**Global Fund Programme South Sudan**

**2021-2023 Implementation Period**

**Call for Proposals for Sub-Recipients for HIV, TB and Resilient and Sustainable Systems for Health (RSSH) programmes in South Sudan**

1. **BACKGROUND**

UNDP partners with the Global Fund to Fights, AIDS, Tuberculosis and Malaria (the Global Fund) to support and strengthen national responses to HIV, tuberculosis and malaria. The objective of this partnership is to ensure access to quality health services for all and to enable all those living or affected by the diseases to live healthy and productive lives while enjoying full social inclusion. The partnership leverages UNDP’s global mandate to strengthened institutions to deliver universal access to basic services and to rebuilding resilient and sustainable health and community systems in crisis and post-crisis settings.

In South Sudan, UNDP has been the Principal Recipient (PR) of Global Fund grants on behalf of the Government of South Sudan (GOSS) since 2004 when the Global Fund's Additional Safeguards Policy was applied limiting the role of national entities to function in this capacity. Since then, working in partnership the Ministry of Health (MOH) and other national stakeholders, UNDP has been managing the Global Fund's support for HIV, TB and Resilient and Sustainable Systems for Health (RSSH) programmes in South Sudan. This support is aimed at providing TB and HIV services and strengthening the country’s health and community systems. Under the current allocation period 2018-2020, UNDP as PR manages a grant portfolio of US$50 million and supports the MOH and other partners to implement HIV and TB programmes across the health sector.

In May 2020, the South Sudan Country Coordination Mechanism (CCM) submitted a Funding Request for the next Global Fund allocation period running from 2021-2023. The total value of the submission was US$71 million to sustain and expand HIV, TB and RSSH programmes. After receiving a positive review from the Global Fund's Technical Review Panel, negotiations will soon begin to finalise the grant agreement so that implementation may begin in January 2021.

To prepare for this negotiation, UNDP, as the PR for the new grant, is moving to put in place the necessary implementation arrangements. For this reason, it is seeking submissions from qualified non-governmental organisations and other registered entities in South Sudan to participate in the implementation of the grant as **Sub-Recipients (SRs)**.

**This Call for Proposals sets out all of the relevant information and minimum requirements for preparing these submissions**.

1. **OPPORTUNITY**

The is opportunity is open to eligible and qualified organisations to assist UNDP to implement interventions according to the following programme areas:

**HIV**

* Design and implementation of combination HIV prevention programmes for key and vulnerable populations, especially older adolescents and young people; uniformed personnel; key populations;[[1]](#footnote-1) prisoners and other detainees; refugees, internally displaced people (IDPs) and other populations of humanitarian concern.
* Support for prevention of mother-to-child-transmission of HIV (PMTCT) services, especially community mobilisation/demand creation and follow-up support for HIV-affected mothers, children and families.
* Support for adults and children living with HIV to access and remain on anti-retroviral therapy, especially community-based programmes for demand creation, practical support (nutrition, income generation, for example), treatment literacy, stigma reduction, adherence, and retention.
* Community-based delivery of HIV treatment, care and support services.

**TB**

* Design and implementation of TB prevention and awareness interventions in communities, especially for key at-risk populations.[[2]](#footnote-2)
* Interventions in communities for adults and children diagnosed with TB to access and remain on TB therapy until cured.
* Practical and psychosocial support for adults and children undergoing treatment for multi-drug resistant tuberculosis (MDR-TB).

**Health and community systems**

* Strengthening the involvement of local civil society and civil society organisations in the national response to HIV and TB.
* Strengthening the meaningful involvement of people living with/affected by HIV and/or TB, and members of key and vulnerable populations in national responses to HIV and TB.
* Interventions to reduce human rights and gender-related barriers to HIV and TB services.

Further details on each Module is provided in Annex I. **Applicants may apply for one or more Modules.**

1. **ELIGIBILITY CRITERIA**

The parameters that will determine whether an entity is eligible to be considered by UNDP will be based on the Request for Information (RFI) provided in Annex II.

1. **PROPOSAL REQUIREMENTS**

Applicants will submit **separate technical and financial proposal.** The **Technical Component** shall follow the format indicated in Annex III.

The **Financial Component** will be comprised of the following an itemised budget per component **not to exceed the designated budget ceilings** for each module following the format indicated in Annex III Section 9.

1. **SELECTION CRITERIA & METHODOLOGY**
2. **Potential SRs will be selected based on the following criteria:**
* The proposed SR has previous/current experience as an implementing partner under current/previous Global Fund grants or other relevant health sector initiatives.
* The proposed SR has capacity and a track-record to mobilise funding for other sources, particularly for its institutional support needs.
* There is a commitment and a track-record of supporting institutional capacity building of national or local entities.
* The proposed SR has capacity to implement programmes across different diseases and/or more than one Module.
* The proposed SR has a commitment to and a track record of supporting primary health care integration.
* The proposed SR has a track record in engaging communities and mobilising their full participation in health programmes, in particular the meaningful involvement of communities most affected by HIV and/or TB.
1. **Proposals will be evaluated according to the following methodology:**

**The evaluation of proposals will follow the quality-based under fixed budget selection (QB-FBS) methodology.**

This methodology takes into account that all submissions will have the same maximum overall price (which cannot exceed the designated fixed budget amount). This means that the evaluation will focus primarily on the quality of the technical proposal. Evaluation of all technical proposals will therefore be carried out according the criteria and scoring process outlined below.

**Note that applicants who exceed the fixed budget ceiling in their financial proposals will be disqualified.**

| **Technical Proposal Evaluation Criteria** | **Score/Weight** | **Points Obtainable** |
| --- | --- | --- |
| 1. | **Eligibility and track-record*** Compliance with minimum eligibility requirements;
* Reputation/track-record of organisation in delivery of health sector interventions in one or more of HIV, TB and health and community systems strengthening;
* Track-record in delivering high quality results in HIV, TB and related health sector interventions, including under previous or current Global Fund grants;
* Track-record working with local national or community level entities for capacity development and programme implementation (including sub-granting);
* Compliance with minimum capacity standards for Global Fund implementers (based on CACHE responses),
 | 30% | 30 |
| 2. | **Proposed methodology*** Shows evidence of technical competence/expertise to deliver selected components;
* Is based on a sound analysis of the progamme context;
* Reflects latest technical guidance/best-practice for programme design/delivery in South Sudan context;
* Follows a clear theory of change or logical framework;
* There are clear links between inputs, implementation modalities, outputs and outcomes;
* Performance framework is clearly articulated with defined indicators, targets, and a routine monitoring and quality assurance process.
* There is meaningful engagement of beneficiaries and most affected communities/individuals;
* There is meaningful engagement of national/local entities for programme implementation and capacity development;
* There is a clear plan to maximise sustainability of results beyond the implementation period;
* Risks have been identified and reasonable mitigation strategies proposed.
 | 40% | 40 |
| 3. | **Programme management structure and qualifications of key personnel*** The programme management structure is clearly defined and well-integrated within the overall management structure of the organisation.
* The programme management structure maximises efficiency
* Key personnel demonstrate experience/expertise in the tasks they will be assigned.
 | 30% | 30 |
|  | **Total** | **100** |

1. **REVIEW PROCESS**

Proposals will be assessed using a five-stage process: (i) determination of eligibility; (ii) technical review of eligible proposals; (iii) scoring and ranking of the eligible proposals based; (iv) round of clarification (if necessary) with the highest scored proposal; and (v) Responsible Party Agreement (RPA) signature.

1. **SELECTION PROCEDURE FOR AWARD OF MODULES**

The applicant which obtains the highest technical score for the Module shall be selected. Applicants may be considered for the award of more than one Module according to the following scenarios:

1. If the proposal of the same receives the highest score for more than one Module, it may be awarded more than one Module as long as its capacity is sufficient to implement the required scope of work. The following criteria shall be used to determine if an applicant has sufficient capacity:
* Experience in OR currently implementing the same/similar scope of work in South Sudan
* Capacity to implement all the activities listed under each Module
* Capacity to achieve all the targets for key indicators
* Capacity to implement activities in geographical areas listed under each Module, either through direct implementation or through partnerships with other national or local entities
* Field presence in key geographical areas listed under each Module OR having existing arrangements with implementing partners at field level in these areas
1. If the proposal of a single applicant is the highest ranked for more than one Module, but its capacity is deemed not sufficient to implement the required scope, the applicant will be awarded the Module(S) in which it achieved the highest score as a result of the technical evaluation and for which they have the capacity to achieve the desired result.
2. **SUBMISSION PROCESS**

Due to Covid-19 prevention measures, applicants must submit electronic copies of proposals and support documents to the following e-mail addresses:

**karin.nasheya@undp.org**

**williams.diing@undp.org**

In order to make it easier to identify your submissions, when submitting your proposals and support documents, your e-mails should be entitled **‘Call for Proposals for Sub-Recipients\_Name of Your Organisation’**.

The proposal submission must contain the following (those that do not will be disqualified):

1. Complete RFI questionnaire and supporting documents.
2. Separate Technical and Financial Proposal (note: proposal shall be submitted in an electronic version. Financial Proposal must be submitted as a separate file encrypted with a password. None of the financial proposal data is disclosed in other documents of the submission. UNDP shall request the password for opening the Financial Proposal only from the Proposers who pass the Technical Evaluation as per the criteria established and disclosed in the call for proposals. The Proposer shall assume the responsibility for not encrypting the financial proposal).
3. Audited financial statements for the previous two fiscal years, including management report and footnotes that accompany the financial statements.

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Submission must be received by **16:00 EAT/Juba** on **7 September 2020**. Late submissions will be rejected.

Applicants shall bear all costs related to proposal preparation and submission.

For additional questions about this Call for Proposals, please e-mail **Karin.nasheya@undp.org**

Note: UNDP reserves the right not to fund any proposals arising from this Call for Proposals.

1. **IMPORTANT ADDITIONAL INFORMATION**

UNDP implements a policy of zero tolerance on proscribed practices, including fraud, corruption, collusion, unethical practices, and obstruction. UNDP is committed to preventing, identifying and addressing all acts of fraud and corrupt practices against UNDP as well as third parties involved in UNDP activities.

(See <http://www.undp.org/content/dam/undp/library/corporate/Transparency/UNDP_Anti_Fraud_Policy_English_FINAL_june_2011.pdf> and <http://www.undp.org/content/undp/en/home/operations/procurement/protestandsanctions/> for full description of the policies)

In responding to this Call for Proposals, UNDP requires all applicants to conduct themselves in a professional, objective and impartial manner, and they must at all times hold UNDP’s interests paramount. Proposers must strictly avoid conflicts with other assignments or their own interests, and act without consideration for future work. All applicants found to have a conflict of interest shall be disqualified.

Without limitation on the generality of the above, applicants, and any of their affiliates, shall be considered to have a conflict of interest with one or more parties in this solicitation process, if they:

* Are or have been associated in the past, with a firm or any of its affiliates which have been engaged UNDP to provide services for the preparation of the design, Terms of Reference, cost analysis/estimation, and other documents to be used in this competitive selection process;
* Were involved in the preparation and/or design of the programme/project related to the services requested under this Call for Proposals; or
* Are found to be in conflict for any other reason, as may be established by, or at the discretion of, UNDP.

In the event of any uncertainty in the interpretation of what is potentially a conflict of interest, proposers must disclose the condition to UNDP and seek UNDP’s confirmation on whether or not such conflict exists.

**ANNEX 1: DESCRIPTION OF MODULES AND BUDGET CEILINGS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Ref.** | **Module** | **Description** | **Quantity/****requirement** | **Location** | **Budget Ceiling (USD)** |
| 1. | Community Support to PLHIV on ART | * Recruitment, training, stipends, supervision and support for expert patients/community treatment supporters.
 | 200 expert patients/community treatment supporters. | Jonglei, Unity, Wester/Norther Bahr El Ghazal; non-PEPFAR-supported counties in Western/Central/Eastern Equatoria, Lakes, Warrap. | $750,000 |
| * Convening, training and support for Community ART Refill Groups.
 | 100 groups by 2023 (10-12 participants/group). | Same as above. | $120,000 |
| * Conceptualisation and implementation of treatment literacy and psychosocial support activities for children/adolescent PLHIV.
 | To be proposed by applicant. | To be proposed by applicant. | $100,000 |
|  |  |  |  | **Sub-total** | **$970,000** |
| 2. | Community Systems Strengthening | * Capacity development and institutional/operational support for national networks.
 | Three networks. | National. | $900,000 |
| * Network building for key and vulnerable populations (KVP)
 | One network. | National. | $215,000 |
| * Design and implementation of community-based monitoring system.
 | 5 states by 2023. | To be proposed by applicant | $600,000 |
|  |  |  |  | **Sub-total** | **$1,715,000** |
| 3. | Community-based HIV Testing Services | * Design and pilot of community-based/self-testing strategies for KVPs (one year).\*
 | To be proposed by applicant. | 1-2 states to be proposed by applicant. | $120,000 |
|  |  |  |  | **Sub-total** | **$120,000** |
| 4. | Programmes to reduce human rights barriers to HIV and TB services | * Design/production of legal literacy ('know your rights') materials for PLHIV/KVPs; convening of community-led legal literacy sessions (one-day, non-residential).
 | To be proposed by applicant. | 3-5 states to be proposed by applicant. | $160,000 |
| * Convening/facilitation of one-day, non-residential meetings/workshops to sensitise law enforcement, health-care workers, others, for enabling environment for KVP services/activities.
 | To be proposed by applicant. | 3-5 states to be proposed by applicant. | $115,000 |
| * Design/production of materials for community level activities to reduce stigma and discrimination.
 | Materials design/production only. | Materials design/production only. | $175,000 |
| * Undertake legal environmental assessment of law, policies and other barriers to access, uptake and retention in HIV and TB services.
 | NA | NA | $125,000 |
|  |  |  |  | **Sub-total** | **$525,000** |
| 5. | HIV and RMNCH integration and ASRHR | * Design and pilot of integrated HIV and RMNCH service provision through preparation of job aids/SOPs; training; supportive supervision for 12-18 months; evaluation.\*\*
 | To be proposed by applicant. | Two states to be proposed by applicant. | $175,000 |
| * Support for design and pilot of adolescent and youth-friendly sexual and reproductive health services through preparation of job aids/SOPs; training; supportive supervision for 12-18 months; evaluation.\*\*
 | To be proposed by applicant. | Two states to be proposed by applicant. | $175,000 |
|  |  |  |  | **Sub-total** | **$350,000** |
| 6. | Laboratory services and support | * Operational support for country-wide sample transport system for EID and VL.
* Technical trainings and mentoring for EID and VL for health service providers.
 | To be proposed by applicant. | Geographic coverage to be proposed by applicant. | $300,000 |
|  |  |  |  | **Sub-total** | **$300,000** |
| 7. | Community support for MDR-TB | * Provision of practical support (nutrition, transport, psychosocial counselling) for MDR-TB patients in communities
 | 100-150 patients/year. | Flexible, patient-centred approach to be proposed by applicant. | $360,000 |
|  |  |  |  | **Sub-total** | **$360,000** |
| 8. | Community support for PMTCT | * Recruit, train, facilitate, supervise mentor mothers/fathers for Demand creation and community support (mentor mothers/fathers) for women on PMTCT and exposed infants.
 | 200 mentors mothers/fathers. | Jonglei, Unity, Wester/Norther Bahr El Ghazal; non-PEPFAR-supported counties in Western/Central/Eastern Equatoria, Lakes, Warrap. | $560,000 |
|  |  |  |  | **Subtotal** | **$560,000** |
| 9. | Combination HIV prevention for adolescents and young people | * Design, capacity-building, implementation of innovative, youth-led, community-level activities for social mobilisation, behaviour change, condom promotion, stigma reduction, GBV awareness.\*
 | To be proposed by applicant. | 3-5 states to be proposed by applicant. | $500,000 |
| * Capacity-building and on-going mentoring of youth networks and up to 3-5 projects per year.
 | 3 networks. | National and/or state level to be proposed by applicant. | $500,000 |
|  |  |  |  | **Subtotal** | **$1,000,000** |
| 10. | Combination HIV prevention for refugees and internally displaced populations | * Implementation of community-led activities for social mobilisation, behaviour change, condom promotion, stigma reduction, GBV awareness.\*
 | 300,000 IDPs/refugees by 2023. | 3-5 POCs/refugee communities to be proposed by applicant. | $450,000 |
|  |  |  |  | **Subtotal** | **$350,000** |
| 11. | Combination HIV prevention interventions for female sex workers | * Implementation of community-led activities for community empowerment, behaviour change, condom promotion, stigma reduction, GBV support interventions in communities for female sex workers.\*
 | 26,000 FSW by 2023. | At least 5-7 locations to be proposed by applicant (excluding PEPFAR-supported sites). | $350,000 |
|  |  |  |  | **Subtotal** | **$350,000** |
| 12. | Combination HIV prevention interventions for uniformed forces | * Design and delivery of innovative combination HIV prevention interventions (including GBV prevention and addictions management) for SSPDF members in communities.\*
 | 70,000 SSPDF members by 2023. | At least 5 locations to be proposed by applicant. | $500,000 |
|  |  |  |  | **Subtotal** | **$500,000** |
| 13. | Tuberculosis | * Community-led interventions for TB awareness, demand creation, TB treatment literacy and support, and stigma reduction.
 | To be proposed by applicant. | At least 5-7 states to be proposed by applicant. | $400,000 |
| * Training and support for provision of TB screening, diagnosis and referral in prisons.\*
 | To be proposed by applicant. | To be proposed by applicant. | $150,000 |
|  |  |  |  | **Subtotal** | **$550,000** |

\*Excludes prevention/treatment commodities;\*\*Excludes incentives for health workers.

**ANNEX II: REQUEST FOR INFORMATION (RFI)**

Applicants are required to complete and submit the questionnaire along with requested supporting documentation. International applicants should submit information pertinent to local operations in South Sudan only.

|  |  |  |  |
| --- | --- | --- | --- |
| **Topic** | **Ref** | **Areas of Inquiry/ Supporting Documentation** | **Response** |
| Proscribed organization | 1.1 | *Is the applicant listed in the UN’s list of proscribed organizations, UNDP Vendor Sanctions List, or indicted by the International Criminal Court?*  |  |
|  | 1.2 | *Is the applicant banned by any other institution? If yes, please provide information regarding the institution and reasons.* |  |
| Legal status  | 2.1 | *Does the applicant have a legal status to operate in South Sudan, and is it compliant with legal requirements of the country’s legal identity and registration*? ***Please provide copies of relevant documents.*** |  |
| Governance and management | 3.1 | *What is the governance structure of the applicant? Please provide a brief description.****Please provide copies of relevant documents such as by-laws, governance manual, board minutes, etc.*** |  |
|  | 3.2 | *What is the organisational structure of the applicant?* ***Please provide an organogram*** |  |
| Donors/partners | 4.1 | *Who are the main donor/ partners of the applicant?****Please provide copies of relevant documents such as most recent annual report.*** |  |
| Geographic focus | 5.1 | *In which geographical areas of the country does the applicant currently operate? If the applicant as regional or state level structures, please indicate.* |  |
| Mandate and constituency | 6.1 | *What is the applicant's mandate, vision, and purpose? (no more than 2 paragraphs)****Please provide copies of relevant documents such as most recent strategic plan.*** |  |
|  | 6.2 | *Is the applicant officially designated to represent any specific constituency (PLHIV, youth, women, for example)? Please explain* |  |
| Areas of expertise | 7.1 | *In which areas does the applicant have expertise in relation to this RFP? List the specific modules.* |  |
|  | 7.2 | *In which other areas does the applicant have expertise? Please list a maximum of five relevant areas.* |  |
| Financial position | 8.1 | *What was the applicants total income/funding received in the preceding 2 years (2017/18, 2018/19)?* ***Please provide financial statements for the past two fiscal years.*** |  |
|  | 8.2 | *What is the applicant's actual and projected inflow of funding for the current (2020) and the following (2021) year?* ***Please provide a list of projects with duration, location and budget for the 2018-2020 period*** |  |
| Public transparency | 9.1 | *What documents or information are routinely shared with the applicant's external audience?* |  |
|  | 9.2 | *How are these documents made available?* |  |
|  | 9.3 | *Does the applicant hold annual general meetings? If yes,* ***please provide minutes from most recent meeting.*** |  |
| Sub-granting/capacity development | 10.1 | *Do the applicant have systems/processes in place to provide sub-grants to local organisations/entities? If yes, please describe and* ***provide copies of relevant documents (policies, guidelines, templates, sub-grantee agreements, etc.)*** |  |
|  | 10.2 | *To which organisations/entities have has the applicant provided sub-grants in the past two-years? Please list project name, duration, sub-grantee and grant amount.* |  |
|  | 10.3 | *What systems/processes does the applicant have in place for capacity development of sub-grantees?* |  |
|  | 10.4 | *What systems/processes does the applicant have in place for proactive risk management of sub-grantees?* |  |

**ANNEX III: PROPOSAL SUBMISSION TEMPLATE**

Please ensure that your submission contains the following sections/information:

**Cover Page**

* Full legal name of organisation
* Modules included in the proposal
* Full name and contact details focal person for the submission

**Proposal summary**

* Maximum 500 words describing applicant, motivation for application and modules included in the application.

**Table of Contents**

**Proposal** (Maximum of 8 pages (single module) or up to 15 pages (multiple modules), 12 point, single space, 2cm margins)

1. **Introduction** (one paragraph)
	* State motivation for submitting application and reasons why applicant is best qualified for the modules included in the application.
2. **Summary of Applicant** (two paragraphs)
	* Provide a brief overview of your organisation and any relevant experience/qualifications in relation to the RFP. Please include any previous experience with Global Fund support.
3. **Overview of Intervention(s)**
	* For each module included in the application, please provide the following:
	1. Name of module
	2. List of objectives/expected outcomes by 2023
	3. Main beneficiaries and locations (if relevant, indicate quantities/types of beneficiaries per location)
	4. Main activities (list each main activity and provide a brief description that address who, how, where, why)
	5. Expected outcomes/benefits (list the main outcomes or significant change for beneficiaries that the intervention is meant to achieve)
4. **Sub-granting Arrangements (one section covering all modules included in the application)**
	* Describe proposed any sub-granting arrangements indicating which interventions/activities will be sub-granted, in which geographic locations, and over what duration.
	* Briefly describe processes for capacity assessment, capacity development, and risk mitigation
5. **Monitoring and Quality Assurance (one section covering fall modules included in the application)**
	* Briefly describe how the intervention/activities would be routinely monitored
	* Briefly describe how quality assurance will be provided on a continuous basis
6. **Project Management (one section covering all modules included in the application)**
* Provide a diagram of project management arrangements
* Provide a brief explanation of the diagram indicating the roles and responsibilities for each position in relation to the proposed modules/intervention(s)
* All proposed levels of management should be included (state and county level, for example)
1. **Risk Management (one section covering all modules included in the application)**
* Provide a table of possible implementation risks and proposed risk mitigation measures. Use the following as a guide:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Assumptions** | **Risks** | **Likelihood** | **Impact** | **Mitigation measures** |
| Qualified staff will be available to support the project. | We cannot recruit enough staff with the right skills. | Low (we have good previous experience with recruitment) | High (if we don't have staff we can't do the project) | We will begin the recruitment process early. We can second/reassign existing staff on an interim basis. |

1. **Proposed Work Plan**
* Please provide a work plan indicating main activities and implementation time periods over the 2021-2023 period.
* If you are applying for more than one module, indicate sections for each module.
1. **Proposed Budget**
* Please provide an indicative budget for each module included in the application.
* Please ensure that the budget includes the following categories (where relevant) and that cost calculations are clearly indicated (unit, unit costs, number of units, frequency, etc.).

**Human resources**

* Positions
* Professional services (consultants, other service providers)

**Travel (staff/supervision)**

* Air travel
* Ground travel
* Accommodation
* Meals/incidentals

**Training**

* Air travel
* Ground travel
* Accommodation
* Meals/incidentals
* Training materials
* Venue costs (hall rental, equipment, etc.)
* Facilitator/trainer fees
* Training materials/stationery

**Materials & equipment**

* Stationery
* Design/production costs
* Printing costs
* Equipment costs (laptops, printers, tablets, etc.)
* Other materials (please specify)

**Operating costs**

* Communications
* Internet
* Rent/utilities
* Sundries

**Other direct costs**

* Audit
* Other costs not included above (please specify)

**Indirect cost**

* Indirect cost allocation (may not exceed 20% of direct cost and must be explained)

**Please provide details notes/justifications for each budget line.**

**Note that applicants who exceed the fixed budget ceilings per module will be disqualified.**

1. **Attachments**

Annex 1: CVs (maximum 3 pages per CV) of key personnel

1. In the context of South Sudan, and within the scope of the new Global Fund grant, key populations are defined as sex workers, men who have sex with men and transgender persons. [↑](#footnote-ref-1)
2. In South Sudan, these populations include adults and children living with HIV; children and adults who are contacts of individuals diagnosed/undergoing treatment for TB; prisoners and other detainees; uniformed personnel living in barracks and other congregate settings; refugees, internal displaced people and other populations of humanitarian concern; and other mobile/migrant populations. [↑](#footnote-ref-2)