

TERMS OF REFERENCE

Job ID/Title:	National Economist for NCD or Tobacco Control Investment Cases
Duty Station:	Home based
Category:	HIV, Health and Development
Additional Category:	
Brand:	UNDP
Post Level:	--
Type of Contract:	Individual Contract
Category (eligible applicants):	National expertise
Application Deadline:	November 28 th 2018

Languages Required:	Arabic	<input type="checkbox"/>	English	<input checked="" type="checkbox"/>	French	<input type="checkbox"/>	Russian	<input type="checkbox"/>
	Spanish	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Portuguese	<input checked="" type="checkbox"/>	Other.....	<input type="checkbox"/>

Starting Date:	December 10th
Duration of Contract:	Up to 20 days working days
Expected Duration of Assignment:	December 10 th 2018 – 30 April 2019

A. Background

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, as envisaged by 2030 Agenda for Sustainable Development. We are on the ground in more than 170 countries and territories, working with governments and people on their own solutions to global and national development challenges. As they develop local capacity, they draw on the people of UNDP and our wide range of partners that can bring about results.

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 and help countries to achieve the Sustainable Development Goals. 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 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 Development Group (HHD), within BPPS, is helping to contribute towards this outcome.

UNDP is a founding cosponsor of the Joint UN Programme on HIV/AIDS (UNAIDS), a partner of the Global Fund to Fight AIDS, TB and Malaria, and a co-sponsor of several other international health partnerships. UNDP's work on HIV, health and development, as described in the HIV, Health and Development Strategy 2016-2021: Connecting the Dots, leverages UNDP'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 Sustainable 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 the law and legal environments in facilitating stronger HIV responses, including the use of flexibilities in intellectual property law to lower the cost of drugs and diagnostics. UNDP also works to empower and include marginalized populations who are disproportionately affected by HIV, such as sex workers, men who have sex with men and people living with HIV. 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 municipal action on SDGs, sustainable responses for Health and HIV such as improving sustainability of AIDS financing, sustainable health procurement, strengthening of national human rights institutions and increasing access to justice for key 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 SDG 3 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 temporary 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 to be able to assume the Principal Recipient role over time.

B. Context

The significant harms of tobacco use on developing countries are usually understood primarily through a health lens. This overlooks the extensive impact of tobacco on social, economic and environmental progress. Tobacco control is a development issue and its success relies on sectors such as commerce, trade, finance, justice and education working with the health sector to their mutual advantage. With the international community including strengthened implementation of the WHO FCTC (target 3.a) within the UN's 2030 Agenda for Sustainable Development, demand for whole-of-government tobacco control support has quickly grown.

Significantly increased investments are necessary to meet Sustainable Development Goal target 3.a on WHO FCTC implementation. These investments will need to rely primarily on domestic public finance. Tobacco taxation (i.e. WHO FCTC Article 6) was specified in the Addis Ababa Action Agenda on Financing for Development for its potential to reduce the health burden and associated costs of tobacco use while generating significant revenue for countries to finance their development priorities. Raised tobacco excise taxes, along with the multiple other interventions outlined across the WHO FCTC's 38 Articles, is one of the most cost-effective and proven health and development interventions. Yet perceived incentive conflicts amongst government sectors, particularly between the health and economic sectors, remain a barrier to its implementation and to implementation of the treaty broadly.

To support increased investments in tobacco control and to facilitate stronger coordination across governments, the UN has been invited to assist countries in quantifying the significant costs of the status quo – to the health sector and the economy at large – against the investments and benefits of scaled up action.¹ The ability of governments – especially ministries of health – to make a compelling, evidence-informed advocacy case for FCTC implementation is crucial for reversing the trend of more and younger people falling ill, living with chronic and debilitating conditions, being unable to participate in labour markets, and dying of diseases stemming from tobacco use.

Overall Objective of the Tobacco Control Investment Cases

UNDP and WHO are supporting implementation of the WHO FCTC Secretariat-led project *FCTC 2030*, which aims to strengthen implementation of the treaty and position tobacco control as a multidimensional sustainable development issue in low- and middle-income countries.

This work includes support to ministries of health to develop national investment cases for scaled up action. The cases calculate the direct and indirect economic costs of tobacco use to a country, the costs of scaling up WHO FCTC implementation, and the returns on those investments, in terms of lives saved and economic costs averted.

Together with the economic analyses, UNDP-led institutional and context analyses identify opportunities to strengthen policy coherence and multisectoral planning and coordination.

The joint UNDP/WHO/FCTC Investment Case team will:

1. To meet with key stakeholders and sectors to discuss the purpose of the investment case, seek their inputs and ultimately secure the endorsement of the case.
2. To undertake an institutional context analysis as it relates to FCTC implementation in the country.
3. To develop collect and analyze national health, economic and social data for input into the investment case.
4. To brief the Government on how to use, adapt and update the FCTC investment case.

C. Duties and Responsibilities of the National Economist

Under the overall supervision of Programme Specialist, during development of each country Investment Case, the National Economist consultant will be responsible for:

1. Troubleshoot national data collection and help with validation of default data where no national data is available;
2. Work with the investment case team to ensure timely delivery of the four main components of the model:
 - a. estimate of the economic burden of tobacco;
 - b. estimate of the impact of key FCTC interventions;
 - c. estimate of the costs of the interventions;
 - d. quantification of the return-on-investment in those interventions;

¹ WHO FCTC Decision COP6/17 requested UNDP and WHO to help countries make the business case for investments in tobacco control.

3. Lead the development of a component of the Investment Case report on the relationship between tobacco control and the tourism sector.
4. Contribute to the development of an advocacy strategy, tailoring the Investment Case findings to the Cabo Verdean context and identifying key talking points for policymakers.
5. Support development of the presentation of the modelling during the handover to the Government.
6. Participate in the briefing session for the handover of the investment case to national partners (1-2 days in early 2019).

Deliverables:

- Draft component on the economic impact of tobacco control and the tourism sector.
- Report on technical input into the investment case at three stages: preliminary findings, first and final drafts of the tobacco investment case report;
- Participation in the launch events of the FCTC investment case.
- Consultancy report.

Reporting:

The consultant will regularly evaluate progress in meeting the specific deliverables with the UNDP Programme Specialist, and other members of the Investment Case mission.

Travel:

No travel is foreseen for this consultancy.

Time-frame:

The consultancy will be home-based for a period of up to 20 days covering the period December 10th 2018 to 30 April 2019.

Evaluation

Applicants will be screened against qualifications and competencies specified below through a desk review that combines the results of a technical and financial evaluation. Specifically, the award of the contract will be made to the Individual Consultant whose offer has been evaluated and determined as:

- responsive/compliant/acceptable, and
- having received the highest score out of a pre-determined set of weighted technical and financial criteria specific to the solicitation; Technical Criteria weight: 70 points; Financial Criteria weight: 30 points.

Only candidates obtaining a minimum of 49 points (70%) out of a maximum 70 points on the Technical Evaluation will be considered for the Financial Evaluation.

Criteria for Technical Evaluation (70 points maximum)

- Minimum of a master's degree or equivalent in health economics, public health, social sciences or a related field (10 points maximum);
- At least three years' experience of research, writing, modeling and analytical skills (20 points maximum);
- Experience in undertaking health investment case analyses (or health spending cost/benefit analyses), including return on investment. (30 points maximum);
- Language; English is required, another UN language is an asset. (10 points maximum).

Criteria for Financial Evaluation (30 points maximum)

The following formula will be used to evaluate the financial proposal:

- $p = y (\mu/z)$, where;
- p = points for the financial proposal being evaluated;
- y = maximum number of points for the financial proposal;
- μ = price of the lowest priced proposal;
- z = price of the proposal being evaluated.

Payment

The table below describes the results and deadlines that must be strictly observed:

Outputs	Period	Payment
1. Draft component on the economic impact of tobacco control and the tourism sector.	January 10 2019	30%
2. Report on technical input into the investment case at three stages: preliminary findings, first and final drafts of the tobacco investment case report;	April 30 2019	70%
3. Confirmation by UNDP on the Participation in the launch events of the FCTC investment case.		
4. Consultancy report approved by UNDP		

D. Competencies

Corporate Competencies

- Demonstrates integrity by modeling the UN's values and ethical standards.
- Promotes the vision, mission, and strategic goals of UNDP.
- Displays cultural, gender, religion, race, nationality and age sensitivity and adaptability.

Functional

- Familiarity with and experience in global health economics, including NCDs.
- Knowledge of the development dimensions of health.
- Familiarity with national health and development planning processes an asset.
- Familiarity with the sustainable development goals and targets, including how UNDP's work on health advances these.
- Competence with Microsoft Word and Excel.

Project and Resource Management

- Exceptional organizational skills.
- Ability to work independently, produce high quality outputs.

Partnership Building and Teamwork

- Demonstrated flexibility to excel in a multi-cultural environment.
- Provides and receives constructive feedback.

Communications and Advocacy

- Exceptional writing skills.
- Ability to clearly and briefly generate insights based on analysis of data.
- Strong capacity to communicate clearly and quickly.

E. Qualifications

Education

- Master degree in Social Science, Public Health, Law, Economics, International Development or a related field.

Experience

- At least three years relevant work experience in NCDs, HIV and/or health, especially in a development context.
- Research, writing, and analytical skills.

Language Requirement

- Fluency in written and spoken English and Portuguese required.

F. Guidelines for Applications

Interested applicants are advised to carefully review this advertisement and ensure that they meet the requirements and qualifications described.

Application Process

Interested consultants must submit their application to the Joint UNDP, UNFPA and UNICEF Operating Services Office, at email address: procurement.cv@cv.jo.un.org , until 28 of November 2018 - 11.59pm local time (Cabo Verde).

Incomplete applications or applications received after the closing date will not be accepted.

The dossier should include the following elements:

1. Curriculum Vitae, which must include the qualifications, experience and detailed expertise.
2. P.11 form filled (annex).
3. A methodological note presenting with clarity and precision the organization and work management, procedure, tools and tasks to accomplish.
4. A calendar of activities.
5. A financial proposal that includes fees, travel, visa and other consulting expenses (Lumpsum).
6. A cover letter confirming the interest and availability for the consultancy (annex).

Please note that the financial proposal is all-inclusive and shall take into account various expenses incurred by the consultant/contractor during the contract period (e.g. rent of dwelling, fee, health insurance, vaccination, visa costs and any other relevant expenses related to the performance of services...). All envisaged costs (except of the unforeseen travel costs for missions, if any) must be included in the financial proposal. Unforeseen travel costs for missions, if any, will be paid separately according to UNDP rules and regulations.

Incomplete applications will not be considered. Please make sure you have provided all requested materials

Due to large number of applications we receive, we are able to inform only the successful candidates about the outcome or status of the selection process.

Approved By

Name: Elisabete Mendes

Signature

A handwritten signature in blue ink, appearing to be 'EM', is written over a horizontal line.

Date 12/11/2018