



BRINGING CIVIL SOCIETY TOGETHER
TO END THE TUBERCULOSIS EPIDEMIC

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Terms of References for Individual Consultant

to develop regional briefing package on budget advocacy for EECA countries of the TB-REP 2.0 project

Date: May 10, 2019

About TB Europe Coalition (TBEC)

Established in 2009, TBEC is a regional advocacy network of civil society organizations and individuals from across the World Health Organization (WHO) Europe region, comprising Western and Eastern Europe, Caucasus and Central Asia. The network aims to strengthen the role of civil society within the regional response to TB, and ensure political and financial commitments to end TB. Currently TBEC has more than 200 members from more than 30 countries in the region. In 2017, TBEC was registered as a legal entity in the Netherlands to step up its regional and national advocacy, capacity building and support to country-led TB advocacy initiatives. The TBEC Secretariat is located in Kyiv and responsible for the coordination, communication, administration, programmatic and policy management of the network.

Background information on the project:

After three years of successful implementation of the multi-partner Tuberculosis Regional Eastern European and Central Asian Project (TB-REP), all the 11 countries from the EECA Region are moving forward, advancing from the new model of care towards Improving DR-TB early detection and treatment outcomes within TB-REP 2.0 project. TB-REP 2.0 will be implemented during 2019-2021, consolidating the achievements and addressing the challenges of the TB-REP project.

The overall goal of the program is to foster timely TB case detection and improved treatment outcomes in patients with special emphasis on drug-resistant TB, through meaningful involvement of communities and civil society and integrated people-centered TB care delivery systems able to address the needs of key and vulnerable populations.

The project is implemented with the financial support of the Global Fund to Fight AIDS, Tuberculosis and Malaria in the countries of Eastern Europe and Central Asia (EECA).

Partners involved in this project's implementation are: Center for Health Policies and Studies (PAS Center) - Principal Recipient, WHO Regional Office for Europe, TBEC, TB People, Global TB Caucus (GTBC). Within the program implementation TBEC is responsible for strengthening advocacy and the operational role of civil society.

Continuous technical assistance will be provided to countries to catalyze advocacy efforts, assess partnerships and advocacy strategies for civil society organizations (CSOs) and regional stakeholders, as well as forge partnerships with the national TB caucuses.

A steady increase in the demand for social services aimed at improving the quality of life of people with TB in difficult living conditions and an increasing burden of providing social support for government agencies and bodies is a basis for reforming social assistance to those in need. The basis of this reform is the understanding that the successful development of the civilian sector is a new resource for their involvement in the implementation of projects to support vulnerable groups, which, along with analyzing the experience of other countries, has increased the need to accelerate the introduction of new social protection mechanisms for the population. New mechanisms for organizing social assistance to various population

groups are a response to significant challenges to relevant institutions of civil society in the form of a significant reduction in donor funding and, most importantly, the need to achieve sustainability through strengthening the relationship of government structures and non-governmental organizations.

The country-specific analysis of the environment and approaches on the implementation of the social contracting will become a basis for further development of community advocacy action plans, advocacy for policy changes and forge sustainable relationships between all country stakeholders in the fight against TB.

Budget advocacy is often a difficult undertaking for CSOs due to large capacity limitation understanding of the budget cycle, the key stakeholders at each stage and limited government transparency in budget preparation and execution. Public guidelines on the government budget cycle (and where to intervene for maximum impact) are often lacking. Over the past decade, CSOs have more actively intervened in the budget process, along with monitoring and reporting on public expenditures in countries all over the world—these efforts can be successful. CSOs can act as a bridge between communities and governments. They can help community members gain a greater voice in the budgeting process, bringing needs and issues to the attention of policymakers. CSOs can also help policymakers understand the impacts of budget decisions and point out when change is needed.

Governments have an obligation to govern in the best interests of their citizens, and civil society plays an important role in making sure this obligation is met. Governments must devote more resources to health and use them more efficiently. By engaging in health budget advocacy, CSOs can help make sure this happens.

In order to help and bring a clear understanding of how CSOs can be involved in budget advocacy in EECA the briefing guide on budget advocacy is planned to develop. This briefing guide should motivate and show the value of budget advocacy, and become the starting point for CSOs of engaging in health budget advocacy, showing how CSOs can get started, and highlighting some important considerations as well as good examples of what has worked in other EECA countries.

The objective of the assignment:

Overarching objectives is to maintain and increase resources to fight TB as a key component within the political agenda and country budgeting process; advocate for and track accountability of political commitments regarding TB policy and financing.

The briefing guide on budget advocacy aims to:

- suggest as simply as possible entry points where CSO/community activists can influence budget changes such as milestones of the national budget cycle and key decision makers;
- provide key recommendations and approaches for CSOs involved in national-level advocacy to promote sustainable funding of high-quality services for vulnerable groups of Eastern Europe and Central Asia (EECA);
- equip civil society advocates with the skills they need to understand the underlying principles and processes of budget advocacy.

The scope of work:

- Describe the role of civil society in budget advocacy.
- Identify opportunities and challenges for civil society in budget advocacy, including participation in social contracting mechanisms;
- Provide examples of successful budget advocacy from EECA;
- Provide examples of budget advocacy that let to sustainability of services in the context of transition from international funding of TB care to national.

Total number of 5 consultancy days is planned for preparing the briefing guide of budget advocacy.

Final number of consultancy days is subjected for negotiation in line with the budget availability and cost-

effectiveness of the consultancy proposal.

Consultant will be evaluated based on the qualifications, consultancy fee will be negotiated based on the consultant's expertise evaluation results.

Expected outcomes:

The consultant will provide the following deliverable, in English or Russian, to the TBEC:

1. A briefing guide will be developed to improve cooperation between national TB programs, health providers and civil society around 15 pages of text including graphics and charts.

Duration of the assignment:

- The work is expected to start after signature of the specific agreement for individual consultancy services.
- The duration of agreement is May 2019 - December 31, 2019.

Qualification requirements:

The consultant is expected to have a strong background in budget processes and a good understanding of the overall context of the TB programs in the EECA region.

The consultant should meet the following qualifications:

Experience/Knowledge

- Educational background in public health, health policy epidemiology, public administration and in other relevant fields (or commensurable working experience).
- Understanding of TB epidemiology, TB policies and interventions, and health systems in the country;
- Experience in budget advocacy and understanding of budget processes in several countries of EECA;
- Track record in academic work/publications is strongly preferred;
- Excellent understanding of Global Fund programs in EECA countries;
- Strong knowledge of the health budgeting processes in EECA;
- Experience in implementing advocacy and/or communication;
- Knowledge of TB and TB-related issues.

Skills

- Ability to conduct desk research, make conclusions, and formulate recommendations for strengthening TB prevention, care and control activities;
- Strong planning, organizational and coordination skills;
- Excellent communication skills;
- Ability to produce high quality, analytical outputs in clear concise language in a timely manner;
- Ability to meet deadlines;
- Ability to work independently and respond to feedback in a timely and professional manner;
- Fluency in English or Russian;
- Proven experience in developing advocacy recommendations for people-centred TB approach;
- Experience of providing consultancy services under regional projects is an asset.

Reporting requirements:

The consultant will closely coordinate with the TBEC Secretariat to ensure effective delivery of the outputs. The briefing guide could be written in either English or Russian languages. It should be in Microsoft Word format, to be submitted in electronic copies to TBEC Secretariat, specifically to TBEC Advocacy & Policy Manager, Yuliia Kalancha – kalancha@tbcoalition.eu