

**Health Policy Initiative (HPI)**  
**SECTION A –REQUEST FOR TASK ORDER PROPOSAL (RFTOP)**

**Strengthening HIV/AIDS Policy & Advocacy in the Asia Pacific Region**

1	RFTOP Number	RFTOP No. 486-07-011
2	Date RFTOP Issued	April 20 2007
3	Issuing Office	Regional Office of Procurement, USAID Regional Development Mission/Asia Bangkok, Thailand
4	Contracting Officer	Carey N. Gordon, RCO E-mail: <a href="mailto:cagordon@usaid.gov">cagordon@usaid.gov</a>
5	Proposals to be Submitted to	Praveena ViraSingh, Procurement Specialist Email: <a href="mailto:pvirasingh@usaid.gov">pvirasingh@usaid.gov</a>
6	Proposals Due	May 21, 2007
7	Payment Office	See Section G.4 Invoices
8	Name of Firm	
9	IQC Task Order Number	
10	DUNS number	
11	Tax Identification Number	
12	Address of Firm	
13	RFTOP Point of Contact	Name: Praveena ViraSingh, Procurement Specialist Email: <a href="mailto:pvirasingh@usaid.gov">pvirasingh@usaid.gov</a>
14	Person Authorized to Sign RFTOP	Carey N. Gordon, Regional Contracting Officer
15	Signature	
16	Date	

## **SECTION B – SUPPLIES OR SERVICES AND PRICE/COSTS**

### **B.1 PURPOSE**

The USAID Regional Development Mission/Asia (RDM/A) requires support for the implementation of its Strengthening HIV/AIDS Policy & Advocacy in the Asia Pacific Region under the Health Policy Initiative IQC as detailed in Section C.

### **B.2 CONTRACT TYPE**

This is a cost-plus-fixed fee, completion type task order. For the consideration set forth in the task order contract, the Contractor shall provide the deliverables or outputs described in Section C and comply with all contract requirements.

### **B.3 BUDGET**

a. This is a Cost Plus Fixed Fee (CPFF) Task Order. The estimated cost for the performance of the work required hereunder, exclusive of fee is \$\_\_\_\_\_. The ceiling fixed fee is \$\_\_\_\_\_. The total estimated cost plus fixed fee is \$\_\_\_\_\_.

b. Within the estimated cost plus fixed fee, if any, specified in paragraph (a) above, the amount currently obligated and available for reimbursement of allowable costs incurred by the Contractor (and payment of fee, if any) for performance hereunder is \$\_\_\_\_\_. The Contractor shall not exceed the aforesaid obligated amount unless authorized by the Contracting Officer pursuant to the clause of this contract entitled "Limitation of Funds" (FAR 52.232-22). See Section I of the basic IQC.

c. Budget Schedule:

To be determined.

### **B.4 PAYMENT**

The paying office is as referenced in Section G.4.

### **B.5 OTHER RFTOP INFORMATION**

The final statement of work for the task order that will result from this RFTOP will be incorporated at the time of award and shall be based on the proposal by the successful offeror.

**END OF SECTION B**

## SECTION C – STATEMENT OF WORK

### 1. TITLE

The title of the program in this task order is Strengthening HIV/AIDS Policy & Advocacy in the Asia Pacific Region.

### 2. INTRODUCTION

The purpose of this task order is to provide technical support and ensure achievement of the program objectives to expand and strengthen HIV/AIDS prevention, care and support, treatment and policy/system strengthening services in the Asia Pacific region. Under the task order the contractor shall carry out activities that are country specific as well as activities that are region wide in scope. Activities will initially focus on China and Asia Pacific regional activities, which are not country-specific. Possible expansion to country-specific activities in Burma, Laos, PNG and Thailand, may occur in the future depending on the funds that may be available in future years. Geographic coverage will be approved by USAID RDM/A in annual work plans submitted.”

This project will support the USAID/RDMA strategy of “Increased effective response to HIV/AIDS and other infectious diseases” by contributing to the Program Objective of Investing in People in the Health Program area and Program Elements: 1.1.HIV/AIDS.

USAID/RDMA’s objective in the policy area is to accelerate and complement effective national responses, which include supporting government policy development where appropriate, building capacity for policy analysis and translating the analysis into action, fostering an enabling environment and building networks at the community-level. These principles will guide USG efforts to strengthen national and local policies and systems to combat HIV/AIDS in the region. Specifically, the goals of this project are to enable host countries, civil society, and networks to undertake critical policy and advocacy actions to improve HIV/AIDS prevention, care, and treatment in the Asia-Pacific Region.

Achievement of the above stated goals will result to the following:

- 1) National and local HIV/AIDS policies, plans and programs based on international best practice adopted and implemented;
- 2) Effective public sector and civil society champions and networks developed, strengthened, and supported to assume leadership in the policy process;
- 3) Timely and accurate data used for evidence-based decision-making and advocacy.

### 3. BACKGROUND

At the end of 2005, there were an estimated 40.3 million people living with HIV and AIDS (PLHA) worldwide. Approximately 8.3 million of these PLHA were from the Asia and the Pacific region. Of the 17.5 million women living with HIV and AIDS worldwide, 2 million live in the Asia and Pacific Region, and the numbers of PLHA continue to grow rapidly in this region. In this region, HIV has increased due to several factors that together provide a fertile environment for the spread of the disease. The region is characterized by the use of injection drugs, a high degree of mobility between and within countries, a thriving sex industry, poverty, and stigmatization towards and discrimination of most-at-risk populations (MARP) for contracting HIV. Over the last five years, financial resources for HIV in the region have more than tripled. However, the coverage of prevention services remains dismally low, ranging from 5-20% across the region. Political commitment to HIV/AIDS in the region remains weak but is growing.

In 2004, RDM/A launched its Greater Mekong Regional HIV/AIDS program, with the goal of mitigating the effects of HIV and AIDS on affected individuals and their societies. This includes reducing HIV

transmission among most-at-risk populations (MARPs). The primary target groups of the strategy are MARPs, specifically injecting drug users (IDU), sex workers (SW) and their clients, men who have sex with men (MSM) and PLHA. In addition, some focus will be given to incarcerated groups and mobile and migrant populations. In order to achieve its goal, RDM/A's strategy focuses on four major components: (1) making strategic information more available and useful; (2) increasing access to comprehensive prevention interventions for MARPs; (3) increasing access to care, support, and treatment for PLHA and their families; and (4) strengthening an "enabling environment" which focuses on increasing participation of civil society and developing and implementing supportive policies and regulations. Capacity development is a crosscutting theme that cuts across all four components.

RDM/A recognizes that addressing and reducing the growth of HIV in the Asia-Pacific region involves developing an enabling environment, with both government and civil society. The RDM/A focus in the region is designed to build and strengthen the synergy between the HIV responses of regional and national governments and civil society. USAID also supports policy and advocacy efforts in the public and private sectors as a means of increasing commitment, resource allocation, and participation at the community, sub-national, and national levels. USAID supports technical assistance to nascent NGOs and civil society groups (particularly MARPs) to participate in advocacy and policy development efforts. USAID/RDMA also funds the Association of Southeast Asian Nations (ASEAN) through USAID's collaboration with ASEAN under the ASEAN Work Program on HIV/AIDS III (AWP III), to build regional commitment to address the HIV epidemic.

#### **4. CURRENT USAID EFFORTS**

Addressing and reducing the growth of HIV/AIDS in the region involves developing an "enabling environment" within both government and civil society. The RDM/A strategy consists of three parts: 1) strengthening political commitment and leadership throughout the region; 2) increasing participation of civil society, especially PLHA, in policy development and advocacy in selected countries; and 3) strengthening capacity in policy development and advocacy at both the regional and country levels.

At the regional level, RDM/A is working with its partners in all countries and with regional entities such as ASEAN to promote development of a regional commitment to deal with the HIV/AIDS epidemic and to develop operational plans to implement appropriate interventions. At the country level, civil society participation, especially of PLHA, in policy development and advocacy is required. Country level activities include: assisting PLHA to form support groups and participate in NGO policy development and advocacy activities; sponsoring workshops in selected countries to identify ways for civil society/NGOs to become involved in policy development and advocacy; providing in-country technical assistance to nascent NGOs; and conducting modeling exercises in selected countries to demonstrate cost-effectiveness of interventions, strengthen political commitment, and increase resource allocation.

Weak human and institutional capacity in all countries affects the way HIV/AIDS prevention, care and treatment services are delivered. To address this need, USAID is helping governments and international and local organizations to adopt care and support activities that are focused on enhancements of individual and institutional capacity to address HIV/AIDS. People living with HIV/AIDS have received help in building advocacy skills; health care providers have received training in non-stigmatizing practices and the latest medical advances; outreach workers have received training in prevention, care, support and treatment interventions; governments have received assistance in collecting and analyzing data to inform decision-making processes; and businesses are receiving help developing workplace HIV/AIDS policies and programs. A cornerstone of our approach is the South-South sharing of best practices and lessons learned.

Current activities focus on linking planning and policy development to the implementation of programs in the region. USAID will continue to assist countries in their projections, estimates, and strategic planning process for the planning and implementation of national HIV programs. Recognizing the importance of strong leadership at all levels and the importance of providing civil society the skills to participate in policy development and advocacy, USAID will continue to build the leadership and advocacy capacity of nascent PLHA groups, and to expand involvement of the poor, of women, and of members of MARPs into the policy discourse. This will be accomplished by facilitating multi-sectoral collaboration, and by

providing advocacy training to leaders and affected community members. The U.S. President's Emergency Plan for AIDS Relief (PEPFAR) recognizes gender as a set of issues that cuts across, and is integral to the implementation and success of prevention, care, and treatment programs. USAID will incorporate gender considerations and activities to reduce stigma and discrimination into all activities, so that they promote gender equity and increase access to services.

## **5. STATEMENT OF WORK**

Funding in the initial year of this task order will only be allocated for China and the Asia Pacific regional activities. Similar, parallel efforts are being conducted in other countries (e.g., the Philippines, Vietnam, Cambodia, and Indonesia) and there may be instances when it will be useful to share content and technical experts.

The contractor shall collaborate with the USG interagency teams on the ground – CDC, DOD, DOL, Peace Corps, HHS and USAID regarding coordination of activities. In addition, where appropriate, the contractor will be expected to participate in the USG interagency technical working group meetings. The contractor is also encouraged to demonstrate how interventions link to prevention, care and treatment programs across the continuum of services supported by the USG, other donors and organizations, and the government.

### **China-Specific Activities:**

Public policies that advance the development and implementation of HIV/AIDS services are critical to the success of the Emergency Plan. Policies and guidelines are essential to train, supervise and develop capacity of health care providers. They are also necessary to establish integrated programs and networks of service providers. Good policies are necessary for good prevention, as well as good care and treatment. The contractor shall work with all USG HIV partners in supporting China's HIV response in Yunnan and Guangxi provinces, and will support the Yunnan and Guangxi provincial authorities in adopting HIV/AIDS policies reflective of international best practices.

### **China and Regional Activities:**

PEPFAR recognizes that targeted interventions can achieve significant reductions in HIV incidence and can dramatically reduce HIV infection risk in both MARPs and the general population. To achieve the PEPFAR prevention goal, combinations of initiatives are needed to reach, engage, and enable MARPs to reduce their risk-taking behaviors and to advocate for access to care, support, and treatment services. The delivery of quality HIV prevention, care, and treatment services is affected by human and institutional resources and capacity. As a result, there is a need to build the capacity and advocacy skills of local NGOs to address access to HIV-related services. The advocacy and decision-making skills of PLHA and MARPs must also be developed so that they can participate as more equal partners in the policy process.

The contractor shall provide advocacy training for NGOs, CBOs and, as appropriate local government authorities, that target MSM, IDU, PLHA, and other vulnerable groups in China specifically, as well as the Asia-Pacific region. For the Asia-Pacific regional activities, the focus should be on strengthening such groups from Burma, Laos, Thailand and PNG, though such strengthening need not include only these countries. The contractor shall also support NGOs, networks, and other local partners in planning for resource mobilization and scaling up of interventions targeting MARPs. In addition, the contractor can provide NGOs with small grants to fund advocacy activities in-country.

Attaining PEPFAR goals require a clear understanding of the course of the epidemic, so that countries can make strategic evidence-based decisions on how to most effectively and efficiently use available resources. To date, the analysis of the impact of AIDS has been poor in the Asia and Pacific region, and data is still limited in many countries. In addition, the true impact of stigma and discrimination faced by PLHA and among those MARPs – and the effect of stigma and discrimination on their use of prevention, treatment and care services, has yet to be completely analyzed and understood. Effective data collection and analysis are necessary to mobilize effective HIV responses and strengthen political commitment to

mobilizing and appropriately targeting these resources. The capacity of governments and advocates to collect, analyze and use data to inform the decision-making process must be strengthened.

Advocacy capacity building will focus on promoting the use of data to achieve more effective responses to HIV, particularly in China. The contractor shall also provide technical assistance to identify HIV advocacy objectives and networks at each project site and provide technical assistance for the planning, implementation, and evaluation of activities designed to achieve those objectives. This may include collaboration with the other partners to produce resources, including policy briefing papers, for use in advocacy activities. The contractor shall also use data analysis for optimal allocation of resources where appropriate.

In addition, to reduce HIV-related stigma and discrimination in the Asia-Pacific region, including in China, the contractor shall provide training in the region, in collaboration with other USG partners, to build the HIV advocacy capacity of PLHA, MARPs, and other stakeholders.

The contractor’s work (resource and activities) under this task order is expected to be divided on annual basis geographically as follows:

a. Overall resources by country

Regional	30%
China	70%
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<b>Total Award Year 1</b>	<b>100%</b>

b. Strategic focus by program area by country

<b>Program Area (Program SubElement)</b>	<b>Regional</b>	<b>China</b>
ARV Services	0%	10%
Other policy analysis & system strengthening	100%	90%
<b>Total</b>	<b>100%</b>	<b>100%</b>

The definition for each program area per the Office of the Director of Foreign Assistance guidance is as follows:

ARV Services: Infrastructure, training clinicians, and other providers, exams, clinical monitoring, related laboratory services, and community-adherence activities.

Other policy analysis & system strengthening: Further other HIV/AIDS-related activities to support national prevention, care, and treatment efforts. This includes strengthening national and organizational policies and systems to address human resource capacity development, stigma, and discrimination, and gender issues; and other crosscutting activities to combat HIV/AIDS including activities to support the implementation of Global Fund programs.

**Results to be achieved**

**Result 1:** National and local HIV/AIDS policies, plans, and programs based on international best practice adopted and implemented.

The contractor shall provide assistance to host country and local organizations to help them develop and adopt policies that improve access to HIV/AIDS services. The contractor shall also seek creative and new ideas and demonstrate proven methods for addressing barriers to both policy adoption and implementation for HIV/AIDS services.

**Result 2:** Effective public sector and civil society champions and networks developed, strengthened, and supported to assume leadership in the policy process.

The contractor shall provide assistance to:

- Strengthen and improve political commitment for access to HIV/AIDS services.
- Ensure that a range of stakeholders at the local, sub-national, national, regional, and global level can assume leadership of meaningful and sustainable advocacy efforts so that policies reflect and address their needs in a sustainable way.
- Strengthen advocacy to address stigma and discrimination.

The contractor shall provide leadership in increasing the visibility and leadership of networks of PLHA, MSM, IDU, and other vulnerable groups in policy dialogue. The contractor must also demonstrate feasible ways to integrate assistance in advocacy, resource allocation, and data use, so that advocacy efforts are bolstered with knowledge about the effective allocation of resources and access to appropriate data.

**Result 3:** Timely and accurate data used for evidence-based decision-making

Given that good data provide the basis for effective policy and advocacy work, the contractor shall help stakeholders provide data to policymakers in easily-understood ways; shall adapt, develop, and apply user-friendly tools for data analysis and policy dialogue; and shall build the capacity of in-country partners to provide data for evidence-based decision-making on their own. As part of its technical leadership role, the contractor shall make special efforts to compile and use data on MARPs and PLHA, and their access to services in the policy process. The contractor shall also develop and apply user-friendly tools for multi-sector policy analysis and dialogue.

In an effort to develop local capacity to plan effectively to mitigate the effects of the HIV/AIDS epidemic, the contractor shall build on programs designed specifically to merge the strengths of country-specific analysis of epidemic dynamics and innovative advocacy approaches to improve the prevention and care responses of countries in resource-constrained settings. The contractor shall promote the following:

1. Increased political commitment and improved decision making through expanded use of local evidence
2. Improved quality and design of national surveillance systems
3. Better monitoring and understanding of epidemic dynamics
4. Improved evaluation and direction of national responses
5. Increased resource allocation
6. Reduced stigma and discrimination

The Applicant's proposal shall detail their recommended approach to achieving these results. The proposal should specifically address but not be limited to how they will achieve the following (and if one of the following is not recommended, the Applicant should explain the thinking behind this):

- Identify and reach key stakeholders to participate in policy processes at national and local levels;
- Assist national and local coordinating bodies to develop and implement sound policies, laws, regulations plans, programs, budgets and monitoring systems in support of priority HIV/AIDS interventions at national and local levels;
- Promote informed dialogue and ensure that decision-makers and stakeholders are knowledgeable about critical issues;
- Package and present information in a way that is useful to stakeholders;
- Assist stakeholders and decision-makers to communicate and disseminate the results of the work;
- Strengthen civil society and governmental collaboration and synergies;
- Reduce stigma and discrimination;
- Increase attention to gender
- Address working with MARPs.

## 6. Measuring Results: Monitoring and Evaluation

The contractor shall adhere to PEPFAR reporting requirements where appropriate at the country and regional level. For each indicator, the Monitoring and Evaluation (M&E) plan shall provide interim and final targets, data sources, collection methods, and baseline information or a timeline for collecting it. In addition to proposing indicators for each result, all PEPFAR indicators are mandatory and must be reported annually for the entire previous fiscal year (October 1 to September 30). Mandatory PEPFAR indicators include, but are not limited to:

- Number of local organizations provided with technical assistance for strategic information activities.
- Number of local organizations provided with technical assistance for HIV-related policy development.
- Number of local organization provided with technical assistance for HIV-related institutional capacity building.
- Number of individuals trained in strategic information including M&E, surveillance and/or HMIS.
- Number of individuals trained in HIV- related policy development.
- Number of individuals trained in HIV-related institutional capacity building.
- Number of individuals trained in HIV-related stigma and discrimination reduction.
- Number of new or revised policies or strategic plans.

Recognizing the limitation of existing PEPFAR indicators to effectively monitor key accomplishments of activities related to HIV/AIDS policy development/implementation, enabling policy environment, and stigma and discrimination, the contractor shall be responsible for developing and executing a Monitoring and Evaluation (M&E) plan, in consultation with the USAID M&E team. Expected program results with illustrative indicators, mid-term milestones/ benchmarks, end-of-project results partially provided in this document should be further elaborated in the M&E plan. Data sources and collection methodologies should also be noted for each indicator.

This M&E plan aims at better demonstrating key outputs and outcomes of this type of program in the Asia-Pacific and providing cutting edge knowledge and tools to monitor progress; and HIV/AIDS policy interventions that can serve as models for other countries, as well as contribute to PEPFAR reporting in the future.

In 2008, the contractor should plan to undertake the second round of an assessment of stigma/discrimination and Greater Involvement of PLHA (GIPA) in Mekong countries as part of the M&E plan. The baseline was conducted in 2005. The follow up round of the assessment is critical to demonstrate improvement of stigma/discrimination and the GIPA situation in the region, as well as being useful information for program planning.

During the initial program planning period, the contractor shall work closely with USAID/RDMA to establish final indicators, as well as baseline data and performance targets for each indicator. The final M&E plan shall be submitted to the CTO for approval within 60 days of the award of the Task Order. USAID/RDMA and the contractor will conduct periodic performance reviews to monitor the progress of work and the achievement of results as based on the targets specified in the M&E plan. Financial tracking data will be required on a quarterly basis.

Due to the emergency nature of the response and the current status of restructuring USG Foreign Assistance throughout the contract period, the M&E plan might need to be updated to be harmonized with those of other partners. The M&E plan will be revised as appropriate on an ongoing basis in collaboration with USAID.

## 7. COLLABORATION

The Contractor should demonstrate a collaborative approach with projects both within USAID/RDMA's health and social portfolio and those in other sectors as appropriate as well as with other relevant regional civil society groups and donor initiatives. The contractor shall collaborate with the USG interagency team on the ground – CDC, DOD, DOL, Peace Corps, HHS and USAID regarding coordination of activities. In

addition, where appropriate, the contractor shall be expected to participate in the USG interagency technical working group meetings.

## **8. PROGRAM MANAGEMENT AND STAFFING**

A. Technical Direction and Coordination: The RDM/A CTO will be responsible for all day-to-day management, oversight, and technical direction of the contractor and overall HIV/AIDS Prevention, Care and Treatment program. The CTO will provide technical directions during the performance of this Task Order, both in writing and verbally. The contractor shall meet at least biweekly (via conference call or in person) with the CTO or his/her designee to review the status of activities, and shall make periodic, unplanned verbal and written briefings to USAID RDM/A and U.S. Embassy staff as appropriate.

B. Personnel Requirements. The contractor shall propose and maintain key technical personnel and other personnel deemed appropriate to implement the major tasks described in Section C. For those personnel based in the field, the RDM/A leaves to the offeror to determine the appropriateness of employing overseas and/or local hires. However, RDM/A requires the establishment of a country office in China. Contractor presence or the ability to identify consistent part-time consultants in Bangkok is required in order to facilitate management and coordination with USAID RDM/A. In addition, the contractor should consider locally (non-overseas)-hired country coordinators; such staff should have played important coordination and country-level support roles in past and current population and health programs.

## **9. Reporting Requirements**

A. Annual work plan: The contractor shall develop annual work plans in concert with other USAID partners, keyed to each US fiscal year of the contract. The offeror shall provide an illustrative annual work plan for the first 12 months of the task order, which will be finalized in consultation with USAID during the first 30 days following the award. Subsequent 12-month work plans through the end of the task order will be prepared and submitted to the USAID RDM/A CTO not later than 30 days before the close of each preceding operating year.

The work plan should include, as a minimum:

1. Proposed accomplishments and expected progress towards achieving task order results and performance measures tied to the M&E plan;
2. Timeline for implementation of the year's proposed activities, including target completion dates;
3. Information on how activities will be implemented;
4. Personnel requirements to achieve expected outcomes;
5. Major commodities to be procured;
6. Details of collaboration with other major partners;
7. Detailed budget; and,
8. Targets and anticipated results and milestone indicators against which the contractor will be evaluated (jointly established with the CTO)

B. Quarterly progress reports: The contractor shall prepare and submit to the USAID RDM/A CTO a quarterly report within 30 days after the end of the contractor's first full quarter, and quarterly thereafter. These reports will be used by RDMA to fulfill electronic reporting requirements to Washington; therefore, they need to conform to certain requirements. The report should contain, at a minimum:

1. Progress (activities completed, benchmarks achieved, performance standards completed) since the last report by country and program area;
2. Problems encountered and whether they were solved or are still outstanding;
3. Proposed solutions to new or ongoing problems;
4. Success stories (if available);
5. Documentation of best practices that can be taken to scale; and.
6. List of upcoming events with dates.

C Quarterly financial reports shall be submitted quarterly to RDMA. They should be disaggregated by country and at sub-element level and contain, at a minimum:

1. Total funds awarded to date by USAID into the task order;
2. Total funds previously reported as expended by contractor by main line items;
3. Total funds expended in the current quarter by the contractor by main line items;
4. Total unliquidated obligations by main line items; and
5. Unobligated balance of USAID funds.

D. Short-term consultants' reports shall be submitted to RDMA in a mutually agreed upon format and time frame.

E. Special reports: From time to time, the contractor shall be required to prepare and submit to USAID special reports concerning specific activities and topics.

F. Completion report: At the end of the task order, the contractor shall prepare a completion report which highlights accomplishments against work plans, gives the final status of the benchmarks and results, addresses lessons learned during implementation and suggests ways to resolve constraints identified. The report may provide recommendations for follow-on work that might complement the completed work.

(End of Section C)

## **SECTION D – PACKAGING AND MARKING**

### **D.1 AIDAR 752.7009 MARKING (JAN 1993)**

(a) It is USAID policy that USAID-financed commodities and shipping containers, and project construction sites and other project locations be suitably marked with the USAID emblem. Shipping containers are also to be marked with the last five digits of the USAID financing document number. As a general rule, marking is not required for raw materials shipped in bulk (such as coal, grain, etc.), or for semifinished products which are not packaged.

(b) Specific guidance on marking requirements should be obtained prior to procurement of commodities to be shipped, and as early as possible for project construction sites and other project locations. This guidance will be provided through the cognizant technical office indicated on the cover page of this contract, or by the Mission Director in the Cooperating Country to which commodities are being shipped, or in which the project site is located.

(c) Authority to waive marking requirements is vested with the Regional Assistant Administrators, and with Mission Directors.

(d) A copy of any specific marking instructions or waivers from marking requirements is to be sent to the Contracting Officer; the original should be retained by the Contractor.

### **D.2 BRANDING**

The Contractor shall comply with the requirements of the USAID "Graphic Standards Manual" available at [www.usaid.gov/branding](http://www.usaid.gov/branding), or any successor branding policy. The Branding Implementation Plan and Marking Plan shall implement the USAID Branding Strategy described in Annex 1.

(End of Section D)

## **SECTION E - INSPECTION AND ACCEPTANCE**

### **E.1 TASK ORDER PERFORMANCE EVALUATION**

USAID inspection and acceptance of services, reports and other required deliverables or outputs shall take place at USAID RDM/A, Bangkok, Thailand, or at any other location where the services are performed and reports and deliverables or outputs are produced and submitted. The Task Order CTO (TO-CTO) identified in Section G has been delegated authority to inspect and accept all services, reports and required deliverables or outputs.

(End of Section E)

## **SECTION F – DELIVERIES OR PERFORMANCE**

### **F.1 PERIOD OF PERFORMANCE**

The estimated period of performance for this task order is September 1, 2007 to August 30, 2010.

### **F.2. DELIVERABLES**

See Section C, Paragraph 9, for full information and definitive listing. In addition to the requirements set forth for submission of reports in Sections C and I, and in accordance with AIDAR clause 752.242-70, Periodic Progress Reports, the Contractor shall submit reports, deliverables or outputs, as further described below, to the CTO (referenced in Sections F.2 and G). All reports and other deliverables shall be in the English language, unless otherwise specified by the CTO.

### **F.3 TECHNICAL DIRECTION AND DESIGNATION OF RESPONSIBLE USAID OFFICIALS**

The Task Order Contracting Office is:

Regional Office of Procurement  
USAID, RDM/A  
5/F GPF Witthayu Towers A, 93/1 Wireless Road  
Bangkok, Thailand 10330

Or

Regional Contracting Office  
USAID Box 47, Bangkok  
APO AP 96546

The USAID RDM/A Cognizant Technical Officer (CTO) will be designated separately.

### **F.4 PLACE OF PERFORMANCE**

The contractor is required to establish and maintain a country office in China. It will be up to the offerors to further outline the location of, and how their COP and other staff will manage all of the regional activities, and those in other countries noted in the task order, as well as coordinate their work with the RDMA. Travel is required within the Asia region and elsewhere.

### **F.5 AUTHORIZED WORK DAY / WEEK**

The contractor is authorized up to a six-day workweek in the field with no premium pay

**F.7 AIDAR 752.7005 SUBMISSION REQUIREMENTS FOR DEVELOPMENT EXPERIENCE DOCUMENTS (JAN 2004) (AAPD 04-06)**

(a) Contract Reports and Information/Intellectual Products.

(1) The Contractor shall submit to USAID's Development Experience Clearinghouse (DEC) copies of reports and information products which describe, communicate or organize program/project development assistance activities, methods, technologies, management, research, results and experience as outlined in the Agency's ADS Chapter 540. Information may be obtained from the Cognizant Technical Officer (CTO). These reports include: assessments, evaluations, studies, development experience documents, technical reports and annual reports. The Contractor shall also submit to copies of information products including training materials, publications, databases, computer software programs, videos and other intellectual deliverable materials required under the Contract Schedule. Time-sensitive materials such as newsletters, brochures, bulletins or periodic reports covering periods of less than a year are not to be submitted.

(2) Upon contract completion, the Contractor shall submit to DEC an index of all reports and information/intellectual products referenced in paragraph (a)(1) of this clause.

(b) Submission requirements.

(1) Distribution.

(i) At the same time submission is made to the CTO, the Contractor shall submit, one copy each, of contract reports and information/intellectual products (referenced in paragraph (a)(1) of this clause) in either electronic(preferred) or paper form to one of the following:

(A) Via E-mail: [docsubmit@dec.cdie.org](mailto:docsubmit@dec.cdie.org);

(B) Via U.S. Postal Service: Development Experience Clearinghouse, 8403 Colesville Road, Suite 210, Silver Spring, MD 20910, USA;

(C) Via Fax: (301) 588-7787; or

(D) Online: <http://www.dec.org/index.cfm?fuseaction=docSubmit.home>

(ii) The Contractor shall submit the reports index referenced in paragraph (a)(2) of this clause and any reports referenced in paragraph (a)(1) of this clause that have not been previously submitted to DEC, within 30 days after completion of the contract to one of the address cited in paragraph (b)(1)(i)of this clause.

(2) Format.

(i) Descriptive information is required for all Contractor products submitted. The title page of all reports and information products shall include the contract number(s), Contractor name(s), name of the USAID cognizant technical office, the publication or issuance date of the document, document title, author name(s), and strategic objective or activity title and associated number. In addition, all materials submitted in accordance with this clause shall have attached on a separate coversheet the name, organization, address, telephone number, fax number, and Internet address of the submitting party.

(ii) The report in paper form shall be prepared using non-glossy paper (preferably recycled and white or off-white using black ink. Elaborate art work, multicolor printing and expensive bindings are not to be used. Whenever possible, pages shall be printed on both sides.

(iii) The electronic document submitted shall consist of only one electronic file which comprises the complete and final equivalent of the paper copy.

(iv) Acceptable software formats for electronic documents include WordPerfect, Microsoft Word, and Portable Document Format (PDF). Submission in PDF is encouraged.

(v) The electronic document submission shall include the following descriptive information:

(A) Name and version of the application software used to create the file, e.g., MSWord6.0 or Acrobat Version 5.0.

(B) The format for any graphic and/or image file submitted, e.g., TIFF-compatible.

(C) Any other necessary information, e.g. special backup or data compression routines, software used for storing/retrieving submitted data or program installation instructions.

## **F.8 AUTHORIZED GEOGRAPHIC CODE**

The authorized geographic code for this activity is 935, except for the procurement of pharmaceuticals and condoms that remain subject to USAID-wide restrictions and source, origin and nationality requirements. Authority to procure in Code 935 countries of testing kits is detailed in Contract Information Bulletin (CIB) 01-04 dated February 22, 2001. In general, local procurement is authorized subject to the provisions of AIDAR 752.225-71, "Local Procurement (FEB 1997)".

(End of Section F)

## **SECTION G – TASK ORDER ADMINISTRATION DATA**

### **G.1 CONTRACTING OFFICER'S AUTHORITY**

The Contracting Officer is the only person authorized to make or approve any changes in the requirements of this task order and notwithstanding any provisions contained elsewhere in this task order, the said authority remains solely in the Contracting Officer. In the event the Contractor makes any changes at the direction of any person other than the Contracting Officer, the change shall be considered to have been made without authority and no adjustment shall be made in the contract terms and conditions, including price.

### **G.2 TECHNICAL DIRECTION**

The Office of Population and Health, USAID RDM/A, shall provide technical oversight to the Contractor through the designated CTO. The contracting officer shall issue a letter appointing the CTO for the task order and provide a copy of the designation letter to the contractor.

### **G.3 ACCEPTANCE AND APPROVAL**

In order to receive payment, all deliverables must be accepted and approved by the CTO.

### **G.4 PAYING OFFICE**

The paying office for this Task Order is:

To be determined.

### **G.5 ACCOUNTING AND APPROPRIATION DATA**

Budget Fiscal Data: To be provided.

(End of Section G)

## **SECTION H – SPECIAL TASK ORDER REQUIREMENTS**

### **H.1 KEY PERSONNEL**

The key personnel identified below are considered to be essential to the work being performed. Unless otherwise agreed to in writing by the Contracting Officer, the contractor shall be responsible for providing such personnel as specified in the Task Order. Failure to provide key personnel designated below may be considered nonperformance by the contractor unless such failure is beyond the control, and through no fault or negligence of the contractor. The contractor shall immediately notify the Contracting Officer and CTO of any key personnel's departure and the reasons therefore. The contractor shall take the necessary steps to immediately rectify this situation and shall propose a substitute candidate for each vacated position along with a budget impact statement, if requested, in sufficient detail to permit evaluation of the impact on the program. The contractor without the written approval of the Contracting Officer and the CTO shall make no replacement of key personnel.

The contractor shall provide the following key personnel for the performance of this task order:

Title	Name
Chief of Party (To be Determined)	

### **H.2 LANGUAGE REQUIREMENTS**

All deliverables shall be produced in English.

### **H.3 GOVERNMENT FURNISHED FACILITIES OR PROPERTY**

The Contractor and any employee or consultant of the Contractor is prohibited from using U.S. Government facilities (such as office space or equipment) or U.S. Government clerical or technical personnel in the performance of the services specified in the Task Order unless the use of Government facilities or personnel is specifically authorized in the Task Order or is authorized in advance, in writing, by the CTO.

### **H.4 CONFIDENTIALITY AND OWNERSHIP OF INTELLECTUAL PROPERTY**

All reports generated and data collected during this project shall be considered the property of USAID and shall not be reproduced, disseminated or discussed in open forum, other than for the purposes of completing the tasks described in this document, without the express written approval of a duly-authorized representative of USAID. All findings, conclusions and recommendations shall be considered confidential and proprietary.

### **H.5 CONTRACTOR'S STAFF SUPPORT, AND ADMINISTRATIVE AND LOGISTICS ARRANGEMENTS**

The Contractor shall be responsible for all administrative support and logistics required to fulfill the requirements of this task order. These shall include all travel arrangements, appointment scheduling, secretarial services, report preparations services, printing, and duplicating.

### **H.6 PERIODIC PROGRESS REPORTS (July 1998) (CIB 98-21)**

(a) The contractor shall prepare and submit progress reports as specified in the Schedule of this contract. These reports are separate from the interim and final performance evaluation reports prepared by USAID in accordance with (48 CFR) FAR 42.15 and internal Agency procedures, but they may be used by USAID personnel or their authorized representatives when evaluating the contractor's performance.

(b) During any delay in furnishing a progress report required under this contract, the contracting officer may withhold from payment an amount not to exceed US\$25,000 (or local currency equivalent) or 5 percent of the amount of this contract, whichever is less, until such time as the contracting officer determines that the delay no longer has a detrimental effect on the Government's ability to monitor the contractor's progress.

(End of Section H)

## SECTION I – CONTRACT CLAUSES

**I.1 See “Health Policy Initiative (HPI)” IQC.**

(End of Section I)

## SECTION J – LIST OF DOCUMENTS EXHIBITS AND OTHER ATTACHEMENTS

### SECTION J - LIST OF ATTACHMENTS –

Attachment Number	Title
Annex 1	Branding Strategy and Marking Plan
J.1	USAID FORM 1420-17 Contractor Biographical Data Sheet *
J.5	Past Performance Report – Short Form (OMB No. 9000-0142)

\* A hard copy is attached at the end of this document; however, for an electronic version, please locate the form at [http://www.USAID.GOV/procurement\\_bus\\_opp/procurement/forms/](http://www.USAID.GOV/procurement_bus_opp/procurement/forms/) .  
The copy of the form is being provided herewith for reference purpose only.

(End of Section J)

## SECTION K – REPRESENTATIONS, CERTIFICATIONS, AND OTHER STATEMENTS

Not required.

(End of Section K)

## SECTION L - INSTRUCTIONS, CONDITIONS, AND NOTICES TO OFFERORS

### L.1 GENERAL

The Government anticipates the award of one (1) cost-plus-fixed fee completion type task order as a result of this RFTOP. After evaluation of initial proposals, USAID expects to select the contractor which

will receive the task order to perform the statement of work. Once this choice is made, USAID may engage in discussions or negotiations with the chosen contractor regarding any matter to be covered in the final task order.

All Questions relating to this RFTOP must be submitted to Praveena ViraSingh, Procurement Specialist, via email at [pvirasingh@usaid.gov](mailto:pvirasingh@usaid.gov), no later than **April 20, 2007**. Offerors shall not submit questions to any other USAID staff, including the technical office for either the Task Order or the basic IQC.

## **L.2 PROPOSAL INSTRUCTIONS**

Proposals for the attached statement of work shall contain the following:

1. A Contract Pricing Proposal Cover Sheet (SF 1411).
2. A certification that no USAID employee has recommended an individual for use under the proposed task order who was not initially located and identified by your organization.
3. A list of at least three (3) recently completed contracts/subcontracts or on-going contracts/subcontracts or cooperative agreements/grants that are similar to the attached statement of work, for federal, state, and local governments or for commercial firms within the last three years. To ensure uniformity of information for conducting the reference checks, the Offeror shall complete Part 1 (Blocks 1 through 9) of the Past Performance Report – Short Form (OMB No. 9000-0142) for the listed contracts/subcontracts. This form is attached. If the offeror encountered problems on any of above mentioned contracts, it may provide a short explanation of the problem and the corrective action taken. Space is provided in Block 6 of the Short Form for this. If the offeror does not follow the prescribed format, then care must be taken to ensure that the substance of the requested information is provided. Reference information should include recent email, fax, and phone numbers and address of contact persons. USAID may contact representatives from the references provided by the offeror to obtain information on the offeror's past performance. The offeror is advised that USAID may obtain past performance information from sources other than those identified by the offeror. USAID will use the past performance information to assess the quality of the organization's past performance and capability to implement programs similar to that described in the statement of work.
4. Any proposed changes to the attached statement of work.

## **L.3 GENERAL INSTRUCTIONS TO OFFERORS**

- (a) RFTOP Instructions: If an Offeror does not follow the instructions set forth herein, the Offeror's proposal may be eliminated from further consideration or the proposal may be down-graded and not receive full or partial credit under the applicable evaluation criteria.
- (a) Accurate and Complete Information: Offerors must set forth full, accurate and complete information as required by this RFTOP. The penalty for making false statements to the Government is prescribed in 18 U.S.C. 1001.
- (b) Offer Acceptability: The Government may determine an offer to be unacceptable if the offer does not comply with all of the terms and conditions of the RFTOP.
- (c) Proposal Preparation Costs: The U.S. Government will not pay for any proposal preparation costs.

## **L.4 INSTRUCTIONS FOR THE PREPARATION OF THE TECHNICAL PROPOSAL**

The technical proposal shall address how your organization plans to carry out the statement of work, not to exceed 25 pages including, a technical approach, personnel plan, and management approach, a draft monitoring and evaluation (M & E) plan and a draft implementation workplan for the first 12 months of the 36-month task order. Graphs, tables, charts, cover pages, dividers, table of contents, and attachments

(draft work plans, resumes, tables summarizing qualifications of proposed personnel, tables), are not included in the 25-page limitation. All narrative pages must be formatted for readability and avoid unusual formatting. Approximate lengths of each narrative section in the technical proposal are recommended to be as follows:

- a. Executive Summary – Page 1
- b. Technical Approach – Pages 2-15
- c. Key Personnel – Pages 16-19
- d. Management Plan/Corporate Capability/Past Performance– Pages 20-25.

1. The Technical Approach must include a clear description of the conceptual approach and the general strategy (i.e. methodology and techniques) being proposed; a description of how the contractor will build the capacity and advocacy skills of local NGOs to address access to HIV-related services, the development of advocacy and decision-making skills of PLHA and MARPs and other stakeholders to enable them to participate as more equal partners in the policy process. It should outline specific, focused activities; explain how the approach is expected to achieve the proposed objectives; and describe a plan that will enable the activities to continue after the program is completed. Offerors are encouraged to propose innovative programs designed to reach the desired outcomes/results.

Offerors are encouraged to demonstrate how interventions link to prevention, care and treatment programs across the continuum of services supported by the USG, other donors and organizations, and the government. The offerors are also encouraged to promote the use of effective data collection and analysis to mobilize effective HIV responses and strengthen political commitment to mobilizing and appropriately targeting these resources.

In addition, the Technical Approach must include a clear description of the offeror's strategic approach to achieve the regional and country specific targets and leverage other resources as described in the statement of work in Section C. The proposal should specifically address how the offeror will achieve the following (and if one of the following is not recommended, the Offeror should explain the thinking behind the rationale):

- Identifying and reaching key stakeholders to participate in policy processes at national and local levels;
- Assisting national and local coordinating bodies to develop and implement sound policies, laws, regulations plans, programs, budgets and monitoring systems in support of priority HIV/AIDS interventions at national and local levels;
- Promoting informed dialogue and ensure that decision-makers and stakeholders are knowledgeable about critical issues;
- Packaging and presentation of information in a way that is useful to stakeholders;
- Assisting stakeholders and decision-makers to communicate and disseminate the results of the work;
- Strengthened civil society and governmental collaboration and synergies;
- Reduced stigma and discrimination;
- Increased attention to gender
- Focus on working with MARPs.

2. The Key Personnel must specify the composition and organizational context of the entire implementation team (including home office support). The offeror shall indicate the names and provide a resume for each proposed candidate (managerial and technical) that clearly outlines his or her experience and background. Resumes should not exceed 4 pages for each person. Please supply proposed position descriptions for the proposed staff. Proposed personnel not yet identified may be shown as "TBD" (to be determined).

Personnel Requirements. The contractor shall propose key technical personnel and other personnel as part of the technical proposal as deemed appropriate to implement the major tasks above. For those personnel based in the field, the RDM/A leaves to the offeror to determine the appropriateness of employing overseas and/or local hires, however, the contractor is required to establish and maintain a

country office in China. It will be up to the offerors to further outline the location of, and how their COP and other staff will manage all of the regional activities, and those in other countries noted in the task order, as well as coordinate their work with the RDMA. In addition, the contractor should consider locally (non-overseas)-hired country coordinators; such staff should have played important coordination and country-level support roles in past and current population and health programs.

- a) Chief of Party - The offeror is required to appoint a Chief of Party (COP). The COP must demonstrate exceptional managerial and operational experience, and preferably experience in managing complex, multi-national/regional activities involving coordination with multiple program partner institutions. The COP must also demonstrate exceptional written and oral communications skills in English. Familiarity with the political, social, and cultural context of working Asia is a strong plus.
- b) Other Personnel - The offeror has the discretion to determine the proper number and mix of additional key personnel, short-term technical staff, and others to meet task order requirements, to be described in the technical proposal.

3. Management Plan/Corporate Institutional Capability/Past Performance must include a clear discussion addressing the following points:

- a. The offeror should also clearly describe its ability to manage activities carried out under the statement of work, provide technical support and necessary oversight, and work with USAID/RDM/A staff, other USG agencies and Embassies, and other important project partners. The offeror shall explain the potential for the management approach to effectively contribute to achieving project targets and objectives. The offeror shall describe in the proposal the proposed role of each technical staff/advisor in the program and specify whether s/he will be country-specific or regionally based. The offeror shall also clearly describe the role of and contractual arrangement with each subcontractor (if any), the approach for managing of proposed subcontractors (if any), and demonstrated past experience managing subcontractors (if applicable).
- b. The prime and major subcontractor' demonstrated experience in the geographic and program areas identified in the Statement of Work; and organizational experience in managing relevant large-scale projects including activities to improve the HIV/AIDS policy environment, support civil society, improve the quality and use of data for decision making and to advance the policy environment.
- c. Demonstrated ability to manage multiple complex tasks involving collaborative efforts, and maintain clear and effective lines of communication between and among clients.
- d. Per Section L.2.3, at least 3 recently completed or on-going contracts/subcontracts that are similar to the statement of work should be provided using the PPR-short form. If the offeror deems it appropriate, then more can be submitted. The PPR short forms can be submitted as an annex. In addition to the PPRs, past performance information from the references provided by the offeror and other sources that USAID may have available will be used. All of the above will be considered in assessing the quality of the offeror's capability to implement programs similar to that described in the statement of work.

## **L.5 COST PROPOSALS**

The total budget for this task order is estimated to fall within the range of \$ 3 million to \$ 4 million for the 36-month period.

Offerors shall submit cost proposals in the following program areas by geographic coverage and operating period for evaluation purposes only as follows:

<b>Program Area (Program SubElement)</b>	<b>Regional</b>	<b>China</b>
ARV Services	0%	10%
Other policy analysis & system strengthening	100%	90%
<b>Total</b>	<b>100%</b>	<b>100%</b>

Detailed costs associated with each program area such as salaries, indirect costs, travel, equipment, and fee, shall be provided separately in the proposal.

Offerors shall also submit a summary cost proposal by operating period and line items, using the following detailed budget format

Cost Element	October 1, 2007 to Sept 30, 2008	Oct 1, 2008 to Sept 30, 2009	Oct 1, 2009 to Sept 30, 2010
Total Direct Labor			
■ Salary and wages			
■ Fringe Benefits			
Consultants			
Travel, Transportation and Per Diem			
Equipment and Supplies			
Subcontracts 1/			
Allowances			
Participant Training			
Other Direct Cost			
Overhead			
G&A			
Material Overhead			
Total Estimated Cost			
Fixed Fee			
Total Estimated Cost Plus Fixed Fee			

1/ Individual subcontractors should include the same cost element breakdown in their budgets as applicable.

The above budget shall be supported by information in sufficient detail to allow a complete analysis of cost. Contractor Employee Biographical Data Sheet (Form AID 1420-17) for the proposed personnel (either US, CCN or TCN), containing salary history for the previous three years. (Bio-data forms must be signed by both the employee and your organization). Offerors must propose costs that they believe are realistic and reasonable for the work in accordance with their respective Task Order Technical Proposals.

(End of Section L)

## **SECTION M – EVALUATION FACTORS FOR AWARD**

### **M.1 GENERAL INFORMATION**

(a) After evaluation of initial proposals, USAID expects to select the contractor which will receive the task order to perform the statement of work. Once this choice is made, USAID may engage in discussions or negotiations with the chosen contractor regarding any matter to be covered in the final task order. However, the Government may award a task order without discussions with offerors.

(b) The Government intends to evaluate task order proposals in accordance with Section M of this RFTOP and award to the responsible contractor(s) whose task order proposal(s) represents the best value to the U.S. Government. "Best value" is defined as the offer that results in the most advantageous solution for the Government, in consideration of technical, cost, and other factors.

(c) Evaluation Process: Proposals timely received will be reviewed and considered against the criteria indicated in Section M.2. Numerical points will not be awarded for cost, and the relative importance of cost is substantially less than technical factors. The review of the cost proposal shall include primarily cost realism, allowability and reasonableness analyses. While cost is a factor, especially as between closely ranked technical proposals, it is expected that the choice of contractor for this work will be based on technical merit.

## **M.2 TECHNICAL PROPOSAL EVALUATION CRITERIA**

The criteria listed below are presented by major category, so that offerors will know which areas require emphasis in the preparation of the technical proposal. Offerors should note that these criteria serve as the standard against which all technical information will be evaluated, and serve to identify the significant matters which offerors should address. Within each category, sub-criteria are weighted according to the points indicated. Sub-criteria that do not have weights assigned will be treated equally.

1. Technical Approach 40 points
  - a. Extent to which the proposed approach is clear, logical, well-conceived, and technically sound; is appropriate to the Asia regional context; reflects understanding and support of USAID/RDMA program objectives; provides for sustained results beyond the life of the project; and draws from lessons learned elsewhere, especially in the Asia Pacific region. (20 points)
  - b. Extent to which illustrative timelines for the effective implementation of project components, demonstrate the applicant's ability to reach stated project objectives within the required time period of performance, including a plan for rapid launch of project activities. Extent to which the Performance Monitoring and Evaluation Plan is clear, appropriate and sound in terms of identification of expected interim and final results of the program and extent to which the plan for collecting base-line and follow-on data is cost effective, will reliably quantify program progress and impact, and will integrate with and support building local capacity to gather and analyze data for decision making. (10 points)
  - c. The extent to which gender and gender issues are identified and addressed. (5 points)
  - d. The extent to which plans for stigma and discrimination are identified and addressed. (5 points)
  
2. Personnel 40 points

Extent and nature of relevant experience and qualifications of project team, as demonstrated by:

The demonstrated quality of the proposed Chief of Party, other proposed staff, and the demonstrated access to appropriate technical personnel with technical experience and expert qualifications in all the programmatic areas outlined in the Statement of Work. (40 points)
  
3. Management Plan/Corporate Institutional Capability/Past Performance 20 points
  - a. Management Plan. The extent to which the proposal clearly describes the ability to manage activities carried out under the Statement of Work, provide technical support and necessary oversight, and work with USAID/RDM/A staff, other USG agencies and Embassies, and other important project partners, including the potential for the management approach to effectively

contribute to achieving project targets and objectives. The extent to which the proposal clearly describes the role of each technical staff/advisor in the program and specifies whether the staff will be country-specific or regionally based. The offeror shall also clearly describe the role of and contractual arrangement with each subcontractor (if any), the approach for managing of proposed subcontractors (if any), and demonstrated past experience managing subcontractors (if applicable). (10 points)

- b. The prime and major subcontractor's demonstrated experience in the geographic and program areas identified in the Statement of Work and organizational experience in managing relevant large-scale projects including activities to improve the HIV/AIDS policy environment, support civil society, improve the quality and use of data for decision making and to advance the policy environment. (5 points)
- c. Demonstrated ability to manage multiple complex tasks involving collaborative efforts, and maintain clear and effective lines of communication between and among clients. (5 points)

**100 Points**

(End of Section M)



# BRANDING STRATEGY AND MARKING PLAN

NOVEMBER 8, 2006

The USAID | Health Policy Initiative<sup>1</sup> is the project sub-brand assigned to the Policy Dialogue and Implementation indefinite quantity contract (IQC), which seeks to foster an “improved environment for health, especially family planning/reproductive health, HIV/AIDS, and maternal health.” The initiative supports policy development and implementation; capacity development of public sector and civil society policy champions; efficient and equitable resource allocation; multisectoral coordination; and evidence-based decisionmaking. The four contractors eligible to bid on task orders within this IQC are Abt Associates, Chemonics, Constella Futures, and Research Triangle Institute (RTI).

## 1.0 POSITIONING

### 1.1 Project Name

The USAID | Health Policy Initiative name applies to all programs, projects, activities, and public communications funded by USAID through the IQC and all task orders awarded under the original contract name “Policy Dialogue and Implementation.” In all documents and materials produced by the IQC, the full name of the initiative should be used together with the task order identification number, for example, USAID | Health Policy Initiative, Task Order 1. On subsequent references, the program can be referred to as “the initiative” or “the project.” Documents will need to clearly reference the task order number under which the work was performed. Once the task order number has been referenced on the cover of the document and on first reference to the project name, it is not necessary to always repeat the task order number. However, the task order number should be mentioned as appropriate to avoid confusion with the overall IQC or other task orders.

The abbreviation “HPI” may be used in internal communications with USAID audiences or other Health Policy Initiative IQC contractors, for example, in workplans and semi-annual reports for internal distribution only.<sup>2</sup> The project name will not be abbreviated in external communications.

### 1.2 Sub-brand

Working with USAID, a project sub-brand has been designed to consistently identify and unify all task orders under the IQC as the USAID | Health Policy Initiative. The sub-brand uses USAID’s recommended

<sup>1</sup> This document was prepared by staff of the USAID | Health Policy Initiative, Task Order 1, which is funded by the U.S. Agency for International Development (USAID) under contract number GPO-I-01-05-00040-00, beginning September 30, 2005. Task Order 1 is implemented by Constella Futures, in collaboration with the Centre for Development and Population Activities (CEDPA), White Ribbon Alliance for Safe Motherhood (WRA), and World Conference of Religions for Peace (WCRP).

<sup>2</sup> As this is an internal document for use within USAID and by IQC contractors, the abbreviation of the project name in this document is acceptable.

fonts, typefaces, colors, and sizes for sub-brands, as found in the branding guidelines created by the Agency.



Separate sub-brands will not be created for each task order. Subsequent task orders will be numbered and identified accordingly in the text of documents.

### 1.3 Primacy of Project Sub-brand Over Other Logos

When a product is produced under the IQC, it will typically carry the USAID | Health Policy Initiative sub-brand. In some instances, Missions may decide that it is better to position a product as coming from USAID rather than the IQC, and, in these instances, the USAID graphic identity could be used instead. Logos of contractors will not be used on materials funded under this contract, although the contractor name and contact information may be included on the inside or back covers of documents.

### 1.4 Translation of the Sub-brand

USAID will translate the project name “Health Policy Initiative” and the tagline “From the American People” into selected foreign languages for use when branding country-specific (not global) project activities and products in countries where the dominant language is: Arabic, Chinese, French, Hindi, Portuguese, Russian, Spanish, Vietnamese, and other languages as needed. The English sub-brand will be used for products of a global nature and in countries where a local language sub-brand has not been created. Copies of the sub-brand will be made available to staff and country programs via the project websites and possibly on CD-ROM.

## 2.0 TYPES OF BRANDING

There are four types of branding:

- *Full branding* – used when a product, publication, or event is positioned as from the USAID | Health Policy Initiative (includes HPI materials and HPI-funded subcontractor materials). Design follows the USAID full branding guidelines.
- *Co-branding* – used when a product, publication, or event is positioned as from the Health Policy Initiative and a partner. It applies when another organization has contributed funding and/or the Mission or CTO otherwise agrees that there is a compelling rationale to co-brand. The design varies as appropriate, though the HPI sub-brand should be of equivalent size and prominence as other partner logos. USAID approval is required for co-branding of all products produced 100 percent with USAID funds. USAID approval is not required to co-brand products produced with joint funding from other organizations, assuming the funding contributed is not a token amount.<sup>3</sup>
- *PEPFAR co-branding* – used whenever materials or activities are supported by HIV funds. The appropriate PEPFAR logo and HPI sub-brand should be of equivalent size and prominence. No USAID approval is required for PEPFAR co-branding.
- *No branding* – used when a product, publication, or event is positioned as from a host-country government or partner, subject to Mission approval. Missions can also approve exemptions from branding when the objective or purpose of the product would be furthered by an appearance of

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<sup>3</sup> USAID is considering determining a set percentage (e.g., at least 25 percent) as a guideline for determining when automatic co-branding would apply.

neutrality; branding causes the data or findings to be viewed as not credible by target audiences; branding impairs the functionality of the product; branding would not be cost-beneficial or practical; branding of a particular product would violate a cultural or social norm or would otherwise be considered inappropriate; or branding violates applicable international law.

Core-funded materials will follow full branding guidelines; the CTO must approve any exceptions to full branding. For materials funded with field support, the Mission must approve any exceptions to full branding requirements. The Annex contains a form that can be used for requesting an exception to full branding.

### **3.0 PROGRAM COMMUNICATIONS AND PUBLICITY**

#### **3.1 Audiences**

The Health Policy Initiative has the following target audiences with whom it will promote and publicize USAID sponsorship:

*3.1.1 Primary audience:* Host-country populations including government officials, policymakers, civil society, and private sector groups that are involved in or related to the health sector (e.g., faith-based organizations, women’s groups, the media, businesses, networks and groups of people living with HIV, etc.).

*3.1.2 Secondary audience:* Host-country clients of family planning/reproductive health, HIV/AIDS, maternal health, and other healthcare programs and services, and other individuals who influence uptake of services; international donor agencies; other Bureau of Global Health cooperating agencies and contractors; and public health researchers.

#### **3.2 Messages**

The Health Policy Initiative differs from many other USAID-funded projects in that the focus is on providing technical assistance to improve implementation of policies, programs, and services, but does not directly fund the implementation of services per se. Therefore, external messages disseminated to the general public in the host country will be limited. Messages will typically be of a more technical nature—focusing on improving policy development and implementation—and will vary depending on the particular audiences, which are noted in Section 3.1.

Where appropriate, the materials and communications prepared under the IQC will make clear that the product was produced with the support of the U.S. Agency for International Development under Task Order # of the USAID | Health Policy Initiative. This acknowledgment may not be appropriate in some program materials, such as certain behavior change materials, or in those instances when the materials produced must appear to be coming directly from the host-country government. The Marking Plan in Section 3.3 below lists other possible exceptions to branding requirements.

#### **3.3 Marking Plan for Materials to be Produced**

Table 1 outlines the types of materials that will be produced under the USAID | Health Policy Initiative. Any materials that are not anticipated below, but are produced under the initiative will also be subject to branding guidelines and CTO or Mission approval, as appropriate. Please note that marking is not required on items used as part of the administration of the contract, such as stationery products, equipment, and offices. The goal is to mark programs and projects, not implementing partners. Thus, letterhead, name tags, business cards, office space, and equipment and supplies are not subject to branding.

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**TABLE 1. MARKING PLAN FOR MATERIALS TO BE PRODUCED**

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Category	Type of Marking*	Notes
<b>ADMINISTRATIVE</b>		
Stationery products	USAID standard graphic identity will not be used on stationery products intended for administrative use	Pertains to letterhead, envelopes, mailing labels, fax coversheets; designs for these materials use the project name without the USAID identity
Business cards	USAID standard graphic identity will not be used on business cards	Please refer all inquiries about the use of the USAID identity on business cards to USAID/W
Office signs	USAID standard graphic identity will not be used to mark project offices	Please refer all inquiries about the use of the USAID identity on office signs to USAID/W
Project deliverables (e.g., semi-annual reports, workplans, performance monitoring plan, financial reports, etc.)	Follows guidelines for full branding	
IQC website and brochure	Follows guidelines for full branding	To be developed and maintained by USAID
Notecards	Follows guidelines for full branding	Pertains to thank you cards, announcement cards, etc.
Folders	Follows guidelines for full branding	
<b>TECHNICAL</b>		
Technical website	HPI sub-brand presented at the top the homepage and sub-pages as appropriate; design follows guidelines for full branding	To be developed and maintained by the Task Order 1 contract holder; it will serve all task orders (Note: USAID will develop and maintain the HPI IQC site)
Technical reports, studies, and analyses	HPI sub-brand printed on the cover of documents; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
Briefing papers, memoranda, and policy recommendations	HPI sub-brand printed on the cover of documents; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
Government policies, strategies, plans, and guidelines (regional, national, and subnational levels) or other materials positioned as being from the host-country government	These materials follow full branding unless co-branding is acceptable or an exemption is provided for no branding. Even with a no branding exemption, it may be possible to include acknowledgment of USAID assistance in the materials, if and as appropriate as per Mission approval.	With Mission approval, may be exempt from full branding if USAID branding would undermine host-country government ownership of constitutions, laws, regulations, policies, studies, assessments, reports, publications, surveys or audits, public service announcements, or other communications better positioned as “by” or “from” a country ministry, agency, department, or government official**

**TABLE 1. MARKING PLAN FOR MATERIALS TO BE PRODUCED**

Category	Type of Marking*	Notes
Organizations' policies, strategies, plans, and guidelines ( <i>e.g., a church's HIV action plan, a workplace anti-discrimination policy</i> ) or other materials positioned as being from the host-country partner	These materials follow full branding unless co-branding is acceptable or an exemption is provided for no branding. Even with a no branding exemption, it may be possible to include acknowledgment of USAID assistance in the materials, if and as appropriate as per Mission approval.	With Mission approval, may be exempt from full branding if USAID branding would compromise the organization's ownership of constitutions, laws, regulations, policies, studies, assessments, reports, publications, surveys or audits, public service announcements, or other communications better positioned as "by" or "from" a host-country partner organization**
Training materials and manuals	HPI sub-brand printed on the cover of documents; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
Software	HPI sub-brand incorporated into the splash screen/menu and printed on the software packaging; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
CD-ROMs	HPI sub-brand printed on the CD label, splash screen/menu, and packaging; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
PowerPoint presentations	HPI sub-brand is required on title and breaker slides; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	Subject to Mission approval, design of the PowerPoint may be tailored to the specific audience at the country level as long as title slides use USAID branding
Conference posters and presentations	HPI sub-brand printed on the poster or presentation; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	Posters and materials presented at professional meetings or international conferences that use HPI data or research should use the HPI sub-brand. Co-branding with the author's organization may be requested if the corporate office made significant contributions to the technical and intellectual development of the study and the resulting products. The author's corporate affiliation can also be acknowledged in the author block.

**TABLE 1. MARKING PLAN FOR MATERIALS TO BE PRODUCED**

<b>Category</b>	<b>Type of Marking*</b>	<b>Notes</b>
Flyers and factsheets	HPI sub-brand printed on the materials; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
Videos	HPI sub-brand included in opening and/or closing title sequences, as appropriate; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
Program materials <i>(communications that target beneficiaries with particular messages, e.g., “Prepare a will,” “Know your rights”)</i>	HPI sub-brand or other acknowledgment of USAID printed on the materials, if and as appropriate as per Mission approval**	If used, the preferred placement of the HPI sub-brand is on the front cover or poster in the lower left-hand corner
<b>PROMOTIONAL</b>		
Event signs, banners, and exhibition booths	HPI sub-brand printed on the materials; design follows guidelines for full branding unless co-branding is acceptable or an exemption is provided for no branding	
Project promotional materials <i>(e.g., success stories, beneficiary testimonials, announcement of research findings or project results)</i>	HPI sub-brand printed on the materials; design follows guidelines for full branding	
Materials for policy launch events	HPI sub-brand or other acknowledgment of USAID assistance printed on the materials, if appropriate as per Mission approval**	Materials would follow same branding strategy as for actual policy document; see above
Materials for site visits	HPI sub-brand printed on the materials; design follows full branding guidelines	

**Notes:**

\* Exact positioning of the HPI sub-brand or other USAID acknowledgment may vary if the product, with CTO and/or Mission approval, is subject to co-branding or no branding.

\*\* Even when a document qualifies for “no branding,” it may be possible to acknowledge USAID’s contribution in one of several ways:

- The USAID standard graphic identity or the HPI sub-brand may appear on the inside cover with the following acknowledgment: “This document was produced with support from the U.S. Agency for International Development through Task Order 1 of the USAID | Health Policy Initiative under Contract No. GPO-I-01-05-00040-00.” Wording may vary slightly depending on the product and the nature and extent of the technical assistance provided. This acknowledgment should also be modified as appropriate to correspond to the particular task order and contractors.
- USAID support may be acknowledged in the preface, foreword, or acknowledgment sections of the document.

However, the host-government may not want any acknowledgment of USAID assistance, for example, on government policies and plans. The Mission should decide how and whether to acknowledge USAID assistance when processing the request for the waiver from branding requirements (exemption from branding).

Also, in some instances, the Mission may prefer to use the USAID standard graphic identity instead of the HPI sub-brand.

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### **3.4 Promotional Activities/Materials for Host-country Citizens**

Because the level of desired visibility for the USAID | Health Policy Initiative is low given the nature of the project's activities (e.g., behind-the-scenes technical assistance) and results (e.g., increased leadership capacity or an operational policy change vs. building a school, establishing a clinic, providing food aid, or repairing a road), the opportunities for and appropriateness of widespread in-country publicity and external promotion of the Health Policy Initiative sub-brand and the support of the American people is somewhat limited. In-country awareness of the support of the American people will be generated primarily through the following key opportunities:

- Project activities (e.g., acknowledgment at training workshops)
- Success stories (disseminated through the Health Policy Initiative website(s), USAID listservs, and e-newsletters, etc.) – 4/year
- Beneficiary testimonials – 1/year
- Site visits by USAID and U.S. Government officials
- Professional photography of key visits by top U.S. Government officials, training workshops, etc.
- Conference presentations, posters, and exhibition booths
- Launch events, when and where appropriate
- Announcements of research findings or release of a new study
- Promotion of final or interim reports
- Communication of program impact/overall results

It is USAID's policy that contractors must not generate their own corporate publicity about a USAID-funded program without first obtaining permission from the Agency. USAID should also be notified before contractors make public the findings of USAID-funded studies or reports (e.g., at conferences, public meetings).

## **4.0 ACKNOWLEDGMENTS**

### **4.1 Acknowledging USAID and the Health Policy Initiative IQC Funding Mechanism**

The following acknowledgment will be included on external Health Policy Initiative publications and internal publications, such as semi-annual reports, as appropriate. The examples below use information for Task Order 1, however, the task order number, contract number, start date, and contractor and subcontractor names will vary as appropriate.

#### *4.1.1 Non-HIV-funded publications:*

The USAID | Health Policy Initiative, Task Order 1, is funded by the U.S. Agency for International Development under Contract No. GPO-I-01-05-00040-00, beginning September 30, 2005. Task Order 1 is implemented by Constella Futures, in collaboration with the Centre for Development and Population Activities (CEDPA), White Ribbon Alliance for Safe Motherhood (WRA), and World Conference of Religions for Peace (WCRP).

#### *4.1.2 HIV-funded publications:*

HIV-funded products can be linked to the President's Emergency Plan for AIDS Relief (PEPFAR) by including an additional sentence in the acknowledgment, which can also be modified as needed to indicate other program or initiative funding.

The USAID | Health Policy Initiative, Task Order 1, is funded by the U.S. Agency for International Development under Contract No. GPO-I-01-05-00040-00, beginning September 30, 2005. **HIV-related activities of the initiative are supported by the President's Emergency Plan for AIDS Relief.** Task Order 1 is implemented by Constella Futures, in collaboration with the Centre for Development and Population Activities (CEDPA), White Ribbon Alliance for Safe Motherhood (WRA), and World Conference of Religions for Peace (WCRP).

#### **4.2 Acknowledging Host-country Governments**

As the Health Policy Initiative strives, in part, to improve national health policies and at the same time, build local capacity and ownership, host-country ministries will be key partners of the initiative. Because a significant proportion of funding for the Health Policy Initiative is expected to come from field missions, USAID does not pre-designate priority countries for this contract. Based on past experience, the contractors under the Health Policy Initiative IQC can expect to work in approximately 30 countries. Subject to Mission approval, products that are to be positioned as coming from host-country governments may be exempted from full branding requirements (see Sections 2.0 and 3.3).

#### **4.3 Acknowledging Other Host-country Partners**

As the Health Policy Initiative strives, in part, to build capacity of civil society policy champions and improve multisectoral coordination and implementation of policies and programs, civil society and private sector groups will be key partners of the initiative. Especially when working with in-country partners and grassroots organizations, recognizing contributions of partners through co-branding is essential for building local capacity, increasing in-country ownership and validation of project activities or findings, and highlighting the ways in which the U.S. Government works collaboratively with others. Because a significant proportion of funding for the Health Policy Initiative is expected to come from field missions, USAID does not pre-designate priority countries or partners for this contract. Based on past experience, the contractors under the Health Policy Initiative IQC can expect to work with groups in approximately 30 countries. Co-branding with civil society and private sector groups products will occur when these organizations have contributed funds to the activity. Co-branding with in-country partners may also be desirable when trying to promote local ownership and capacity building. However, when products are fully funded by USAID, Mission approval is required for any exceptions to full branding requirements (see Sections 2.0 and 3.3).

#### **4.4 Co-Branding with Other Donor Organizations**

Based on previous experience, the contractors under the Health Policy Initiative can expect to collaborate with other donor organizations, such as GFATM, GTZ, UNAIDS, UNDP, UNICEF, U.S. Department of Labor, WHO, and other organizations that contribute funds to publications, products, and events. In such cases, the guidelines for co-branding will be followed, assuming the funding contributed is more than a token amount. Otherwise, USAID approval will be required for co-branding.

#### **4.5 Co-branding with the President's Emergency Plan for AIDS Relief**

The Health Policy Initiative receives funding from the offices of Population and Reproductive Health (PRH), HIV/AIDS (OHA), and HIDN, regional bureaus, and missions. For its HIV-related products, publications, and events, the Health Policy Initiative will follow the branding guidelines established by the Office of the Global AIDS Coordinator (OGAC) pertaining to PEPFAR. While final guidelines have not been released, OGAC encourages projects receiving HIV funds to co-brand PEPFAR whenever USAID is also identified. Co-branding means that the PEPFAR logo should be of equal size and prominence as the USAID | Health Policy Initiative sub-brand and that PEPFAR should be acknowledged in any text along

with USAID (see Section 4.1.2 above). These guidelines may be subject to change once the final OGAC branding guidelines are released.

OGAC has created country-specific logos for the 15 focus countries and the “plus five” countries. These logos feature the country flags and should be used for any country-specific materials. The general PEPFAR logo, without flags, should be used in all other countries and for materials that are intended for international audiences. Note: When a country-specific PEPFAR logo is used, the USAID | Health Policy Initiative sub-brand remains the same (Mission sub-brands are not used).

# ANNEX I FORM FOR REQUESTING EXCEPTIONS TO FULL BRANDING

Please use the form on the next page to facilitate the process of seeking and tracking Mission and CTO approval for any exceptions to full USAID branding of HPI materials. This form is available for downloading via the project websites. Email approvals are also acceptable.

Approval is not needed for full branding. Approval is also not required for co-branding when other organizations contribute funds for the document’s production, but it is needed when USAID paid for the activity or product in its entirety. The CTO or Mission may also approve co-branding for the following reasons:

1. Co-branding acknowledges the human resources or in-kind resources contributed by the partner
2. Co-branding builds capacity of a local organization, such as a women’s group or network of people living with HIV
3. A document deals with culturally sensitive issues (e.g., adolescent reproductive health, gender norms, HIV prevention for youth, etc.) and co-branding highlights the broad-based local support for the findings of the report
4. Or other reasons as appropriate

The CTO or Mission may approve no branding for the following reasons:

1. The objective or purpose of the product would be furthered by an appearance of neutrality
2. Branding causes the data or findings to be viewed as not credible by target audiences
3. The product is better positioned as being produced by the host-country government or partner
4. Branding impairs the functionality of the product
5. Branding would not be cost-beneficial or practical
6. Branding of a particular product would violate a cultural or social norm or would otherwise be considered inappropriate
7. Branding violates applicable international law

Even in cases of no branding when the HPI sub-brand is not used, USAID’s contribution may be acknowledged either in the text or verbally at relevant meetings and events.

Program materials do not need to follow the full branding guidelines for type, color, and layout. However, the project sub-brand or other acknowledgment statement should be used on program materials to acknowledge the U.S. Government’s support and funding, if and when appropriate. CTO/TA or Mission approval, depending on the funding source, should be obtained before program materials are produced.



REQUEST FOR EXCEPTIONS TO FULL BRANDING

**1. Title (or Activity):**

*If not known yet, please briefly describe the material to be marked*

**2. Type of material(s) to be produced (document, banner, CD, program materials, etc.):**

**3. Type of branding proposed:**

- Co-branding with another donor
- Co-branding with local partner
- Exemption from branding ("no branding")

**4. Date Submitted:**

**5. Date Approval is Needed By:**

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**6. If not using full branding, please describe the proposed branding approach (attach example if available):**

**7. Rationale for branding approach:**

**8. Type and placement of USAID acknowledgment if appropriate:**

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**FOR CTO or MISSION USE ONLY**

- I approve of the proposed branding approach.
- I approve of the proposed branding approach, with the following changes:
  
- I do not approve of the proposed branding approach. Please submit a new proposal.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**ATTACHMENT J.1**

**USAID FORM 1420-17 - CONTRACTOR BIOGRAPHICAL DATA SHEET**

## CONTRACTOR EMPLOYEE BIOGRAPHICAL DATA SHEET

1. Name (Last, First, Middle)		2. Contractor's Name	
3. Employee's Address (include ZIP code)		4. Contract Number	5. Position Under Contract
		6. Proposed Salary	7. Duration of Assignment
8. Telephone Number (include area code)	9. Place of Birth	10. Citizenship (if non-U.S. citizen, give visa status)	

11. Names, Ages, and Relationship of Dependents to Accompany Individual to Country of Assignment

12. EDUCATION (include all college or university degrees)				13. LANGUAGE PROFICIENCY (See Instructions on Reverse)		
NAME AND LOCATION OF INSTITUTE	MAJOR	DEGREE	DATE	LANGUAGE	Proficiency Speaking	Proficiency Reading

14. EMPLOYMENT HISTORY

1. Give last three (3) years. List salaries separate for each year. Continue on separate sheet of paper if required to list all employment related to duties of proposed assignment.

2. Salary definition - basic periodic payment for services rendered. Exclude bonuses, profit-sharing arrangements, or dependent education allowances.

POSITION TITLE	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #	Dates of Employment (M/D/Y)		Annual Salary
		From	To	Dollars

15. SPECIFIC CONSULTANT SERVICES (give last three (3) years)

SERVICES PERFORMED	EMPLOYER'S NAME AND ADDRESS POINT OF CONTACT & TELEPHONE #	Dates of Employment (M/D/Y)		Days at Rate	Daily Rate in Dollars
		From	To		

16. CERTIFICATION: To the best of my knowledge, the above facts as stated are true and correct.

Signature of Employee	Date
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17. CONTRACTOR'S CERTIFICATION (To be signed by responsible representative of Contractor)

Contractor certifies in submitting this form that it has taken reasonable steps (in accordance with sound business practices) to verify the information contained in this form. Contractor understands that the USAID may rely on the accuracy of such information in negotiating and reimbursing personnel under this contract. The making of certifications that are false, fictitious, or fraudulent, or that are based on inadequately verified information, may result in appropriate remedial action by USAID, taking into consideration all of the pertinent facts and circumstances, ranging from refund claims to criminal prosecution.

Signature of Contractor's Representative	Date
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**ATTACHMENT J.2**  
**Past Performance Report – Short Form (OMB No. 9000-0142)**

(Please see PPR-Shortform.pdf of email)