



**2025**

# Call for Proposals L'Initiative

CALL FOR PROPOSALS GUIDELINES

Publication Date: 20/11/2024

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

**Next phase projects focused on  
"Strengthening Health Systems" at all levels  
(from 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. BACKGROUND AND OVERVIEW OF L'INITIATIVE

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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). Funded under program 209 "Solidarity with developing countries", L'Initiative operates under the supervision of the MEAE.

L'Initiative aims to provide access to health for all and eliminate the HIV, tuberculosis and malaria pandemics. Its main objective is therefore to support and foster the involvement and performance of an ecosystem of committed individuals, national authorities and organizations working on responses adapted 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<sup>1</sup> and is one of the main targets of L'Initiative's interventions for the current cycle 2023-2025. France's new global health strategy 2023-2027 identifies Human Resources for Health as the cornerstone of all health systems<sup>2</sup>.

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. 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.**

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<sup>1</sup> France's actions are consistent with the WHO's Global Strategy on Human Resources for Health (HRH), "recognizing that health workers are essential to building strong and resilient health systems that contribute to achieving sustainable development goals and targets related to nutrition, health, education, gender equality, employment, and reducing inequalities."

<sup>2</sup> [https://www.diplomatie.gouv.fr/IMG/pdf/a4\\_strategie\\_sante\\_mondiale\\_v4\\_cle059d18.pdf](https://www.diplomatie.gouv.fr/IMG/pdf/a4_strategie_sante_mondiale_v4_cle059d18.pdf)

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## 2. OVERVIEW OF L'INITIATIVE'S 2025 CALL FOR PROPOSALS

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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**:
  - 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 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-OR-APR-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-APO-01) or strengthening the role of key and vulnerable populations (call 24-2025-INIT-VP-APO-02).

### 3. AIM OF THIS CALL FOR PROPOSALS

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This call is focused exclusively on the series of projects aimed at strengthening the role of key and vulnerable populations. L'Initiative intends to continue its support to interventions and approaches that have demonstrated effectiveness and for which a next phase grant would enable the results achieved to be deepened or scaled up.

Supported projects may fall into one or more of these categories. Next phase projects are those that are supported for a second phase or more, that focus on:

- Integration by national policies (strategic plan, health program, integration into the health system); and/ or by funding from the Global Fund or other donors.
- Activities being replicated and adapted for other beneficiaries and/or expansion to other regions/districts/cities.
- Going more in depth with the approach developed.
- Transferring to a local lead implementer.
- Continuation project.

Replicating a project or approach in a new country, if it does not include the country / countries from the previous phase, is considered to be a new project.

L'Initiative plans to support next phase projects that take a systemic approach to enhance the strengthening of health systems, their policy and regulation, their organizational structure, and the behaviors and practices of actors.

HSS next phase projects should also prioritize strengthening human resources for health<sup>3</sup> and integrate human rights-based and gender equality approach into all activities<sup>4</sup>.

**Proposed interventions will focus in particular on:**

#### 1. Strengthening human resources for health through:

- **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.

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<sup>3</sup> 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").

<sup>4</sup> L'Initiative has produced a webinar on gender to help technical experts incorporate gender issues into their technical assistance assignments. The webinar comprises 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 (Canal Expertise) and is also useful for project development and implementation. An indicative bibliography is also available. The webinar can be viewed here: <https://initiative.expertisefrance.fr/thematique-transversale/genre-et-dssr/>

- 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.
  - 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.
- 2. Strengthening national systems for procurement and supply management (PSM) systems for drugs and health products, as well as strengthening pharmaceutical governance<sup>5</sup> including linkages with national and regional drug agencies.**
- 3. Projects that align HIV, tuberculosis and malaria control programs with sexual and reproductive health, maternal<sup>6</sup>, child and adolescent health programs and integrated service delivery platforms at all levels of the health system, including at the community level.**

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<sup>5</sup> 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>

<sup>6</sup> 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.

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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 Union<sup>7</sup>.

**All next phase projects will also continue and strengthen a cross-cutting approach to increasing the rights of women and adolescent and young girls to access health and address 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 will have to be systematically taken into account** through targeted provision of quality services and products for each population group specifically.

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<sup>7</sup> Principles available here: [European Ethical Principles for Digital Health](#)

**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. With a view to building country ownership, next phase projects should integrate public institutions into projects through a contract or partnership with the lead applicant. Next phase projects must demonstrate an integration of national stakeholders, both in terms of national authorities, target communities and also Global Fund teams, where appropriate.

**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. In this regard, next phase projects should set out the top-level results achieved by the project funded previously and how the next phase will deepen or increase improvements to service delivery.

**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.

**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 Scale up :**

Anticipation of potential scale-up, where it is possible and desired, must be presented from the outset. The following will be considered to be project scale up:

- Integration by national policies or integration of activities into projects financed by the GF or other donors.

- And/or replication and adaptation of their activities for other beneficiaries and/or other countries.
- Expansion within the same country to other regions/districts/cities. Projects will need to present what is being scaled up from the previous funded project and the planned scale up strategy. Projects must specify whether the approach (innovation or model) has already demonstrated credibility, relevance, a comparative advantage compared to existing practices, feasibility, compatibility or suitability to the context and actors, and the (initial) results achieved. Where appropriate, a presentation of the strategy and methods for demonstrating the relevance, feasibility, acceptability and/ or success of the "model" is expected (e.g. study, research, learning processes, modelling, evaluation, economic analysis).

If a project includes scale-up, the planned scale-up and the implementation approach must be presented. The lead applicant's capacity to ensure scale up and identify partner strengthening needs or potentially capacity transfers, and planned methods (technical skills, management, training & supervision, advocacy, etc.) may also be presented.



## 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 organizations<sup>4</sup>, with the exception of regional non-state organizations<sup>8</sup>, 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.

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<sup>8</sup> United Nations and associated agencies, regional state organizations

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.

- **“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 the 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 project<sup>9</sup> **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.

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

**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.).
  - o 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.

**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.
- / !!!! \** Les **projets multi-pays**, doivent être exécutés avec **au moins un partenaire de mise en œuvre dans chacun des pays**.

**Next phase projects must relate to the initial implementation country.**

**If the project will take place in a new country, it is not considered a next phase project and you will have to apply through the "standard" VP/HSS calls for proposals.**

**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"> <li>▪ Human resources: including employer contributions and any costs included in the remuneration package.</li> <li>▪ 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.</li> <li>▪ Transport costs: <ul style="list-style-type: none"> <li>- 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.</li> <li>- Rental or purchase of vehicles essential to implementing activities that are key to the project being delivered effectively.</li> </ul> </li> <li>▪ 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 Finance<sup>10</sup>. The per diem rates for national staff and participants must be set in agreement with Expertise France.</li> <li>▪ Equipment, software and other IT tools: purchase or rental justified by the specific needs of the project in line with the market price.</li> </ul>	<ul style="list-style-type: none"> <li>▪ 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.</li> <li>▪ Civil servants' salaries or any other salaries already funded by another program, including by the Global Fund.</li> <li>▪ Operating costs of Country Coordinating Mechanisms (CCMs).</li> <li>▪ Transport and/or subsistence costs that do not correspond with sound management and are not economically advantageous for the project.</li> <li>▪ Organizational costs, other than administrative costs (10% maximum).</li> <li>▪ Debts and provisions for losses or debts.</li> <li>▪ Interest on debts.</li> <li>▪ Costs already covered under a different framework.</li> <li>▪ Purchasing land or buildings.</li> <li>▪ Exchange rate losses.</li> <li>▪ Loans to third parties.</li> <li>▪ Transport costs and subsistence allowances for Expertise France staff.</li> <li>▪ 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"> <li>- The partnerships are set out in the various call for projects documents (in particular the action plan, budget and risk management table).</li> </ul> </li> </ul>

<sup>10</sup> Available here: [http://www.economie.gouv.fr/dgfip/mission\\_taux\\_chancellerie/frais](http://www.economie.gouv.fr/dgfip/mission_taux_chancellerie/frais)

<ul style="list-style-type: none"> <li>▪ Constructing, refurbishing or upgrading buildings: justified if specific activities are being implemented, or if it makes it possible to reduce dependence on fossil fuels.</li> <li>▪ Costs relating to prevention, diagnosis and patient care activities at community level provided that they are not already fully covered by the Global Fund or by the government.</li> <li>▪ Initial or ongoing training activities, including costs related to training, such as workshops, tutorials, field exercises, etc.</li> <li>▪ Activities to support the HRH labor market and support public policies.</li> <li>▪ Health product procurement only in the context of pilot or innovative interventions aimed at scale-up or activities related to operational research.</li> <li>▪ Costs specifically related to monitoring, evaluation and learning (human resources and activities):             <ul style="list-style-type: none"> <li>- 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.</li> </ul> </li> <li>▪ A contingency allowance of up to 5% of the intervention budget.</li> <li>▪ Operating costs of up to 10% of the intervention budget.</li> <li>▪ Any other type of expenditure not covered by the list of ineligible costs opposite.</li> </ul>	<ul style="list-style-type: none"> <li>- The projected costs relating to the interventions they are involved in are detailed in the same way as the other projected project costs.</li> </ul>
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**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.

*A MEAL toolkit is available for information when developing a robust monitoring, evaluation and learning system to be integrated into the project concept note. It includes a checklist of monitoring, evaluation and learning expectations and activities, a briefing note on mandatory accountability indicators as well as a guide entitled "Guides and tips for working on your project's logical framework."*

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## 6. ASSESSMENT CRITERIA

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The concept note will be assessed based on the following criteria:

- 1) **Consistency with the guidelines:** The project constitutes a next phase project in line with the definition and objectives set out in these guidelines.
- 2) **Presentation of the context and justification for the next phase of the project**
  - a. Context, issues and justification for the next phase of the project.
  - b. Complementarity of the next phase of the project and linkage with programs supported by the Global Fund.
  - c. Complementarity of the next phase of the project and connection with other actors.
- 3) **Intervention logic**
  - a. Overall objective and specific objective(s)
  - b. Outcomes and activities
- 4) **Project monitoring, evaluation and learning: Description of the planned monitoring, evaluation and learning system and dedicated resources for the project.**
- 5) **Operational, financial and political sustainability:** Presentation of the sustainability approach for planned interventions at an operational, financial and political level.
- 6) **Project management**
  - a. Programmatic arrangements
  - b. Financial arrangements
  - c. Visibility and communications
- 7) **The project's cross-cutting approach to gender.**
- 8) **Consistency of the anticipated budget.**

The assessment table used to assess letters of intent showing the weighting for each criterion is available in the information folder that can be downloaded from the POPs call for proposals submission platform POPs<sup>11</sup>.

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<sup>11</sup> [https://pops.expertisefrance.fr/sdm/ent2/gen/ficheCsl.action?PCSLID=CSL\\_2024\\_z5vpUZQ2eK](https://pops.expertisefrance.fr/sdm/ent2/gen/ficheCsl.action?PCSLID=CSL_2024_z5vpUZQ2eK)

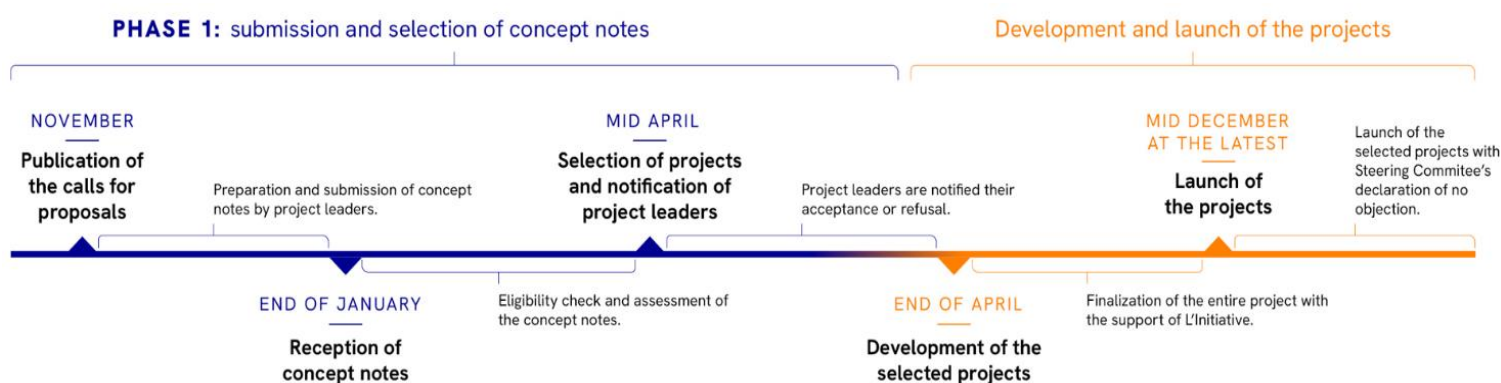


## 7. PROJECT SELECTION

### Timeline

#### Stages :

- I. Phase I from December 2024 to April 2025: submission, review and selection of the **concept note**.
- II. April 2025: projects selection committee.
- III. For selected projects: start-up of the development phase for full project proposals with support from L'Initiative team.
- IV. Full project proposals are submitted to the steering committee for notice of no objection at latest in the December 2025 meeting (to avoid the risk of cancelling project selection and grant award).



### Selection committee

The preselection committee<sup>12</sup> 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.

<sup>12</sup> Composition of this committee may be subject to change.

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## 8. PROPOSALS: DOCUMENTS TO PROVIDE

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

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.

Proposals will be considered complete if all of the documents below are included:

1. **Concept note** (Annex 1).
2. **Admin form** (Annex 2).
3. **Project budget** (Annex 3).
4. 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).
5. **Full 2023 financial report** (income statement and balance sheet) of the main lead applicant, validated at the General Meeting or any other governance body.
6. **Letters of commitment** from each of the project implementing partner organizations.
7. **Letters of support** from the CCM(s) of the relevant countries.

*( ! ) Please note ( ! )*

*If a next phase project will be implemented by a different lead applicant to the previous phase funded by L'Initiative, the following documents must also be attached:*

1. A **copy of the lead applicant's statutes** (if in a language other than French or English)
2. **Proof of registration** of the national lead applicant organization, to include their registered address in the implementation country.
3. The **latest annual activity report**.
4. The latest **last validated audit report**.

The lead applicant can attach any available evaluations, learning documents, studies, etc. to their proposal, that they deem necessary to enhance understanding of the project.

## 9. HOW TO SUBMIT PROPOSALS

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Lead applicants will have to register (from 20 November 2024) on the POPs platform POPs<sup>13</sup> 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:

- 3 December 2024 à 10 : 00 (UTC+1)
- 8 January 2025 à 10 : 00 (UTC+1)

If you wish to participate, please register using the following link: <https://expertise-france.formalto.app/pdCNdsbh2E>

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)<sup>14</sup>
- Calling from Europe/ France: +33 1 73 25 21 20 (toll-free number)
- By email : [support@achatpublic.com](mailto:support@achatpublic.com)

The technical service may ask you to download the remote office application *AnyDesk*<sup>15</sup>, 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](mailto: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.

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<sup>13</sup> [https://pops.expertisefrance.fr/sdm/ent2/gen/ficheCsl.action?PCSLID=CSL\\_2024\\_z5vpUZQ2eK](https://pops.expertisefrance.fr/sdm/ent2/gen/ficheCsl.action?PCSLID=CSL_2024_z5vpUZQ2eK)

<sup>14</sup> 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

<sup>15</sup> <https://anydesk.com/fr/downloads/windows>

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## 10. QUESTIONS

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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 the L'Initiative website <sup>16</sup>.

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<sup>16</sup> [www.linitiative.expertisefrance.fr](http://www.linitiative.expertisefrance.fr)

**L'INITIATIVE**

Sida, tuberculose, paludisme

[www.linitiative.expertisefrance.fr](http://www.linitiative.expertisefrance.fr)

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