

Call for Proposals: Sustainability and Legacy Grants for Mental Health and Disability Inclusion

Ghana Somubi Dwumadie
(Ghana Participation Programme)

June 2022

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1. Introduction and background

1.1. Introduction

Ghana Somubi Dwumadie (Ghana Participation Programme) is a four-year disability programme in Ghana, with a specific focus on mental health. This programme is funded with UK aid from the UK government. The programme is run by an Options' led consortium, which also consists of BasicNeeds-Ghana, Kings College London, Sightsavers International and Tropical Health, and focuses on four key areas:

1. Promoting stronger policies and systems that respect the rights of people with disabilities, including people with mental health disabilities
2. Scaling up high quality and accessible mental health services
3. Reducing stigma and discrimination against people with disabilities, including mental health disabilities
4. Generating evidence to inform policy and practice on the effectiveness of disability and mental health programmes and interventions

Ghana Somubi Dwumadie also undertook a range of activities to address the impact of the Coronavirus disease of 2019 (COVID-19) pandemic on people with disabilities, including people with mental health conditions, for example our COVID-19 Psychosocial Resilience Grants round which took place between 2020 and 2021.

Ghana Somubi Dwumadie, as a component of the wider Leave No One Behind (LNOB) programme in Ghana, will contribute to the overall LNOB impact goal whereby all people with disabilities, including people with mental health conditions are engaged, empowered, and able to enjoy improved wellbeing, social and economic outcomes and rights.

Evidence gathered by the programme¹ supports the contention that people with disabilities, including people with mental health conditions in Ghana have not fully benefited from health and development progress. In addition, they face stigma and discrimination, exclusion and human rights abuses and violations. They are particularly at risk of encountering barriers to accessing the services and support needed to live equal lives.

The programme's Theory of Change (ToC), as depicted in Figure 1, reflects the conceptual understanding of the pathways of change required to contribute to the overall LNOB impact goal.

¹ www.ghanasomubi.com

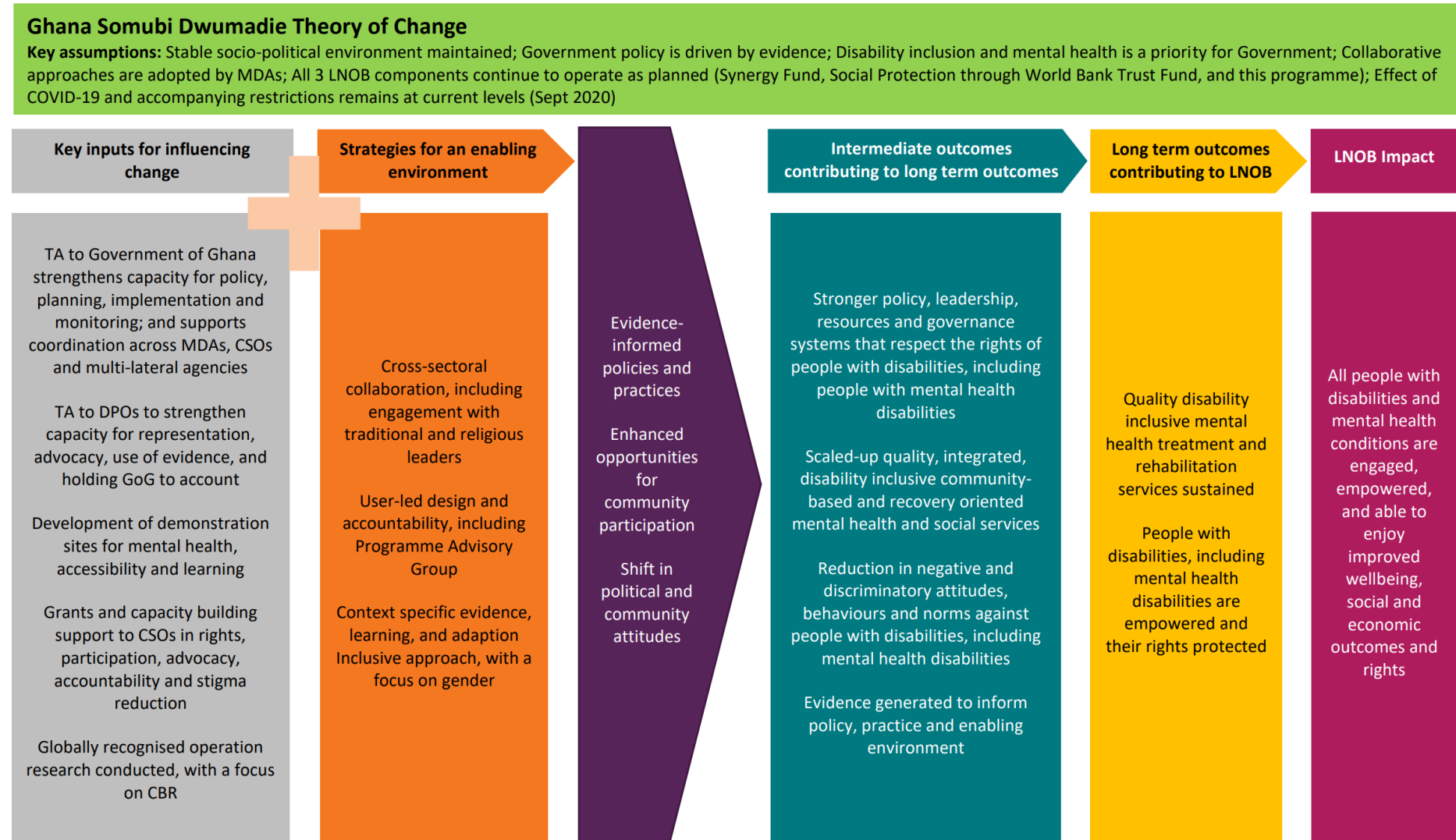


Figure 1: Programme ToC

1.2. Background to call for proposal

Estimates for numbers of people with disabilities, including people with mental health conditions, in Ghana vary, however, in the latest census, the number of people with disabilities (excluding mental health conditions, which was not measured in the census) was 7.8%². World Health Organisation (WHO) previously estimated that approximately 13% of Ghanaians have mental health conditions³, however, this is likely to have increased as a consequence of the ongoing pandemic. Therefore, at least 21% of Ghanaians have a disability or mental health condition.

Despite constitutional and legislative guarantees on the rights of people with disabilities, and of people with mental health conditions, policies and laws have not always been adequately implemented. There is pervasive entrenched discrimination towards people with disabilities, including people with mental health conditions. People with disabilities, including mental health conditions, in Ghana are typically poorer than their non-disabled peers in terms of access to education, healthcare, employment, income, justice, social support and civic involvement. Among the key barriers to inclusion are discriminatory attitudes, inaccessible environments, exclusionary institutions and inadequate data⁴. Early social exclusion and limited education and skills training leads to more difficulties in finding and keeping employment and limited career advancement⁵. Compounding this, people with disabilities and their families may face additional costs such as extra medical, housing, caregiver, and transport costs⁶.

The treatment and quality gap remains high - according to an assessment in 2015, an estimated 2% of people with mental health disabilities were being treated,⁷ and anecdotally we believe it is now still a low 10-15%.

Progress has been made in education and sensitisation on the rights of people with disabilities and mental health conditions, to be treated on an equal basis with others. However, there is continued stigma, negative attitudes and discrimination towards people with disabilities, including mental health conditions, in Ghana, and few opportunities to take a stand against stigma, discrimination and abuse.

A lack of inclusion and engagement can be seen to flow down from policy and decision-making to subsequent funding and resource allocation, service design, delivery and regulation. This situation enables practices of stigma and discrimination

² The proportion of Ghanaians 5 years and older with a disability, defined as “difficulty in performing various activities”, 2020 census.

³ National Academies of Sciences, Engineering, and Medicine (2016) Online Resource Bookshelf

⁴ Rohwerder, B. (2015). Disability inclusion: Topic guide. Birmingham, UK: GSDRC, University of Birmingham

⁵ Groce, N., Kett, M. (2013) The Disability and Development Gap, Leonard Cheshire Disability and Inclusive Development Centre, University College London

⁶ Ingstad. B. & Eide. A. (2011). Disability and poverty: A global challenge. Bristol: Policy Press

⁷ Ohene, S., Sustainable Mental Health Care in Ghana: A Demonstration Project. 2015

to persist across health, economic, social, environment and political structures for people with disabilities, including people with mental health conditions.

Several integrated policy and legal measures have been adopted in line with global commitments and development goals to improve participation and inclusion of people with disabilities, including mental health conditions. However, despite these concerted efforts, opportunities remain to more significantly enable people with disabilities, including mental health conditions, to remove the barriers which prevent them from participating fully in their communities, including having their voices heard and incorporated in policies and programmes that affect them directly. The full participation and leadership of people with disabilities, including people with mental health conditions, is crucial to minimise the attitudinal, environmental and institutional barriers that affect them. There are significant benefits associated with the inclusion and participation of persons with disabilities. As highlighted by FCDO's new Disability Inclusion and Rights Strategy 2022-2030, including people with disabilities is not just the right thing to do - it creates healthier, fairer and more prosperous societies for everyone to enjoy. Globally, people with disabilities represent over \$1.2 trillion in annual disposable income and with equal opportunity can contribute between 3-7% of GDP⁸.

The post 2020 national election context produced some level of uncertainty for implementation of policies and laws with its attendant delays in the appointments of Ministers, National Council on Persons with Disabilities (NCPD) Board (appointed November 2021), and particularly delays with the MHA Board, which is yet to be appointed at the time of writing. In spite of the above, the Government of Ghana has shown interest in disability matters by making key concrete commitments during the 2022 Global Disability Summit, co-hosted by Government of Norway and Government of Ghana. Ghana Somubi Dwumadie is providing technical Support to the Ministry of Gender, Children and Social Protection to operationalise the commitments made by the Government.

To complement the technical assistance (TA) component of the programme, Ghana Somubi Dwumadie integrates a strong grants component which is designed to support civil society organisations (CSO) and organisations of people with disabilities to tackle stigma and discrimination and support people with disabilities, including people with mental health conditions, to advocate for their rights. The grants component is positioned within the overall programme ToC with a focus on output 3 **reducing stigma and discrimination against people with disabilities, including mental health disabilities**. Since 2020 the programme has implemented two grant rounds: Round 1 call for proposals (issued in July 2020) with a focus on COVID-19 psychosocial resilience support, and Round 2 call for proposals (issued in December 2020) focusing on evidence and effectiveness of mental health and disability inclusion, which funded a range of advocacy-focused and social behaviour change (SBC) projects. In total the programme has funded 16 grants across 15 grantees (Seven in round 1 and nine in round 2).

8

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1074127/Disability-Inclusion-and-Rights-Strategy-2022.pdf

The programme as a whole is strongly aligned and contributes to FCDOs Disability Inclusion and Rights Strategy 2022-2030. The programme directly contributes to four (4) out of the six (6) **intervention areas** of the strategy namely: Universal human rights, freedom and democracy, inclusive health, inclusive social protection and inclusive humanitarian action. In addition, the programme particularly responds to two (2) out of three (3) **enablers for inclusion** identified in the strategy namely: Strengthening organisations of persons with disabilities and empowerment of people with disabilities.

2. Ghana Somubi Dwumadie principles and approach to granting

2.1. Principles

Ghana Somubi Dwumadie grant making is delivered in line with the following principles, which applications should be mindful of:

- **Participation** – a founding principle of the disability rights movement is ‘Nothing About Us Without Us’. Grants will only be given to projects which clearly demonstrate a participatory approach, involving persons with disabilities, and/or mental health conditions.
- **Capacity building** – An integral aim of the programme’s grant making is to strengthen the capacity of local disability actors, including and especially Disabled People’s Organisations (DPO) and Self-Help Groups (SHG). Through tailored capacity development support, the programme will not only improve the effectiveness of these grassroots organisations and their networks, but also enhance the robustness of their internal systems and governance and promote their sustainability.
- **Knowledge-building** – sharing learning with partners, stakeholders and the wider sector to support meaningful change. Grants will be used to promote a culture of learning and sharing among grantees.
- **Collaboration** – working with a wide range of stakeholders within and beyond the disability and mental health spectrum. The programme will facilitate regular structured occasions for collaborative reviews of grant progress and achievements, and the participation of the grant’s target participants will be encouraged.
- **Adaptability** – to the evolving disability and mental health policy environments.

2.2. Approaches

To realise the above principles, the programme’s grant-making implements the following approaches. Applicants are advised to ensure their proposals internalise these approaches.

Inclusion and diversity management

The grants mechanism is committed to supporting DPOs and SHG to access funding and to support their development. A range of inclusive measures will be taken, including:

- Only grantee projects which are participatory in nature will be funded.
- Grantee projects which fill inclusion gaps, whether in terms of geography, or in terms of marginalised groups, will be prioritised. For example, projects which work with women and girls with disabilities or mental health conditions.
- Grant payments will be made in advance, to support robust financial management of smaller organisations.
- The Monitoring, Evaluation and Learning (MEL) approach is designed to foster inclusion.

The Programme and its grants mechanism is committed to reducing gender inequality and discrimination against women and girls in all forms. In view of this, the grants mechanism places premium on WROs, DPOs, SHGs that prioritise women and girls in their organisations as well as interventions. The programme granting team will expect consideration of gender as an integral dimension of all prospective grantees. This will include institutional governance structure, proposal preparation, implementation, understanding gender dimensions of the proposed area for funding, clear strategies and measures for addressing inequalities between women and men in the proposed area of funding, higher proportions of women and girls targeted and reached by the intervention as compared to their male counterparts.

Sustainability and Value for Money (VfM)

The grants mechanism will integrate sustainability and VfM approaches into all aspects of the grant making process in order to achieve lasting change. Specific actions include:

- Developing a capacity building and knowledge-sharing programme for grantees, which they will commit to as a condition of the grant. Round 3 grants will specifically focus on building the capacity of grassroots organisations, including DPOs and SHGs.
- Making the level of post-grant sustainability an assessment criterion when scoring grant proposals.
- Making VfM a specific assessment criterion, where ensuring VfM is about reaching the highest possible programme quality and impact at lowest possible cost.
- Prioritising projects most likely to achieve lasting change, for example because they provide an evidence base for decision-making.

Do No Harm and responsible granting

The programme's granting mechanism will establish a clear, robust systematic and locally relevant approach to risk management for the grants with a particular focus on safeguarding and Do No Harm approaches.

All programme grants will be awarded on the premise that all activities will improve the overall situation in the places which they operate. We will mitigate risks through a number of measures, including:

- Undertaking due diligence (DD) on potential grantees to ensure have adequate systems in place to receive funding.
- Where weaknesses in organisational capability exists, which we believe can be mitigated, this will be done through capacity building and/or TA.
- We will undertake regular monitoring visits, and have regular and open communication with grantees, in addition to ensuring regular financial and technical reporting. Frequency will be set depending on the project being funded.
- Grantees will be required to commit to the principles of safeguarding and child protection. Where grantees do not have policies and procedures in place they may not be funded.

Robust management of conflict of interest (COI)

Due to the relatively small operating environment of mental health and disability programmes and activities in Ghana, the Ghana Somubi Dwumadie grants mechanism acknowledges that COIs may occur or appear to occur for the granting mechanism. As such, the programme is committed to ensuring that COIs are well managed, reported and appropriate steps are taken to mitigate and manage them. A COI may arise where an organisation's or an individual's own interests, whether direct or indirect, may impact on, or be perceived to impact on, their ability to act with integrity or impartiality. Conflicts of interest may include the involvement of family, political affiliations, organisational membership or economic interests between an applicant or grantee, and a member of the grants programme.

Known and unknown conflicts of interest are managed by:

- Obligation for grantees to declare potential COI and propose mitigation strategies.
- Eligibility checks being undertaken by two members of the grants team.
- Assessments being undertaken by two different members of the grants team.
- The clear division of responsibility and authority at each stage of the grants process.
- Ensuring that an individual with a known COI does not decision make or unduly influence an application, or management of an approved grantee.

3. Sustainability and Legacy Grants call for proposals

Building on the experiences and lessons from the previous two grant rounds, Ghana Somubi Dwumadie has released a third and final call for proposals designated as **Sustainability and Legacy Grants for Mental Health and Disability Inclusion**. The sections below provide details of the Round 3 call for proposals.

3.1. Thematic focus and rationale

Sustainability and Legacy Fund grants will focus on strengthening the capacity of a network of grassroots SHGs, DPOs and WROs to position them for greater role in sustaining user-led approaches to delivering services for people with disabilities, including people with mental health conditions, particularly women. The programme will adopt a mentoring approach to capacity building whereby DPOs, SHGs and WROs will receive tailored support to improve knowledge and skills, enhance their performance in programmatic interventions and ensure sustainability.

The rationale of this focus is that small and grassroots SHGs, WROs and DPOs have unique potential to develop, leverage, and implement novel local solutions to problems and challenges facing people with disabilities, including people with mental health conditions. If their institutional and technical capacity is strengthened, if they are supported to participate fully in user-led approaches, and if their collective power is harnessed into an effective movement to advocate for disability inclusion, SHGs, WROs and DPOs can drive sustainable positive change in the wellbeing and rights of people with disabilities or mental health conditions, especially women. The programme fully recognises the importance of supporting small and grassroots SHGs, WROs and DPOs to build their own capacity across a broad range of themes, so that they can become highly capable, vibrant and independent organisations over time, thus enabling them to meaningfully participate in user-led approaches towards enhancing disability and mental health inclusion in policies and services.

The capacity building of DPOs, WROs and SHGs will be delivered as a joint venture between the Ghana Somubi Dwumadie and local capacity building partners (to be contracted as part of this call for proposals). The rationale is that the capacity building partners, being local, will remain available to continue mentorship support to the DPOs, WROs and SHGs, beyond the current programme.

3.2. Objectives of Legacy Fund grants

The **overall objective** of Legacy Fund grants is to harness the unique contribution and strengths of small and grassroots organisations, by strengthening their capacity to bring about sustainable change in the lives of people with disabilities, including people with mental health conditions, particularly women with disabilities or mental health conditions

The **specific objectives** of Legacy Fund grants are:

1. To strengthen the institutional and technical capacity of small and grassroots SHGs, WROs and DPOs thus enabling them to play a greater role in user-led approaches to claiming the rights of people, especially women, with disabilities, including those with mental health conditions.
2. To improve the wellbeing of, and empower people, especially women, with disabilities, including with mental health conditions, through interventions implemented by small and grassroots SHGs, WROs and DPOs.

3.3. Structure of the Sustainability and Legacy Fund

This grants round will adopt a dual track funding structure as outlined below:

Track 1 grants: these grants will be available to capacity building partner organisations that meet customised eligibility criteria (described in section 3.4 below). The programme will fund up to three capacity building partners under Round 3. Given the distinctive features and capacity needs of SHGs, WROs and DPOs, the approach for each will need to be tailored. Hence, applications to Track 1 grants will focus on either of two streams:

- **Stream 1:** Capacity building for SHGs (Track 1, Stream 1 – T1S1)
- **Stream 2:** Capacity building for DPOs or WROs (Track 1, Stream 2- T1S2)

Track 2 grants: these grants will be available to DPOs or WROs that meet basic eligibility criteria (see section 3.4 below) and will be used to cover the cost of the DPOs or WROs to participate in capacity building and to deliver programme interventions (in respect to specific objective 2 above).

3.4. Eligible organisations and end users

Track 1: Capacity building partners

Organisations eligible to apply for funding under Track 1 include:

- CSOs that are established and registered as umbrella of disability organisations, with existing membership of DPOs.
- Grassroots membership associations bringing together SHGs or other interest groups working to advance rights and welfare of people with disabilities, including mental health conditions.
- Organisations with specific expertise and experience in building capacity of DPOs, WROs and or SHGs in the area of disability or mental health inclusion.

Organisations applying to build capacity of SHGs must demonstrate existing partnership or affiliation with the SHGs that they intend to support.

Track 2: DPOs or WROs

Organisations eligible to apply for funding under Track 2 should:

- Be organisations of people with disabilities, including people with mental health conditions, or women's right organisations that are user-led and that actively demonstrate their commitment to disability and mental health inclusion.
- Be registered with the Metropolitan, Municipal, and District Assemblies (MMDA) within their jurisdiction.
- Have ground presence within the targeted geographical areas (see section 3.5).
- Preferably be member of an umbrella organisation (but not mandatory).

Targeted end-users

The targeted end-users of the grant must be one or more of the following groups:

- People, especially women, with disabilities
- People, especially women, with mental health conditions

3.5. Geographical scope

Legacy Fund grants will be open to all regions of Ghana; however, priority will be given to underserved regions including: Northern Region, Upper East Region, Upper West Region, Savana Region, North East Region, Bono East Region, Brong Ahafo Region, Volta Region, Oti Region and Central Region.

At the grant assessment stage, deliberate efforts will be taken to achieve fair geographical spread of the awarded grants.

3.6. Priority scope of work

This section describes the priority scope of work that will be funded through Legacy Fund grants under the two tracks.

Track 1: Capacity building of DPOs, WROs and SHGs

The capacity building interventions will be tailored to the level, objectives, needs and contexts of each DPO or WRO as determined through an initial organisational capacity assessment (OCA). The OCA, to be conducted jointly by the capacity building partner and the programme team, will lead to development of a detailed, time-bound and results-oriented capacity building plan. The plan will have measurable indicators and milestones that will be the basis for progress tracking.

For SHG, a formal OCA will not be undertaken, instead the capacity building partner will be expected to engage with the SHGs to develop a simple capacity building workplan.

In order to stimulate ownership by the recipients of the capacity strengthening support, a mix of participatory methods will be used including appreciative inquiry, training, coaching, mentorship and accompaniment approaches. Given that DPOs, WROs and SHGs are at different levels of capacity and will have varying starting points, the themes and topics to be covered will be adapted accordingly. For SHGs, examples of topics and themes to be covered include:

- Group dynamics and conflict resolution
- Basic record keeping
- Financial literacy including basic bookkeeping
- Work planning
- Local resource mobilisation
- Community entry and engagement
- Rights-based advocacy (including skills on engaging with authorities and holding duty bearers to account.)
- Safeguarding

On the other hand, capacity building for DPOs and WROs will cover both institutional as well as technical and programming capacity areas. Table 1 provides an indicative list of capacity building topic and themes, to be adjusted based on the findings from OCA.

Table 1: indicative list of capacity building areas

Institutional capacity building	Technical capacity building
<ul style="list-style-type: none"> • Organisational planning: vision, mission, goal, objectives and strategic planning. • Organisational governance, leadership and management • Financial management • Key policies e.g., safeguarding, anti-fraud, gender mainstreaming etc. 	<ul style="list-style-type: none"> • User-led approaches for disability inclusion • Proposal/grant writing • Monitoring and evaluation • Advocacy • Social and behaviour change communication and stigma reduction

As mentioned earlier, differentiated approaches will be taken for DPOs, WROs and SHGs given their distinctive features and capacity needs. Table 2 below provides guidance on the distinction between stream 1 and stream 2 applications.

Table 2: distinction between Track 1 stream 1 and 2 applications

Track 1 Stream 1: Capacity building for SHGs	Track 1 Stream 2: capacity building for DPOs
<ul style="list-style-type: none"> Applicants will not be expected to name the SHGs but should indicate the number of groups to be targeted (disaggregated by geography, form of disability, etc) and the total number of people with disability who will directly benefit with the number of women highlighted. 	<ul style="list-style-type: none"> Applicants will not be required to name the DPOs or WROs that they will support as this will be determined through Track 2 (see below). However, the applicants will be expected to state the number of DPOs or WROs that they have capacity to support and also the capacity areas/themes for which they have expertise. The information will be useful in matching the DPOs or WROs to the capacity building partners.
<ul style="list-style-type: none"> Applicants should demonstrate an existing relationship with the SHGs that they are targeting. Applicants that are an existing umbrella association of SHGs or that are working with (or have previously worked with) SHGs will have higher chances of success. 	<ul style="list-style-type: none"> Applicants that are umbrella organisations of DPOs will have higher chances of success. The DPOs or WROs allocated to the successful applicants for capacity building will be determined through Track 2. Notably, the allocated DPOs or WROs will not necessarily be members of the successful capacity building partners i.e., in the case of an umbrella organisation. This implies that where the successful capacity building partner is an umbrella organisation of DPOs or WROs, capacity building will not be limited to its member DPOs or WROs.
<ul style="list-style-type: none"> Formal OCA will not be undertaken, instead the capacity building partner will be expected to engage with the SHGs to develop a simple capacity building workplan. 	<ul style="list-style-type: none"> After contracting the T1S2 grantee(s), in liaison with the programme team, will undertake OCA for the DPOs or WROs assigned to them. The OCA will lead to development of a detailed, time-bound and results-oriented capacity building plan. The plan will have measurable indicators and milestones that

	will be the basis for monitoring and evaluation.
<ul style="list-style-type: none"> • Given that SHGs will not directly receive grants from Ghana Somubi Dwumadie, applicants under Track 1 Stream 1 are expected to include in their budgets all the costs related to delivering capacity building to the SHG (including facilitation of the members of SHG to accessibly participate in capacity building activities). • The T1S1 applicants can also include minimal costs to facilitate SHGs to participate in programme activities such as advocacy meetings. 	<ul style="list-style-type: none"> • Applications under T1S2 will cover cost of the capacity building partner to deliver capacity building activities. The budget will not include the costs of the DPOs or WROs to participate in the capacity building activities as these will typically be covered within their budget.

Specific roles and responsibilities of Track 1 applicants include:

- Submit grant application in the prescribed format (see application pack)
- For those qualifying for award in principle, participate in the pre-award Due Diligence and provide all required documentations to support their application.
- For those receiving award under T1S1: in liaison with the grants team, engage the SHGs and develop tailored capacity building plans. Amend the application to align with the capacity building plan and resubmit.
- For those receiving award under T1S2: in liaison with the grants team, undertake OCA for the DPOs or WROs and subsequently develop detailed capacity building plan. Amend the application to align with the capacity building plan and resubmit.
- In liaison with the programme team, undertake capacity strengthening of the DPOs, WROs, SHGs through a mix of tailored participatory methods.
- Maintain a handholding role for the DPOs, WROs, SHGs throughout the grant period, ensuring they continue to receive mentorship support through a transparent accompaniment model.
- Assume responsibility and accountability for the funds received, including compliance with donor rules and regulations.
- Participate in programme MEL activities.
- Financial and programmatic reporting to Ghana Somubi Dwumadie

Track 2: Eligible DPO or WRO activities

Under Track 2, successful applicants will be funded to cover two categories of costs (i) costs of participating in the capacity building delivered by the capacity building partner, which may include facilitation to attend training and mentorship sessions, (ii) costs of implementing specific programme interventions with a focus on either one of three themes:

- **User-led advocacy** for the rights of people with disabilities, including people with mental health conditions. Examples of work under this theme include:
 - Advocacy activity, including advocating with Government of Ghana (GoG) for increased investment in mental health.
 - Advocacy for enabling environment including adoption of the Disability Amendment Bill and implementing commitments from the African Disability Protocol, as well as advocacy for the adoption of the Affirmative Action Bill
 - Advocacy targeting duty bearers (including policy makers and service providers) on enforcement of Ghana's policies and laws aimed at ensuring people with disabilities, including people with mental health disabilities, are able to access their rights and entitlements.
- **Social and behaviour change** to reduce stigma and discrimination against people with disabilities, including people with mental health conditions. Examples of work under this theme include:
 - Operationalisation of the Ghana Somubi Dwumadie Social behaviour change (SBC) strategy and specifically dissemination of context-specific key messages targeting strategically selected audience segments.
 - Creating a culture of supportive community environment to enable people with disabilities, including people with mental health disabilities, to realise their fullest potential. This could be done for example, through engaging traditional and religious leaders, community and interpersonal dialogue approaches, persuasive and innovative messaging through the use of local media (district and community radio and drama), role modelling or civic engagement.
 - Working with media, traditional and religious leaders, and community leaders to encourage and support adoption and use of more positive words and phrases around mental health and disability, in local languages as well as in English. Where needed, development of new positive words and phrases will be supported. DPOs could also apply innovative tactics to challenge the old language and to embed the new language.
- Evidence-based approaches to **improve integration and accessibility of quality mental health and social services** for people with disabilities, including people with mental health conditions. Examples of work under this theme include:

- User-led initiatives to support implementation of Ghana Accessibility Standard, including accessibility audits and sensitisation of service providers.
- User-led, peer-to-peer demand creation activities to promote uptake of health and social services by people with disabilities, including mental health disabilities.
- Integrating mental health into primary care
- User-led approaches to supporting maternal mental healthcare

Specific roles and responsibilities of Track 2 applicants include:

- Submit grant application in the prescribed format (see application pack).
- Participate in OCA and work closely with the capacity building partner to develop a capacity building plan.
- Participate in pre-award DD.
- Participate in capacity building activities organised and delivered by the capacity building partner.
- With mentorship support from capacity building partner, implement intervention activities (under specific objective 2) as per approved proposal and workplan.
- Participate in programme MEL activities.
- Undertake financial and programmatic reporting to Ghana Somubi Dwumadie and comply to all contractual obligations.

Ineligible activities

For both funding tracks, the following are examples of activities that are ineligible:

- Logistical support for Government.
- General public education.
- Support for children (under 18 years old).
- Activities which don't meet the eligibility criteria.
- Activities which may lead to civil unrest.
- Activities which discriminate against any group on the basis of age, gender reassignment, disability, race, colour, ethnicity, sex and sexual orientation, pregnancy and maternity, religion or belief.
- Activities that are fully funded by other sources whether in cash or in kind.
- Costs incurred prior to a formal agreement being executed including those associated with preparing bid or grant proposals.

3.7. Grants size and duration

The total value of the Sustainability and Legacy Grants call is approximately Ghanaian Cedi (GHS) 1,700,000, subject to confirmation of funding from FCDO. It is anticipated that up to three grants will be awarded under Track 1 and up to five awarded under Track 2. The final decision will be taken at the assessment and recommendation stage based on factors such as available total budget, and quality of applications received, among others. Table 3 below presents information on the grant size and duration for the two tracks.

Table 3: Grant size and duration

Track 1: Capacity building of DPOs, WROs and SHGs	Track 2: Grants to DPOs or WROs
<ul style="list-style-type: none"> • Up to GHS 250,000 for a period of 12 months (stream 1) • Up to GHS 500,000 for a period of 12 months (stream 2) • Grant capped at 50% of organisation’s latest annual turnover. • Up to 15% of grant amount can go towards organisational overhead expenditure. • A minimum of 5% should be spent on MEL 	<ul style="list-style-type: none"> • A ceiling of GHS 150,000 for period of up to 12 months, commensurate with capacity and period of implementation. • Up to 25% of grant amount to be used to cover the costs of participation in the organisational capacity building activities. • Up to 15% of grant amount can go towards organisational overhead expenditure. • A minimum of 5% should be spent on MEL • Minimum of 55% of the grant to be used to implement intervention activities.

Match funding is not a requirement for Sustainability and Legacy grants. All implementations must be completed by December 2023. Grantees will be required to return unspent funds to the programme.

3.8. The grants life cycle

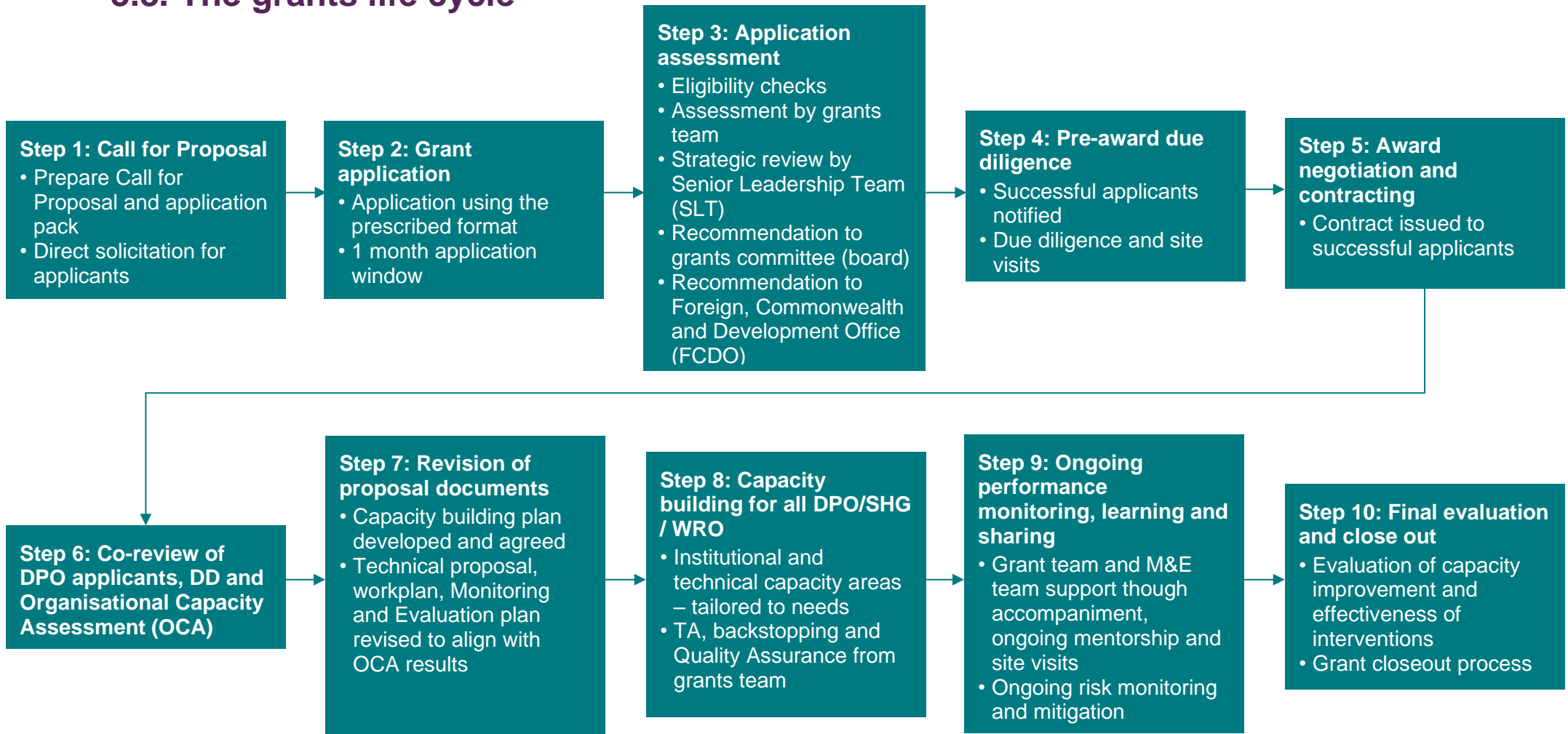


Figure 2: Track 1 grants cycle

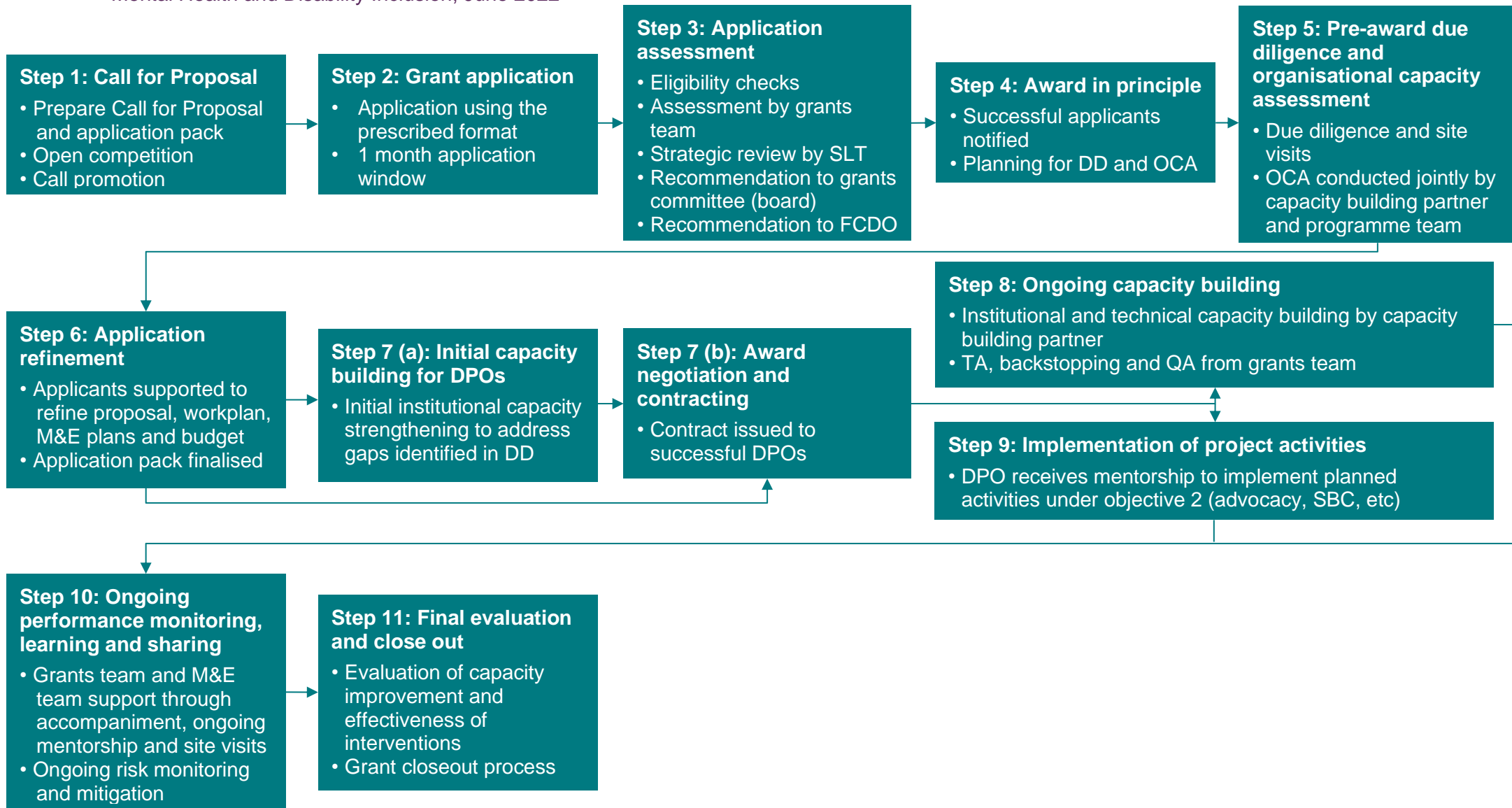


Figure 3: Track 2 grants cycle

3.9. Receiving applications

The call for proposals will be publicised in mainstream media and social media platforms. Applications will be received through open competition where any eligible organisation can apply. Ghana Somubi Dwumadie may undertake direct solicitation for applications under circumstances it deems fit. Applications (whether competed for or directly solicited) will be checked for eligibility and then assessed against the assessment criteria.

3.10. Assessment criteria

Applications will be assessed based on the application and accompanying documents. Table 4 outlines the key assessment criteria.

Table 4: Key assessment criteria

Track 1 assessment criteria	<ul style="list-style-type: none"> • Applicants seeking to build capacity of SHGs demonstrate they have existing relationship or affiliation with the SHGs targeted. • Applicant must have existing capacity and experience of delivering organisational capacity building interventions to people with disabilities or mental health conditions. • The proposal demonstrates clear capacity building strategies and a sound monitoring and evaluation plan.
Track 2 assessment criteria	<ul style="list-style-type: none"> • The proposed interventions focus on one or more of the three thematic areas stated in this call for proposal • The proposed intervention must benefit at least one of the end users listed above. • The proposed activities and interventions apply user-led approaches and are evidence-based. • The project outlines a realistic plan for interventions to be sustained post-grant funding.
Assessment criteria applicable to both tracks	<ul style="list-style-type: none"> • Applicants meet the eligibility criteria for the grants track applied for. • The proposal demonstrates a participatory and user-led approaches involving the target groups it seeks to support, in particular women with disabilities or mental health conditions • The project demonstrates a robust approach to safeguarding throughout the implementation stages • The application clearly shows how it will deliver the project within the stipulated time frame

	<ul style="list-style-type: none">• The project represents good value for money• The applicant organisation has a strong track record or prior experience relevant to the proposal• Both the applicant and the proposal demonstrate strong commitments to gender equity and equality
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3.11. How to apply

Applications for this call will open on 15th June 2022.

Interested applicants should visit <https://www.ghanasomubi.com/new-legacy-grants> and download the application pack that includes:

- Application form
- Budget template
- Results Framework
- Frequently Asked Questions (FAQ)
- Grantee Code of Conduct
- Safeguarding policy checklist

Applicants should complete the application form and submit via email to Grants@GhanaSomubi.com by 17:00 pm on 13th July 2022, with requested accompanying documents. Kindly note that no application will be considered after this date and time.

Further information:

- We will provide details of a virtual information session on our website
- We expect to complete assessments of Track 1 applications within 6 weeks and Track 2 applications within 10 weeks.
- Shortlisted applicants will undergo a DD assessment before grants are awarded.
- It is anticipated that contracting and disbursements of funds to successful applicants (selected grantees) will be done within 8 weeks of award in principle, with projects starting before November 2022.
- Please note that the successful submission of a proposal does not represent any commitment for funding. The decision whether to fund your project will be based on the review of your proposal and the assessment of your organisation. Funding will also depend on availability of funds from FCDO.

Appendix 1: List of abbreviations

Acronym	Description
COI	Conflict of Interest
COVID-19	Coronavirus disease of 2019
CSO	Civil Society Organisation
DD	Due Diligence
FCDO	Foreign, Commonwealth and Development Office
DPO	Disabled people's organisation
GHS	Ghanaian Cedi
GoG	Government of Ghana
LNOB	Leave No One Behind
M&E	Monitoring and Evaluation
MEL	Monitoring, Evaluation and Learning
MHA	Mental Health Authority
MMDA	Metropolitan, Municipal, and District Assemblies
MoGCSP	Ministry of Gender, Children and Social Protection
NCPD	National Council for People with Disabilities
OCA	Organisation Capacity Assessment
QA	Quality Assurance
SBC	Social behaviour change
SHG	Self-Help Group

Acronym	Description
SLT	Senior Leadership Team
TA	Technical assistance
ToC	Theory of Change
VfM	Value for Money
WRO	Women's Rights Organisation