



## Health Commitment Grants — India.

### Request for Application

#### A Community Approach to Decentralized Community Based Disease Surveillance in India

**TIFA2.0/2025/005**

**Posted date: 27th Jan 2026**

**Questions Due: 30th Jan 2026 Jan 2026 to [tifa.bharat@jsi.org](mailto:tifa.bharat@jsi.org)**

**Submissions due: 6th Feb 2026 via [Tifabharat.org](http://Tifabharat.org) portal**

JSI Research & Training Institute, Inc. (JSI) implements the Tuberculosis Implementation Framework Agreement (TIFA), a project managed by the United States Department of State (DOS). Spanning eight years (2019–2027), this initiative builds on the U.S. Government’s investments in TB programming. In 2026, the project is expanding its scope to address additional health priorities under the America First Global Health Strategy.

Through direct engagement with local governments, TIFA co-designs Health Commitment Grants (HCGs) and other subawards. These instruments accelerate progress toward national and global health targets, foster country ownership, and enhance public health emergency preparedness and response.

**The Collaborative Process:** TIFA employs a phased, collaborative approach to develop HCGs and subawards. In partnership with the National Centre for Disease Control (NCDC), we identify country priorities and potential implementing partner organizations. Invited organizations will undergo a guided co-design process; once the subaward has been approved, the implementing partner will implement the subaward activities while DOS and JSI/TIFA verify the completion of key milestones.

In India, the TIFA project is focused on strengthening national health security by fostering unified action across government sectors and local partners. This collaborative approach is essential for building a resilient defence system capable of detecting, preventing, and responding to the rising threat of emerging infectious diseases. While JSI/TIFA’s foundational work involved partnering with organizations to advance National TB Elimination Program goals, our mission has recently expanded. We are launching a new focus on Global Health Security and are requesting applications for community-based surveillance to enhance our collective ability to detect and respond to health threats.

JSI/TIFA will fund Global Health Security initiatives to contribute to India’s efforts to contain outbreak-prone diseases and emerging pathogens at their source. To support this, JSI/TIFA seeks an organization to implement a Decentralized Sentinel Community Surveillance Model aligned with the NCDC’s Integrated Health Information Platform (IHIP) and Integrated Disease

Surveillance Programme (IDSP) framework. This model empowers community-based platforms, such as Self-Help Groups (SHGs) and Mahila Arogya Samitis (MAS), to identify and report early warning signals using the IHIP community-based reporting tool. It will encourage community ownership and strengthen healthcare resilience through rapid response to emerging threats.

**We invite applications from Indian organizations to undertake the following activities:**

Goal	Proposed Objectives	Expected Outputs/Outcomes
	To implement a simplified, NCDC-aligned "Trigger List" for real-time reporting of syndromic clusters through the IHIP community tool.	Minimized detection lag by early identification of health threats at the community level, prior to clinical or laboratory confirmation.
	To standardize a protocol requiring Medical Officers to validate community signals via tele-consultation or field visits within 24 hours.	Closed-loop response by 100% verification and documentation of community signals by respective health authorities within the 24-hour window.
	To formalize surveillance as a statutory function of Panchayats and Municipalities to ensure institutional ownership.	Statutory Integration by transformation of community surveillance into a permanent, locally-mandated governance function.
	To implement a performance-based recognition framework to maintain sentinel motivation without external financial dependency.	Contribute to fiscal resilience by reduced government expenditure through localized containment of outbreaks, by demonstrating an effective and scalable model of 7-1-7 approach in India.

The proposed<sup>1</sup> states in which this intervention will be implemented include Bihar, Jharkhand, Maharashtra, Karnataka and Assam. Awardees will implement activities in two districts in each state to cover a total of 10 districts. Applicants may propose to cover all, or only a subset, of the proposed states. JSI/TIFA may issue awards to one or multiple organizations.

**The following proposed indicators are essential to capture the project progress. Additional indicators may be proposed by the applicant and/or may be added during the co-design phase:**

<sup>1</sup>Note: geographies may be modified during the co-design process based on additional NCDC input.

1. Number of community-based platforms mobilized and trained to identify and report early warning signals (EWS) using a simplified syndromic trigger list aligned with NCDC/IDSP standards.
2. Number of cases (signals) reported by community members via the existing IHIP community tool.
3. Percentage of IHIP-logged early warning signals verified by a Medical Officer via tele-verification or field visit within 24 hours.
4. Proportion of verified alerts formally converted to "Outbreak" status or dismissed with documented justification by the Medical Officer or District Surveillance Officer.
5. Number of impending outbreaks identified where immediate public health action was initiated within the selected geographies.

### **Eligibility**

Interested organizations must meet the following mandatory criteria:

- **Legal Status:** Must be a legally registered Indian NGO with a valid FCRA registration, or a for-profit organization with all mandatory registrations (PAN, TAN, GST) eligible to receive foreign funds, or an international organization legally registered in India.
- **Leadership Commitment:** The Chief Executive must be willing to enter into a formal agreement, and the organization is authorized to receive funds from JSI, the Washington-based partner.
- **Compliance:** Demonstrated ability to comply with all U.S. Government regulations and certifications.
- **Strategic Experience:** Proven track record of liaising and prior work experience with the NCDC is highly preferred.
- **Technical Capacity:** Possession of a qualified team with the technical expertise required to administer large-scale government or public health programs and the ability to rapidly initiate immediate implementation and deliver meaningful results in a 12-month timeframe.
- **Community Engagement:** Previous experience within the past 3 years working with urban and rural community platforms such as SHGs, MAS, or Jan Arogya Samiti (JAS) is preferred.
- **Availability:** Ability to present to a selection panel (virtually or in person) during the second week of February 2026, and to participate in an in-person co-design workshop in New Delhi during the third week of February 2026.

### **Application Submission**

- **Platform:** Applications must be submitted via the **TIFA Bharat Portal** (<https://tifabharat.org/>).
- **Deadline: 6 February 2026, at 18:00 IST.**
- **Inquiries:** Questions may be directed to [tifa.bharat@jsi.org](mailto:tifa.bharat@jsi.org) until 30 January 2026, at 18:00 IST. Responses will be shared with all eligible applicants by 03 February 2026.

### **Selection Steps**

1. **Administrative Screening:** JSI/TIFA staff will verify that all applications meet basic eligibility requirements.
2. **Technical Review:** A selection committee will evaluate eligible applications based on technical merit.
3. **Ranking:** Applicants will be ranked based on their concept papers and, if required, a technical presentation.
4. **Co-Design:** Top-ranked organizations will be invited to a multi-day workshop in New Delhi (tentatively mid-February 2026) to develop a detailed activity plan and budget.

## Evaluation Criteria

Applications will be scored based on a total of 100 points across the following categories:

- **Technical Approach (30%):** Clarity and innovation of the methodology (specifically regarding outbreak-prone diseases), alignment with NCDC/IDSP programs, and the feasibility of achieving objectives within the timeline.
- **Organizational Capacity (25%):** Track record within the past 3 years of managing large-scale health projects and specific experience in integrating community-based surveillance into the Integrated Health Information Platform (IHIP).
- **Coordination & Communication (15%):** Effectiveness of proposed mechanisms for coordination between national programs (NCDC, IHIP/IDSP) and community-level organizations (**SHG**, MAS, JAS) across all administrative levels.
- **Digital Innovation (15%):** Experience implementing digital surveillance tools and the ability to translate data into actionable public health interventions.
- **Operational Feasibility (15%):** The expertise of the proposed project team in disease control, digital tools, and health systems strengthening.

## Funding and Timeline

- **Budget Range:** The total funding for this project is between \$200,000 and \$1,000,000 USD. JSI/TIFA may issue awards to one or multiple organizations. We are looking for proposals that show the proposed plan should be cost-effective and use resources wisely to achieve the best results.
- **Project Duration:** The project will last for a maximum of 12 months.
- **Quick Start-up:** We will prioritize organizations that are ready to begin work immediately once the agreement is signed.