient numbers of health personnel that are sufficiently competent and qualified to meet needs.
 - Promoting training that provides certificates and diplomas, including for community health workers.
 - Promoting gender mainstreaming as a major determinant of health in the training curricula for health professionals.
 - Promoting training that follows international guidelines.
 - Promoting the availability and quality of educational infrastructure and equipment.
 - Professional, teaching and interpersonal skills of trainers.
 - Management and accreditation of programs.
 - Geographic spread of training programs and internships to ensure a good distribution of health professionals.

- **Interventions to support policies, programs and to strengthen and manage human resources for health, aimed in particular at:**
 - Geographic planning and distribution of human resources for health based on demographic and health data.
 - Programs to structure and forecast plan professions.
 - More efficient distribution of tasks.

³ L'Initiative has produced a webinar on gender to help technical experts incorporate gender issues into their technical assistance assignments. The webinar includes four tools: an introduction and overview video, and three modules "Gender and pandemics", "Gender and types of support" and "Gender and assignment methodologies". This tool was designed for the Expertise Channel and is also useful for project development and implementation. An indicative bibliography is also available. The webinar can be accessed here: <https://www.initiativeSpour100.fr/encourage-prise-en-compte-du-genre>

- Occupational health.
- Regulating health professionals in the public, private, for-profit and not-for-profit sectors.
- Recruitment and professional integration methods for young graduates.
- Quality and practice checks.
- Health professional status, particularly community health professionals.
- Financing and remuneration of health personnel and benefits allowing for their retention in the system, good living conditions and a safe professional environment conducive to delivering quality care, as well as local support/mentoring, etc.
- Gender mainstreaming and diversity in human resources for health policies, procedures and interventions.
- Integration of mental health into health services.

Of the key issues relating to HRH, this call for proposals aims to take action around:

- Strengthening community health systems through training and support for community actors.
- Gender equality and preventing discrimination.
- Improving the quality and acceptability of health services, including⁴ how welcoming they are.
- Improving the quality of health services and the care relationship.

2. Strengthening national systems for procurement and supply management (PSM) systems for drugs and health products, as well as strengthening pharmaceutical governance⁵ including linkages with national and regional drug agencies.

3. Projects that align HIV, tuberculosis and malaria control programs with sexual and reproductive health, maternal⁶, child and adolescent health programs and integrated service delivery platforms at all levels of the health system, including at the community level.

4. Strengthening health information systems, with particular focus on the production and use of safe, quality, timely, transparent and interoperable health data, respecting human rights and in accordance with the 14 ethical principles for the primary and secondary use of health data adopted and promoted in global health by the European Union⁷.

4 <https://www.who.int/news-room/fact-sheets/detail/human-rights-and-health>

5 To find out more, applicants are advised to look at the resources available on L'Initiative's website, including the cross-cutting evaluations "Civil society capacity strengthening", "Strengthening the skills of health personnel": <https://www.initiative5pour100.fr/documents/renforcement-de-societe-civile-vis-du-fonds-global-202>

6 Prevention, screening and treatment of human papillomavirus (HPV) and related cancers or any other sexually transmitted infection, combating gynecological and obstetric violence or sexual mutilation, menstrual hygiene, accessibility/quality/availability/acceptability of contraceptive/family planning products and services (including safe abortion), comprehensive sexuality education, sexual mutilation etc.

7 Principles available here: European Ethical Principles for Digital Health

Cross-cutting theme:

(!) All projects must integrate a cross-cutting approach aimed at combating gender inequalities, in order to accelerate efforts to promote gender equality in health systems, in terms of human resources for health (combatting gender-based and sexual violence against health professionals, combatting professional inequalities in recruitment, awareness raising around gender equality in initial and ongoing training) and in access to care.

- The needs of women, men and people who do not adhere to gender norms must be systematically taken into account, in an effort to address existing inequalities, especially in terms of vulnerabilities to pandemics and in accessing care. This approach to gender also relates to health systems, by working to ensure effective participation of women in health systems and to provide quality services and products for each specific population group.

Lead applicants should note:**o Partnerships:**

L'Initiative encourages the implementation of projects in multidisciplinary partnerships and with a variety of actors, including health authorities, research actors, civil society and the private sector. For projects that respond to area 1 on HRH, an arrangement or partnership with and by public institutions is highly encouraged.

o Ownership:

Where national policies, plans and strategies exist, projects will need to demonstrate that they are aligned with them. If they do not exist, priority will be given to support to develop them. Projects must be co-developed with all partners, stakeholders and beneficiaries.

o Impact:

Projects must bring about a change on the ground in the practices of health professionals, be sustainable and bring about improvements in the delivery of health services.

o Cross-cutting gender integration:

The approach to gender must be presented in a cross-cutting way, whether it is during the design, implementation or coordination of projects. Carrying out a gender assessment at the beginning of the project is highly encouraged.

In order for proposed activities to be relevant, it is crucial for projects to include a cross-cutting approach to gender in their design, implementation and coordination. Projects must specifically take account of the needs of women, men, and people who do not adhere to gender norms. They must aim to bridge existing inequalities and transform the roles assigned by society to men and women, as well as the power relations between men and women, which reinforce these inequalities, particularly in terms of vulnerability to pandemics and access to care. This gender approach must also apply to key populations, who are not homogeneous populations; they have different needs according to their gender and age, and are especially vulnerable to violence, particularly gender-based violence. In this respect, L'Initiative strongly encourages lead applicants to include a specific or general objective in their projects that explicitly focus on promoting gender equality.

o Operational research:

Projects may include operational research activities (e.g. carrying out a *baseline* study, testing an innovative approach or tools, using social science methodologies to demonstrate the relevance and effectiveness of a selected approach), but they must not constitute the main focus of the project.

o Provide integrated, people-centered quality services:

Proposed projects should ensure the integration of responses to pandemics and other health issues and prevent a siloed approach that would not benefit all health systems. A focus on co-infections and comorbidities could be developed, as well as streamlining care and people-centered prevention pathways.

o Fostering a systemic and integrated approach:

Proposed projects should aim to sustainably strengthen health systems, their policy and regulation, their organizational structure, the behavior and practices of actors by integrating the activities, interventions and mechanisms rolled out through the health system.

o Catalytic scope:

Projects must be able to change health practices and/ or policies.

o Scale up:

Anticipation of potential scale-up, where it is possible and desired, must be presented from the outset.

4. ELIGIBILITY CRITERIA

Expertise France will check in the first instance that each project submitted responds to all the eligibility criteria.



PROJECTS THAT RESPOND TO ALL THE CRITERIA BELOW WILL BE DEEMED ELIGIBLE

- 1. Project duration** must be between **36 and 48 months**.
- 2. The total requested grant amount** must cover at least 50% of the project budget and be between **€650,000 and €3,500,000**.
- 3. It must be submitted by a lead applicant**, in collaboration with “implementing partners” or “associate stakeholders”:
 - The “**lead applicant**” is the organization that submits the letter of intent and completes the full proposal if they are pre-selected. Lead applicants are the sole recipients of L'Initiative grants and shall be individually responsible vis-à-vis Expertise France for implementation of the Project.

The project lead applicant must be **legally registered and have a board of directors / management committee and a registered headquarters in an eligible country or in France**. International organizations⁸, with the exception of regional non-state organizations, may not be the lead applicant or an implementing partner of projects. However, they can be associated stakeholders that do not receive any delegated budget.

The lead applicant must have been **legally registered for at least 3 years** at the time of project submission.

Lead applicants and implementing partners must not have any statutory provisions that prevent Expertise France, or any external auditor appointed by Expertise France, to carry out on-the-spot checks and inspections and have relevant rights to access the project sites and premises where the project will be carried out, including access to all documents and electronic data relating to the technical and financial management of the project.

**/ ! ** Organizations can be the lead on a maximum of two projects under this call for proposals and on a maximum of three projects across all of L'Initiative's 2025 calls for proposals.

- “**Implementing partners**” that are involved in the design and implementation of the project must receive **sub-granting from the lead applicant** who is the sole recipient on behalf of all Partners of the payments made by Expertise France. The Lead Applicant shall then pay, without undue delay, the amounts due to each Partner.

Organizations can be implementing partners, even if their board /steering committee and head office are registered in a non-eligible country. This is on the condition that there is proven and robust **collaboration with the lead applicant and that the budget delegated to them / their partners does not exceed in total 15%** of the grant from Expertise France, regardless of the number of implementing partners registered in a non-eligible country.

⁸ United Nations and associated agencies, regional state organizations

- “Associated stakeholders” are other organizations linked to the project but are **not sub-granted to** (other donors, beneficiaries, national institutions, etc.).

/ ! \ There is no limit with regard to being an implementing partner or associated stakeholder under L’Initiative 2025 calls for proposals.

4. The lead applicant must have sufficient management capacity to manage the requested budget.

The average annual cost of the project⁹ **must not exceed 70% of the total annual costs** (expenses) of the lead applicant. For the purpose of this call for projects, total costs (expenditure) are calculated based on the 2023 financial report (income statement and balance sheet), validated at a General Assembly or any other governance body.

5. Co-financing is required for a minimum of 10% of the total intervention budget if the lead applicant's annual expenditure is more than 5 million Euros:

- Co-financing can take two forms - *in cash* or in kind:
 - o “**Co-financing in kind**” means that **the lead applicant does not contribute money**, but instead contributes **through the value** of goods, services or physical resources **made available to the project**. Instead of providing **monetary funds**, **the lead applicant** contributes in kind by making material assets or specific skills available to support the project.
This type of co-financing will be included in the budget and assessed on the basis of the market value/actual cost of the contributions, so that these non-monetary resources are integrated into the overall project budget.
For example: for a project that involves construction, co-financing in kind could consist of the provision of construction materials, specialized labor or land. For research projects, this could involve the provision of laboratories, scientific instruments or research time.
 - o “**Cash co-financing**” means **the lead applicant contributes funds to** cover specific expenses related to the project.

Under L’Initiative's calls for projects, lead applicants can choose what type of co-financing they want to contribute, which could be both forms of co-financing simultaneously.

- The need for co-financing is determined by the total expenditure set out in their **2023 financial report** (income statement and balance sheet) approved by a General Assembly or other governance body that the lead applicant has in place.
- If co-financing has **not yet** been confirmed at the time of submitting the project proposal, this should be mentioned in the proposal forms (letter of intent and administrative form). However, it should be noted that co-financing will be requested if your project is pre-selected and if you are not able to provide proof of it, this constitutes a reason for rejecting the application.
- Lead applicants with annual expenditure under 5 million Euros that **voluntarily** include a co-financing amount will be judged favorably.
- If a proposed project receives **co-financing from AFD or Expertise France, which** is confirmed or anticipated, or any other French bilateral financial or human support, the lead applicant must:
 - o Provide an overview of the project and its financing in a transparent way, from the

statement of intent stage (achievements, request, period, type of contract, reference, etc.).

- If the lead applicant has co-financing from another French stakeholder, they should plan for consultations to take place between the French co-financers prior to funding being approved to ensure that accountability requirements are met with regard to our supervisory bodies and to prevent the risk of duplicate funding.

⁹ Calculated based on the total project budget, not the proportion requested from L'Initiative.

6. Be implemented in one or more of the 38 eligible countries listed below:

 Algeria	 Guinea-Bissau
 Benin	 Haiti
 Burundi	 Laos
 Cambodia	 Lebanon
 Cameroon	 Liberia
 Central African Republic	 Madagascar
 Chad	 Morocco
 Comoros	 Mauritius
 Congo	 Mauritania
 Ivory Coast	 Mozambique
 Democratic Republic of the Congo	 Myanmar
 Dominican Republic	 Rwanda
 Djibouti	 Senegal
 Equatorial Guinea	 Sierra Leone
 Ethiopia	 Thailand
 Gabon	 Togo
 Gambia	 Tunisia
 Ghana	 Ukraine
 Guinea	 Vietnam

- / ! ** Submitted projects may be implemented in one or more of the countries on this list. Projects must not exceed three implementation countries unless they are supported by a network or a pre-existing regional non-governmental organization.
- / !! ** In such cases, projects must not exceed five implementing countries. Multi-country projects must be part of a clearly justified regional dynamic.
- / !!! ** **Single-country projects** must be carried out with **at least one implementing partner registered in the project country**. If the lead applicant is registered in the country of implementation, they are not required to delegate budget to associated stakeholders.
- / !!!! ** **Multi-country projects** must be carried out with **at least one implementing partner in each country**.

Projects that do not meet all of the eligibility criteria will be deemed ineligible and will be rejected without being assessed. A criteria checklist is attached to these guidelines.

5. ELIGIBILITY OF COSTS

Eligible costs	Ineligible costs
<ul style="list-style-type: none"> ▪ Human resources: including employer contributions and any costs included in the remuneration package. ▪ Direct costs required for successful project implementation (e.g. dissemination of information, translations, printing, insurance, etc.), including the cost of financial services (in particular the cost of transfers and financial guarantees) set out in the budget. ▪ Transport costs: <ul style="list-style-type: none"> - Any form of return journeys, which must be in economy class for air transport, unless prior specific authorization is given in writing by Expertise France. - Rental or purchase of vehicles essential to implementing activities that are key to the project being delivered effectively. ▪ Living expenses (per diems): staff and other persons participating in the project. The maximum amount corresponds to the rate set by the French Ministry of Economy and Finance¹⁰. The per diem rates for national staff and participants must be set in agreement with Expertise France. ▪ Equipment, software and other IT tools: purchase or rental justified by the specific needs of the project in line with the market price. ▪ Constructing, refurbishing or upgrading buildings: justified if specific activities are being implemented, or if it makes it possible to reduce dependence on fossil fuels. ▪ Costs relating to prevention, diagnosis 	<ul style="list-style-type: none"> ▪ Any costs that exceed the salaries and costs normally incurred by the lead applicant or, where applicable, its partners, unless a prior justification has been given indicating why the additional amounts are essential for project implementation. ▪ Civil servants' salaries or any other salaries already funded by another program, including by the Global Fund. ▪ Operating costs of Country Coordinating Mechanisms (CCMs). ▪ Transport and/or subsistence costs that do not correspond with sound management and are not economically advantageous for the project. ▪ Organizational costs, other than administrative costs (7% maximum). ▪ Debts and provisions for losses or debts. ▪ Interest on debts. ▪ Costs already covered under a different framework. ▪ Purchasing land or buildings. ▪ Exchange rate losses. ▪ Loans to third parties. ▪ Transport costs and subsistence allowances for Expertise France staff. ▪ Unauthorized cascade funding (regranting or subgrants). However, project implementation in partnership with other organizations involving financial transfers is possible subject to: <ul style="list-style-type: none"> - The partnerships are set out in the various call for projects documents (in particular the action plan, budget and risk management table). - The projected costs relating to the interventions they are involved in are detailed in the same way as the other projected project costs.

and patient care activities at community level provided that they are not already fully covered by the Global Fund or by the government.

- Initial or ongoing training activities, including costs related to training, such as workshops, tutorials, field exercises, etc.
- Activities to support the HRH labor market and support public policies.
- Health product procurement only in the context of pilot or innovative interventions aimed at scale-up or activities related to operational research.
- Costs specifically related to monitoring, evaluation and learning (human resources and activities):
 - These costs must represent between 5 and 10% of the total intervention budget, of which 2 to 3% will be devoted to a mid-term evaluation for Projects requesting 1 million Euros or more from L'Initiative. The costs should represent 2 to 3% of the MEAL costs, but should not exceed €50,000. The final evaluation does not need to be budgeted by the lead applicants.
- A contingency allowance of up to 5% of the intervention budget.
- Operating costs of up to 10% of the intervention budget.
- Any other type of expenditure not covered by the list of ineligible costs opposite.

¹⁰ Available here: http://www.economie.gouv.fr/dgfip/mission_taux_chancellerie/frais

Please take note of the following points:

- Projects requesting funding from L'Initiative of 1 million Euros or more must plan and budget for (human resource and activity costs) a **mid-term evaluation** under monitoring, evaluation and learning costs. We recommend that the budget for the mid-term evaluation should be between 2% and 3% of the project budget, but should not exceed €50,000.
- An external final evaluation may be conducted by L'Initiative on certain projects. Therefore, no final evaluation costs need to be included in the project budget.

6. ASSESSMENT CRITERIA

Projects submitted under this call for proposals will be assessed over two phases:

- I. Phase I from December 2024 to April 2025: submission, assessment and pre-selection of letters of intent.
- II. Phase II from April to October 2025: a list of lead applicants will be pre-selected to submit a full project proposal. Full project proposals will be assessed and then presented to the selection committee in October 2025.

Phase I assessment criteria

The evaluation criteria for Phase I are as follows:

- **Compliance of the project** objectives with the call for proposals and with the guiding principles and priorities of the French global health strategy.
 - **Selection of project beneficiaries** that is relevant and consistent with their needs.
 - **Relevance of the proposed approach** and intervention methods.
 - Clear approach to **strengthening the capacity and skills of HRH** based on a needs assessment.
 - The project takes a **cross-cutting approach to gender**.
 - There is a **strong logic in relation to strengthening work and complementarity** with Global Fund grants.
 - **Geographic relevance and coherence**, particularly for multi-country projects.
 - **Budget** requested and management capacity: consistency between the level of budget requested and the project's planned activities; assessment of the team within the organization assigned to administrative and financial management and finally the organization's capacity to manage similar funding.
 - **Relevance of the partnership and capacity strengthening**: a greater level of diligence will be given to capacity strengthening of local organizations, which requires budget delegation. For **single-country projects** led by a local organization that is not obliged to delegate budget to partners, the quality of the partnership approach as well as the proposed activities to enable capacity strengthening will be assessed systematically.
 - **A holistic approach**, focused on people and their needs, including those located furthest from the health system, will be regarded particularly favorably in terms of the desired impact of proposed activities.
 - Partnerships as part of project implementation **with government stakeholders in relation to HRH** (ministries,) and training bodies will be viewed as beneficial.
 - If the letter of intent relates to continuing **or renewing a project already funded by L'Initiative**, there will be a considerable focus on the results achieved by the previous project, the learning that has been come from it and the inclusion of a project exit strategy and a plan for the sustainability of activities.
 - Projects that promote an **inclusive and integrated response to different health issues** faced by populations, including combatting pandemics, will be of particular interest. This may involve systemic interventions relating to policies and regulations, organizational structures, as well as the behaviors and practices of key stakeholders.
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The scoring grid for the letters of intent, with the weighting of each criterion, is available in the consultation file (DCE), which can be downloaded from the POPs call for proposals submission platform¹¹.

Phase II assessment criteria

During phase II, the following areas will determine whether projects are selected for funding (**more detail on these areas will be given to pre-selected applicants at the end of phase 1 - they are provided here for information only**):

- **Context:** quality of the analysis and response to identified needs (geographic relevance, added value, alignment with National Strategic Plans, complementarity with existing interventions, etc.).
- **Complementarity and alignment with Global Fund grants.** Letters of support from the CCM(s) of the relevant countries will be judged favorably.
- **Strong linkages and involvement of implementing partners and stakeholders.** Relevance of activity distribution by sector of intervention, the expertise and management capacity of the lead applicant and implementing partners.
- **Intervention Logic:**
 - Relevance of the project objectives (general and specific).
 - Consistency of activities with expected outcomes.
 - Selection and involvement of beneficiaries, gender balance.
 - Skills and capacity strengthening: based on a structured methodology (needs assessment, baseline and expected target groups, training approach: (e.g. articulation of theory to practice, training plan, how achievements are assessed, translating knowledge into practice).
- **Robust project monitoring and evaluation system:** robustness and structure of the logical framework, quality of indicators, dedicated human and material resources for monitoring and evaluation, monitoring and evaluation plan, inclusion of a mid-term evaluation if required by level of funding, a systematic learning process from the outset and throughout the project to facilitate the scale up of good practices and sharing of results. Methodological resources will be made available by L'Initiative to support future lead applicants.
- **Exit strategy: sustainability of project outcomes beyond the funded activities.** Clear plans for financial and institutional sustainability must be articulated.
- **Cross-cutting approach that is sensitive to gender and human rights** and takes into account the specific needs of women, men, and people who do not adhere to gender norms, to address inequalities and transform the roles attributed by society, which increase vulnerabilities to pandemics and access to healthcare.
- **Budget:** general consistency with planned activities, distribution between lead applicant and implementing partners, eligibility of costs, precision of calculations. Particular attention will be paid to the proportion of lead applicant's annual budget already funded by L'Initiative.

¹¹ https://pops.expertisefrance.fr/sdm/ent2/gen/ficheCsl.action?PCSLID=CSL_2024_bGJmME0ieU

- **Inclusion of technical expertise** to strengthen the organizational and/or technical capacity¹² of the lead applicant and / or partner organizations will be judged favorably - the needs identified must be described and justified in the project proposal.

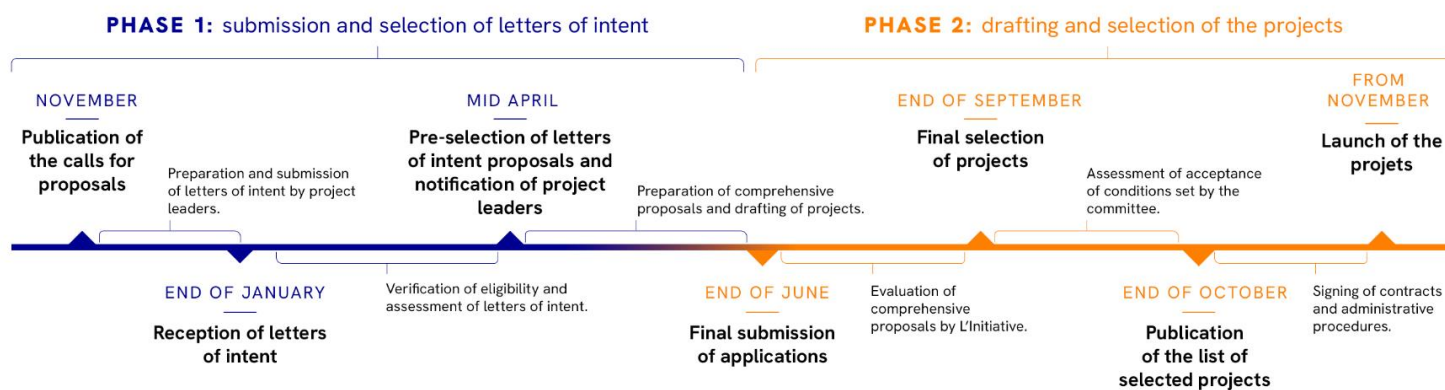
Additional Assessment (without scoring):

- A management capacity assessment will be carried out for lead applicants based on the organization's information, experience, accounting system in place, and its financial and organizational capacity.
- Finally, although it is not an evaluation criterion, L'Initiative encourages lead applicants to include focus on environmental and health concerns from the project development phase and throughout implementation: limiting travel responsible for greenhouse gas (GHG) emissions, such as short trips by plane or car where online interactions can be used instead; constructing / refurbishing buildings in line with improved resilience standards relating to extreme natural events, constructing / refurbishing buildings with high overall energy efficiency (including thermal) and reducing dependence on fossil fuels.

¹² Gender mainstreaming approach, monitoring and evaluation, governance, financial management, etc.

7. PROJECT SELECTION

Timeline



Selection committee

The preselection committee¹³ is composed of members of L'Initiative's Steering Committee.

The Global Fund to Fight AIDS, Tuberculosis and Malaria is also invited to participate in the pre-selection committee.

Committee decisions are discretionary and cannot be appealed.

The grant agreement for each project selected by L'Initiative Preselection Committee must be signed and project implementation must start within 12 months of the selection notification date. Funding for projects that do not meet these conditions will be withdrawn.

Expertise France reserves the right to exclude any project from this call for proposals if the content demonstrates any of the following:

- Strong similarities with a third-party source (study, another project, etc.), without referencing the third-party source.
- Or is similar in all respects to a third-party source (study, other project, etc.), without referencing the third-party source.

¹³ Composition of this committee may be subject to change.

8. PROPOSALS: DOCUMENTS TO PROVIDE

The consultation file and these guidelines are available in French and English on the Expertise France POPs call for proposals submission platform¹⁴.

Applications can be submitted in French or English by lead applicants in agreement with their partners and/or stakeholders involved in implementing the proposed project.

Documents for the first phase of the call for proposals to link to your “application” on the POPs platform:

1. **Letter of Intent** (Annex 1).
2. **Admin form** (Annex 2).
3. A **copy of the lead applicant's statutes** (if in a language other than French or English, a simple translation will be required).
4. **Proof of registration** of the lead applicant organization, to include their registered address (if in a language other than French or English, a simple translation will be required)
5. Proof that the lead applicant has **complied with social and tax duties in the country of registration (e.g. latest URSSAF certificate [body responsible for the collection and distribution of social security contributions] certificate** if the lead applicant is registered in France or equivalent available, last tax certificate or equivalent available).
6. **Full 2023 financial report** (income statement and balance sheet) of the main lead applicant, validated at the General Meeting or any other governance body.
7. **The lead application organization's last annual activity** report.
8. **The lead applicant organization's last validated audit report** (if not available during Phase I, please note that this report will be mandatory if you are pre-selected for Phase II).
9. **Letters of support from** the CCM(s) of the relevant countries (if not available during Phase I, please note that signed letters will be mandatory if pre-selected for Phase II).

Documents for the second phase of the call for projects to link in your application on the POPs platform:

1. **Full project proposal submission form** (Annex 1).
2. **Logical framework** (Annex 2).
3. **Activity timeline** (Annex 3).
4. The project **budget** (Annex 4.1) and instructions for use (Annex 4.2).
5. Overview of planned **human resources** (Annex 5).
6. Risk management table (Annex 6).
7. Lead applicant **capacity analysis** form (Annex 7).
8. **Gender mainstreaming** checklist (Annex 8).
9. Monitoring, evaluation and learning needs self-assessment (Annex 9).
10. **Lead applicant organization's latest validated audit report** (mandatory if not provided in Phase I).
11. **Letters of commitment** from each of the project implementing partner organizations (mandatory if not provided in Phase I).
12. **Letters of support from** CCM(s) of the relevant countries (mandatory if not provided in Phase I).

The lead applicant can attach any additional documents they deem necessary for their project to be assessed (evaluation report, learning documents, etc.).

¹⁴ https://pops.expertisefrance.fr/sdm/ent2/gen/ficheCsl.action?PCSLID=CSL_2024_bGJmME0ieU

9. HOW TO SUBMIT PROPOSALS

Lead applicants will have to register (from 20 November 2024) on the POPs platform¹⁵ to be able to access the proposal documents.

They will be guided through the platform to fill in the necessary information online and upload the proposal documents by 21 January 2025 at 12:00 noon (UTC+1).

Two information sessions will take place (in French with simultaneous interpretation in English) to guide lead applicants on submitting their online proposal:

- 2 December 2024 at 10:00 (UTC+1)
- 7 January 2025 at 10:00 (UTC+1)

If you wish to participate, please register using the following link:

<https://expertise-france.formalto.app/fDZyljegyN>

If you encounter problems accessing the platform, lead applicants can contact the POPs platform support service:

- Calling from Outside Europe/ France: +33 (0)892 23 21 20 (0,35 euros/min)¹⁶
- Calling from Europe/ France: +33 1 73 25 21 20 (toll-free number)
- By email: support@achatpublic.com

The technical service may ask you to download the remote office application *AnyDesk*¹⁷, to be able to provide you with remote support on your computer.

Or contact L'Initiative's team by sending an email to: aap.linitiative@expertisefrance.fr.

Any application documents received after 21 January 2025 at 12:00 (UTC+1) or proposals that are incomplete will not be processed.

(!) We highly recommended that you start uploading proposal documents to the POPs platform as soon as possible, and not wait for the deadline (21 January 2025 at 12:00 UTC+1) to take account for the time needed to upload them, which may vary depending on the size of the documents and the quality of your internet connection.

¹⁵ https://pops.expertisefrance.fr/sdm/ent2/gen/ficheCsl.action?PCSLID=CSL_2024_bGJmME0ieU

¹⁶ If it is not possible to call this premium number, email the support service at POPs and request a call back. Make sure that 1) you are available on the number provided and 2) you share your number using this format: +country code/(0)number

¹⁷ <https://anydesk.com/fr/downloads/windows>

10. QUESTIONS

All questions relating to this call for proposals must be sent via the POPs submission platform **no later than 14 January 2025 at 12:00 noon (UTC+1)**.

Answers to questions received within the allotted time will be gradually posted on the POPs platform (in the "questions/answers" section). It is the responsibility of each organization to check for responses posted on L'Initiative website.

L'INITIATIVE

Sida, tuberculose, paludisme

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