



Request for Proposals

Expanding Long Term Financing Options for Countries in West and Central Africa with High HIV Burden

Reference: EMP/EDA/2511

Deadline for submission:
~~25 November 2008, 17:00 (Geneva time)~~
Extended: 19 December 2008; 17:00 (Geneva time)

Background information on UNAIDS

The Joint United Nations Programme on HIV/AIDS (UNAIDS) supports and coordinates the efforts of ten cosponsoring United Nations system organizations and works with a wide range of other partners in the global response to AIDS. For further information on UNAIDS please refer to the UNAIDS website at www.unaids.org

Requirements under this Request for Proposal

UNAIDS developed estimates for 134 low- and middle-income countries on the **Financial Resources required to Achieve Universal Access to HIV, Prevention, Treatment, Care and Support**. These estimates are based on the type of epidemic and nationally established targets using the latest available data. More information on resource needs for HIV and AIDS are available at: <http://www.unaids.org/en/PolicyAndPractice/ResourcesAndFunding/default.asp> .

The UNAIDS, AIDS Financing and Economics Division has produced updated global estimates and is now planning to have these estimates validated by the countries in order to gradually replace the estimates using globally set targets, scale-up rates and populations in need.

Contacts and Procedures

The proposals must be written in English and be separated into two components: a technical and a financial bid. The proposal should be sent to the following address:

Electronic: marillar@unaids.org

or

Courier: Regina Marilla
EDA/AFE/EMP
UNAIDS
20, avenue Appia
1211 Geneva 27
Switzerland

Proposals should bear the following reference: **EMP/EDA/2511**. Bids should be received in UNAIDS by ~~25 November~~ **19 December 2008, 17:00** (Geneva Time), at the latest.

Documents Provided and Confidentiality

The information contained in this RFP and any other information furnished by UNAIDS as part of the RFP process, must be treated as confidential and no use, other than for the purpose of responding to this RFP, is authorised. All documents provided by Vendors to UNAIDS in respect of this RFP will be treated as confidential.

Evaluation of Proposals and Vendor Qualifications

All Proposals received by the specified Closing Date and Time, will be evaluated by an Evaluation Panel composed of UNAIDS Officials from HQ Geneva. Only those Vendors with sufficient appropriate experience for performance of work relevant to this RFP, depth and quality of staff, financial strength and stability, will qualify for further consideration and short-listing.

To assist in the evaluation and comparison of Proposals, UNAIDS may, at its discretion, ask a Vendor for clarification of its Proposal. The request for clarification and the response shall be in writing.

UNAIDS reserves the right to:

- Award the Contract on the basis of the UNAIDS' particular objectives
- Award the Contract to a Vendor of its choice, even if its bid is not the lowest
- Award separate Contracts for parts of the work to one or more Vendors of its choice, even if their bids are not the lowest
- Not award any Contract at all UNAIDS also reserves the right to negotiate the terms of the Proposal(s) made by one or more Vendors of its choice, including but not limited to negotiation of the price quoted in such Proposal(s) and/or the deletion of certain parts of the work, components or items called for under this RFP.

There is no obligation by UNAIDS to reveal, or discuss with any Vendor, how a Proposal was assessed, or to provide any other information relative to the evaluation process. Vendors whose Proposals are not selected will be notified in writing of this fact, and shall have no claim whatsoever for any kind of compensation. Proposals shall remain valid for a minimum period of 60 calendar days from the Closing Date.

Terms and Conditions

Any order resulting from this RFP shall be subject to UNAIDS General Conditions of Contract (provided as part of this RFP process). This RFP, together with the selected Vendor's Proposal, shall form an integral part of the Contract, it being understood that any and all of the Vendor's (including Vendor's partners) general and other contractual terms and conditions, regardless of whether they are included or referred to in the Proposal, invoices or other documents accepted by UNAIDS, will by this reference automatically be excluded from the Contract and shall have no force and effect whatsoever between the parties (unless, but only unless and only to the extent any such terms or conditions have explicitly been agreed to by UNAIDS in writing). Any expenses incurred in formulating a Proposal to this RFP will be borne by, and are the sole responsibility of, the Vendor.

All prices and charges must be quoted in US dollars. Vendors are expected to examine all instructions, forms and specifications associated with this RFP. Failure to furnish all information required by the RFP and associated documents, or submission of a Proposal which does not comply with these documents will be at the Vendor's risk and may affect the evaluation of the Proposal.

Technical Requirements

Expanding Long Term Financing Options for Countries in West and Central Africa with High HIV Burden

Background

AIDS is a long-term epidemic that requires a commitment of resources that is sustained in the long term, and can be sufficiently predictable to allow the affected countries to plan effectively the scaling up of services. The underlying challenge for attaining the Millennium Development Goals (MDG), and for economic development in general, applies also to overcoming the HIV epidemic – insufficient resources have been committed towards them, and all of the diverse development and health concerns must compete for those same inadequate resources. It is important to distinguish between strategies to increase the overall level of resources for health and development, and those to increase the priority given to HIV within existing allocations. Both will be important for developing sustainable financing for HIV over the next 10-20 years.

The resource needs for HIV prevention, AIDS care and treatment and impact mitigation constitute a significant proportion of the gross national income (GNI) in the highest burden countries of sub-Saharan Africa. According to estimates prepared by UNAIDS in 2005, the total resource needs for HIV¹ are already more than 4% of GNI in seven countries of sub-Saharan Africa, and between 2%-4% in a further fifteen countries. The steadily increasing treatment needs alone exceed 20% of the existing health budgets in seven countries. The average for this in low-income countries lies between 7%-8%, but it also exceeds 5% on average in the ten lower and upper middle-income countries of the region.

Clearly, the scale up path envisaged by UNAIDS will raise challenges of budgetary management and delivery capacity. It cannot take place without substantial external financing, from bilateral or multilateral sources as, for most sub-Saharan countries, their capacity to finance the proper response to the epidemic can not meet the needs. Additional financing are necessary and governments must implement other financing mechanisms at national and regional level in order to leverage the external assistance to HIV over the long term.

In many sub-Saharan countries, the bulk of the financing of AIDS treatment and care is currently coming from external sources, rather than the Government budget. This has led to concerns that the financial need to maintain even the existing cohorts of people on anti-retroviral drugs may be difficult to sustain financially if the policies of bilateral or multilateral donors change significantly in the medium term.

The purpose of this consultancy is to investigate the available sources and mechanisms of financing in low- and middle-income countries in relation to planned expenditure or estimated resource needs, and to recommend measures that could meet the identified financing gaps in a sustainable way.

Tasks

The Economics and Development Analysis team from the UNAIDS Secretariat has initiated a set of activities in order to identify options for sustainable and long term financing for the HIV Response in Africa. UNAIDS² is seeking to support up to three countries from the west and central Africa region to design a financial strategy that will ensure funding for their HIV programme over a 15-25 years time horizon in a sustainable manner.

The aim of this consultancy is to enable countries to design a sustainable long-term financing map for their response to their HIV epidemics.

Specific Objectives

For each of the three pilot countries:

- To undertake a quantitative analysis of all existing and potential financing mechanisms of the national programme for HIV.
- To identify the constraints and opportunities each financing mechanism faces in its implementation.
- To recommend measures to meet identified financing gaps in a sustainable manner.

Work of the Consultant

The consultant will work in a selection of at least three low- and middle-income countries, which will be selected from the following list in consultation with the UNAIDS Regional Support Team in Dakar (Senegal), and the UNAIDS Country Offices in the countries concerned (alphabetical order) :

• Burkina Faso	• Nigeria
• Cameroon	• Togo
• Côte d'Ivoire	

It is envisaged that all of the above-mentioned countries in the region will be invited by UNAIDS to a subsequent regional conference in order to share the conclusions and experiences gained during this pilot exercise.

In each country, the following tasks will be undertaken:

1. In consultation with the appropriate stakeholders in the country, analyse the existing financing mechanisms directed towards the AIDS response, including, but not limited to government budget allocations, aid flows, loan and non-loan mechanisms and out of pocket expenditure by individuals, social health mechanisms either at the point of service delivery or through public or private insurance. For each of them, their long-term trend and potential should be assessed.
2. Compare these to the estimated needs³ and existing planned expenditures for prevention, treatment and care programmes over a 10-15 year period, and to estimates of the potential impacts of HIV on the economy of the country.
3. Identify the range of the financing shortfall during the forthcoming 10-15 years.
4. With the assistance of stakeholders at country level, particularly the Ministry of Finance, and the UNAIDS' Economics and Development Analysis team, identify additional potential financing

² The term UNAIDS includes the Secretariat, UNHCR, UNICEF, WFP, UNDP, UNFPA, ONUDC, ILO, UNESCO, WHO and the World Bank

³ UNAIDS will provide estimates of resource needs to the year 2015

mechanisms (including multi-country or regional mechanisms). For each of them, identify the costs and benefits and the preliminary steps for implementation.

5. Define a *Long-term sustainable financing map* which highlights the key components, a tentative sequencing for implementation, and a financial simulation compatible with the trend of HIV expenditures.
6. With the assistance of UNAIDS, convene the relevant stakeholders from the country national AIDS programme, the ministries of finance, health, social security and education (and others where appropriate), civil society and the UN theme group in a country workshop for a discussion of the financing options.
7. Provide recommendations for additional and stable financing. This should include estimates of the limits to what can realistically be financed from public or private domestic sources, and what needs to be drawn from external sources.
8. When the country level analysis has been completed, draft an issues paper that summarises the findings on financing options across the countries. The issues paper should address the question of whether or not it would be appropriate to modify the existing restrictions on eligibility to concessional aid or loan funding for middle-income countries with high AIDS burden.

Deliverables

1. An inception report describing the methodology, operational plan and chronogram.
2. A report for each of the selected countries, containing the information, analysis and recommendations as specified above, and proceedings of the national workshop.
3. An issues paper outlining recommendations for financing options applicable to the selection of middle-income countries with high HIV burden.

Timetable

It is envisaged that the work will be completed over a six (6)-month period, as illustrated below:

	Jan-09	Feb-09	Mar-09	Apr-09	May-09	June-09
Inception phase (incl. initial briefing and logistical arrangements)						
Country level consultation and analysis						
Report writing						

Team Profile and Indicative Budget

We are looking for a team providing a strong knowledge of public economics, development economics and health economics. Applicants must be fluent in both French and English. The team must cumulate demonstrable experience in the above fields of economics, including with country experience. The budget will be determined through a process of tendering, but will be based on an estimate of about 3,5 to 4 person months of consultant time. Consortia with institutes, universities, consultant office and individuals from countries above mentioned are strongly encouraged. Applicants might apply as team or as individuals. In the latter case, they accept to be associated and managed in a team to be assembled by UNAIDS.

Most of the activities should be performed within the countries selected (and therefore include living expenses) plus travel and meeting expenses for three countries.

The budget should also include provision for one country workshop in each country as described in the above activities and the production cost for the reports.