



Rapid Start Mini Grants

Request for Proposal

Ending the HIV Epidemic (EHE) Program
Infectious Disease Bureau

09/19/2025

I. OVERVIEW

The Boston Public Health Commission (BPHC) is the public health department for the City of Boston. Our mission is to protect and improve the health of all Boston residents, especially those who are most at risk.

Through the Ending the HIV Epidemic (EHE) Program, led by the BPHC Infectious Disease Bureau, we are working to stop new HIV infections and help people with HIV live long, healthy lives. A key part of this work is Rapid Start, helping people move quickly into care and start HIV treatment right after diagnosis, improving long-term health outcomes

Community and faith-based organizations are vital partners. They are trusted in the neighborhoods they serve and can reach people often missed by larger health systems. Supporting these groups expands access, builds connections, and improves health outcomes. With federal EHE funding, BPHC is offering mini-grants to organizations in the Boston Eligible Metropolitan Area, which includes Boston, Chelsea, Revere, and Winthrop. This Request for Proposals (RFP) invites organizations to apply for funding to carry out activities in one or more of the following three focus areas:

1. **Health Education:** Teaching people about HIV, treatment, and prevention in clear and culturally relevant ways.
2. **Stigma Reduction:** Helping communities reduce fear, shame, or discrimination around HIV so that people feel safe getting tested and seeking care.
3. **HIV Testing & Linkage:** Offering HIV testing in community settings and making sure that anyone who tests positive is connected to medical care quickly. Organizations who do not already have a clinical partner for linkage are still encouraged to apply. BPHC will provide support to help establish these partnerships.

By funding these efforts, we aim to:

- Increase knowledge and awareness about HIV.
- Build stronger, stigma-free communities.
- Ensure that more people know their HIV status and can get care right away.

All service contracts awarded by the Boston Public Health Commission may be subject to following the City of Boston's living wage ordinance. This ordinance requires that all employees working on sizable city contracts earn an hourly wage that is enough for a family of four to live at or above the federal poverty level. This wage amount called the living wage, is recalculated every year. For more information, please visit <https://www.boston.gov/worker-empowerment/living-wage-division>.

As part of BPHC's efforts to have an equitable procurement process, BPHC will consider and encourage Certified Unrepresentative Businesses Enterprises (CUBE) that includes; Minority-owned Business Enterprises (MBE), Women-owned Business Enterprises (WBE), Veteran-owned Business Enterprises (VBE), Disability-owned Business Enterprise (DOBE), Lesbian Gay Bisexual Transgender Business Enterprises (LGBTBE), Minority Non Profit (MNPO), Women Non Profit (WNPO), Minority Women Non Profit (MWNPO) and local businesses to apply to this RFP.

II. KEY DEFINITIONS

The following terms are defined to promote a common understanding of key concepts used in this RFP to ensure clarity and equity in the application process:

- **Antiretroviral Therapy (ART):** HIV medications that help people with HIV live healthier lives and prevent transmission.
- **Viral Suppression:** When HIV treatment lowers the amount of virus in the body to very low levels, keeping people healthy and making HIV much harder to pass to others.
- **Rapid Start:** Beginning HIV treatment as soon as possible after diagnosis, ideally within 7 days, to improve health outcomes and reduce HIV transmission.
- **Linkage to Care:** Helping someone connect to HIV medical services after an HIV diagnosis.
- **Re-engagement in Care:** Helping someone who has stopped HIV care to return to services and restart treatment.
- **Social Determinants of Health (SDoH):** Everyday conditions, such as housing, food, safety, income, or discrimination, that affect a person's ability to stay healthy and in care.
- **Stigma Reduction:** Activities that decrease shame, discrimination, or negative attitudes about HIV and those affected by it.
- **Health Education and Risk Reduction (HERR or HERRs):** Structured activities that give people the information, skills, and support they need to reduce HIV risk, make informed health choices, and stay engaged in care.
- **Undetectable = Untransmittable (U=U):** When a person living with HIV takes treatment and reaches an undetectable viral load (the virus is so low it cannot be measured), they cannot pass HIV to their sexual partners. This message is a key part of reducing fear and stigma and encouraging people to get tested and start treatment.

III. RFP TIMELINE

Date	Activity	Notes
September 19, 2025	Posted on BPHC.org	Posted by 10:00 AM EST
October 1, 2025	Bidders Conference Session I	10:00 am to 12:00 noon Virtual participation Registration Link Here Weblink here: https://bphc-org.zoomgov.com/meeting/register/Cyd5_nTIRwKcgxBcMeoiUQ
October 8, 2025	Bidders Conference Session II	10:00 am to 12:00 noon Virtual participation Registration Link Here Weblink here: https://bphc-org.zoomgov.com/meeting/register/UIQuO3DcQCm0CFn0HYMrow
October 10, 2025	Deadline to submit written questions	Questions must be emailed to: RFR@bphc.org and LAButalib@bphc.org (with CC to JHuynh@bphc.org) by 5:00 PM EST.
October 15, 2025	Responses to questions posted	Available on www.bphc.org/RFP by 5:00 PM EST
October 17, 2025	Request for Proposals Due	Submitted via email to: RFR@bphc.org and LAButalib@bphc.org (with CC to JHuynh@bphc.org) by 5:00 PM EST. Subject line: <i>EHE Mini-Grant Application.</i> No exceptions.
October 27, 2025	Notification of decision / anticipated award date	BPHC may extend this date at its discretion. Proposals remain valid for 120 days unless withdrawn in writing.
November 5 th and November 6 th	Mandatory Orientation	All awarded organizations are required to attend a mandatory 1.5-day orientation.

IV. SCOPE OF WORK

Selected organizations will carry out one or more activities that support Rapid Start. Rapid Start means helping people know their HIV status, linking them to care quickly if they test positive, and supporting them to stay in care.

While the three focus areas described below: Health Education, Stigma Reduction, and HIV Testing & Linkage, are closely connected and often overlap in practice, each plays a distinct role in supporting Rapid Start.

Applicants may choose to focus on one, two, or all three areas.

❑ **Focus Area 1 - Health Education:**

This focus area is about building knowledge and understanding. Health education activities focus on giving people clear, accurate, and culturally appropriate and relevant information about HIV prevention, treatment, and care. The goal is to increase knowledge, correct misinformation, and prepare individuals and communities to make informed choices.

- Provide clear, accurate information about HIV prevention, testing, and treatment.
- Share U=U messaging (Undetectable = Untransmittable).
- Create and share flyers, videos, workshops, or other materials that fit the culture and language of the community.
- Use peer educators or trusted community members to deliver information.
- Hold workshops, discussion groups, or peer-led sessions to build HIV knowledge.

❑ **Focus Area 2 - Stigma Reduction:**

This focus area is about shifting attitudes and building supportive environments. Culturally appropriate and relevant stigma reduction activities focusing on changing the negative beliefs, fears, and discrimination that surround HIV. The goal is to create communities where people feel safe seeking testing, care, and treatment. This work often includes training community leaders, hosting dialogues, and building empathy.

- Host events, workshops, or campaigns that reduce shame, fear, or discrimination about HIV.
- Train faith leaders, youth leaders, or community champions to speak out against stigma.
- Use storytelling, art, theater, or social media to create open conversations about HIV.
- Provide safe spaces, support groups, or dialogue circles where people can share and learn.

❑ **Focus Area 3 - HIV Testing & Linkage.**

This focus area is about driving action and connecting people to care. Testing and linkage activities focus on providing opportunities for people to know their HIV status and ensuring that anyone who tests positive is connected to medical care quickly. The goal is to reduce barriers to testing, increase early diagnosis, and make sure no one falls through the cracks when linking to treatment.

- Provide HIV testing in trusted community settings (churches, barber shops, community centers, health fairs, etc.).
- Make sure people who test positive are quickly connected to a clinic for confirmatory testing, treatment, and ongoing care.
- Use peer navigators or staff to help people move from testing to their first medical appointment (“warm handoffs”).
- Provide small supports (transportation vouchers, food cards, childcare, etc.) that make testing and linkage easier.
- Offer transportation, food vouchers, or other small supports to help people get tested and linked to care.
- Partner with local clinics, health centers, or health departments to ensure quick linkage to confirmatory testing and treatment.

Note: Partnership building between community-based and/or faith-based organizations and clinical providers are required on this focus area to ensure smooth connections to care and ongoing support. Applicants without existing clinical partnerships are strongly encouraged to apply; BPHC will provide support in facilitating and establishing those connections as part of the program.

V. Learning Collaborative

As part of this grant, all funded organizations will take part in the creation of a Learning Collaborative with BPHC and fellow grantees. **Participation is mandatory.**

- The Learning Collaborative meets **bi-weekly (every other week) for no more than two hours** throughout the grant period.
- Participants share best practices, tools, and strategies for carrying out Health Education, Stigma Reduction, and/or HIV Testing & Linkage.
- Sessions provide space to discuss challenges, opportunities, and lessons learned from the field.
- Over time, this group will serve not only as a learning space but also as an advisory body, helping to shape future Rapid Start programming in the coming grant years.
- The standing date and time will be set after awards are made.

The goal is to build a strong community of practice where organizations learn from each other, strengthen their programs, and contribute directly to the future direction of Rapid Start in Boston.

V. AWARD INFORMATION

- **Anticipated Awards:** 4–6 mini-grants.
- **Award Amount:** \$75,000 per contract.
- **Project Period Projection:** 4 months.
 - **Start Date of Grant:** November 1, 2025
 - **End Date of Grant:** February 28, 2026

VI. CAPACITY BUILDING & TRAINING

BPHC is committed to helping all funded organizations succeed, including those with little or no past experience in HIV work. To support this, BPHC will offer a series of optional trainings during the grant period for organizations that would like additional support.

The goal of these trainings is to provide tools and best practices to carry out activities in Health Education, Stigma Reduction, and/or HIV Testing & Linkage. Trainings may also include practical skills such as data collection and project management to help grantees deliver their programs and meet reporting requirements with confidence. While participation in these trainings is not required, grantees are encouraged to attend the sessions most useful to them. We also welcome grantees to share their own training needs and ideas for tools or best practices that would strengthen their work. Where possible, BPHC will provide additional training or technical assistance in response to those requests.

Proposed trainings and technical assistance (subject to change based on grantee needs):

HIV Basics & Rapid Start 101

- Covers HIV transmission, treatment, and the importance of Rapid Start.
- Ensures all grantees (even those without prior HIV experience) can deliver accurate, clear health messages.

Health Education & Community Engagement

- Strategies for designing and delivering culturally relevant health education.
- How to adapt messages for different audiences (faith communities, youth, migrants, LGBTQ+).
- Use of peer educators and creative methods (storytelling, art, social media).

Stigma Reduction & Community Dialogue

- Understanding HIV stigma and its impact.
- Tools for leading anti-stigma campaigns and conversations.
- Practical role-playing for responding to myths, fear, or discrimination in community spaces.

HIV Testing, Linkage, and Partnerships

- Best practices for hosting community-based testing events.
- How to do warm handoffs and referrals to clinical partners.
- Guidance on building or strengthening partnerships with clinics and health departments.
- Emphasis that BPHC can help where partnerships don't already exist.

Data Collection & Reporting Made Simple

- Basics of tracking participants, activities, and outcomes in each focus area.
- Using simple tools (spreadsheets, templates) to meet BPHC's reporting needs.
- Guidance on protecting confidentiality and respecting community trust.

Program Management & Sustainability

- Managing grant funds and small projects effectively.
- Tips on budgeting, planning, and maintaining staff/volunteer motivation.
- Exploring ways to sustain programs after the grant ends (partnerships, new funding).

Upon award and notification of decision, organizations will be expected to participate in a 1.5-day, in-person orientation on November 5th and November 6th.

Expected Learning Collaborative Dates:

- Week of November 17th
- Week of December 1st
- Week of December 15th
- Week of January 5th
- Week of January 19th
- Week of February 2nd
- Week of February 16th
- Week of February 23rd

VII. APPLICATION INSTRUCTIONS

To apply for this mini-grant, please submit a proposal of 3–4 pages (page limit does not include the budget and/or appendices). Your proposal should be written in clear language and include the following sections:

1. Organization Overview

- Tell us about your organization, who you serve, and why your community trusts you.
- Share any experience you have with health education, stigma reduction, or testing (does not need to be HIV-specific).

2. Focus Area(s) and Activities

- Clearly state which focus area(s) you are applying for (you may choose, one, two, or all three):
 - Health Education
 - Stigma Reduction
 - HIV Testing & Linkage
- Describe the activities you will carry out under each focus area you select.
- Explain your timeline and how you will make sure activities reach your community.

3. Community and Cultural Responsiveness

- Explain how your activities will fit the culture and language of the people you serve.
- Tell us which priority communities you will reach (e.g., youth, LGBTQ+, immigrants, people of color, people who use drugs, etc.).

4. Partnerships and Linkage

- If you are applying for the Testing & Linkage category, list your clinical partner and describe how you will connect people who test positive to HIV care.
- If you do not currently have a clinical partner, please note this. BPHC will help connect you with a clinical partner.

5. Capacity and Staff

- List who will work on the project (staff, volunteers, peer educators) and provide resumes and/or short bios of key staff/volunteers.
- Describe their experience and roles. (Resumes are not required, but you may include them if helpful.)

6. Budget and Use of Funds

- Submit an estimated 4-month project budget using the BPHC budget template.
- Submit a budget narrative explaining how funds will support your activities.

Note: Priority will be given to organizations that clearly demonstrate the capacity to implement and carry out proposed activities within the 4-month project period.

7. Commitments

- Confirm that your organization will:
 - Participate in the weekly learning collaborative (2 hours/week)
 - Submit required reports and data.
 - Work with BPHC and other partners to share learning and improve services.

VIII. EVALUATION CRITERIA

Proposals will be reviewed based on the following:

1. **Clarity of Proposal**

- 1.1. The proposal clearly explains which focus area(s) (Health Education, Stigma Reduction, and/or Testing & Linkage) the organization will work on.
- 1.2. The plan describes the activities in simple terms, with a clear timeline.

2. **Capacity and Experience**

- 2.1. The organization shows it has the staff, volunteers, or community partners needed to do the proposed activities.
- 2.2. The organization demonstrates past experience with outreach, education, or similar public health/community work (does not have to be HIV-specific).
- 2.3. The organization shows trust and connection with the community it wants to serve.

3. **Cultural and Linguistic Responsiveness**

- 3.1. The proposal shows how activities will be culturally appropriate and use the language(s) spoken in the community.
- 3.2. The plan recognizes and responds to the needs of the priority populations.

4. **Partnerships and Linkage**

- 4.1. For proposals that include Testing & Linkage, the organization explains how it will connect people to HIV care.
- 4.2. If the organization does not yet have a clinical partner, it states willingness to work with BPHC to build one.

5. **Budget**

- 5.1. The proposed budget is reasonable and matches the activities described.
- 5.2. The proposal explains how funds will be used to directly support the program goals.
- 5.3. The proposal **clearly demonstrates** the capacity to implement and carry out proposed activities within the 4-month project period.

IX. APPLICATION CHECKLIST AND SUBMISSION INSTRUCTIONS

Use this checklist to make sure your application is complete before submitting.

All proposals should be clear, simple, and no longer than 3–4 pages (page limit does not include the budget and/or appendices)

Note: Please attach this checklist as the cover page of your application.

Required Documents

- ☐ **Organization Overview.** Description of your group, who you serve, and why the community trusts you.
- ☐ **Focus Area(s) and Activities.** State which focus area(s) you are applying for (Health Education, Stigma Reduction, HIV Testing & Linkage) and describe your planned activities.
- ☐ **Community and Cultural Responsiveness.** Explain how your work will fit the culture and language of the community you serve.
- ☐ **Partnerships and Linkage.** If applying for Testing & Linkage, describe how you will connect people to HIV care. (If no partner yet, note that BPHC will help you.)
- ☐ **Capacity and Staff (Budget Narrative Spreadsheet).** List staff, volunteers, or peer educators who will work on the project and their roles.
- ☐ **Budget.** Include a 4-month project budget using the BPHC template.
- ☐ **Commitments.** Confirm your organization will:
 - ☐ Participate in mandatory BPHC trainings.
 - ☐ Submit reports/data.
 - ☐ Work with BPHC and partners.
- ☐ **Required Appendices/Attachments**
 - ☐ Proof of 501(c)(3) Status
 - ☐ Resumes/short bios of key staff/volunteers.
 - ☐ Letters of support from clinical partner or statement of willingness to work with BPHC to build a partnership.
 - ☐ Examples of past outreach or education materials your organization has used (does not need to be HIV specific).

Submission Reminder

- **Submit your full application by email to:**
RFR@bphc.org and LAbutalib@bphc.org (with CC to JHuynh@bphc.org and svasquez@bphc.org)
by 5:00 PM EST on October 17, 2025
- **Use subject line:** “EHE Mini-Grant Application.”
- All applications are due by 5:00 PM EST on October 17, 2025 – **there will be no exceptions to this deadline.**