

GLOBAL ALLIANCE AGAINST HUNGER AND POVERTY: RIFQ “BECAUSE CHILDHOOD IN PALESTINE NEEDS NOT ONLY PROTECTION... BUT ALSO KINDNESS”

FAST TRACK IMPLEMENTATION PLANNING – PALESTINE – EARLY CHILDHOOD

What is the Fast Track planning process? This process started by the Global Alliance’s Board of Champions aims to co-develop with implementing countries a high-level, strategic implementation plan for a single national large scale programme linked to the Alliance’s policy basket. The process uses the 2030 Sprints commitments as a foundation and expands on it with specific details, including partnership needs. The Global Alliance will use these plans to identify concrete partnership offers from other members, providing potential financial or knowledge support—or both—in alignment with the country’s programme priorities.

The implementation plans will serve as a foundation for future steps, where they will be further detailed and expanded into full operational plans. These plans will also guide formal partnership and resourcing agreements between implementing countries and both knowledge and financial partners. The Global Alliance’s Support Mechanism, along with other partner structures can provide support in this further development.

A detailed concept note and FAQ on the fast track planning process, the Global Alliance, and what to expect from them can be found here: <https://tinyurl.com/mwcakh35>

1. Executive Summary

- **Country:** Palestine - Gaza Strip and West Bank.
- **Program Name:** RIFQ "Because childhood in Palestine needs not only protection, but also kindness".
- **Main Objective:** ensure that all children under the age of 6 and all pregnant or breastfeeding women affected by war receive essential social protection and health services, with integration of emergency response services.
- **Brief Description:** Program includes 3 phases: I. Emergency humanitarian aid (guarantee the minimum of essential social protection and health services); II. Reconstruction (restore social infrastructure and improve access to social protection and health services); III. Sustainability (integrate and expand programs to build a resilient social protection system).
- **Target Audience:** 150,000 pregnant or breastfeeding women affected by the war; 10,000 children under the age of 6 who have lost one or both parents (this figure includes 2,000 children under three years old living in poor foster families); 19 specialized service delivery institutions, providing direct services to children without parental care, including shelter, protection, and care. 80% of beneficiaries in the Gaza strip and 20% in the West Bank
- **Time Frame:** 3 years (2026 – 2028)
- **Budget:** US\$ 44 million.

- **Need for financial support:** U\$ 42 million. The Palestinian Ministry of Social Development (MoSD) plans to contribute around 5% of the total funding needs. This is estimated at U\$ 2 million.
- **Need for technical support:** Capacity building for social workers, assistance for program design and management, capacity building at subnational level management and back office, assistance to build information systems.
- **Partners already involved in the intervention:** UNICEF, ESCWA, UNFPA.
- References in the Global Alliance Policy Basket: Policy Instrument [Child and family support/benefits](#);- Country Example [Portugal: Portuguese Child Guarantee](#)

2. Proposal Details

a) How the intervention works: the program envisages three phases, taking into account the complex political and economic context of Palestine in light of the impact of Gaza war:

- Phase I - Emergency Humanitarian Aid
- Phase II - Reconstruction Key Activities
- Phase III - Sustainability Key Activities

b) Specific objectives and timeline: The program is designed for an initial three-year implementation period (2026–2028), with a view to scaling and integrating key components into long-term national social protection systems:

Phase I - Emergency Humanitarian Aid:

- Duration: 0 - 6 months.
- Specific objectives: ensure minimum essential social protection and health services, and preserve lives.
- Activities:
 - Provide Multi-Purpose Cash Assistance (MPCA) and Child grants, alongside health kits and nutrition assistance to meet critical health, hygiene, and nutrition needs.
 - Provide Mental Health and Psychosocial Support Services (MHPSS) to women and children.
 - Organize institutional/emergency response for children who lost their caregivers due to the war.
 - Elaboration of the methodology of collecting data.
- Expected impact: Improved protection, health, psychosocial wellbeing of vulnerable women and children, with stronger and more coordinated care systems that ensure safety, continuity of services, and reduced vulnerability after crisis situations.
- Immediate results: Emergency Social protection, health and psychosocial services are delivered to women and children and direct assistance meets urgent protection, health, hygiene, and nutrition needs.

Phase II - Reconstruction:

- Duration: 6 months – 2 years.
- Specific objectives: restore social infrastructure and improve service access.
- Activities:
 - Rehabilitate and equip 19 damaged but active specialized institutions providing direct services to children without parental care, including shelter, protection, and care.

- Provide Mental Health and Psychosocial Support Services (MHPSS) to pregnant and breastfeeding women and children.
- Improve coordination among government and local/international partners.
- Launch effective M&E systems to measure outreach and impact.
- Expected impact: improve service quality, response efficiency, and rebuild trust in the social system.
- Immediate results: Social facilities are rehabilitated and operational, and access to key social protection services is improved.

Phase III - Sustainability:

- Duration: 3 years.
- Specific objectives: achieve institutional sustainability and system integration from a national perspective.
- Activities:
 - Integrate programs into the national social protection framework and secure public budget funding.
 - Build long-term alliances with civil society and the private sector to support women's economic and social empowerment.
 - Develop national policies for childcare and preventive protection for vulnerable groups.
 - Expand legal and regulatory framework for social services and care.
- Expected impact: A nationally integrated and sustainable institutional system capable of delivering coordinated, inclusive, and resilient services for vulnerable populations, with reduced fragmentation and improved efficiency across sectors.
- Immediate results: strengthen institutional capacities aligned with national frameworks, improved coordination and integration among relevant stakeholders, and harmonized procedures and referral mechanisms. These actions enhance institutional readiness and support the sustainability of the system at the national level.

c) Goals:

- Strengthen protection and care environments for vulnerable children and pregnant or breastfeeding women by integrating psychosocial, and protection interventions.
- Ensure access to essential health and hygiene supplies.
- Restore and strengthen the capacity of 19 child specialized facilities through rehabilitation and equipping to deliver safe and quality services.
- Improve mental health and psychosocial wellbeing of pregnant and breastfeeding women, and children and their caregivers through structured psychosocial and mental health support services.
- Enhance institutional capacity and coordination to sustain service delivery within existing national systems.

d) Detailed budget:

Total value: USD 44 million, distributed as follows (considering 5% as a contribution from The Ministry of Social Development – US\$ 2 million). This contribution will primarily cover **long-term sustainability costs**, especially:

- Salaries for approximately 52 currently active staff in Gaza, many of whom are directly involved in delivering protection and social assistance services.
- Operational utilities and maintenance to ensure continuity of essential services during the stabilization phase.

Phase I - Emergency Humanitarian Aid: USD 26.54 million, including (USD 1 M from MOSD):

- Procurement of dignity kits, post-partum kits for pregnant and breastfeeding women, and nutrition top ups for malnourished children **USD 10.7M** (post-partum kits 10,000*200\$= 2 M) + (Dignity Kits 150,000* 50\$=7.5 M) + (nutrition top ups (nutrition top ups (2,270*176.24*3=1,2 M).
- Mental Health and Psychosocial Support Services (MHPSS) for children and pregnant or breastfeeding women **USD 10M**
- MPCA for 10,000 pregnant or breastfeeding women **USD 3.8M** (382\$*10000*1)
- Child grants for 2,000 children "living with poor foster families": **USD1M** (170\$*3*(2,000)
- Capacity-building for Ministry of Social Development (MoSD) staff, social workers, and local partners. **USD 1M** – MoSD contribution)

Phase II - Reconstruction: USD 14.73 million, including (USD 230,000 from MOSD):

- Rehabilitation and Equipment for 22 Specialized Facilities **USD 11M**
- Case Management, Psychosocial Support, and Monitoring **USD 2M**
- Logistics and Coordination (national & subnational) **USD 1.5M**
- Staffing & Operations **USD 0.23M** (permanent cost from MoSD)

Phase III - Sustainability: USD 2.73 million, including (USD 0.5 M from MOSD):

- Operation and staffing **USD 0.23 M (permanent cost from MoSD)**
- Case management, psychosocial support, and monitoring **USD 1 M**
- Logistics and coordination at national and subnational levels **USD 1 M**
- Strengthen the legal frameworks to ensure preventive protection, childcare and social services for vulnerable groups **USD 0.5M**

Note: All payments under this initiative will be delivered through the existing e-payment systems, which are well established, reliable, and widely used in Palestine. These systems are already operational and currently used for social allowances and other transfers, ensuring secure, timely, and transparent delivery of payments to beneficiaries, while reducing operational risks and facilitating scale-up when needed.

e) Target audience selection criteria

Target Audience and Numbers: Taking into consideration an allocation of 80% for the Gaza Strip and 20% for the West Bank, the program focuses on two primary groups affected by the war, totaling approximately **160,000 individuals**:

- **Pregnant and Breastfeeding Women:** A total of **150,000** women are targeted. Within this group, **50,000** are specifically identified as pregnant women¹.
- **Children under Age 6 who have lost one or both parents:** A total of **10,000** children. This includes 2,000 children under the age of three living with poor foster families.
- **Specialized service delivery institutions:** 19 specialized child care facilities

Selection and Priority Criteria: The criteria are designed to address immediate protection and survival needs while filling existing gaps in the social welfare system:

- **War-Affected Status:** The primary criterion is that the beneficiaries are directly affected by the ongoing war in the Gaza Strip and conflict in the West Bank.
- **Loss of Caregivers:** High priority is given to children who **lost their primary caregiver** during the conflict.
- **Addressing the "0 to 3" Age Gap:** A key focus of the criteria is the inclusion of families with children aged **0 to 3 years**. Historically, these families were excluded from national social allowance eligibility despite their high vulnerability to hunger and malnutrition.
- **Addressing Pregnant Women – First Pregnancy:** This criterion was applied to avoid overlap with other assistance programs targeting pregnant and breastfeeding women and to ensure complementarity of support. All selected beneficiaries are identified through the Ministry of Social Development's existing databases.

Identification and Data Sources: To ensure that assistance is not duplicated, all beneficiaries **will be** systematically screened against the National Social Registry prior to enrollment and the disbursement of any payments. The registry **will serve as the single reference point** for verifying eligibility and confirming that individuals are not receiving similar assistance. In addition, continuous coordination **will be maintained** with humanitarian and development partners through established coordination mechanisms to ensure complementarity, avoid overlap, and harmonize assistance delivery.

- **MoSD Database:** Data for the 10,000 children under the age of six are drawn from the MoSD Social Registry. Support for the 2,000 children living with poor foster families was provided based on assessment results jointly conducted by UNICEF and the Ministry of Social Development (MoSD).
- **Cash working Group Reports, Interim Rapid Damage Needs Assessment (IRDNA), and trusted UN agencies web sites:** data for pregnant and breastfeeding women.
- **Cash working Group Referral pathways:** data for MPCA ,child grant and nutrition top-ups.

f) Detailed technical support needed

Technical support / capacity building at the national and subnational level for program design and management.

- Capacity building for social workers.
- Support for monitoring systems, including child vulnerability assessments and case management tools.
- Logistical support for outreach and center-based services.
- Support women social protection through selfcare services, sheltering, case management, providing a minimum package of gender-based violence specialized services.

¹ American United Nations Population Fund. (Year). *UNFPA Arab States – Crisis in Gaza*. https://arabstates.unfpa.org/en?utm_source=chatgpt.com

- Contribute to data collection and data verification
- Targeting and identifying vulnerable population groups and enhancing specialized centers.
- Technical support to conduct a comprehensive assessment and review of the legal framework surrounding early childhood care.

g) Main stakeholders

Ministry of Social Development (MoSD) of Palestine. Intended role:

- Lead program implementation, coordination, and monitoring.
- Ensure integration of emergency response protocols into existing systems.
- Provide technical guidance and capacity building for subnational offices and partner organizations.
- Oversee procurement and distribution of supplies to childcare centers and supported facilities.
- Ensure data collection, reporting, and beneficiary accountability mechanisms.

h) Other Palestinians Stakeholders

Ministry of Health, Ministry of Relief, National Early Childhood Committee, Subnational Government (Governorates / Directorates of Social Development), and Community-Based Committees.

i) Existing Foreign Partnerships

United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), UNICEF, United Nations Population Fund (UNFPA), The Working Women's Society, the Women's Centre for Legal Aid and Counselling, the Early Childhood Resource Centre, Juthour, Italian Agency for Development Cooperation, The Spanish Agency for International Development Cooperation, WFP, World Bank, UN Women.

l) Monitoring & Evaluation

Monitoring and evaluation of early childhood care centers are conducted periodically by a specialized committee led by the Ministry of Social Development. This includes field visits to assess staff performance and verify compliance with approved standards and criteria. Although monitoring and evaluation systems exist, challenges include limited geographic coverage, lack of digital tools, and shortage of staff and trained personnel. The program proposes enhancing these systems by investing in technology, training staff, and expanding field evaluations to strengthen follow-up and accountability. The launch of the "Global ECD Measurement Framework", spearheaded by UNICEF and the UNESCO Institute for Statistics, introduced a standardized approach to monitoring early childhood development globally.

3. Specific Support Needs

Detailed financial support needed:

- Grants from bilateral and multilateral donors, including EU, UNICEF, UNFPA, UNRWA and Arab Funds.
- Concessional funding for digital systems or center infrastructure (if applicable).
- Potential collaboration with development banks or pooled humanitarian funds to support scale-up and long-term integration.

Detailed knowledge / technical support needed:

- Social work with families (coaching about how to promote independence, autonomy, self-reliance and access to rights).
- Methodologies for visitations (approaches, frequency, pedagogical tools and planning)
- Bold methodologies of field evaluations to strengthen follow-up and accountability.

Proposed Role for Alliance Partners:

UNICEF:

- Provide technical guidance and support on child-focused interventions, including family based alternative care approaches and MHPSS focusing on children and care-givers. Ensuring that quality standards for child protection services are taken into consideration and supporting child protection service provision.
- Provide technical support and guidance in the development and implementation of parenting programmes.
- Support monitoring systems, including child vulnerability assessments and case management tools as well as providing capacity building support.
- Technical assistance and support in reviewing relevant regulations and policies including the Nursery Regulation.
- Offer technical and logistic support for outreach and child -based services.

UNFPA

- Ensure quality standards in services for pregnant and breastfeeding women.
- Support capacity building for frontline health and social workers.
- Support women social protection through MHPSS, self-care services, sheltering, case management, providing a minimum package of GBV services.
- Contribute to data collection and gender-sensitive monitoring tools.
- Cash and voucher assistance for pregnant and lactating women and women at risk

ESCWA (United Nations Economic and Social Commission for Western Asia)

- Capacity Building – Training and technical assistance to strengthen national policymaking. It focuses on hands-on knowledge transfer to empower government entities to independently advance their development policies and programs.
- Legal Review – Assessment of laws on early childhood care, including an examination of maternity and paternity support and care relevant to the project.
- Policy Guidance – Sharing best practices and policy benchmarks, including from conflict-affected and emergency regions.
- Advocacy – ESCWA will assist the MoSD in developing an advocacy and communication strategy aimed at enhancing community awareness of early child development and care needs as well as the need for related legislation and legal amendments.
- Peers Exchange – Facilitating learning with countries in the Arab region and beyond, in view of effective early childhood interventions including those affected by war and conflict situations.
- Coordination Support – Enhancing national program alignment and inter-agency collaboration (UNICEF, UNFPA). ESCWA will support the MoSD in establishing or strengthening a national coordination mechanism, helping to link the outcomes of the current pre-plan with related social protection and childcare programs to create synergies, as well as inter-agency coordination (including UNICEF and UNFPA)

Sustainability strategy

The program is designed for an initial two/three-year implementation period (2026–2028), with a view to scaling and integrating key components into long-term national social protection systems.

The plan delivers Multi purpose cash assistance, child grants, essential health and nutrition support, and Mental Health and Psychosocial Support Services for women and children, while ensuring emergency care for children without parental support. At the institutional level, the plan focuses on rehabilitating and equipping child-care institutions and women's shelters, strengthening data collection and monitoring systems, and improving coordination among partners. Sustainability is ensured through integration into the national social protection framework, expansion of legal and policy frameworks, secured public financing, and the establishment of long-term partnerships with civil society and the private sector

4. Background and Current Status

The Gaza Strip is experiencing an unprecedented humanitarian crisis resulting from prolonged conflict, large-scale displacement, and the near collapse of basic social services. Children under the age of six and pregnant and breastfeeding women are among the most severely affected groups, facing heightened risks of food insecurity, poor health outcomes, psychosocial distress, and exposure to violence and exploitation. Existing social protection and early childhood care systems have been critically disrupted, with many facilities damaged or non-operational, services suspended, and professional staff working under extreme constraints.

Although Palestine has an established national social protection framework, the current emergency has exposed significant gaps in coverage for early childhood and maternal support. These gaps are particularly evident for children who have lost one or both caregivers and for pregnant or breastfeeding women who require integrated health, protection, nutrition, and psychosocial services. Fragmented humanitarian interventions and short-term assistance mechanisms have proven insufficient to respond to the scale, duration, and complexity of needs, highlighting the urgent need for a structured, phased, and system-oriented response.

The RIFQ program is designed to respond to this context by establishing an integrated, care-responsive intervention that combines emergency assistance with recovery and long-term system strengthening. The program builds on national structures led by the Ministry of Social Development while aligning with global policy frameworks promoted by the Global Alliance Against Hunger and Poverty.

At present, interventions targeting early childhood care and maternal protection in Gaza remain limited in scale, scope, and coordination. Available services are largely emergency-driven, short-term, and unevenly distributed, with weak linkages between social protection, health, nutrition, and psychosocial support sectors. Many child protection spaces, childcare centers, and women's shelters have been damaged or rendered partially non-operational, further constraining access to essential services.

Mental health and psychosocial needs among children and women are escalating rapidly, yet access to structured and sustained support remains extremely limited. Social workers and frontline staff continue to operate under severe capacity constraints, while monitoring and follow-up systems suffer from limited geographic coverage, insufficient staffing, and a lack of digital tools.

The situation is further aggravated by the widespread loss or absence of caregivers. Many caregivers have been killed, hospitalized, displaced, evacuated to third countries, or detained. According to UNFPA, pregnant and breastfeeding women are engaged in a daily struggle for survival. Health

facilities report a sharp increase in malnutrition among women and newborns, with rising cases of anemia, pregnancy complications, low birth weight, and neonatal mortality. With essential foods such as meat, fruits, eggs, and dairy products either unavailable or unaffordable, most newborns are now born underweight, and that conditions are deteriorating rapidly.

In this context, there is no comprehensive or coordinated response capable of addressing these intersecting protection, health, and nutrition challenges. The RIFQ program therefore represents a critical intervention to bridge immediate humanitarian response with reconstruction and sustainability. Through a phased approach that prioritizes life-saving assistance, rehabilitation of social infrastructure, and eventual system integration, the program addresses urgent needs while laying the foundation for a more inclusive, coordinated, and shock-responsive social protection system for young children and mothers in Gaza.

As for the West Bank, the repeated and ongoing attacks have resulted in significant damage, widespread disruption of livelihoods, and the displacement of large numbers of residents. These conditions have increased vulnerability levels, weakened coping mechanisms, and exposed affected populations to heightened social and economic risks. Consequently, many households have become unable to meet their basic needs, making them a vulnerable group in urgent need of sustained support and social assistance interventions.

5. Connections with the Global Alliance against Hunger and Poverty

Specific references in the Policy Basket:

- Policy Instrument [Child and family support/benefits](#)
- Country Example [Portugal: Portuguese Child Guarantee](#)

Child and family benefits, as shown by evidence, reduce poverty, improve food security, health (reduce mortality under the age of 5, use of health services, mental health), nutrition (dietary diversity), early childhood development, education outcomes for children (school enrollment and attendance), promote gender equality and support children with disabilities, while also enhancing social cohesion, reducing inequality and increasing resilience to shocks.

Alignment with 2030 Sprints: Palestine joined the Global Alliance as a founding member in 2024 and participated in the Maternal and Early Childhood Interventions Sprint event in November 2024, with the following announcement, which is in full agreement with the current intervention proposal: *“The Palestinian government will provide essential emergency services to 155,000 pregnant women and breastfeeding mothers, as well as health and social services for approximately 10,000 young children who have lost their caregivers.”*

Strategic Importance: This program is a national priority because it responds to the urgent needs of women and children affected by the war, displacement, and poverty. It supports Palestine’s national goals to strengthen social protection, improve early childhood development, and reduce inequality. The program also aligns with the Global Alliance objectives by focusing on maternal and child well-being, promoting inclusive service delivery, and advancing progress toward the 2030 Sprint commitments.

This proposal supports the 2030 SDGs, particularly Goals 1, 2, 3, 4, 5, and 10, and reflects a progression from humanitarian response to state-building and robust social welfare system. At its core, the approach emphasizes long-term sustainability and prioritizes the protection and empowerment of vulnerable groups (early childhood, pregnant and breastfeeding women). The program also aligns with the SDGs 3, 4 and 5 and the national sectoral strategies of the state of Palestine in the areas of

health, social protection, gender equality and the national strategy for combating violence against women. This program strengthens national resilience by investing in the most vulnerable groups - young children and mothers - during times of crisis.

It improves the social protection system's emergency response capacity by strengthening service provision systems, empowering women and protecting children under 3 by integrating early childhood, health, and protection services; the program lays the foundation for long-term human development and social stability.

6. Pre-Plan Summary Table

Rifq							
Phases	Brief description	Goals	Components	Potential Partners	Support needed	Amount needed Million \$	
Rifq	Phase I (06 months)	Emergency Humanitarian Aids	Ensure minimum essential services and preserve lives.	MPCA, Child grants, Dignity kits, Nutrition top ups, MPHSS, and Capacity Building.	UNFPA, ESCWA, UNICEF	Grant and Technical	US\$ 26.54
	Phase II (6 months-2 years)	Reconstruction	Restore social infrastructure and improve service access	Rehabilitation and equipment	UNFPA, ESCWA, UNICEF	Grant and Technical	US\$ 14.73
	Phase III (Year 3)	Sustainability	Achieve institutional sustainability and system integration from a national perspective	Program Integration, Strategic Partnerships, Childcare Policies, Regulatory Expansion.	UNFPA, ESCWA, UNICEF	Grant and Technical	US\$ 2.73

7. Next Steps & Contacts

Over the next weeks the Government of Palestine and the Alliance Support Mechanism will work with current and potential Alliance members to complement this pre-plan with concrete and specific indications of support. **If you are an Alliance member already involved or believe your country or organization can contribute, we invite you to delve into each plan and [submit a non-binding Expression of Interest through the provided link](#) or QR code.** This will get you into a concrete country-level dialogue on implementation, including the country government and the other potential partners.

If you have questions on the plans, on the next steps, and on the submission of Expressions of Interest, please write to palestine-childrensupport@endhungerandpoverty.org and/or reach out to the focal points below.

Palestinian Authority Focal Point: Ms. Sonya Helou - shelou@mosd.gov.ps (mobile: +972 599 272 626)

Global Alliance Support Mechanism Focal Point: Mr. Federico Spano, Country Programmes Lead, federico.spano@endhungerandpoverty.org. Alternate: Mr. Francisco Xavier (Brazilian Ministry of Social Development and Assistance, Family and Fight Against Hunger): palestine-childrensupport@endhungerandpoverty.org

EXPRESSION OF INTEREST / PARTNERSHIP STATEMENTS (about 1 page per partner)

The aim of the partnership statement is to briefly summarize areas of potential engagement for individual country plans. The statement is *not* a commitment to provide financial or other support. It is aimed at indicating areas of interest, as well as the resources, experience, and capabilities of partners in areas relevant to the ambition set out in national plans. The statement should be limited to around one page, recognizing that more detailed country plans will be developed.

- a. **Reason for interest** / *Brief summary of how the proposed country plan aligns with your institutions mandate, priorities, and work programmes/.*
- b. **Institutional Capacities and Strengths** *[briefly outline those applicable to this programme, avoiding both overly broad and detailed descriptions].*
- c. **Intended/expanded partnership role(s)** *[Describe your potential role in this partnership, with a specific focus on the requests for external support described in the programme. List all potential modalities (ie. grants, loans, concessional loans, technical assistance, capacity building, knowledge exchange, learning/training materials, co-implementation of specific programme components, and other measures).*
- d. **Indicative Finance:** *I Where possible include indicative financial envelopes/ranges in US\$ in aggregate and for each modality.]*
- e. **Current and prospective partnership role(s) in the programme (if applicable)** *[briefly describe your current/past contributions to this programme implementation only in case your organization is already a partner for it]*
- f. **Alignment with 2030 Sprints (if applicable)** *[If your organization joined the 2030 Sprints process under the Global Alliance with a public commitment/announcement, please state which Sprint and briefly state how the present expression of interest would help deliver on that commitment]*
- g. **Current potential co-partnerships** *[Please list intended, desired or already planned co-partnerships with additional third countries, organizations and/or other Alliance members, describing potential roles for those organizations (i.e. co-financing, technical assistance, M&E, blended finance, others) and synergies with your own institution's role]*
- h. **Applicable Conditions and Restrictions** *Briefly list major conditions and restrictions that apply, recognizing that further commitments might, for example, be subject to board approval, future arrangements and agreements with implementing government, applicable terms and conditions for grants/loans, availability of resources, further understanding, negotiation and fact-finding missions, and future technical and legal arrangements”].*
- i. **Focal point(s) in institution for follow up:** *[list full name(s), title(s), and contact details (email and mobile/WhatsApp)]*

Submit your expression of interest here:
<https://forms.gle/7CtL5NEXvuMPbrzWA>

