



## **TERMS OF REFERENCE**

### **FOR INDIVIDUAL CONTRACT**

<b>POST TITLE:</b>	<b>Consultant to provide technical support on strengthening policy coherence to promote access to health technologies</b>
<b>AGENCY/PROJECT NAME:</b>	<b>United Nations Development Programme (UNDP)</b>
<b>COUNTRY OF ASSIGNMENT:</b>	<b>Home based with no travel required</b>

#### **1) PROJECT DESCRIPTION**

The United Nations Development Programme (UNDP) is the UN's global development network, advocating for change and connecting countries to knowledge, experience and resources to help people build a better life. We are on the ground in 170 countries and territories, working with governments and people on their own solutions to global and national development challenges to help empower lives and build resilient nations.

The Bureau for Policy and Programme Support (BPPS) has the responsibility for developing all relevant policy and guidance to support the results of UNDP's Strategic Plan. BPPS's staff provides technical advice to Country Offices; advocates for UNDP corporate messages, represents UNDP at multi-stakeholder fora including public-private dialogues, government and civil society dialogues, South-South and Triangular cooperation initiatives, and engages in UN inter-agency coordination in specific thematic areas. BPPS works closely with UNDP's Crisis Response Unit (CRU) to support emergency and crisis response. BPPS ensures that issues of risk are fully integrated into UNDP's development programmes. BPPS assists UNDP and partners to achieve higher quality development results through an integrated approach that links results based management and performance monitoring with more effective and new ways of working. BPPS supports UNDP and partners to be more innovative, knowledge and data driven including in its programme support efforts.

BPPS supports UNDP's 2014-2017 Strategic Plan, focusing on 7 outcomes including strengthening institutions to progressively deliver universal access to basic services (outcome 3). The HIV Health and Sustainable development team, within BPPS, is helping to contribute towards this outcome.

#### **HIV, Health and Development Approach**

UNDP is a founding cosponsor of the Joint UN Programme on HIV/AIDS (UNAIDS), a partner of the Global Fund to Fight AIDS, Tuberculosis and Malaria, and a co-sponsor of several other international health partnerships. UNDP's work on HIV, health and development leverages the organization's core strengths and mandates in human development, governance and capacity development to complement the efforts of specialist health-focused UN agencies. UNDP delivers

three types of support to countries in HIV, health and development.

First, UNDP helps countries to mainstream attention to HIV and health into action on gender, poverty and the broader effort to achieve and sustain the Millennium Development Goals. For example, UNDP works with countries to understand the social and economic factors that play a crucial role in driving health and disease, and to respond to such dynamics with appropriate policies and programmes outside the health sector. UNDP also promotes specific action on the needs and rights of women and girls as they relate to HIV.

Second, UNDP works with partners to address the interactions between governance, human rights and health responses. Sometimes this is done through focused or specialized programmes, such as promoting attention to the role of legal environments (law and access to justice) in facilitating stronger HIV responses, including the use of flexibilities in intellectual property and human rights law to lower the cost of drugs and diagnostics and to increase access to HIV-related treatment. UNDP also works to empower and include people living with HIV and marginalized populations who are disproportionately affected by HIV - also known as key populations - such as sex workers, men who have sex with men, transgender people. Beyond these focused efforts, UNDP plays a key role in ensuring attention to HIV and health within broader governance and rights initiatives, including support to district and municipal action on MDGs, strengthening of national human rights institutions and increasing access to justice for marginalized populations.

Third, as a trusted, long-term partner with extensive operational experience, UNDP supports countries in effective implementation of complex, multilateral and multisectoral health projects, while simultaneously investing in capacity development so that national and local partners can assume these responsibilities over time. The UNDP/Global Fund partnership is an important part of this work, facilitating access to resources for action on MDG 6 by countries that face constraints in directly receiving and managing such funding. UNDP partners with countries in crisis/post-crisis situations, those with weak institutional capacity or governance challenges, and countries under sanctions. When requested, UNDP acts as interim Principal Recipient in these settings, working with national partners and the Global Fund to improve management, implementation and oversight of Global Fund grants, while simultaneously developing national capacity for governments or local entities to be able to assume the Principal Recipient role over time.

Increasing access to affordable treatment for HIV and related co-infections in low and middle income countries remains a key aspect of UNDP's work under the UNAIDS Unified Budget and Accountability Framework (UBRAF). The cost of treatment is often affected by various laws and policies. They are part of the complex set of factors that influence access at national, regional and international levels. As a founding co-sponsor of UNAIDS, guided by the health-related MDGs, particularly MDG 6; "to halt and reverse the spread and HIV, Malaria and other epidemics by 2015", UNDP is mandated to provide support to governments in their implementation of policies and programs that protect the human rights of people affected by HIV.

### **Access and delivery of new health technologies for TB, Malaria and Neglected tropical disease**

A majority of deaths caused by infectious disease are of poor people living in low and middle income countries with many occurring in children under five. HIV, malaria, tuberculosis (TB) and other epidemics continue to devastate communities throughout the developing world. The prevalence of neglected tropical diseases (NTDs), endemic in 149 countries, also remains high. As part of its work on accelerating progress on the MDG 8.E specifically aimed to address the sector gap in research and development (R&D) funding for new global health technologies for global

diseases and their availability: “in cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries.”

The Access and Delivery Partnership (ADP) is a five-year (2013-2018) project that aims to help LMICs enhance their capacity to access and introduce new health technologies for TB, malaria and NTDs. New health technologies are broadly defined as drugs, diagnostic tools and vaccines that are relevant for the prevention, treatment or cure of TB, malaria and NTDs, but are not yet available for market introduction of have not been introduced in LMICs. The introduction of new health technologies can place a weighty burden on existing health systems. These burdens may include new requirements for drug regulation, supply and distribution, and health personnel training. Accordingly, the Access and Delivery Partnership will focus on building capacity of LMIC stakeholders to enable the development of the systems and processes required to effectively access new health technologies, and introduce them to populations in need. Led and coordinated by UNDP, the ADP is a unique collaboration among UNDP, the Special Programme for Research and Training in Tropical Diseases at the World Health Organization (WHO/TDR) and PATH. Working together, the partners will leverage the expertise within each organization to provide the full range of technical skills necessary to strengthen capacity in LMICs.

## **2) SCOPE OF WORK**

Under the overall supervision of the Programme Advisor, the Consultant will be responsible for responding to government and civil society requests in Tanzania and Ghana to provide technical support for reviewing laws, policies and regulations relating to intellectual property, and providing recommendations for ensuring that public health concerns are adequately incorporated into national legal and policy frameworks.

It is anticipated that the outcome of this technical support will inform policymakers in Ghana and Tanzania on the policy measures needed to facilitate an enabling framework that will promote access and delivery of health technologies.

## **3) EXPECTED OUTPUTS AND DELIVERABLES**

- a) Provide technical support to Ghana and Tanzania on reviewing and revising relevant national draft laws, policies and regulations, and provide recommendations on incorporating public health concerns into national legal and policy frameworks;
- b) Develop at least 2 expert-level knowledge products, including policy papers, technical reports, issue briefs etc. responding to government and civil society requests.

## **4) INSTITUTIONAL ARRANGEMENTS**

The consultant will regularly evaluate progress in meeting the specific deliverable with the Programme Advisor of the Access and Delivery Partnership.

## 5) DURATION OF ASSIGNMENT, DUTY STATION AND EXPECTED PLACES OF TRAVEL

### Duration

The duration of the assignment is 6 months, from 95 October 2017 2017 – 31 March 2018. The substantive component of the assignment is expected to take maximum 40 working days to complete.

### Duty Station

The assignment is home based with no travel required.

## 6) DEGREE OF EXPERTISE AND QUALIFICATIONS

### Educational Qualifications:

- )] An advanced degree in international trade law, intellectual property law regulation, international affairs, or public health law, and a knowledge of at least one of the other substantive areas.

### Professional Experience:

- )] A minimum of 10 years of relevant work experience related to intellectual property rights, international trade, pharmaceutical policy, and international law or a related field;
- )] Demonstrated experience working with the UN or other multilateral organizations in providing technical and capacity-building support to low and middle-income countries;
- )] Extensive experience in conducting research and analysis on issues relating to intellectual property barriers to access to health technologies.

### Functional knowledge:

- )] Extensive record of policy papers, technical reports and other relevant documents, specifically related to promoting access to medicines and integrating public health needs in intellectual property policies and laws;
- )] Excellent writing and editorial, and presentation skills are essential
- )] Relevant experience training civil society and government officials on intellectual property and access to medicines would be highly advantageous

### Language Requirement:

- )] Excellent written and spoken English

## 7) REQUIRED DOCUMENTS

Interested individual consultants must submit the following documents/information to demonstrate their qualifications. Please group them into **one (1) single PDF document** as the application only allows to upload maximum one document:

- a) **Letter of Confirmation of Interest and Availability** using the template provided by UNDP in Annex III;

- b) **Personal CV or P11**, indicating all past experience from similar projects, as well as the contact details (email and telephone number) of the Candidate and at least three (3) professional references;
- c) **Financial Proposal** that indicates the all-inclusive fixed total contract price, supported by a breakdown of costs, as per template provided. If an Offeror is employed by an organization/company/institution, and he/she expects his/her employer to charge a management fee in the process of releasing him/her to UNDP under Reimbursable Loan Agreement (RLA), the Offeror must indicate at this point, and ensure that all such costs are duly incorporated in the financial proposal submitted to UNDP.

**Incomplete proposals may not be considered.**

## **8) CRITERIA FOR SELECTION OF THE BEST OFFER**

Individual consultants will be evaluated based on the following methodology:

Cumulative analysis:

The award of the contract shall be made to the individual consultant whose offer has been evaluated and determined as a) responsive/compliant/acceptable; and b) having received the highest score out of set of weighted technical criteria (70%). and financial criteria (30%). Financial score shall be computed as a ratio of the proposal being evaluated and the lowest priced proposal received by UNDP for the assignment

Technical Evaluation Criteria (maximum 70 points):

- ) Relevance of Education in international trade law, intellectual property law regulation, international affairs, or public health law, and a knowledge of at least one of the other substantive areas (15 points)
- ) Relevance of work experience in intellectual property rights, international trade, pharmaceutical policy, and international law or a related field (15 points)
- ) Demonstrated experience working with the UN or other multilateral organizations in providing technical and capacity-building support to low and middle-income countries (20 points)
- ) Extensive record of policy papers, technical reports and other relevant documents, specifically related to promoting access to medicines and integrating public health needs in intellectual property policies and laws (20 points)

Only candidates obtaining a minimum of 70% of the total technical points would be considered for the Financial Evaluation.

## **9) CONSULTANT PRESENCE REQUIRED ON DUTY STATION/UNDP PREMISES**

None.

## **10) PAYMENT TERMS**

Consultant must send a financial proposal based on Daily Fee.

Consultant shall quote an all-inclusive Daily Fee for the contract period. The term "all-inclusive" implies that all costs (professional fees, communications, consumables, etc.) that could be incurred by the IC in completing the assignment are already factored into the daily fee submitted in the proposal. If applicable, travel or daily allowance cost (if any work is to be done outside the IC's duty station) should be identified separately. Payments shall be done on a monthly basis based on actual days worked, upon verification of completion of deliverables and approval by the IC's supervisor of a Time Sheet indicating the days worked in the period.

In general, UNDP shall not accept travel costs exceeding those of an economy class ticket. Should the IC wish to travel on a higher class he/she should do so using their own resources

In the event of unforeseeable travel not anticipated in this TOR, payment of travel costs including tickets, lodging and terminal expenses should be agreed upon, between the respective business unit and the Individual Consultant, prior to travel and will be reimbursed.

Travel costs shall be reimbursed at actual but not exceeding the quotation from UNDP approved travel agent. The provided living allowance will not be exceeding UNDP DSA rates. Repatriation travel cost from home to duty station in Bangkok and return shall not be covered by UNDP.

## **11) ANNEXES TO THE TOR**

- ) **Annex I – TOR**
- ) **Annex II – General Condition of Contract**
- ) **Annex III - Offeror's Letter to UNDP Confirming Interest and Availability for the Individual IC, including Financial Proposal Template**

## **12) APPROVAL**

This TOR is approved by:

Signature

Cecilia Oh  
Programme Advisor, Access and Delivery Partnership (ADP)

Date of Signing