The Local Capacity Initiative (LCI) was established by the U.S. Government in 2013 to strengthen sustainability of national HIV and AIDS responses through increased advocacy capacity of local civil society organizations (CSOs). Supporting PEPFAR principles of country ownership and sustainability, LCI directly funds and supports CSOs that advocate for key and vulnerable populations to:

- Reduce legal and policy structural barriers,
- Reduce stigma and discrimination, and
- Ensure that key populations are involved in the planning and implementation of programs that affect their lives.

In order to increase PEPFAR’s ability to support local ownership of the HIV response in a sustainable manner, LCI funding will support organizations that aim to enhance the effectiveness of local health systems in addressing the HIV response through:

1. Increasing accountability and transparency of a government’s national commitments and planned results by advocating for transparency, evidence-based policies/regulations and civil society engagement in each stage of HIV program development and implementation.
2. Reducing legal and policy structural barriers to a quality HIV response.
3. Reducing stigma and discrimination for key populations, thereby creating greater access to HIV services.
4. Supporting civil society networks/coalitions including those that advocate for key populations from both a policy and programmatic perspective.
5. Promoting the ability of citizens to recognize and demand quality services in their community and acting as advocates for the HIV-related health care needs of a country to hold governments accountable for service delivery.
6. Fostering sustainability of CSOs beyond the life of USG funding in targeted assistance finance PEPFAR countries.
7. Ensuring there is an enabling environment for CSOs resulting in increased access and uptake of HIV services.

The LCI is implemented through two funding mechanisms—direct funding of CSOs and funding of capacity building technical assistance.

Technical Assistance

Two USAID-funded projects, the Health Policy Project (HPP) and Advancing Partners & Communities (APC), will work with country LCI teams to assess and strengthen organizational development and advocacy capacity of grantees.

Technical assistance will support grantees in implementing the program and enhance their policy and advocacy programming with a focus on organizational sustainability.
APC will provide technical assistance to increase an organization’s capacity to:

- Advocate for and monitor transparent, evidence-based policies and regulations
- Engage in each stage of HIV program development and implementation
- Engage civil society networks/coalitions
- Engage citizens in recognizing, and advocating for quality services
- Sustain activities beyond the life of USG funding

While grantees are diverse in their structures, capacity, and focus, HPP and APC will strive to identify, assess, and measure core elements of capacity building to achieve common outcomes and document lessons learned across the LCI grantees portfolio.

**LCI Capacity Assessment Tool**

Each organization funded through LCI will go through an organizational and advocacy/policy capacity assessment using the LCI Capacity Assessment Tool to determine technical assistance needs. The assessment consists of a facilitated self-assessment as well as optional stakeholder interviews to assess the organization’s systems in the following areas:

- Policy analysis
- Policy monitoring
- Policy advocacy and communication
- Addressing policy implementation barriers
- Networking and multisectoral coordination
- Policy dialogue
- Accountability systems
- Monitoring and evaluation
- Governance
- Management systems
- Resource mobilization

The results of the LCI tool and stakeholder discussions will inform the action planning process that will help prioritize and direct technical assistance during the life of the program. Technical assistance will be provided through trainings, south-to-south exchanges, mentorships, and other means.

In the first round of the LCI, organizations will be funded in 14 countries including Asia Regional, Botswana, Cameroon, Caribbean, Central Asian Republics, Dominican Republic, Ghana, Guyana, India, Mozambique, Papua New Guinea, Rwanda, Uganda, and Zimbabwe. Grants will be three-year awards running from 2013/4 to 2016/7. Awards will be made by USAID and the Centers for Disease Control (CDC).

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