



Health Commitment Grants — India

Request for Application

**NASHTA– Nutrition Support for TB: A Same-Day Delivery Implementation Project
TIFA2.0/2026/014**

Posted date: 11th September 2026

Questions Due: 15th September 2026 to tifa.bharat@jsi.org

Submissions due: 22nd September 2026 via tifabharat.org

About the Tuberculosis Implementation Framework Agreement (TIFA)

JSI Research & Training Institute, Inc. (JSI) implements the Tuberculosis Implementation Framework Agreement (TIFA) managed by the United States Department of State (DOS). The eight-year (2019–2027) project builds on the United States government's (USG) investments in tuberculosis (TB) and other global health priorities. Through direct engagement with local governments and their partners, TIFA co-designs fixed amount subawards, which may include Health Commitment Grants (HCGs), that accelerate countries' progress toward national health targets, support country ownership, and foster sustainability while advancing the DOS goals of making America safer, stronger, and more prosperous.

TIFA employs a phased, collaborative approach to develop subawards with our country partners. In partnership with the National Tuberculosis Elimination Program (NTEP) and Department of State (DOS-US Government), we identify country priorities and openly compete for opportunities. Organizations are invited to apply for subawards and, if selected, are guided through a co-design process. Implementing organizations then execute the subawards, and DOS and JSI/TIFA verify completed milestones. Since its inception in India, JSI/TIFA has issued more than 80 subawards to over 25 implementing partners, supporting national program priorities across various thematic areas within the NTEP framework.

Background and context

Undernutrition is the leading risk factor for TB in India, with nearly half of all persons with TB (PwTB) being underweight at diagnosis. Underweight PwTB face a two-fold increased risk of mortality, with approximately one in three unfavorable outcomes directly attributable to undernutrition. While the National TB Elimination Programme (NTEP) provides nutritional interventions, such as energy-dense nutritional supplements (EDNS) and community-mobilized food baskets via the Ni-Kshay Mitra scheme, their real-world impact is severely limited by implementation delays. Currently, only ~2% of PwTB receive a food basket in the critical first month of treatment. A national analysis links early Ni-Kshay Mitra support to a 48% reduction in mortality (aOR 0.52), demonstrating that timing is crucial.

The central challenge is not whether to provide nutritional support, but how to deliver it on day one. The current system operates as a reactive chain where requests for support are raised only after diagnosis, leading to weeks of delay while waiting for donor matching.

The purpose of same-day delivery of nutritional support at TB diagnosis initiative is to flip this approach from reactive to proactive by pre-positioning food baskets and funds directly at clinics

before diagnosis occurs. This ensures that nutritional support is ready and waiting for the patient on the exact day of diagnosis, closing the critical early-treatment gap.

We invite applications from qualified Indian organizations to implement and evaluate this 5-month pilot model.

Program Goals, Activities, and Expected Outputs

Goal	Sample activities	Expected outputs
Demonstrate a proactive, same-day nutritional delivery model for PwTB to ensure day-one availability of food baskets/EDNS, mitigate early treatment dropouts, and establish a scalable operational playbook within routine NTEP workflows.	Identify and select pilot sites in collaboration with State NTEP/CTD; establish clean storage facilities and set up up-front procurement mechanisms at health facilities to bypass donor-matching delays.	Selected healthcare facility sites operationalized with pre-positioned funds, storage space, and procurement protocols established.
Establish community and youth volunteer networks to support supply chain management and basket assembly.	Onboard, train, and deploy MY Bharat (or equivalent local youth/community) volunteers to procure, assemble, and maintain a ready buffer of standard food baskets at clinics.	Trained volunteer cadres deployed across pilot sites with ready-to-deliver food basket buffers maintained on-site.
Integrate same-day handover into routine clinical care.	Implement proactive handovers where food baskets and EDNS are provided to newly diagnosed PwTB on the calendar date of treatment initiation.	100% of newly diagnosed PwTB offered nutritional support on Day 1, with real-time logging of delivery timestamps.
Monitor implementation and log process bottlenecks.	Maintain daily delivery registers and weekly process logs; conduct short weekly operational coordination calls to resolve supply chain barriers in real time.	Weekly process logs, barrier taxonomies, and operational run charts maintained to track delivery maturation.
Evaluate operational acceptability and synthesize findings.	Conduct closed operational checklists and beneficiary/provider feedback touchpoints to capture acceptability, feasibility, economic strain, and weight trajectories.	A comprehensive, NTEP-ready "Procure-Assemble-Deliver" Playbook delivered to inform national expansion.

Site selection will be guided by formal conversations with the Central TB Division and State NTEP officials.

Expected Results and Key Performance Indicators

The following proposed indicators are essential to capture the project's progress over the 5-month implementation window. Additional indicators may be proposed by the applicant or refined during the co-design phase:

1. Primary Indicator: Same-day delivery rate, percentage of eligible PwTB starting treatment who receive the food basket/EDNS on the exact calendar date of diagnosis.
2. Secondary Indicator: Follow-up delivery rate, percentage of enrolled PwTB who receive a food basket at their first routine follow-up visit (measuring sustained delivery).
3. Proportion of patients receiving complete nutritional support at both initial diagnosis and first follow-up.
4. Total number of health facilities/sites operationalized with pre-positioned food buffers and up-front funding mechanisms.
5. Percentage of trained community/MY Bharat volunteers actively engaged in basket assembly and inventory management per site.
6. Documented weight trajectory summaries for patients receiving timely versus delayed nutritional support during the intensive phase.
7. Development and submission of a finalized, cost Procure-Assemble-Deliver Operational Playbook for NTEP scale-up.

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 non-governmental organization legally registered in India.
 - Public international organizations (PIO) and intergovernmental organizations (IGO) are not eligible.
- 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.
- Government Liaison: Proven track record of experience in working in tertiary hospital settings (medical colleges and/or district hospitals). The applicant must showcase strong existing liaison capabilities with the state tuberculosis centre to ensure smooth program implementation.
- Operational Readiness: Ability to rapidly initiate implementation (within 15 days of award) and deliver all project milestones within 4-5 months or less (before the end of 31 March 2027).
- Availability: Availability to participate in a mandatory Co-Design workshop in New Delhi (tentatively scheduled for the fourth week of September)

Application Submission

- Platform: Applications must be submitted via the TIFA Bharat Portal (<https://tifabharat.org/>).

- **Deadline:** 22nd September 2026, at 18:00 IST.
- **Inquiries:** Questions may be directed to tifa.bharat@jsi.org until 15 September 2026, at 18:00 IST. Responses will be shared with all eligible applicants by 17th September 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.
4. **Co-Design:** Top-ranked organizations will be invited to a multi-day workshop in New Delhi (tentatively scheduled for 4th week of September 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 (40%):** Operational innovation in establishing a same-day delivery chain at District TB Centres and PHCs. Evidence of a robust strategy to coordinate MY Bharat youth volunteers to assemble baskets to state-specific guidance and manage buffer stock replenishment.
- **Organizational Experience and Capacity (20%):** Assessment of the proven track record in executing targeted quality-improvement pilots, managing community youth cadres, and working collaboratively with District Health Societies.
- **Operational Feasibility and Innovative Strategy (20%):** Quality of proposed methodology and demonstrated capacity to accurately capture and analyze routine NTEP weight indicators, assess stigma, and measure household economic strain. Strategy for seamlessly integrating this data into district dashboards to monitor delivery accuracy.
- **Coordination Mechanism (20%):** Proposed mechanisms for internal coordination between the project and national health programmes (NTEP) at the state, district, and block levels. Strategy for active engagement with District TB Officers (DTOs).

Funding and Timeline:

- **Budget Range:** The total funding for this project is between \$100,000 to \$150,000 USD. JSI/TIFA may issue fixed amount subawards (HCGs) to one or multiple organizations. TIFA encourages proposals that are cost-effective and demonstrate a wise use of resources to achieve the best results.
- **Project Duration:** The intervention must align with a strict timeframe of 5 months. All project milestones must be completed within 4-5 months (before March 31, 2027).
- **Quick Start-up:** TIFA will prioritize organizations that are ready to begin work immediately once the agreement is signed.
- **Consortium & Sub-awarding:** Consortium proposals with subawards are not permitted.