Section 1: Community Grants Guidelines

PEPFAR Uganda Community Grants Program to Combat HIV/AIDS
The PEPFAR Uganda Community Grants Program to Combat HIV/AIDS seeks to assist local Ugandan grassroots community organizations to implement projects that promote HIV/AIDS prevention and provide care and support to orphans and vulnerable children (OVC) and/or key populations (KP).

More than 1.5 million Ugandans are estimated to be living with HIV and AIDS. Since 2004, PEPFAR has collaborated with the Government of Uganda, national, international, and civil society organizations on building Uganda’s capacity to lead the HIV/AIDS response. Focus areas include care and treatment, prevention, impact mitigation, and health systems strengthening. Supported programs aim to achieve epidemic control by focusing on high impact, efficient interventions within populations and areas with elevated HIV prevalence rates. PEPFAR Uganda implements its programs through the U.S. Centers for Disease Control (CDC), U.S. Department of Defense (DOD), U.S. Department of State (DOS), Peace Corps, and U.S. Agency for International Development (USAID).

With PEPFAR’s support, Uganda is on course to achieve UNAID’s ambitious 90-90-90 goals (90 percent of people living with HIV know their status, 90 percent of those diagnosed are accessing treatment, and 90 percent of those on treatment have suppressed viral loads) by 2020.

PEPFAR Uganda Community Grant Priorities
Is this grant appropriate for your organization? Applications that receive funding will demonstrate a significant impact in the areas that are priorities for the PEPFAR Uganda Community Grants Program. Please review the below information to ensure your project should apply. Grants are awarded for a 1-year period. The amount for each award is no more than equivalent of $25,000 USD and will be paid in Ugandan Shillings. Grants cannot be used for the direct cost of antiretroviral treatment, but instead can support services and programs for individuals.

1. **Applications to Support Orphans and Vulnerable Children (OVC):**
   OVC, under the PEPFAR program, is defined as children 0-17 years of age who have lost a parent to HIV/AIDS, who are otherwise directly affected by the disease, or who live in areas of high HIV prevalence and may be vulnerable to the disease or its socioeconomic effects.

   Applications should emphasize family-centered activities that lessen the impact of HIV/AIDS on children and adolescents, including meeting their most basic needs of health, safety, stability, and schooling through the following core intervention activities:

   - **Access to Health and HIV Services:** Examples include promoting HIV testing for OVC and OVC households, linking HIV-positive children, adolescents, and family members to healthcare facilities for care and treatment, maintaining the negative status of OVC and adolescents, establishing partnerships and referral systems between other community and facility HIV programs, and supporting a child-focused and family-centered approach to health and nutrition.

   - **Safety, Protection, and Psychosocial Support:** Examples include community-level child protection/gender based violence prevention and response activities, referrals to other services, addressing psychosocial health among children and their caregivers, teaching positive parenting skills including discipline, communication on adolescent risk and HIV disclosure, and creating supportive, child-friendly spaces for OVCs, particularly for adolescents at high risk (i.e. out-of-school girls).

   - **Stability, Economic Strengthening, and Social Protection Support:** Examples include developing
Household Economic Strengthening (HES) initiatives, such as savings groups or income generating activities (IGA), improving family financial management, supporting vocational training and other individual HES activities to stimulate income, and integrating HES with other child-focused interventions such as parenting.

- **Schooling and Education:** Examples include providing equal access to education for HIV affected children, identifying key at-risk groups, facilitating primary and secondary education opportunities for at-risk groups, implementing school-based psychosocial support and safety from violence, supporting early childhood development in coordination with Prevention of Mother to Child Transmission (PMTCT) and other pediatric HIV programs, and integrating HIV care and treatment.

**Project applications should target one of the below OVC Prioritized Districts to be considered:**

**Central:** Buikwe, Bukomansimbi, Buvuma, Gomba, Kalangala, Kalungu, Kampala, Kayunga, Luwero, Lwengo, Lyantonde, Masaka, Mityana, Mpigi, Mubende, Mukono, Nakaseke, Rakai, Ssembabule, Wakiso

**Eastern:** Bugiri, Bukedea, Bukwo, Busia, Buyende, Iganga, Jinja, Kamuli, Katakwi, Mayuge, Mbale, Namayingo, Soroti, Tororo

**Northern:** Agago, Apac, Arua, Dokolo, Gulu, Kitgum, Kole, Kotido, Lira, Nebbi, Omoro, Oyam

**Western:** Bundibugyo, Hoima, Ibamba, Isingiro, Kabale, Kabalore, Kagadi, Kakumiro, Kamwenge, Kanungu, Kasese, Kibale, Kiruhura, Kiryandongo, Kyegwga, Kyenjojo, Masindi, Mbarara, Mitooma, Ntungamo, Rubanda, Rukungiri, Sheema

**2. Applications to Support Key Populations (KP):**

A key population (KP) is persons who are affected by punitive laws, regulations and policies, severely stigmatized and marginalized, and are disproportionately affected by HIV. This includes men who have sex with men (MSM), transgender persons (TG), sex workers (SW), and people who inject drugs (PWID). The PEPFAR Uganda Community Grants Program also includes vulnerable populations as classified by the Ugandan HIV prevention strategy, such as prisoners, fisher folks, and truckers.

Community-based outreach is an effective method of overcoming challenges related to reaching out to key populations. Projects should aim to increase KPs’ access to health services. Examples of the types of project activities that are considered include:

- Addressing stigma and discrimination through KP peer networks;
- Increasing use of KP friendly services available within the community;
- Enhancing community condom education and availability, as well as, distributing related HIV prevention commodities;
- Offering risk reduction counseling and supplies through community-based outreach and peer outreach;
- Partnering with community and facility based KP services to increase HIV service up-take;
- Enrolling and retaining HIV positive KP members in HIV care and treatment and other health services towards the 90-90-90 goal;
- Providing HIV testing and counseling (HTC) that are accessible to KPs (i.e. mobile counseling and testing, drop-in centers, “hotspots,” and households);
- Creating a community environment that enables KPs to access services and raising
awareness in stakeholders’ (i.e. community leaders, law enforcement officers, religious leaders, healthcare workers);

- Proactively participating in community level KP advocacy events, including those offered by partnering organizations and ensuring that KP issues filter through the policy decision making channels;
- Promoting an inclusive community in view of the legal environment around KP programming; and
- Engaging with other KP Civil Service Organizations (CSO) to leverage effectiveness and efficiency and minimize service duplications.

Project applications should target one of the below KP Prioritized Districts to be considered:

**Central:** Buikwe, Bukomansimbi, Buvuma, Gomba, Kalangala, Kalungu, Kampala, Kayunga, Luwero, Lwengo, Lyantonde, Masaka, Mityana, Mpigi, Mubende, Mukono, Nakaseke, Rakai, Sembabule, Wakiso

**Eastern:** Bugiri, Bukedea, Bukwo, Busia, Buyende, Iganga, Jinja, Kamuli, Katakwi, Mayuge, Mbale, Namayingo, Soroti, Tororo

**Northern:** Agago, Apac, Arua, Dokolo, Gulu, Kitgum, Kole, Kotido, Lira, Nebbi, Omoro, Oyam

**Western:** Bundibugyo, Hoima, Ibanda, Isingiro, Kabale, Kabalore, Kagadi, Kakumiro, Kamwenge, Kanungu, Kasese, Kibale, Kiruhura, Kyirandongo, Kyegegwa, Kyenjojo, Masindi, Mbarara, Mitooma, Ntungamo, Rubanda, Rukungiri, Sheema

Criteria for Selection
The PEPFAR Uganda Small Grants Coordinator reviews every application received carefully. We look for new and interesting ideas for combating HIV/AIDS within your communities. Applications selected will meet the following criteria:

- The application demonstrates an immediate positive impact on a community need.
- The application involves a significant contribution of materials, leadership, labor, or cash from the community.
- The application clearly identifies the number of OVC and/or KP beneficiaries and the funds requested are a reflection of the number of beneficiaries served.
- The application project is achievable and realistic for the means and skills of the community and will be completed within the 12 month timeframe.
- The application outlines a clear path to self-sustaining activities that will continue once the grant money has been used.
- The application is from a group or community that has a proven track record of accomplishing project objectives.
- The application funds are allocated for the project only; funds cannot be used for alcohol, entertainment, salaries, payments to government officials, utilities, organization operating expenses, or construction.

**2018-2019 Community Grants**
New application forms for the 2018-2019 Community Grants will be available in August 2017. Application open submission will begin in September 2017.