



CALL FOR CONCEPT NOTES – THE HIV-INSTRUMENT (2026-2030)

General outline

The Embassy of the Kingdom of the Netherlands in Maputo (EKN Maputo), on behalf of the Dutch Ministry of Foreign Affairs (MoFA), invites regional civil society organizations (regional CSOs) to submit concept notes for the implementation of the HIV-instrument in six countries in Southern Africa.

As part of the broader policy framework *Focus* (2026–2030), this HIV-instrument aims to contribute to the elimination of HIV/AIDS as a public health threat by 2030 by strengthening the capacities of local civil society organizations to increase the access and integration of HIV-services for adolescent girls and young women, and key populations in Southern Africa.

The total funding available under this programme is €98.7 million, divided into two funding streams:

- Funding stream one (€83.7 million) for regional CSOs to implement activities towards the main goal.
- Funding stream two (€15 million) for Aidsfonds to strengthen the technical and organizational capacity of regional and local CSOs from funding stream one, anchoring the Dutch approach.

To ensure all subgoals are achieved and all countries and target groups are reached in a sustainable and effective way, regional CSOs applying for funding will collaborate with Aidsfonds. Guided by localization principles, Aidsfonds will act in a supportive role towards regional CSOs, responding to local needs and reinforcing local leadership. The application process for funding stream one (regional CSOs) includes two phases:

- **Phase 1: Call for concept notes** – Regional CSOs are invited to submit a concept note developed in cooperation with Aidsfonds, covering both subgoals, countries and target groups. Concept notes will be assessed against threshold criteria (see Annex 1). Regional CSOs are requested to contact Aidsfonds to jointly identify capacity strengthening needs and develop a vision on collaboration and complementarity.
- **Phase 2: Invitation to submit full proposals** – Selected regional CSOs will submit a full proposal developed in cooperation with Aidsfonds. Proposals will be assessed against substantive criteria, to be provided to selected regional CSOs during phase 2.

Funding will only be guaranteed after a regional CSOs successfully concludes both stages of the application process, culminating in a positive *Quality at Entry* assessment and final approval of the full proposal by EKN Maputo.

Timeline period	Activity	Responsible
06 Oct - 15 Nov 25	Submission of call for concept notes	Regional CSOs
13 Oct.	Q&A session with potential partners	Regional CSOs, AF, EKN Maputo + MoFA
19 Nov - 12 Dec 25	Assessment, selection of concept notes and invitation to submit full proposals	EKN MAP + MoFA
15 Dec - 13 Feb 26	Drafting and submission of full proposals	Selected Regional CSO's + AF
16 Feb - 30 Mar 26	Assessment of full proposals due diligence visit	EKN MAP (EKN HAR, EKN PRE, EKN LUA) + MoFA
1 Apr – 15 May 26	Approval phase & contract drafting	EKN MAP
17 May 26	Signing contract	EKN MAP + Regional CSOs + AF
01 June 2026	Official Launch of Programme Implementation	EKN MAP + Regional CSOs + AF

1. Introduction

Southern Africa¹ remains the region most affected by HIV, with disproportionately high prevalence and incidence rates. While significant progress has been made, and despite global, regional, and national commitments to end AIDS by 2030, the HIV-response in the region continues to face major challenges that limit further progress. These include stigma and discrimination, gender-based violence (GBV), punitive laws, conservative norms, and persistent socioeconomic inequalities that undermine access to HIV-prevention, testing, treatment, care, and support, particularly for adolescent girls and young women, and key populations (men who have sex with men, trans gender, people who use drugs, sex workers, and migrants). Challenges are also related to health systems with integrated HIV-services in Southern Africa, which are under-resourced, fragmented, and under pressure due to declining donor funding. Many countries show inconsistent domestic investment and limited political will to implement people-centred HIV-policies. Without stronger support for locally led, community-driven responses with CSOs at the centre of decision-making and implementation, progress towards ending AIDS as a public health threat will be undermined.

2. HIV-instrument goal

The main goal of the HIV-instrument is:

To contribute to the elimination of HIV/AIDS as a public health threat by 2030 by strengthening the capacities of local civil society organizations to increase the access to and integration of HIV-services for adolescent girls and young women, and key populations in Southern Africa.

Under the main goal, two specific subgoals are identified:

Subgoal 1 – HIV-services and systems: To increase access to HIV-services: prevention, referral to testing and treatment, and care and support, including integration of people-centred HIV-services in health systems, responding to the needs of adolescent girls and young women, and key populations.

Subgoal 2 – HIV-policies: To strengthen development and implementation of data-informed HIV- and AIDS-policies at local, national and regional levels, with a focus on removing structural and multi-sectoral barriers and strengthen integration of people-centred HIV-services in health systems, addressing the specific needs of adolescent girls and young women, and key populations.

3. Programme principles

This HIV-instrument is part of the broader policy framework *Focus* (2026–2030). The *Focus* framework emphasizes locally led development, capacity strengthening of local civil society organizations, increased focus and efficient use of resources. Across all instruments, gender equality is a key condition².

3.1. Locally led development

This HIV-instrument promotes a locally led development approach, where local actors such as individuals, societies, networks, (non-governmental) organizations, local entities and local governments decide on their priorities, develop their own agenda and solutions and use their capacity, leadership and resources to realise these solutions. In this HIV-programme, key principles of locally led development are:

- Community leadership Key population-led, youth-led, and women-led networks and community movements must drive the HIV-response, not merely participate as implementing agents.
- Meaningful participation in design, coordination, governance, agenda setting, allocation, monitoring and learning.
- Building and strengthening community-led movements, shifting power and resources to these community communities and networks.
- Alignment with local context and needs. This means that interventions should align and contribute to national and regional (SADC) frameworks, policies and strategies. Examples are the Lusaka Agenda, the Maputo Protocol, SADC strategies related to HIV, and the UNAIDS Sustainability

¹ [Eastern and Southern Africa regional profile — 2024 global AIDS update The Urgency of Now: AIDS at a Crossroads | UNAIDS](#)

² [Letter to parliament on the policy framework for cooperation with civil society organisations in the period 2026-2030](#)

Roadmaps. Locally led approaches and interventions also respond to the needs of adolescent girls and young women, and key populations related to the subgoals.

In their concept notes, applicants are requested to demonstrate how their programmes ensure locally led development by applying the key principles outlined above.

3.2. Strengthening capacity of local organizations on the Dutch HIV-approach with Aidsfonds

While the HIV-instrument is grounded in the principle of locally led development with communities, MoFA acknowledges the expertise and contribution of Dutch organizations strengthening capacity of regional and local CSO on the *Dutch HIV-approach*. The Dutch HIV-approach has demonstrated success in the past and is characterized by the following key elements:

- A human-rights based, people-centred approach to reach vulnerable and hard-to-reach key populations.
- A community-led approach ensuring leadership, meaningful participation and representation of communities (such as community-led organizations, networks, and other movements) in programme design, agenda-setting, resource allocation, movement building, and advocacy, thus positioning communities as drivers of change.
- Building bridges between communities, civil society, academia/knowledge institutes, healthcare providers and relevant regional and national authorities, recognizing that sustainable change requires coordinated efforts.
- Evidence-based programming, data-driven decision making, ensuring accountability of duty bearers.
- Linking HIV-response to broader health system strengthening and national and regional health goals, acknowledging that HIV cannot be addressed in isolation from sexual health, rights, gender norms and other structural barriers such as inequality.

To achieve the main goal of the HIV-instrument, it is essential not only to support technical capacity strengthening but also to address organizational capacity strengthening needs of civil society organizations in the region. Therefore, the technical key elements of the Dutch HIV-approach are complemented by organizational capacity strengthening. This includes support for governance, financial management and accountability, and Monitoring, Evaluation and Learning (MEL) systems.

Given its longstanding expertise in the Dutch HIV-approach globally and in Southern Africa, as well as its history of strong collaboration with EKN Maputo, the MoFA has identified Aidsfonds as the dedicated partner to support implementation of this HIV-instrument. In doing so, Aidsfonds supports regional and local CSOs to become stronger organizations and to deliver more sustainable results in line with the instrument's main goal and sub-goals. Annex 4 provides an overview of the Aidsfonds' track record and capacity strengthening offer, highlighting its specific expertise on the Dutch HIV-approach.

The role of Aidsfonds

This HIV-instrument follows the principles of locally led development. Guided by these principles, Aidsfonds will act in a supportive role towards regional and local CSOs, responding to their needs and reinforcing local leadership. Therefore, in this role, Aidsfonds will:

- Strengthen technical capacity of regional and local CSOs that are selected under this HIV-instrument to ensure community-led responses are anchored in the Dutch HIV-approach. This will help regional and local CSOs to deliver interventions more effectively and sustainably.
- Strengthen organizational systems and long-term sustainability of CSOs that are selected under this HIV-instrument, including activities on governance, financial management & accountability, and Monitoring, Evaluation and Learning (MEL).

3.3. The funding modality and budget

The budget of this HIV-instrument is delegated to EKN Maputo. The total budget allocation of this HIV-instrument amounts to €100 million to achieve the main goal and subgoals. Of this amount, 0.3% is reserved for Monitoring, Evaluation and Learning under the MoFA policy framework *Focus*, and 1% for the EKN Maputo to support programme and policy activities in the region – in coordination with EKN Harare, EKN Pretoria and EKN Luanda. An amount of €98.7 million is available for activities of partners.

The HIV-instrument applies a **two-funding stream modality**: **1)** Funding towards direct implementation by regional CSOs; and **2)** funding for technical and organizational capacity strengthening from Aidsfonds. Together, activities from the two funding streams contribute to the overarching programme main goal and subgoals, ensuring locally led and sustainable HIV-interventions in Southern Africa.

1) Regional CSOs (Max. €83.7 million)

This funding stream is dedicated to support regional CSOs in delivering direct interventions on both subgoals, focusing on services and systems, and policies related to HIV. Regional CSOs, who can operate across borders and align with the regional character of this HIV-instrument, are eligible to apply for funds. Regional CSOs need to include both subgoals, all countries and all target groups in their approach as reflected in their concept note. Local CSOs are not eligible to apply as applicant. Regional CSOs may subcontract local CSOs or other partners where this is relevant to ensure thematic or geographic coverage of interventions. See annex 1 for the threshold criteria for selection and the definitions of regional CSOs.

In their concept notes, applicants are requested to submit an indicative general budget per cost category, subgoal and per country for their proposed activities, up to a maximum of €83.7 million.

2) Aidsfonds (Max. €15 million)

Funding will be provided to Aidsfonds to strengthen technical and organizational capacities of regional CSOs and local CSOs funded under stream one, anchoring the Dutch HIV-approach. Aidsfonds may also directly contract local organizations (e.g. civil society platforms and networks) to ensure that Dutch HIV-expertise is effectively embedded in programme implementation.

3.4 Collaboration, Coordination and Accountability

Collaboration between regional CSOs and Aidsfonds

In the full proposal phase, applicants will provide more detail on the partnership with Aidsfonds, specifying the foreseen interventions and contributions of both the regional CSO and Aidsfonds. After approval of the full proposals, each partner will have its own activity plans, output level results, budgets and contracts, while contributing to shared programme outcomes and indicators. Aidsfonds will have its own activity plan, including all capacity strengthening activities with partners, output level results, budget and contract, while contributing to shared programme outcomes and indicators.

To ensure transparency and clarity on collaboration and joint implementation of activities between regional partners and Aidsfonds, it is required to record agreements on mutual responsibilities (through for example a Memorandum of Understanding) during the call for proposal (phase 2).

Legal and financial accountability

Regional CSOs and Aidsfonds hold legal and financial responsibility for implementing their own activities and complying with the obligations attached to the awarded funds. Each partner is accountable for the funds allocated to them, activities and decisions under their direct control, and activities implemented by sub-implementing partners. Regional CSOs and Aidsfonds are only liable for operational and financial misconduct or mismanagement of activities funded directly or via subcontracting under their budgets allocated to them by EKN Maputo. A regional CSO or Aidsfonds is not liable for operational and financial misconduct or mismanagement by other organizations independently contracted by EKN Maputo under this HIV-instrument.

Joint accountability

Although each awarded partner maintains its own interventions and own activity plan, all partners, including sub-implementing partners, share joint accountability to ensure that interventions contribute to the main goal and sub-goals of this instrument, rather than solely to their individual objectives.

Coordination

EKN Maputo will coordinate the HIV-instrument, ensuring alignment, coherence, complementarity, and synergy among all implementing partners. Coordination will be operationalized through joint planning, structured progress reviews, and harmonized MEL frameworks and processes. Within this coordination

framework, awarded partners are expected to contribute to the joint accountability of results, include and follow harmonized programme indicators and reporting mechanisms, share lessons learned and best practices, create synergies and joint interventions, and coordinate communication efforts to enhance the collective visibility and impact of the HIV-instrument.

3.5 Focus of the HIV-instrument

3.5.1. Geographic coverage

This HIV-instrument builds on existing Dutch investments, networks, and expertise in Southern Africa. The selection of geographic focus is further guided by criteria such as strategic priorities, epidemiological data, the track record of the HIV-response, country gaps and needs, the current donor landscape, and Dutch representation (Embassies and consulates) and interests.

To maximize impact through a more focused approach, the HIV-instrument targets interventions in six countries: Angola, Eswatini, Mozambique, South Africa, Zambia, and Zimbabwe. Activities addressing populations involved in cross-border movements will also take place in border areas of Lesotho and Malawi. In addition, regional initiatives—such as policy roundtables, and learning activities for decision-makers and policymakers—may include participation from Lesotho and Malawi.

3.5.2. Target groups

Adolescent girls and young women aged 15 to 29 years, and key populations such as men who have sex with men, transgender, people who use drugs, migrants, and sex workers (starting from the age of 18 years old).

3.5.3. Service delivery

In alignment with the principles of the policy framework *Focus*, the HIV-instrument will focus on activities in the field of service provision that directly improve people's and communities' lives. While activities related to advocacy and dialogue on various levels are allowed (except for lobbying in the Netherlands), at least 30% of the programme budget under stream 1 of this HIV-instrument must be spent on activities in the field of service provision.

3.5.4. An integrated approach

To prevent fragmentation of multiple, smaller programmes and to ensure integrated regional programming with synergies between partners, regional CSOs are required to submit a concept note that covers all countries, all subgoals and all target groups. If necessary, regional CSOs can sub-contract local CSOs as sub-implementing partners to ensure all countries, subgoals and target groups are included.

As shared in the *Focus* policy framework, the HIV-instrument shifts away from multi-layered consortia towards simplified two-layered structures. This means that the regional CSO can sub-contract local CSO as sub-implementing partners, but these local CSO cannot sub-contract another partner.

3.5.5. Cross-cutting themes: gender and climate change

Gender and climate change are cross-cutting themes in all Focus-instruments. This HIV-instrument explicitly includes gender equality, as actively engaging with women and girls and addressing their specific situation, including underlying issues- enhances effectiveness of effective development cooperation and leads to better programmatic results³. The instrument also recognizes that climate change poses risk and creates vulnerabilities that directly affect health outcomes. By integrating climate considerations, the instrument ensures that interventions are more resilient, sustainable, and responsive to the realities faced by affected communities. Applicants who are invited to submit a full proposal (phase 2) need to include in their project proposal a description and analysis of gender, an analysis of the context of climate change, including an assessment of climate risks and climate vulnerabilities relevant to the HIV-instrument.

³ Activities under the HIV-instrument must score 1 (gender equality as the main objective) or 2 (contributes to gender equality) according to the OECD-DAC gender equality policy marker.

4. Concept note requirements⁴

The aim of the concept notes is to select regional CSOs that meet the threshold criteria and subsequently are willing and capable to submit a proposal in line with the goals described above. The concept note will have the following requirements:

Part 1: Cover page and formal statement

1. Cover page which specifies:
 - the organization names of the regional CSO, and potential other partners.
 - the name and designation of the contact person and full contact details of the lead applicant.
2. Signed statement by the regional CSO confirming the threshold criteria are met.

Part 2: Organizational track record and capacity

1. Description of organizational set up.
1. Registration, governance structure, strategic plan.
2. Relevant (and recent) track record related to HIV-experience of the regional CSO in selected countries in the region.
3. Overview of financial statements of the applicant showing financial independence and capacity.

Part 3: General vision and programme set-up

1. A general analysis of the regional and context regarding the HIV-instrument.
2. A general description of the programme approach:
 - a. Regional and country context analysis.
 - b. Alignment with regional (SADC) and national strategic plans related to HIV.
 - c. To reach the main goal/subgoals.
 - d. Countries of implementation.
 - e. Target groups.
 - f. Cross-cutting themes (gender and climate).
 - g. Plans of collaboration with other sub-implementing partners to ensure programme, country and target group coverage.
3. Description of vision on locally led development.
 - a. In line with the key principles highlighted in chapter 3.1. of this HIV-instrument, How the programme is set up and intends to ensure locally led development,
4. Description of vision on and approach of collaboration with Aidsfonds.
 - a. How the regional CSO will collaborate with Aidsfonds, including a description of technical and organizational capacity strengthening needs, jointly identified with Aidsfonds.
5. Indicative budget overview per subgoal and per country (Excel format, see annex 3).

Annexes (not part of page limit):

- Signed cover page.
- Summary table threshold criteria.
- Documentation related to the threshold criteria:
 - 1. Type of organization (regional CSO).
 - 2. Relevant expertise on HIV.
 - 3. Financial independence.
- Indicative budget overview.

⁴ min 5, max. 10 pages, excluding annexes ; 15 A4 size; font Calibri pt. 11; line spacing 1.08 or more, PDF format.

5. Selection procedure

The selection procedure for this call for concept notes is divided into two rounds: the concept note phase and the proposal phase.

Phase 1: Call for concept notes (10 pages)

Regional CSOs are invited to submit a concept note in collaboration with Aidsfonds. Concept notes will be assessed against the threshold criteria outlined in this call (annex 1). Only concept notes that meet these criteria will be considered for the next phase. Incomplete applications or concept notes of more than 10 pages (excluding annexes) will be disqualified and will be rejected without being assessed. Regional CSOs whose concept notes do not meet the threshold criteria will be notified by EKN Maputo within six weeks after the submission deadline. Funding will not be provided based on a concept note.

Phase 2: Submission of full proposals

Selected regional CSOs from phase 1 will be invited to submit a full proposal developed in collaboration with Aidsfonds. Generally, full proposals will describe the regional CSOs' detailed activities and objectives, include complementary activities in collaboration with Aidsfonds and further demonstrate how the proposal contributes to both goals, countries, and target groups, Monitoring, Evaluation and Learning (MEL) and overall budget.

Full proposals will be assessed against quality criteria and will also include organisational assessments and due diligence visits from EKN Maputo. Partners will be assessed by EKN Maputo on organisational capacity, transparency, integrity, and programme oversight, including governance arrangements, due diligence, SEAH policies, risk mitigation strategies, and monitoring mechanisms.

More details on the requirements of the full proposals, including the organisational assessment, will be included in the invitation to submit a full proposal and shared with selected regional CSOs after Phase 1.

Approval

Funding will only be guaranteed after an applicant successfully concludes both stages of the application process, including a positive organisational assessment, culminating in a positive Quality at Entry assessment and final approval of the full programme proposals by EKN Maputo.

4. Submission guidelines

Regional CSO are invited to submit a concept note and annexes to EKN Maputo to map@minbuza.nl, no later than 15th November 2025, by 23:59 CAT. The subject line of the email includes the name of the programme you are applying for and name applicant, namely: Call for concept notes for HIV-instrument + name applicant. The time that the email is received is considered as the time of submission. Any technical issues relating to electronic submission is at the risk of the regional CSOs' application.

It is important to note that the email server will reject files larger than 10 MB. For larger files a ZIP-file can be used, or the application could be split up into smaller files and sent in separate and clearly numbered emails. When the latter is the case, the time at which the last email is received, is the time the application is submitted. Concept notes submitted after the deadline will not be considered.

Contact details Aidsfonds

Regional CSOs submitting a concept note are required to collaborate with Aidsfonds. For this purpose, the following focal point is available for engagement:

Soraya Bouwmeester, senior project officer key populations, Aidsfonds
Email: SBouwmeester@aidsfonds.nl

Q&A Session

EKN Maputo will host an online Q&A session on Monday 13th October 2025, from 14:00- 15:00CAT. Given the limited time available and questions can be addressed during this session, please submit your questions in advance by email to map@minbuza.nl, no later than Friday the 10th of October 12.00CAT. Use the subject line: Question for Concept Note – HIV-Instrument.

To attend the session, please use the information below:

[Q&A session HIV-Instrument EKN Maputo](#)

Enter Meeting ID: **714961**

Enter Passcode: **4491**

ANNEXES

ANNEX 1: THRESHOLD CRITERIA

1. Type of organization

The applicant is a regional CSO whose objectives, as laid down in its registration, statutes, governance structure and/or strategy (or other relevant documentation), relevant to the main and subgoals of this HIV-instrument. Local CSOs can NOT be applicants but can be sub-contracted by the regional CSO as sub-implementing partner. The applicant is also allowed to sub-contract other regional CSOs.

What are regional CSOs: Regional CSOs have a regional mandate and scope and are registered in one of the selected countries of implementation in Southern Africa. They may include national organizations, (part of) regional networks, and/or regional (indigenous) non-governmental organizations (NGOs) who have implemented relevant regional HIV-programme activities in all 6 targeted countries in the past 10 years. Regional CSOs operate within the local context of reference, are subject to local laws, have local governance structures and their strategies and actions are centred on local issues.

Organizations NOT eligible as applicants:

- International organizations, including foreign-headquartered NGOs, even if registered and operating in the Southern African region.
- International organizations regionally registered but lacking strong local/indigenous roots (e.g. no local leadership, governance or a track record in locally led implementation).
- For-profit entities.
- UN-agencies and multilateral institutions.
- Regional and/or local organizations registered outside the selected Southern African countries.
- Local organizations, CBOs, community-led organizations, networks (eligible only sub-contracted partner).

Eligibility Documentation: Provide the following documentation: Registration/Article of Association, statutes, governance structure, and/or strategy relevant to the main and subgoals of this HIV-instrument, to be eligible as applicant. If your organization does **not** qualify as regional CSO, you are not eligible for funding as applicant in this HIV-instrument.

2. Relevant Expertise on HIV

To be able to qualify for funding, applicants must have proven track record, showing relevant HIV-expertise in Southern Africa. Include a relevant track record on:

- HIV-expertise related to main and both subgoals of the HIV-instrument.
- HIV-expertise of the past 10 years, including three recent examples in the past 5 years.
- all six selected countries in Southern Africa.

2.1 Instructions for demonstrating relevant expertise on HIV

Complete the table below to demonstrate a brief overview of relevant HIV-expertise in the past 10 years including **at least three detailed examples** of similar programmes (in terms of size, context, and complexity) that have been successfully completed (max 3 pages):

Programme Title	Programme description + role applicant	Implementation Period	Geographic coverage	Total programme budget vs managed budget	Donor Funding Source /
				€	
				€	
				€	
				€	

Concept notes should cover all selected countries, subgoals and target groups. However, if the applicants' current track record does not cover all countries, sub-goals, or target groups, clearly indicate these gaps in your concept note and explain how you will ensure full coverage in the areas not currently addressed.

3. Financial independence criteria

The information below includes the threshold criterion on financial independence or eligibility for the customised approach for specialist and small, Southern organizations.

3.1. Financial independence

To be eligible for funding under the HIV-instrument, two requirements have been established regarding the financial independence of the applicant organization. In line with the policy framework *Focus*:

- During the period 2022–2024, at least 25% of the applicant's total annual income was derived from sources **other** than income from the MoFA.
- An organization may not receive more income/funding from the MoFA under this HIV-instrument than it receives in non-MoFA income (calculated as an average over the past three years).

Income from the MoFA is understood to include:

- all direct grants and/or contributions⁵ received from the budget of the MoFA or the budget from Foreign Trade and Development (including embassies of the Kingdom of the Netherlands), **minus** funds that were transferred⁶ to other organizations within a partnership arrangement to the benefit of which the grant or contribution was paid, such as a consortium under the 'Strengthening Civil Society' policy framework or any other consortium in which the applicant acted as lead partner.
- all funds received from an organization that received a grant or contribution from the MoFA or the Foreign Trade and Development budget, for activities paid from that grant or contribution.

Applicants meeting the **minimum threshold of 25% non-MoFA income** can be awarded an annual grant or contribution **up to** the average annual amount of non-BZ income received during the period 2022 to 2024 inclusive. A grant or contribution equal to **five times** that average annual amount may therefore be awarded over the full five years of the programme, subject to the ceiling per application under this HIV-instrument.

Instructions for demonstrating financial independence

Specifically for threshold criterion related to financial independence, provide the following documentation:

A. Completed Table 1.

Notes for completing table 1:

- **Row 1:** Enter your total annual income for during the years 2022,2023, and 2024
- **Row 2:** If applicable, also indicate the MoFA funds you disbursed to consortium partners within a partnership in which you were the lead partner during those years.
- **Row 3:** Subtract the amount in row 2 from the amount in row 1. Row 3 now shows your annual total income minus disbursed MoFA-funds to consortium partners.
- **Row 4:** Then indicate which portion of the amount in row 3 did not come from the MoFA's budget or the Foreign Trade and Development budget.
- **Row 5:** Determine the annual average of the amounts in row 4.
- **Row 6:** Then indicate the annual percentage of non-MoFA-income relative to your total income (non-MoFA-income from row 4 / total income from row 3 x 100).
- **Row 7:** Finally, determine the annual average percentage of non-MoFA-income.
- Provide a separate appendix explaining how the figures in the table arrived

⁵ Not including commissioned work.

⁶ By 'transferring' funds, we mean the bank transfer of funds to the bank account of a consortium partner.

		2022	2023	2024
		Amount	Amount	Amount
1.	Annual total income in EUR per year			
2	Total amount of demonstrably disbursed MoFA-funds to consortium partners under a partnership in which you were the lead partner, in EUR per year			
3	Annual total income minus demonstrably disbursed MoFA-funds to consortium partners under a partnership in which you were the lead partner (amount from row 1 minus amount from row 2), in EUR per year			
4.	The part of the amount in row 3 that was NOT funded by MoFA in EUR per year			
5	The average annual non-MoFA-income (row 4 of (2022 + 2023 + 2024) / 3) in EUR			
6.	The annual % non-MoFA-income (total non-MoFA income from row 4/total income from row 3 x 100), in % per year%%%
7	The average annual % non-MoFA-income (row 6 of (2022 + 2023 + 2024) / 3), in %%		

Table 1 – Your organization's income in 2022, 2023 and 2024

After completing Table 1, check the outcome of row 7 (average percentage of non-MoFA-income over the years 2022, 2023, and 2024). If this percentage....:

- ... is less than 25%: you do not meet the threshold criterion and are not eligible for funding under the HIV-instrument
- ... is higher than 25%: you can apply for a subsidy of up to 5 x the average annual amount of non-MoFA-income for 2022, 2023, and 2024 (row 5 of Table 1). The average annual amount is multiplied by a factor of 5 because all selected programmes are awarded funds for a maximum of five years.

The maximum subsidy amount that can be applied for is illustrated below with an example:

Calculation example:

*The average annual non-MoFA-income of applicant XYZ over the years 2022 + 2023 + 2024 is € 10,000,000. Applicant XYZ wishes to apply for funding stream 1 the HIV-instrument, for which a maximum application amount of **€83.700.000** applies (see paragraph 3.3. of the call for concept notes). Although applicant XYZ could apply for a maximum of (5 x €10,000,000 =) €50,000,000 based on their annual non-MoFA-income.*

B. Audited annual financial reports for the financial years 2022, 2023, and 2024

To support the information in Table 1, please submit your audited annual financial reports for the financial years 2022, 2023, and 2024. If applicants cannot provide audited annual financial reports, they must provide an explanation as to why the annual financial reports have not been audited. For each submitted annual financial report, please indicate on which page and under which section the requested information on financial independence listed in Table 1 can be found.

3.2 Customised approach for specialist organisations and small Southern organisations

For specialist organizations and small Southern organisations, an exception is made to the 25% threshold criterion, as well as to the maximum grant amount indicated above. In the new policy framework, a **specialist organisation** is defined as follows:

- It is a civil society organization that distinguishes itself, compared to other civil society organizations active in the same policy area, in terms of focus, nature, and the scope of knowledge and experience.
- The organization has been active for at least 15 consecutive years (reference date: 1 June 2025) on the core theme to which the instrument for which funding is requested relates. This must be demonstrated through a track record.
- The organization has specialized in the core theme. This must be demonstrated by showing that at least 80% of its annual program funding over the past five years has been spent on activities or interventions related to this core theme, based on an auditor-certified statement.

A **small Southern organisation** is defined as an organization that

- was established and is legally registered in a low- or middle-income country, according to the OECD-DAC classification, and
- has annual personnel budget of no more than EUR 500,000. This must be evidenced by the most recent financial annual report.

Instructions for demonstrating eligibility as a specialist organisation

3.2A Articles of Association with date and place of incorporation

The articles of association required under threshold criteria 1 of the HIV-Instrument must demonstrate that the applicant has existed for at least fifteen years (reference date: October 1, 2025).

3.2B Track record on your core theme

Under threshold criteria 2, applicants are requested to submit track record listed for the past 10 years. To be eligible as specialist organisation, the applicant should demonstrate that it has been active on the core theme covered by the instrument for at least 15 consecutive years (reference date: October 1, 2025). This track record must include at least five and no more than ten projects or programmes focused on the core theme covered by the grant application. This track record should demonstrate a spread over time (i.e. a distribution of projects over the past fifteen years).

- A requirement is that at least one project must be more than ten years old.
- Describe the projects in no more than 500 words per project, clearly stating:
 - The nature and scope of the project and your organization's role.
 - The project's key results.
- If this track record is already covered under threshold criterion 2 and meets the requirement for this specific case, please indicate this and refer to the track record provided under threshold criterion 2.

3.2C Completed Table 2 including auditor's statement

Complete and submit Table 2 based on the annual financial reports requested in 3.2D below.

Table 2 – Specification of the expenditure of the applicant's programme funding 2020 – 2024

		2020	2021	2022	2023	2024
1.	Total annual programme funding.	€	€	€	€	€
2.	The portion of 1. (row above) spent on activities related to the core theme.	€	€	€	€	€
3.	% of programme funding spent on activities related to the core theme (row 2 - core theme funding / row 1 - total annual programme funding x 100).	%	%	%	%	%

Applicants who receive a positive assessment from the MoFA for eligibility for the customised approach as a specialist organisation, and who are invited to submit a call for proposals will be asked separately to provide an auditor's statement. This statement certifies that the information in Table 2 below is correct, and that at least 80% of your organisation's annual programme funding in 2020, 2021, 2022, 2023, and 2024 was spent on activities related to the core theme. There is no set format for this statement. Like the auditor's statement under 3.2C above, the statement on Table 2 does **not** need to be submitted with the application but should be submitted along with the ORIA documentation at the explicit invitation of the MoFA.

3.2D – Audited annual financial reports for the financial years 2020, 2021, 2022, 2023 and 2024

Please submit the audited annual financial reports for the financial years 2020, 2021, 2022, 2023, and 2024. Please clearly indicate on which page and in which section we can find the requested information from Table 2. If applicants cannot submit audited annual financial reports, they must provide a conclusive explanation as to why the annual accounts have not been audited.

N.B. To qualify for the customised approach through qualification as a specialist organization, all requirements arising from 3.2A, 3.2B, 3.2C, and 3.2D of this annex must be met.

Instructions for demonstrating eligibility as a 'small Southern organization'

3.2E Place of incorporation and registered office

The articles of association and any amended articles of association or registration (see threshold criteria 1) that are required to be submitted with the concept note must provide sufficient evidence that your organisation is incorporated and registered in a country listed on the OECD-DAC list of low- and middle-income countries. If the articles of association do not sufficiently demonstrate this, you can submit a deed of incorporation as an attachment to the application.

3.2F Annual financial report

You are required to submit your most recent annual financial report with your application. This report must demonstrate that you have spent a maximum of EUR 500,000 on employees of the applicant.

N.B. To be eligible for the customised approach through qualification as a small southern organisation, all requirements arising from 3.2E and 3.2F of this annex must be met.

4. Vision on locally led development vision and complementarity

The applicant demonstrates a vision of and approach on locally led development and collaboration with Aidsfonds and other potential partners. This includes a description of:

- how the applicant ensures locally led development, in line with the key principles outlined in chapter 3.1 of the HIV-instrument.
- how the applicant shared a vision and approach of collaboration with Aidsfonds, including a description of technical and organizational capacity strengthening needs. the HIV-Instrument, in line with description in chapter 3.4 of the HIV instrument.

Applicants not sharing a vision of and approach for locally led development and collaboration with Aidsfonds, including jointly identified areas for technical and organizational capacity strengthening, will **not** be eligible for funding under this HIV-instrument.

ANNEX 2. NON-ELIGIBLE ACTIVITIES PER SUB-GOAL OF REGIONAL CSOS AND LOCAL CSOS.

Subgoal 1: To increase access to services, including HIV-prevention, referral to testing and treatment, and care and support focusing on adolescent girls and young women, and key populations.

Ineligible activities:

- Purchase of pharmaceuticals (ARVs; PreP; Lenacapavir and others) and HIV-tests.
- Economic activities linked to reducing HIV-vulnerability or improving stability of target groups.
- Acquisition of Condom and PreP; HIV-testing KITS; ARVs.
- Activities unrelated to HIV-prevention, care and support as mentioned above.

Subgoal 2: To strengthen development and implementation of data-informed HIV- and AIDS-policies at local, national and regional levels, with a focus on removing structural and multi-sectoral barriers and addressing the specific needs of adolescent girls and young women, and key populations.

Ineligible activities:

- Advocacy or policy work unrelated to HIV/AIDS or target groups.
- Initiatives lacking clear evidence or data components.
- Standalone awareness campaigns without policy or structural change focus.
- Policy/advocacy initiatives outside SADC, unrelated to the main and subgoals and/or in the Netherlands.

Lastly, the following activities are ineligible for:

- Proselytism or activities involving racism, stigmatizing expressions, antisemitism, or other forms of religious persecution or discrimination that are punishable and/or prohibited under Dutch and/or European law.
- Commercial activities or activities that already receive direct subsidy or contributions charged to the budget of the Ministry of Foreign Affairs or the budget for Foreign Trade and Development Cooperation.
- Policy advocacy in the Netherlands.

ANNEX 3: INDICATIVE BUDGET TEMPLATE

Instructions:

- Fill in the direct costs, per cost category (including subgoals), and per country.
- The maximum budget of the proposal should not exceed the maximum budget available under this HIV-instrument.
- At least 30% of the programme budget under this HIV-instrument must be spent on activities in the field of service provision.
- To ensure concept notes include a regional scope of interventions, and to avoid potential fragmentation of resources, smaller-sized projects and contracts, a total budget below €15 million will be considered ineligible.

Total direct costs per subgoal / country	Angola	Mozambique	Eswatini	South Africa	Zambia	Zimbabwe	Non-specific	Total
Program management costs								
Subgoal 1								
Subgoal 2								
Monitoring Evaluation and Learning (Incl. Report and Audit)								
Total Direct costs								

Annex 4: Aidsfonds track record

Aidsfonds – Soa Aids Nederland is a Dutch organisation with more than 40 years of experience in the HIV response and over 100 years of expertise in STI and sexual health prevention and care. We envision a world without HIV and AIDS, where everyone enjoys good sexual health and is free to love without fear. As a Dutch organisation that also works internationally, we place working with communities as equals at the heart of all our efforts. We combine scientific research, community engagement, and advocacy to ensure that HIV, AIDS and STIs remain high on the global health agenda. By applying the knowledge and lessons learned in the Netherlands, especially on our [effective approach on HIV](#), to our international programmes and vice versa, we strengthen the global response and contribute to building a healthier world.

What we do

As one of the largest HIV-specific funders globally, Aidsfonds works closely with communities, funders, researchers, and decision-makers to invest in community-led, participatory approaches and advocate for effective HIV responses. We have advocates in The Hague and Brussels to influence health policies and financing, and we engage other donors as philanthropic advocates while supporting global community networks to shape policies, medicine pricing, and funding. In the Netherlands, we provide sexual health expertise, education, and advocacy to ensure accessible and inclusive services. Across all our work, we foster collaboration among communities, governments, academia, funders, religious leaders, and law enforcement to create enabling environments for health. Our approach is grounded in rights-based programming, ensuring communities lead from programme design through implementation and evaluation. We focus our work on:

Equal rights: We tackle criminalisation, stigma, and gender-based violence, working with communities, governments, and partners to reduce HIV vulnerability. Through community-led monitoring, we turn evidence into advocacy, as seen in our [Hands Off programme](#), where data on rights violations against sex workers informs policy and programming.

Sexual health: We improve access to prevention, treatment and care through initiatives like the [EmpowHER Fund](#) which expand choices in HIV prevention and drive lasting policy change. These efforts enable women, girls, and key population communities to take ownership of their sexual health.

HIV cure: Through the [SPIRAL project](#), we bring together researchers from the Netherlands and Africa to research different HIV variants worldwide to ensure that HIV cure research is globally representative and equitable. We have invested in developing the talent of young African HIV researchers as key collaborators in this work.

Funding and support: In the Love Alliance and the [Robert Carr Fund](#), we use [participatory grantmaking](#) to give communities more control over funding and decisions. This approach helps build stronger networks, better advocacy, and more sustainable work. By supporting communities to grow their own



organizations, we help them speak up and push for change. So far, the [Love Alliance](#) has supported over 300 organizations in 10 countries, all working to improve human rights and access to healthcare.

Our achievements in 2024



What we can offer

Rooted in the Dutch Approach - pragmatic, rights-based and community-centred – we bring a strong track record in:

- Community leadership & decision-making – coordinating co-decision making in HIV programming, including participatory grantmaking.
- Movement building & advocacy – supporting community-led organisations to provide services, advocate, and strengthen leadership.
- Participatory grantmaking – funding key population and women-led organisations.
- Inclusive governance – facilitating decision-making and governance in multi-stakeholder partnerships.
- Stakeholder engagement – facilitating collaboration between communities, decision makers, governments, law enforcement, religious leaders, healthcare providers, and high-level policymakers.
- Global advocacy – driving change on HIV financing, equal rights, and global health policy.
- Evidence & accountability – gathering data to inform programming and advocacy, and strengthening community-led monitoring (e.g. documenting human rights violations).
- Thought leadership – expertise on HIV cure research, participatory grantmaking, key population programming, and community-led approaches.
- Capacity & systems strengthening – supporting national and regional CSOs in governance, financial management, accountability, advocacy strategies, and monitoring & evaluation.
- Peer-driven learning – implementing learning approaches that centre the growth and leadership of movements.