Saving lives Sustainably
ANNUAL REPORT 2018
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About the SPHS
SPHS brings together seven United Nations agencies and three global health financing institutions, committed to introducing sustainable procurement in the global health sector. Through a transparent and inclusive engagement process, and by leveraging its normative and market power, the SPHS is dedicated to lowering the environmental impact of its procurement, with the aim of improving human health and well-being.

For more information about the SPHS and its work, visit: www.savinglivesustainably.org

Acronyms

ADB: Asian Development Bank
AIDS: Acquired Immune Deficiency Syndrome
AMR: Anti-Microbial Resistance
BCtA: Business Call to Action
BMGF: Bill and Melinda Gates Foundation
BMZ: German Federal Ministry for Economic Cooperation and Development
CCEOP: The Cold Chain Equipment Optimization Platform
CEO: Chief Executive Officer
COP: Conference of Parties
DFID: The United Kingdom Government’s Department for International Development
EPI: Expanded Programme on Immunisation
ESG: Environmental, Social and Governance
FENSA: Framework of Engagement with Non-State Actors
FIT: Freight in Time
Gavi: Global Alliance for Vaccines and Immunization
GF: The Global Fund to Fight AIDS, Tuberculosis and Malaria
GF/HIST: Global Fund/Health Implementation Support Team
GH 50/50: Global Health 50/50
GHG: Greenhouse Gas
GMP: Good Manufacturing Practices
HCWH: Health Care Without Har
HHD: HIV, Health and Development
HIV: Human Immunodeficiency Virus
IGSS: The Guatemala Social Security Institute
IPC: Inter-Agency Pharmaceutical Coordination Group
ISO: International Organization for Standardization
LTA: Long Term Agreement
NCD: Noncommunicable Diseases
NFM: New Funding Model
NMS: National Medical Store
NGO: Non-Governmental Organization
PAHO: Pan American Health Organization
PAGE UN: Partnership for Action on Green Economy
PVC: Polymerizing Vinyl Chloride
REAP: Reducing Emissions from Antibiotic Production
RH: Reproductive Health
UPS: United Parcel Service
SDGs: Sustainable Development Goals
SPHS: UN informal Interagency Task Team on Sustainable Procurement in the Health Sector
Sida: Swedish International Development Cooperation Agency
SIWI: Stockholm International Water Institute
TB: Tuberculosis
TCO: Total Cost of Ownership
TPEs: Thermoplastic Elastomers
UN: United Nations
UNAIDS: The Joint United Nations Programme on HIV/AIDS
UNDP: United Nations Development Programme
UN Environment: United Nations Environment
UNFPA: United Nations Population Fund
UNHCR: United Nations High Commissioner for Refugees
UNICEF: United Nations Children’s Fund
UNOPS: United Nations Office for Project Services
WHO: World Health Organization
3MDG: The Three Millennium Development Global Fund
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SAVING LIVES SUSTAINABLY

Mobilization of cross-sectoral expertise leverages improved sustainable health procurement.

For more than 70 years, UNICEF has been tackling threats to children and adolescents through its extensive experience, efficient logistics and creativity. It provides and advocates for their health care and nutrition, education, and protection from violence and exploitation. It also works to build a nurturing and sustainable environment in which they can thrive.

UNICEF procures essential supplies and services amounting to over US$3.4 billion annually which reach beneficiaries in over 150 countries, supporting the fulfilment of children’s vast potential. Our work positively impacts children’s lives far beyond direct procurement. We also help to build systems that are responsive to children’s needs wherever they may be. These include targeted market influencing, setting of standards, sharing of expertise, and information transparency. This is never our work alone - UNICEF’s achievements always occur in collaboration with our partners. In the health sector, members of the SPHS Task Force are integral to our joint accomplishments.

As a member of SPHS since its establishment in 2012, UNICEF is proud to work with sister UN agencies, governments, NGOs, and the private sector, to address and focus on the sustainability of health sector supply chains. The highlight of the SPHS collaboration in 2018 was the successful convening of the “1st Saving Lives Sustainably: Asia Forum 2018”. This international conference focusing on sustainable production of health commodities was organized by UNDP (as the host agency of SPHS) in collaboration with the Swedish International Development Cooperation Agency (Sida), the Asian Development Bank (ADB), UN Environment, UNFPA, UNICEF, Health Care Without Harm (HCWH), and Business Call to Action (BCtA). UNICEF was honored to contribute to this multidisciplinary forum by presenting its best practices and experiences in reducing medical waste and nurturing local market potential. We and others left the forum inspired to continue with this important work.

As a Chair of the SPHS Steering Committee Meeting, I was privileged to lead discussions on how to leverage the success of the Asia Forum for the future - to make our collaboration and partnerships with public, private, civic, and academic actors even more purposeful, and to pursue similar fora in other parts of the world. I also encouraged the SPHS members to align their capacity building efforts for health and supply chain practitioners with similar UN initiatives, to maximize synergies, focus and impact.

In 2019, we look forward to continu-
ing our work with the SPHS member UN agencies and other actors to jointly address the challenges brought on by global issues such as climate change and conflict, which only lead to unsustainable, insecure and displaced lives for children. To achieve sustainability in developing global health supply chains that equitably serve children and adolescents, we need to adopt agile new ways of thinking. Given the scale of its procurement and supply operations, UNICEF finds itself in a strategic position to influence and address many procurement-related sustainable development issues, such as eliminating child labour in supply chains, protection for vulnerable young people and development of opportunities to address their health and life skills needs.

Moving forward and accelerating our efforts to achieve the UN Sustainable Development Goals (SDGs), we will leverage the innovations and market reach of business, the influence and power of governments, the experience of NGOs, and the global reach of multilateral organisations.

Katinka Rosenbom
Chief, Contracting Centre – Supply Division, UNICEF
2017 UNITED NATIONS SPHS MEMBER AGENCIES
HEALTH PROCUREMENT AND SUPPLY OVERVIEW

The main source of the following data is extracted from the UNOPS 2017 Annual Statistical Report on United Nations Procurement, which examines the combined spending on goods and services of 39 United Nations organisations in detail. The Report helps the SPHS Secretariat to analyze the key statistical information about the procurement done by SPHS member agencies on health commodities and services.

Total Number of Countries Covered by Health Procurement of the UN SPHS Member Agencies

Top 15 Countries Supplying the Highest Volumes of Health Goods and Services to the UN SPHS Member Agencies (in US$ millions)

1. India $703.3
2. Belgium $594.0
3. United States of America $445.0
4. France $382.0
5. The Netherlands $319.7
6. Republic of Korea $171.3
7. Germany $127.1
8. Denmark $75.9
9. Switzerland $72.4
10. China $60.9
11. United Kingdom of Great Britain and Northern Ireland $55.4
12. Kenya $49.6
13. Austria $48.5
14. South Africa $42.9
15. Ireland $32.4

All data is extracted from the UNOPS 2017 Annual Statistical Report on United Nations Procurement. Product segments taken into consideration are: Medical Equipment, Health Care Services, Pharmaceuticals including Contraceptives, and Laboratory and Testing Equipment.
Total 2017 UN SPHS Member Agencies Health Procurement and Distribution Among Members (in US$ millions)

- **Commodities**: $3,453
- **Services**: $301
- **Total Health Procurement and Distribution Among Members**: $3,754

**Percentage of each UN SPHS Member Agency Coverage in the Total Health Procurement**
- UNHCR: 1%
- UNOPS: 5%
- WHO: 11%
- UNICEF: 51%
- UNFPA: 4%
- UNDP: 10%
- PAHO: 18%

**Health Procurement Volumes and Growth (2013-2017)**

**Health Procurement Distribution per Segments and Families (above US$0.5 millions)**

**Pharmaceuticals incl. Contraceptives and Vaccines**
- Immunomodulating drugs: $586,954,267.33
- Amebicides and trichomonacides and antiprotozoals: $134,750,959.03
- Estrogens and progestins and internal contraceptives: $121,182,543.42
- Hormones and hormone antagonists: $117,414,812.20
- Antiviral drugs: $46,048,429.45
- Antibacterials: $6,893,712.84

**Medical Equipment and Accessories and Supplies**
- Clinical nutrition: $220,443,847.32
- Mobile medical services products: $78,652,968.73
- Patient care and treatment products and supplies: $60,787,677.61
- Medical facility products: $35,672,430.17
- Patient exam and monitoring products: $14,556,660.48

**Health Care Services**
- Comprehensive health services: $269,056,919.68
- Disease prevention and control: $21,434,591.64
- Medical practice: $7,719,781.93
- Death and dying support services: $1,894,584.75
- Food and nutrition services: $675,546.46

**Laboratory and Testing Equipment**
- Laboratory and scientific equipment: $133,721,459.94
- Measuring and observing and testing instruments: $23,084,694.17
- Laboratory supplies and fixtures: $1,642,637.72
THE YEAR UNDER REVIEW

2018 was a year of global action. It was a wake-up call for the world to understand that it was time to take the effects of the climate change more seriously as it threatens lives, economies and livelihoods now more than ever. It was time to step up efforts to create a better world for each and every one of us.

In 2018, the SPHS member agencies continued to leverage their capacity to change the world by prioritizing human and environmental health. The world’s biggest gathering on climate, the 2018 UN Climate Change Conference in Katowice, showed once again that only global answers can solve global problems. With this in mind, our member agencies continued to work towards achieving the UN Sustainable Development Goals (SDGs) and leaving no one behind. In order to do so, planetary health and climate change were prioritized.

For us, 2018 was a year of innovation and accomplishments. We continued to strengthen capacities in sustainable health procurement through various training and webinars. Through these venues, we raised awareness on key environmental and social issues in the global health supply chains, particularly on renewable energy, water efficiency, human rights and women empowerment in the global health sector, as well as the alarming threat of antimicrobial resistance.

We encouraged designs in procurement processes that minimized environmental impacts and waste in the health sector. We partnered with governments to implement strategic plans to accelerate joint health and environment priorities.

Looking back, we are proud of what we have accomplished together with our members and stakeholders. 2019 is a year when we continue to take decisive action to minimize the paradoxical contribution of the health sector towards climate change.

We are counting on our members and other stakeholders to help us continue to make a difference. Together, we are stronger, and only together, we can deliver.
KEY RESULTS: IN A GLANCE

Global overview of key achievements towards more sustainable health policies, strategies, and practices.

GUATEMALA: Reducing the Cost of Guatemalan Health Care
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SWITZERLAND: UN Environment Hosts the Minamata Convention on Mercury
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SWEDEN: World Water Week 2018
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GERMANY: Gavi and Germany Partner to Harness Blockchain Technology
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MYANMAR: Four Donors Commit More Than $125 Million to Improving Health Success Story
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UGANDA Mobile Phones and Digital Technology Delivery in Uganda
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PHILIPPINES: Asia Forum 2018
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COLD-CHAIN: THE LAST CHILD, THE LAST MILE
Ensuring vaccines reach every child, wherever they live, is a complex process. A number of factors have to be met to make this a reality. Not only do vaccines have to arrive in time to be distributed where they are needed, all vaccines must be continuously stored at the appropriate temperature from the time they are manufactured to the moment of use.

The Cold Chain Equipment Optimization Platform (CCEOP) is a global initiative aimed at equipping health facilities, in developing countries, with high performance, well-maintained cold-chain equipment, to ensure that vaccines are available at the final delivery point of immunization supply chains. When installed at required locations, this equipment will help to guarantee the viability and potency of the vaccines and therefore contribute to wider and more reliable immunization coverage. Initiated in 2016, the initiative is led by UNICEF in collaboration with the Bill and Melinda Gates Foundation (BMGF), Gavi, and the World Health Organization (WHO). A total of 41 countries have been approved by Gavi to date and are eligible for co-investment through the CCEOP.

Under this initiative, in 2018 a total of 10,400 fridges were installed at health facilities in 13 countries. UNICEF supported another 26 countries in finalizing their operational deployment plans, which was the basis for initiated procurement action which will lead to deployment of another anticipated 25,000 fridges in 2019. Working with partners to ensure that cold-chain equipment is available in hard-to-reach or neglected areas will increase immunization coverage and equity, so that even more of the world’s most vulnerable children are protected against life-threatening diseases.

Project Details

This project is contributing to sustainability in numerous ways. First, Solar Direct Drive refrigerators supplied under this initiative do not require batteries, which can damage the environment if not disposed of properly. Second, the refrigerant used in the refrigerators has a low ozone depletion rating and complies with the Montreal Protocol mitigating against global warming. Third, the initiative uses a turnkey concept to factor in the total cost of ownership (TCO): the refrigerator and freezer manufacturers take full responsibility for delivery, installation, and staff training through their local authorized dealer. This will help to prevent the breakdown of equipment through regular local maintenance and repair, extending the equipment’s life and helping to avoid the cost of re-purchases. TCO consideration including local after sales service does not only maximise best value for money but also support the local economy as it utilises and builds the capacity of local dealers.
REDUCING THE COST OF GUATEMALAN HEALTH CARE
Guatemala is strengthening efficiency of health commodities supply chain through ethical procurement, transparency and accountability.

In 2015, it was discovered that some major cases of unethical procurement were affecting medicine procurement in Guatemala’s Social Security Institute (IGSS). Hidden structures inside the Institute meant that certain suppliers were doing very well from government procurement. This meant medical services were more expensive than they needed to be, and it was holding the country back from gaining access to vital drugs and building new and improved medical facilities.

In 2016, UNOPS was brought in to design sustainable policies around procurement, infrastructure and project management for the IGSS. But entrenched unethical procurement is very difficult to remove and UNOPS faced significant challenges from inside and outside the Institute. Long-term suppliers who had profited from these practices inside the Institute resisted attempts to reduce costs. Stories attacking the project were placed in the media.

UNOPS priority was to improve the way the IGSS acquired medicines and medical supplies. Once it had implemented a transparent procurement system, it then began a more wide-ranging institutional reform of IGSS. It focused on procurement, organisational management, logistics and health services. Experts came in to work alongside staff in the Institute. Andrea Calvaruso, the Officer in Charge at UNOPS Guatemala, said this approach led to “changing mindsets.” Underlying all of these changes was the need to introduce a culture which enhances ethical procurement, transparency and accountability. “UNOPS brought transparency and clear rules in the procurement processes,” said Andrea.

The project has delivered big savings for Guatemala. UNOPS organized four public tender events after putting in place transparent and effective procurement processes. These led to savings of more than $155 million. The IGSS has reported an estimated 54 percent saving on the purchase of medicines since they began working with UNOPS. IGSS held international tenders to acquire 598 of the 731 basic drugs that they required, which included essential medicines and drugs of high commercial value important for patients.

The costs savings have enabled Guatemala’s health care service to invest in improved facilities. “With these resources, the Institute could build a new hospital, reduce the cost of medical services, extend insurance coverage and much more,” said Fabrizio Feliciani, UNOPS Regional Director for Latin America and the Caribbean.

Project Details

UNOPS is applying this model to health sector systems around the world. Already, it has provided hundreds of millions of dollars of health-related project support globally, from constructing hospitals to procuring medical equipment supplies. This helps communities gain greater access to the health facilities, services and supplies they need and delivers sustainable health outcomes for millions of people.
PARSYL AND GAVI ANNOUNCE SUPPLY CHAIN STRENGTHENING PARTNERSHIP
Vaccine supply chains in Uganda and Senegal will get a boost thanks to a new partnership between Gavi, the Vaccine Alliance and Parsyl Inc.

The partnership, announced at a high-level conference for Gavi’s 2018 mid-term review, will use Parsyl’s advanced supply chain data platform to support Senegal and Uganda to track and monitor cold chain conditions while vaccines are being distributed within countries. Parsyl’s monitoring devices combined with its mobile application and web platform will provide, for the first time, near real time visibility of the entire vaccine supply chain.

Vaccines need to be kept at a constant temperature to remain effective – if they become too hot or too cold they can be rendered useless within a matter of hours. Unreliable transportation systems and storage facilities in developing countries make it difficult to maintain the necessary conditions. According to a recent review by the journal Vaccine, approximately 37 percent of vaccines were exposed to temperatures below recommended ranges during storage in lower income countries.

Parsyl provides an easy way to collect and analyse data about supply chain conditions and transform it into insights about the integrity of sensitive products as they are shipped around the globe. Using a combination of proprietary wireless sensing devices and data analytics, Parsyl provides a solution that allows global health supply chain partners to answer critical questions about what happened to vaccines during shipment and storage, the causes and locations of any vaccine degradation, and what improvements can be made.

“The global effort to ensure every child, no matter where they live, has access to lifesaving vaccines relies completely on having strong, reliable supply chains,” said Dr. Seth Berkley, CEO of Gavi. “These precious vaccines can travel thousands of miles across the world to reach remote communities in Africa and Asia, but if they become too hot or too cold during that very last mile all the effort is for naught. That’s why this partnership with Parsyl is so important, ensuring that countries are using the latest technology to keep these vaccines effective.”
SUSTAINABLE SOURCING AND PROCUREMENT OF HEALTH PRODUCTS
Sourcing and procurement of health commodities is a critical component of health programs in the fight against AIDS, tuberculosis and malaria. The Global Fund is committed to playing an active and strategic role in shaping markets to maximize access to health products and improve health outcomes for people affected by the three diseases. Nearly half of Global Fund’s investments are used to procure and manage quality-assured medicines and health products.

A key strategic objective of the Global Fund is to enable a balanced, efficient and sustainable supply system in all countries where we invest. The Global Fund also works with manufacturers to encourage and promote environmentally and socially responsible procurement of health commodities. In 2018, 13 countries including the Democratic Republic of Congo, Malawi, Nigeria and Zambia adopted cartonless packaging for first-line antiretroviral treatments. Switching to cartonless packaging presents many benefits. It reduces the cost of annual treatment for HIV by $1.80 per person, resulting in US$29 million of savings across all Global Fund’s grants and access to annual treatment for HIV for an additional 400,000 people. It generates savings throughout the supply chain and helps reduce storage space in warehouses, distribution centres and health clinics by 33 percent. Eliminating packaging material reduces our carbon footprint: it is estimated that this initiative can save 5 million kilograms of paper and 900 tons of wood.

Project Details

The Global Fund is committed to advancing responsible sourcing and procurement with manufacturers and suppliers of health products. The Global Fund encourages environmental, health and safety standards for its supply of artemisinin, a key ingredient used in antimalarial medicines and promotes the shift to cartonless packaging of antiretroviral medicines.

The Global Fund and partners have defined a tailored and holistic procurement approach across four components:

Ecology: Lessen the impact on environment throughout the supply chain by using knowledge and skills to contribute to a steady improvement in eco-efficiency. This includes shifting from air freight to sea freight whenever possible.

Society: Promote fundamental human rights such as decent labour conditions, children’s rights and workers’ health and safety

Economy: Provide additional economic benefits to communities by empowering communities through knowledge sharing

Business practices: Promote good practices among suppliers and other buyers
DELIVERING FOR MOTHERS IN NAIROBI
For the health sector, non-functional infrastructure means patients can’t access health clinics close to their homes, health clinics lose medical supplies that need refrigeration and medical professionals must fight to save lives in overcrowded or unsanitary conditions.

For the estimated 89,000 people who live in Kayole, a low-income area located in Nairobi city’s Eastlands, it’s an all too familiar situation. Kayole has three public health centres. The Kayole 1 Health Centre is a vital part of the neighbourhood’s health infrastructure and serves approximately 52,000 people.

Many of the women who visit the maternal facilities at Kayole 1 have been referred there by community health volunteers. Community health volunteers dedicate much of their own time visiting people at home to help raise awareness about health matters, as well as services that are available in the area. Based on their training, if they believe someone needs to see a medical health professional, they collect basic information and refer them for a clinic visit.

Bernard Karari has served as a community health volunteer for 15 years. As the only man working in this field in Kayole, he has his work cut out for him. “Sometimes the men don’t want women to talk to them about some issues so I am the only person who can do it,” he says.

Before maternal facilities at the health centre at Kayole were functional, Bernard experienced a tragic incident helping a woman give birth on the street. “The lady was hypertensive, and we could not think of how to bring her to a hospital as there was no transport. Sadly, both she and the baby died from loss of blood,” he recalls. “I can see that things are much better now,” he adds.

For over two decades, the maternity building at Kayole 1 did not house functioning maternity facilities.

Lilian Muiruri, a nurse and supervisor at the centre says: “Deliveries were not possible here before. Women had to give birth at home or at the local chemists. It was unsafe, but these women work as housewives and street vendors. Their husbands are casual labourers. They cannot afford transport at a moment’s notice.”

In support of a United Kingdom’s Department for International Development funded UNICEF project, UNOPS rehabilitated the maternity facilities at Kayole 1. Green technology, such as solar panels, were installed at the centre to help provide a constant supply of power.

Project Details

UNOPS is supporting UNICEF to reduce maternal mortality and strengthen health care services across five of the worst affected counties in Kenya. As part of this US$12 million project, funded by the United Kingdom’s Department for International Development, 57 health centres were rehabilitated incorporating a range of green technology retrofits and solar powered solutions, designed to minimize electricity usage and provide access to water services. Close to 500 days of training were provided to community volunteers and health workers, and more than 14,000 people benefitted from knowledge transfer activities. The project was completed in June 2018, and the facilities were handed over in the course of 2017 and 2018.
MOBILE PHONES AND DIGITAL TECHNOLOGY TO BOOST VACCINE DELIVERY IN UGANDA
New collaboration will address vaccine supply challenges in 171 health facilities ensuring that children in the hardest-to-reach areas are protected with vaccines.

Thousands of children living in the densely populated districts of Wakiso, Nakaseke and Nakasongola in central Uganda will get better access to life-saving vaccines thanks to a new collaboration between the Uganda Ministry of Health, Gavi, the Vaccine Alliance, UPS and Freight in Time Ltd (FIT). The 18-month pilot project will use a customised mobile app and a wireless temperature monitoring system to help address supply chain challenges in 171 health facilities in three districts with the some of the lowest immunisation coverage and the highest number of unimmunised children in the country.

“Our main challenge is the last mile distribution of vaccines,” said Dr. Opar Bernard Toliva, Expanded Programme on Immunisation (EPI) manager in the Uganda Ministry of Health. “While some districts in Uganda are distributing vaccines all the way to the health centre, the majority of cases the health facilities have to pick up the vaccines themselves. This can cause challenges for health clinics due to lack of transport and time thus preventing children in remote areas from being protected with vaccines.”

The project will increase the efficiency and cost-effectiveness of vaccine delivery through a transport solution model specifically designed by UPS and FIT. With real-time data and analytics, it will also improve the visibility of supply chain performance: for the first time Uganda’s National Medical Store (NMS) will receive an overview of the entire supply chain in the three districts. This will allow for more accurate vaccine stock records, forecasting and planning. In addition to providing the latest technology and tools available, UPS and FIT will also bring innovative supply chain solutions to Uganda and build real capacity. For instance, teams on the ground will teach health clinic workers how to manage vaccine stocks, use the apps to understand consumption data and then use that information to order vaccines. The teams at the national and district vaccine stores will now have visibility on the stocks in each clinic so can plan their supplies more efficiently and effectively.
BABY BOXES FOR UKRAINIAN FAMILIES
The Government of Ukraine’s Ministry of Social Policy, UNICEF and UNOPS have launched a pilot project to protect the health and well-being of babies across the country.

The project aims to provide a baby box with essential childcare items to caregivers of every newborn in Ukraine. The box itself can be used as a cradle and will include a mattress, thermometer, diapers, blankets, baby linens, toiletries and pamphlets with breastfeeding and childcare tips. The boxes are supplied by a Ukrainian company, which creates jobs and supports the local economy.

“It is assembled with love, to make sure that the family of a newborn has everything necessary to take care of the child. It is a high-quality box with high-quality content,” remarked Volodymyr Groisman, Prime Minister of Ukraine.

The baby boxes will go a long way to support low-income families, who often cannot afford to buy many of the items in the box. The informational material will also raise awareness on healthy practices for infant care.

The project distributed 115,000 baby boxes to families and their newborns by the end of 2018.

This high-priority initiative is a part of the recently adopted Ukraine National Action Plan on implementing the United Nations Convention on the Rights of the Child.

At the request of the Government, UNOPS is supporting the project with the procurement of the baby boxes. Along with partners and experts, UNOPS has identified items for the boxes that will best benefit babies and support their caregivers.

“Employing the highest international standards and led by the best value for money principle, UNOPS has identified and procured the best products for an optimal price. We are proud to support the Government of Ukraine in implementing such a high-profile national priority,” said Sergei Volkov, Deputy Head of Office, Head of Programme, UNOPS Ukraine.
TO HELP MORE MOTHERS AND BABIES: CATHERINE’S STORY
Meet Catherine Nasike, a mother of three and a Community Health Volunteer. On our journey, we visit her Turkana home in Kenya, meet her family and neighbours and are guided through Catherine’s experiences as a volunteer.

The four-kilometre ride from the health centre to Catherine’s home is bumpy. The unpaved route offers little shade from the sun, yet is one that Catherine walks often. Unlike many of her neighbours whose homes are made from sticks and leaves, Catherine has a two-room mud house.

Catherine has lived the challenges her community faces, earning her respect among her neighbours. She does not take her responsibilities as a health volunteer lightly.

Whenever she hears that a woman is pregnant, Catherine visits them as soon as she can to encourage pre-natal care. Her voice is loud, advocating for women to access health, but also on behalf of women, conveying their hesitations to health care professionals and looking for a path forward.

She explains: “A woman cannot just go to the centre without the agreement of her husband first, or the father or brother for women who are not married.”

“No, men can have many wives. They decide all the health matters for them.”

But with men in the community often away tending to their herds for days at a time, this can be quite impractical.

Catherine recounted a time when she worked with a 15-year-old, who, unmarried at the time, relied on her father for health decisions. Based on her training as a health volunteer, Catherine suspected the girl might have a difficult birth and encouraged her father to take his daughter to the clinic when labour started. Her efforts paid off.

Reflecting on her own experiences with childbirth, she believes that the information and support that community health volunteers provide would have been very helpful. Catherine was just 16 when she gave birth to her son Gilbert, and it was a complicated pregnancy. She had to be transported by boda boda (motorbike taxis) to the Lodwar County Referral Hospital. She arrived with complications and was forced to wait several days to deliver her baby, because the hospital was not equipped to treat her over the weekend.

“If it was now, it would be different,” she says. “I would have much more help and the hospital would be able to do the delivery anytime without waiting.”

Project Details

Kenya has some of the highest rates of maternal mortality in the world. According to World Bank data, for every 100,000 live births, approximately 510 women lose their lives during pregnancy and childbirth. To help address this challenge, UNOPS is supporting the United Nations Children’s Fund, to reduce maternal mortality and strengthen health care services across five of the worst affected counties in Kenya — Turkana was one of them.

For more project details, see page 21.
Success Stories

We succeeded in our effort to promote sustainable health procurement and documented the following good practices.

Partnerships for Change: Engaging with UNDP Manufacturers and Procurement of Health Products

UNDP supports countries to implement large-scale health programmes and to strengthen their institutions to deliver essential services in challenging and high-risk country contexts. This also includes addressing rising social and environmental challenges. WHO has called climate “the greatest threat to global health in the 21st history”1 and yet, the health sector is also paradoxically contributing towards climate change through health commodities production, consumption practices and the massive scale of the global health procurement carbon footprint.

In response to this challenge, UNDP has taken a new organisational model and business approach to its procurement practices. Through a long-term agreement with five suppliers of antiretroviral pharmaceuticals, UNDP has influenced the manufacturing practices of its suppliers. This includes transitioning of manufacturing facilities towards ISO environmental management certifications. UNDP has also worked with regulators and manufacturers to reduce packaging for antiretroviral medication, leading to increased shipping capacity per container, reduced CO₂ emissions from freight shipments (by 57 percent), and reduced packaging waste by almost one-third. This has generated a significant reduction in environmental impacts, while simultaneously achieving procurement savings of US$8.15 million – which can then be reinvested to increase treatment coverage and ultimately and save more lives.

Based on this success, UNDP has incorporated similar initiatives as part of new long-term agreements signed with ten manufacturers or antiretrovirals, with a total contract value of US$300 million for the next three years. The new long-term agreements, launched in March 2018, include a “partnerships for change” approach through the entire procurement process. Manufacturers and freight

1 https://www.who.int/globalchange/global-campaign/cop21/en/
forwarders provide confidential qualitative and quantitative data which is then used through business intelligence analytics and portfolio risk assessments, leading to the identification of hotspot areas for further improvements. This will allow UNDP to further support innovation in and gradual adoption of sustainable health manufacturing and procurement practices.

**An Efficient, Effective Pooled Procurement Mechanism**

The Global Fund’s Sourcing and Supply Department manages approximately US$1 billion health product spend per year for grantees in about 65 countries through the Pooled Procurement Mechanism to deliver on its Market Shaping Strategy, increasingly implementing its responsible procurement approach in collaboration with partners and manufacturers across product categories. Health products available through the mechanism include antiretroviral drugs, antimalarial medicines, long-lasting insecticidal nets, essential medicines used in HIV programmes and condoms, viral load tests and rapid diagnostic tests. The Sourcing Team achieved US$175 million in savings across Global Fund grants in 2018. On-time and in-full deliveries of 84 percent significantly contributed to decreasing reports of stock-outs. These efforts are expanding the ability of partners to achieve greater value for money that can, in turn, be invested to save more lives.

**Live Monitoring of Latex Condoms**

In 2017, the UNFPA Quality Assurance team implemented temperature tracking of condom shipments as part of a pilot study for six countries, monitoring the temperature conditions of the shipment from the supplier’s warehouse to the final destination. The initiative aims to improve access to quality assured condoms, helping to advert risk for the end users and minimizing the loss of resources due to damaged goods. Currently, data retrieval and analysis from tracking devices of two shipments have been performed. Post-shipment testing has also been performed for some of the shipments. Conclusions from the study may influence the requirements for shipping conditions of condoms.

Quality analysis of male latex condoms production began in 2017 and monitoring has been ongoing on a monthly basis. The practice has been developed to enable assessment of the quality of male latex condoms across lots and provides a broader overview of the quality of condom manufacturing.

The analysis allows UNFPA to alert condom manufacturers of potential quality issues in their condom production. It also serves as an incentive to manufacturers producing high-quality condoms to maintain their current level. If applicable, manufacturers will also be able to use the analysis to improve aspects of their manufacturing processes such as packaging of products, management of transportation conditions, and more.

In 2018, UNFPA has implemented a risk-based approach system for condom quality monitoring. This approach is intended to qualify manufacturers into quality statuses based on abidance to stringent standards and specifications. The approach is to reduce lead time of testing, increase flexibility to respond to changes in demand and to ensure ongoing compliance with quality management systems.

**Third Time Running: UNOPS Receives Awards for Distinction in Sustainable Procurement**

UNOPS receives the gold level award from the world’s leading purchasing and supply association and remains the only United Nations organisation to achieve this honour.

“UNOPS deserves special commendation for achieving gold three years in a row [...] They are the only organisation to have reached this level consistently and were particularly identified as having strong sustainability goals,” said Duncan Brock, Group Director, Chartered Institute
of Procurement and Supply.

“This award underlines our commitment to quality. We are determined to keep raising the bar on the services we offer to nations across the world, in support of the Sustainable Development Goals,” said Grete Faremo, UNOPS Executive Director.

One UNOPS project in Kosovo⁹, highlighted as part of the latest award submission, saw the supply and installation of wastewater treatment plants at three common crossing points. Procurement processes encouraged designs that minimized environmental impacts and reduced waste. The project included gender-mainstreaming initiatives to support the hiring of women to complete technical work. With the project now complete, treated sewage water is channeled into tanks used to fight fires. Grey water, relatively clean wastewater, supplies fire hydrants, irrigates green areas and is used in public toilets.

“Procurement has a significant impact on critical social, economic and environmental concerns. It is the reason we embed sustainable procurement considerations into what we buy globally, whether products or services,” said Patricia Moser, Director, UNOPS Procurement Group.

“In addition to our own procurement model, we opt to hold ourselves accountable to private sector standards, to demonstrate our commitment to ensuring a more sustainable world,” she added.

As part of its wider efforts, UNOPS continues its Possibilities Programme through which small- and medium-sized enterprises and women- and youth-owned businesses are empowered to participate in UN procurement.

UN Environment Committed to Support a Sustainable Blue Economy

Aiming for a better planet and a sustainable economy, UN Environment, together with over 100 delegations, presented various commitments at the first global conference on the sustainable blue economy that took place in Nairobi, Kenya from November 26-28, 2018.

Cognizant of the potential of cross-cutting policies to drive a sustainable blue economy, UN Environment committed to lead global partnerships to map, assess and value ecosystem services. With this knowledge, different sectors that rely on oceans can make well-informed and sustainable decisions that allow both people and the seas to benefit.

With various discussions around the urgent need for effective waste management taking place at the conference, UN Environment committed to strengthen global partnerships on marine litter, nutrient management and waste-water based on the principles of circularity.

Gavi Recognised as an Equal Salary Employer

EQUAL-SALARY Foundation certifies that Gavi, the Vaccine Alliance offers equal pay to men and women.

Gavi, the Vaccine Alliance, has become the first global health organisation to be certified as an equal salary employer by the EQUAL-SALARY Foundation, a Swiss non-profit organisation focusing on equal pay for women and men.

“I am extremely proud that Gavi is leading the way as an equal salary employer,” said Anuradha Gupta, Deputy CEO of Gavi the Vaccine Alliance. “We will continue to work tirelessly to ensure the Gavi Secretariat is an inclusive and equitable environment, in which every employee feels valued. And we won’t stop there – we are also committed to reducing gender barriers in the countries we support to ensure a person’s health is not dictated by their gender and that mothers, the primary care givers, are empowered to access quality services for their

⁹ As per UN Security Council Resolution 1244 (1999)
Gavi has implemented a proactive gender policy to ensure equal access to immunisation for boys and girls in the countries it supports. Gavi also provides funding for health systems to help countries address barriers to immunisation, including those related to gender.

As part of this effort, Gavi-supported countries are encouraged to analyse and understand how vaccine coverage varies by sex, income and geographic location to help identify reasons for low immunisation coverage in certain groups. Efforts to better understand gender-related barriers and activities are crucial to finding solutions to these obstacles, which may prevent both boys and girls from being immunised.

**Thinking Outside of the Box**

In July 2018, the Global Fund worked with suppliers and partners in Zambia to place the first order of 4 million cartonless packages of antiretroviral treatment. That single order generated savings of US$ 766,000 from unit cost reduction and freight expenses. It helped reduce volumes by 51 percent, lower storage space requirements and save an estimated 100 tons of paper and 17 tons of wood. The savings were reinvested in programs to provide access to annual treatment for HIV for an additional 9,000 people.

The Global Fund aims to transition all first-line antiretroviral treatment to cartonless packaging in 2019.

**Fast-Tracking Action on Health and The Environment**

African ministers of health and environment agreed on a 10-year strategic plan to increase investment and accelerate joint health and environment priorities. The [Strategic Action Plan to Scale Up Health and Environment Interventions in Africa 2019 – 2029 to the African Union](#) was adopted at the closing of the third interministerial conference on health and environment held in the Gabonese capital from 6 to 9 November 2018.

Supported by the World Health Organization, UN Environment Programme and development partners, the action plan can positively change the course of sustainable development in Africa.

The Prime Minister of Gabon, Franck Emmanuel Issoze-Ngondet, said “We must go further, particularly in terms of mobilizing material and financial resources for the implementation of national plans, but also in terms of clarifying and sharing responsibilities.”

**Nearly one in four premature deaths in Africa are linked to the environment and climate change** and threatens to increase the number of health emergencies and outbreaks in the coming years. African leaders have recognized the need for health and environment sectors to work together since the 2008 Libreville Declaration and in 2010 the Luanda Declaration led to the creation of the Health and Environment Strategic Alliance, which is viewed as a path maker.

**UNFPA/UNICEF Joint Solicitation Exercises in 2018 and 2019**

UNFPA continues to increase collaboration with UNICEF in relation to joint bidding exercises. This is done in order to both combine procurement volumes of the two organisations, aiming to achieve the best value for money, and to share resources in the bidding process. A typical corporate solicitation process is time and resource intensive with the approximate cost of US$ 15,000.

Based on the joint solicitation conducted by UNFPA and UNICEF, the organizations were able to establish several Medical/Hospital Furniture Long Term Agreements. Such activity has let to the harmonization in quality, solicitation documents and standards of the products being...
offered. This positive outcome and the improvement of the cooperation across the UN agencies demonstrated in such exercises has resulted in having both UNFPA and UNICEF sitting together to map products and services which overlap in our operations, with the intention to combine resources and increase the commodities that are sourced via joint processes.

In addition, UNFPA and UNICEF recently launched another joint bid solicitation for anatomical models. The organizations expect to establish new LTAs by Q3 2019.

The continuation of this successful cooperation will be maintained and prioritized by both organizations.

**Four Donors Commit More Than $215 Million to Improve Health of the Most Vulnerable People in Myanmar's Hardest to Reach Places**

The United Kingdom, Sweden, United States and Switzerland have committed more than US$ 215 million to improving the health of Myanmar’s most vulnerable people through the UNOPS-managed Access to Health Fund.

Myanmar’s health system continues to improve, but significant health inequities remain. People living in conflict-affected areas are likely to experience poorer health outcomes, while those living in remote or hard-to-reach places are also more likely to suffer.

Four donors are committed to tackling these complex challenges, through continued pooled funding for Myanmar’s health sector. This pooled funding mechanism, the Access to Health Fund, will operate from January 2019 to the end of 2023. Access to Health is aligned with national health goals and priorities, supporting the achievement of Universal Health Coverage by 2030.

Access to Health Fund Board Chair Rea Bonzi said: “Despite making great leaps forward in the past few years, the health system in Myanmar faces great challenges in reaching its most vulnerable populations.”

“From those who live in remote or conflict-affected areas, to those who face enormous stigma in reaching services – Access to Health Fund aims to support the government and ethnic health organisations to reach everyone,” he added.

Through support to ethnic health organisations in close coordination with the Ministry of Health and Sports, the Fund will help bring services where they are most needed. Work will concentrate attention on conflict-affected areas, which government health providers may find difficult to reach and where available health services may be limited or of poor quality.

Access to Health will also dedicate funding and resources to continued work in strengthening the health system, and sustaining and building on the gains achieved by the Fund’s predecessor, the 3MDG Fund. The achievements and lessons of the 3MDG Fund were recognized by Head of Office for Sweden, Anders Frankenberg: “People living in 3MDG-supported townships have a better chance to access the quality health care that they need – not just to survive, but to thrive.”

The Access to Health Fund will support Myanmar’s response to communicable diseases (Malaria, HIV and Tuberculosis) and mother and child health, and will also dedicate resources to supporting Myanmar’s health system through investments in human capacity, infrastructure and management systems.


Gavi, the Vaccine Alliance, The Global Fund and UNICEF have been praised for their commitment to gender equality in a report released by Global Health 50/50. The review measures 140 organisations working in global health on indicators such as the existence of a gender strategy for programmes.
the collection of disaggregated data and the gender parity of senior management.

Ten further organisations, including WHO and the European Commission, were named as “high scorers.”

“We will never succeed in our mission to build a healthier, more prosperous world if half the population is left underrepresented, unempowered and underserved,” said Dr. Seth Berkley, CEO of Gavi, the Vaccine Alliance. “At Gavi we are working hard to make both our programmes and our Secretariat inclusive and equitable. While we know that there is more to do to tear down the gender barriers that stop people getting the health care they need, it’s an honour to be recognised for this progress by GH50/50.”

**UNFPA Green Procurement**

Together with their condom suppliers, in 2018, UNFPA reduced solid waste by more than 1.4 million kilos per month. This joint effort has translated into saving more than 5 million kWh of electricity during the last year.

Dignity kits are a critical part of the UNFPA humanitarian response effort. In 2018, UNFPA also reduced the environmental impact of UNFPA basic dignity kits. The savings of non-emitted carbon dioxide equivalent (CO2e) are much higher than what UNFPA initially envisaged.

From a cautious estimate of 3.6 metric tonnes, UNFPA now has a yearly volume of 13 tonnes of non-emitted CO2e. This means UNFPA avoided polluting the environment with a total of 39 tonnes CO2e since the implementation of global long term agreements. This corresponds to 90 barrels of consumed crude oil less in the world.
The health sector is providing an indispensable service to the public and, therefore, plays a crucial role in human development. The health and environment outcomes are interdependent. Climate changes and natural disasters impact the health of affected people, influence over 80 percent of the communicable and non-communicable diseases, change disease patterns and the delivery of available health services. In addition, health commodities including medicines, diagnostics and medical waste contribute to carbon dioxide emissions.

UNDP is committed to helping countries understand the close nexus between environment and health and understand the role that sustainable procurement practices can play to reduce a significant proportion of the health sector’s GHG emissions. Public procurement, indeed has been identified as a key entry point for promoting more sustainable production and consumption patterns. By adopting sustainable procurement policies, strategies and practices, governments and international development actors can therefore be drivers for a major shift towards inclusive, green economies.

Funded by the Swedish International Development Agency (Sida), the Sustainable Health in Procurement Project (SHiPP) aims to reduce the harm to people and the environment caused by the manufacture, use and disposal of medical products and by the implementation of sustainable procurement practices. The project targets countries in sub-Saharan Africa, Latin America, the Caribbean, the Pacific and Asia.

The Sustainable Health in Procurement Project (SHiPP)
SPHS Annual Report 2018

mention of health programmes, in order to strengthen sustainable procurement in the UN system and in strategic countries in the South. UNDP has been implementing SHiPP since 2018, together with Health Care Without Harm (HCWH) to leverage purchasing power and drive policy and market demand for sustainable manufacturing and waste management technologies within the health sector.

For more information about SHiPP, please visit http://bit.ly/SHiPPinbrief

Gavi and Germany to Harness Blockchain Technology

German government and the Vaccine Alliance to explore the application of blockchain technology to increase efficiency of immunisation programmes.

Gavi, the Vaccine Alliance and the German Federal Ministry for Economic Cooperation and Development (BMZ), through the KfW Development Bank, announced at Gavi’s high-level 2018 mid-term review conference in Abu Dhabi, UAE, that they will partner to explore the application of blockchain technology to Gavi’s cash support and supply chain management systems.

Before a vaccine can protect a child, immunisation programmes involve complex planning and procedures. Outdated vaccine supply and distribution systems can delay and limit the impact that vaccines have on people’s health. BMZ, KfW and Gavi recognise that blockchain technology could radically transform health systems by reducing wastage and creating trust amongst development partners, funders and countries.

“Blockchain technology could help us understand in real-time all the steps taken while a vaccine is being delivered,” said Dr. Seth Berkley, CEO of Gavi, the Vaccine Alliance. “This technology has the potential to increase efficiency and reduce costs for developing countries but, most importantly, it could save lives.”

Starting in 2019, the joint project will focus on exploring practical areas of application for this technology in the immunisation space to, for example, effectively track funds and vaccines.

Generic Contraceptives Saved Over US$ 3.6 Million

Shifting from innovator contraceptives to quality-assured generic substitutes has allowed UNFPA to save over US$3.6 million over a five-year period, from 2014 to 2018. The saved resources have the potential to provide one full year of generic injectable contraceptives for over 1.3 million women - 5.3 million vials in total.

During this period, UNFPA delivered generic hormonal contraceptives to over 60 countries, with a significant increase in terms of both new and returning programmes and partners.

As defined by WHO, an innovator medicine is the pharmaceutical product that was first authorized for marketing as a patented product. Generic medicines meet the same standards of quality, safety and efficacy as innovator medicines and generic RH contraceptives contain the same active pharmaceutical ingredient as the innovator product.

All generic medicines procured by UNFPA are prequalified by WHO, approved by Stringent Regulatory Authorities or recommended by the Expert Review Panel.

Renewed Partnership Between UNFPA and The Global Fund

The partnership between the Global Fund and UNFPA has common strategic priorities - preventing the spread of HIV/AIDS by providing quality assured condoms. Since the beginning of the collaboration between UNFPA and the Global Fund in 2016, male condoms procurement levels have increased significantly. In 2018, UNFPA procured more than 1.1 billion male condoms of which 30 percent were on behalf of the Global Fund.

In the absence of a cure, prevention is crucial to ending AIDS. As the only effective barrier prevention method providing triple protection against HIV, other sexually transmitted infections and unintended pregnancy, condoms remain a critical component of HIV/AIDS prevention programmes.

The collaboration enables the Global Fund and UNFPA to obtain a leveraged position in the global market of HIV/AIDS related products. By working together and combining procurement volumes, lower prices and faster delivery times can be
achieved— a central aspect of maximizing access to HIV/AIDS related products and helping to save the lives of millions.

In 2018, Global Fund Recipients in 36 countries received male and female condoms to a value of over US$18 million. The partnership ensures the continuation of procurement and delivery of male and female condoms to the 60 countries that are receiving health products from the Global Fund.

**New Network for Male Condom Quality Control Laboratories**

Since 2010, UNFPA has been working with African national laboratories conducting testing of male latex condoms. Based on the laboratories’ request for increased collaboration and information sharing opportunities, UNFPA has established the AfroCondomNetwork, which serves as a communication platform for collaboration among laboratories and regulatory agencies.

The members consist of national laboratories and national regulatory agencies responsible for quality assurance of condoms from nine countries: the Democratic Republic of the Congo, Ethiopia, Ghana, Namibia, Nigeria, Senegal, Uganda, Zambia and Zimbabwe.

By fostering partnerships among national laboratories, facilitating their interaction with national regulatory agencies in the area and promoting scientific and technical collaboration, the initiative is committed to protecting public health in the countries they serve. Through information sharing, the performance and technical skills of laboratory staff will be enhanced, while avoiding duplication within the network.

Generic medicines meet the same standards of quality, safety and efficacy as innovator medicines and generic RH contraceptives contain the same active pharmaceutical ingredient as the innovator product.

All generic medicines procured by UNFPA are prequalified by WHO, approved by Stringent Regulatory Authorities or recommended by the Expert Review Panel.
TRAININGS
We organized sustainable public procurement trainings for procurement practitioners.

The achievements highlighted in this section contributed to the following Sustainable Development Goals (SDGs):

Asia Forum 2018: Sustainable Production and Disposal in the Health Sector

The 1st Saving Lives Sustainably: Asia Forum 2018 was organized by UNDP, as the Host Agency of the SPHS, in collaboration with the Asian Development Bank (ADB), UN Environment, UNFPA, UNICEF, Health Care Without Harm (HCWH) and Business Call to Action (BCtA).

The Forum provided an invaluable opportunity for building capacity and galvanising action on sustainable production in the health sector, bringing together stakeholders from around the world to exchange knowledge, share experiences, identify good practices, and agree upon the way forward.

Funded by the Swedish International Development Cooperation Agency (Sida), the Forum was held at the Asian Development Bank (ADB) Headquarters in Manila, Philippines, from 13-15 June 2018, and featured various high-level speakers including: Mr. Ola Almgren, Executive Representative of the UN Secretary General; UN Resident Coordinator and Resident Representative of UNDP Philippines; Mr. Titon Mitra, UNDP Philippines Country Director; Mr. Woorchong Um, Director General of Sustainable Development and Climate Change Department at the ADB; Dr. Gundo Aurel Weiler, WHO Representative in the Philippines; Mr. Harald Fries, Swedish Ambassador to the Philippines; Dr. Esperanza Cabral, Member of the Board of Directors, Health Care Without Harm Asia; and Dr. Nestor F. Santiago, Jr., Assistant Secretary of Health of the Philippines.

The Forum was organised as a climate-smart event. The venue, the ADB Headquarters, is gold-level LEED certified building, and is

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The 1st Saving Lives Sustainably: Asia Forum 2018
Good Practices in Sustainable Production, Procurement and Disposal in the Health Sector. Read here.
100 percent powered by renewable energy. Participants went paper-free as the Forum agenda and all other relevant event material were made available through the event app. Delegate bags were made of ‘kat-cha’ cloth, which comes from used rice sacks. No bottled water was used at the event. The vast majority of event participants, organisers, speakers and moderators stayed at environmentally friendly hotels. The Forum successfully achieved zero waste.

In November 2018, the 1st Saving Lives Sustainably: Asia Forum 2018 Report and Compendium was launched. The Report and Compendium provide insights into over 70 good practice examples in sustainable production, procurement and disposal in the health sector, which were presented at the Forum and now serve as guidance on how to further strengthen sustainability in the global health supply chains.

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**CAPACITY DEVELOPMENT STATISTICS 2018**

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<thead>
<tr>
<th>4</th>
<th>LEARNING OPPORTUNITIES PROVIDED</th>
<th>The 1st Saving Lives Sustainably Asia Forum 2018</th>
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<tr>
<td>39%</td>
<td>PARTICIPANTS FROM ASIA</td>
<td>Empowering Women in Global Health Supply Chains</td>
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<tr>
<td>18%</td>
<td>PARTICIPANTS FROM THE PRIVATE SECTOR</td>
<td>Opportunities and Challenges in Introducing Renewable Energy in the Health Sector</td>
</tr>
<tr>
<td>496</td>
<td>PARTICIPANTS</td>
<td></td>
</tr>
<tr>
<td>34%</td>
<td>WOMEN</td>
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**2019 MOVING FORWARD, PARTICIPANTS REQUESTED VARIOUS LEARNING OPPORTUNITIES**

- Collective vision for sustainability, and the development of a sustainable model in the health sector.
- Developing engagement strategies with suppliers of health commodities.
- Understanding in what stages women are less represented in the health sector supply chain.
- Understanding how the wastewater treatment systems are affected by antibiotic waste.
- Incorporating institutional frameworks to support the uptake of renewable energy in the health sector.
- Creating opportunities for local production of health commodities in developing countries.
The Minamata Convention on Mercury, hosted by UN Environment, held its second Conference of the Parties (COP2) in Geneva, Switzerland from 19 to 23 November 2018. COP2 aimed at strengthening the recently established Convention, while countries update the various strategies to address this heavy metal pollutant throughout its life cycle. Among the main outcomes of the COP2 was the adoption of guidelines on the environmentally sound interim storage of mercury other than waste mercury by the parties.

In 2017, countries at COP1 committed to tackling this neurotoxin. Thousands of tons of mercury are released into air, land and water through human activity, including coal burning and artisanal and small-scale gold mining.

Once in the environment, it enters the food chain, accumulates in the body and can harm the brain, heart, kidneys, lungs and immune system of people of all ages. Mercury is particularly harmful to unborn children and infants whose nervous systems are under development. Damage to the brain cannot be reversed.

**SPHS Webinars**

In 2018, the SPHS Secretariat held three webinars and brought together 180 people from all around the world to explore the following topics: Empowering Women in Global Health Supply Chains; Opportunities and Challenges in Introducing Renewable Energy in the Health Sector; and Human Rights, Water and Antimicrobial Resistance.

**Empowering Women in Global Health Supply Chains**

- **Moderator**
  Ms. Alka Narang, Assistant Country Director, UNDP India

- **Speakers**
  Ms. Shama Karkal, Chief Executive Officer, Swasti
  Ms. Nida Shehzad, Lead, Digital & Innovation, Sehat Kahani
  Mr. Florin Marin, Gender Equality

![Photo by IISD/ENB, Sean Wu](image)
Promoting gender equality is not only a matter of human rights but also a fundamental condition for sustainable social and economic development. Ensuring that women and girls have full and equal opportunities for leadership at all levels of decision-making in political, economic and public life should be a priority for the post-2015 agenda. The SPHS webinar on Empowering Women in the Global Health Supply Chains focused on expert presentations providing business cases for investment in women’s health and empowerment programmes.

The webinar presented concrete case studies and expert knowledge in strengthening gender equality and promoting human and labour rights in the manufacture of medical products. Presenters spoke to their experiences of women’s empowerment workplace programme that brings together global and local companies, business associations, and donors to support women in global supply chains through health, finance, and other curricula. In addition, principles of gender-responsive communications were discussed to ensure that language does not reinforce gender inequalities and stereotypes, but rather helps to subvert them.

**Opportunities and Challenges in Introducing Renewable Energy in the Health Sector**
(17 October 2018)

**Moderator**
Mr. John Macauley, Regional HIV, Health and Development Programme Specialist, UNDP Istanbul Regional Hub

**Speakers**
Dr. Saleban Omar, Senior Regional Programme Advisor, HIV, Health and Development Team, UNDP
Mr. Tom Erichsen, CEO, Differ Group
Ms. Sasmita Patnaik, Programme Lead, CEEW
Mr. Marlon Apanada, Director, Allo trope Philippines

Due to the significant energy costs associated with production, it is important to use more effective sources of energy. Among renewable energy sources, solar power has been identified as the most optimal, reducing operational costs. This webinar covered a spectrum of topics that revolve around renewable energy, including the impacts of renewable energy and linkages to the Sustainable Development Goals, the importance of energy in the health sector due to its crucial role in the cold chain and storage, the use of solar energy internationally and its impact on different sectors, and more.

The webinar provided expert presentations focusing on opportunities for renewable energy generation and challenges faced in this process, as well as offered examples of introducing renewable energy systems in production and health facilities that highlight expected benefits. In addition, expert presentations outlined the key challenges related to limitations in current policy frameworks and the need for discussions at various levels among procurers and suppliers, to increase renewable energy utilization, especially in developing countries.

**Human Rights, Water and Antimicrobial Resistance: A New Nexus-Approach to Address a Complex Challenge?**
(6 November 2018)

**Moderator**
Dr. Natalya Lukyanova, HIV and Health Policy Officer, UNDP Ukraine

**Speakers**
Mr. Thomas Möller, Environmental Coordinator, Aarhus University Hospital
Mr. Nicolai Schaaf, Programme Manager, Stockholm International Water House (SIWI)

In light of the discussions held at the Asia Forum 2018 Campfire Session led by Stockholm International Water Institute (SIWI), the SPHS webinar, “Human Rights, Water and Antimicrobial Resistance: A New Nexus-Approach To Address a Complex Challenge?”, explored the relationship between a healthy environment and human rights, with a special focus on water and antibiotics.

The speakers emphasized the fact that antimicrobial resistance (AMR) is not only a threat to human and environmental health, but also a threat to human rights and this cannot be resolved without understanding the core of the relationship between pharmaceutical manufacturing, drivers of AMR and human rights.

The strategies of removing pharmaceuticals from wastewater and methods of mapping the pharmaceuticals in wastewater by developing treatment technology for removal of pharmaceuticals and neutralizing multi-resistant bacteria were explored throughout the webinar.
World Water Week 2018

Organized by the Stockholm International Water Institute (SIWI), the World Water Week 2018 was held in 26-31 August in Sweden. Over 3,300 individuals and around 380 convening organisations from 135 countries participated in the Week.

The UNDP HIV Health and Development Regional Leader for Europe and CIS, and the SPHS Coordinator Dr. Rosemary Kumwenda presented the efforts of UNDP to reduce the environmental burden of the health sector at the Reducing Emissions from Antibiotics Production session.

Dr. Kumwenda further discussed how sustainable health care supply chains can tackle the growing antimicrobial resistance crisis through sustainable health supply chains in the latest issue of the WaterFront Magazine, published by the Swedish International Water Institute. The interview highlights how UNDP aims to reduce the harm to people and the environment caused by the manufacture, use and disposal of medical products and the implementation of health programmes, through UNDP’s Sustainable Health in Procurement Project (SHiPP) and SPHS. For more information about the project, please see page 34.

Stockholm Water Front Magazine. Read Dr. Rosemary Kumwenda’s interview here.
SPHS AROUND THE WORLD IN 2018

1. Climate-Smart Healthcare and Sustainable Procurement in the Health Sector: Policy, Guidelines and Implementation, Report Release and Seminar, 6-7 Feb, China
2. Mission to India: Reducing Emissions from Antibiotic Production (REAP) Inception Workshop and Meetings, 5-9 Feb, India
3. The Nordic Conference on Sustainable Healthcare, 15 Feb 2018, Sweden
4. Official presentation of Sustainable Health in Procurement Project (SHiPP) in India, 11-14 Feb, India
5. Eighth Meeting of the European Environment and Health Task Force (EHTF), 20-21 March, Germany
6. The Workshop on Environmental Sustainability in Clinical Care, 6-8 Apr, United States
7. Sustainable Health in Procurement Project (SHiPP) Inception Workshop, 17-19 Apr, Turkey
9. Inter-Agency Pharmaceutical Coordination Group (IPC) Meeting, 19 Jun, Switzerland
10. High-Level Political Forum on Sustainable Development 2018: UNDP HHD Intervention at the High-Level Side Event on SDG 12, 18 Jul, United States
11. World Water Week 2018, 26-31 Aug, Sweden
12. UNDP GF Programme Management and Finance Workshop, 12 Sep, Turkey
13. WHO Prequalification Programme Meeting, 24-27 Sep, Denmark
15. Sustainable Healthcare Coalition Face-to-Face Partner Engagement Meeting, 19 Oct, The United Kingdom
16. Ukraine and Moldova Orientation and Inception Planning Workshop, 15-16 Nov, Ukraine
17. Minamata Convention on Mercury, 16-23 Nov, Switzerland
18. The First Global Conference on the Sustainable Blue Economy, 26-28 Nov, Kenya
In line with UNDP Strategic Plan (2018-2021) and UNDP HIV, Health and Development Strategy - Connecting the Dots (2016-2021), since 2003, UNDP has worked as interim Principal Recipient for funding from the Global Fund to Fight AIDS, TB and Malaria (Global Fund) in over 50 countries. In this role, it provides a range of implementation support to governments for large-scale health programmes, including the procurement of medicines and other health products. This work is complemented by capacity-building to strengthen national procurement and supply management systems, as a key component of establishing resilient and sustainable systems for health.

Building on this, a rapidly increasing number of governments are requesting UNDP to help strengthen national capacities and systems for the provision of health services, especially for the procurement and supply management of health products for communicable and non-communicable diseases.

A critical function of UNDP’s health procurement services is supporting public health institutions to procure health products at the best value and ensure their timely delivery to patients in optimal quality, according to international standards. The UNDP Quality Assurance Policy for Health Products was developed to assure the safety of all health products procured by UNDP, in line with international best practices. The Policy is based on WHO norms and standards for medicines and health commodities.

The achievements highlighted in this section contributed to the following Sustainable Development Goals (SDGs):

- 3: Good Health and Well-being
- 3: Industry, Innovation and Infrastructure
- 12: Responsible Consumption and Production
- 8: Decent Work and Economic Growth
- 9: Industry, Innovation and Infrastructure

UNDP Quality Assurance Policy for Health Products

Download the report here.
other health products and is aligned with Quality Assurance policies of other UN agencies and international organisations, such as MSF or ICRC. By detailing UNDP quality assurance requirements for health procurement, the Policy represents a key document for all parties involved in procurement activities across UNDP as well as for national partners, suppliers and donors.

**UNDP HIV, Health and Development Annual Report 2017-2018**

UNDP’s work on HIV and health makes a powerful contribution to Agenda 2030 and the commitment to leave no one behind. The 2017-2018 Annual Report highlights results from UNDP’s work with partners to support the development dimensions of HIV and health in 129 countries.

To meet the complex, interrelated challenges identified in the 2030 Agenda, multi-stakeholder partnerships and innovative platforms are needed. The report includes an overview of UNDP’s HIV and health portfolio, and how we support countries to turn innovations into scalable and sustainable solutions to deliver results on reducing inequalities and exclusion that drive HIV and poor health; promoting effective and inclusive governance for health, and; building resilient and sustainable systems for health.

**Report highlights:**
- 3.1 million lives saved
- 2.2 million people currently on HIV treatment
- 72 million cases of malaria treated
- 870,000 cases of TB detected and put on treatment
- 91 UNAIDS Fast-Track and other UNAIDS priority countries supported on human rights, gender and key populations
- 53 countries supported through the UNDP-Global Fund partnership
- 30 countries supported in NCD and tobacco control

**UNICEF Implements Sustainable Procurement September 2018**

UNICEF provides an information note on its sustainable procurement. The note presents what sustainable procurement means for UNICEF, putting its organisation-al practices into a wider context, and summarizing important case studies. The note includes UNICEF’s planned actions to implement its recent sustainable procurement procedure (its policy) as part of the organisation’s contributions to attain the Sustainable Development Goals between now and 2030.

**The Global Fund: Sourcing and Procurement**

Sourcing and procurement of health products is a critical component of health programs in the fight against the three diseases.

The Global Fund plays a significant role in global markets for medicines and technologies that prevent, diagnose or treat HIV, tuberculosis and malaria. The Fund remains committed to playing an active, deliberate and strategic role in shaping markets to maximize access to health products and improve health outcomes for people affected by the diseases.

The Global Fund procurement spend accounts for 10 percent of the global public health market. Nearly half of Global Fund investment in health programs is used to procure and manage quali-
ty-assured medicines and health products.

In 2017 that amounted to about US$2 billion. Health product spend accounts for between 40-60 percent of money allocated to a country by the Global Fund.

**Building Circularity into Our Economies Through Sustainable Procurement**

This publication aims to introduce the role that sustainable procurement can play to accelerate the transition to a circular economy and the shift towards more sustainable patterns of consumption and production, based on the work conducted by the United Nations Environment Programme in this field and on experience documented by partners and governments.

The document intends to inform dialogues on how best to bring more circularity in our economies at global level; it is addressed to both public procurers and policy makers, as well as corporate buyers and business leaders.

It has been developed as part of the United Nations Environment Programme work on sustainable consumption and production and continuous engagement with building circularity into our economies.
MEET THE SPHS VOICES

We bring you thought leaders’ personal perspectives on the nexus of sustainable development, procurement and health

By taking a closer look at the inspiring leaders who aim to save the planet as we save lives, we share their vision through their very own eyes and learn what has yet to be done and how we will achieve it together.

1. According to Lancet, climate change is the biggest global health threat of the 21st century, and current health procurement practices often demonstrate the “take, make and dispose” model, which is one of the main contributors to planetary deterioration. How can we ensure that key stakeholders from the health sector do not contribute to climate change and a linear economy that eventually harm population health?

2. There are major risks associated with the production, procurement and disposal of health commodities. In your opinion, what is a top good practice from 2018 that mitigated these risks and contributed to more sustainable practices?

3. The private sector has an extremely important role to play when it comes to more sustainable health supply chains, as most of the products used in the health sector are produced by the private sector. What are the key steps to be taken to strengthen collaboration with the private sector and ensure more sustainable and ethical supply chains?

AMANDA LINDSTROM
Technical Officer, UNDP Global Fund
Health Implementation Support team, HIV, Health and Development Team, Bureau for Policy and Programme Support

I recommended that we need to ensure that the health sector transitions into a transparent global economy, and to watch the industry norm leaders who are facilitating the best practices as part of this transition. As highlighted by Micheal R. Bloomberg, “An increasing transparency makes markets more efficient and economies more stable and resilient.” This quote is a response to the climate-related financial disclosure risk that needs to be conducted by companies as response to climate change. As of this year, the term ESG (Environmental, Social and Governance) has endured a remarkable rise as an investment and decision-making criteria for investment firms. This is not due to this being a new idea or practice, but due to the availability of datasets and tools that allow analysts to efficiently monitor and evaluate company performance in these complex areas. It is also important to note, as an example, Mylan’s CEO, Heather Bresch, had announced this year a new executive role in Global Sustainability and will be expanding their efforts on the development of ESG data and evolving stakeholder expectations. Therefore, I recommend this would be an important area to watch amongst all industry norm leaders and to gather the best practices for the health sector on this transition towards ESG transparency.

For 2018, I would state the most important UNDP risk management initiative and movement towards sustainable practices was the release of the new Quality Assurance Policy on Pharmaceuticals and Health Products. It is important to recognize that good manufacturing practices (GMP) need to be addressed as an initial step of the supply chain architecture before we can ensure compliance in the evolving areas of ESG due diligence. Second, I would like to highlight our procurement capabilities to capture ESG data as part of our long-term agreements with ARV manufacturers and our embedded practices to monitor and measure results. This has been proven as a useful risk management measure and allows us to help facilitate transition towards more sustainable practices, as well as to identify new areas of opportunities such as market readiness for GS1 implementation and pharmaceutical takeback programmes.

It is important to recognize that the private sector holds the market and technical expertise necessary to transition the health supply chain towards sustainable best practices. However, it is also important to recognize that the health sector is also the most regulatory complex by far, and due to this, industry is quite risk adverse which falls under collaboration initiatives. On this note, I would state that there is an important role for the UN to moderate an interdisciplinary dialogue (such as the SPHS) where regulatory challenges could be addressed that does not conflict with anti-trust and competition laws or infringe on national and constitutional laws. Thus, I think Canada has some good ideas on how to conduct this engagement with the private sector through expert review panels and multi-interest advisory committees, and I think the UN has an important role to play in the international arena. The global policy in the books (SDCs) needs to fit with the policy in action, and this could not be achievable without interdisciplinary dialogues within specific sectors.
Awareness raising and capacity development are the first, and probably one of the most important steps to shift the mindset. This is a bottom-up approach, so to speak. But to change how we operate, it is also imperative to have universally acceptable, clear policy and quality assurance framework that governs and makes the stakeholders in the health sector accountable for non-compliance.

Considering the urgency of climate change, decisive interventions would be vital.

Waste is one of the key risk areas for UNICEF’s supply chain. UNICEF procures safe injection equipment for vaccines on behalf of 80 countries annually, amounting to approximately 30,000 cubic meters of equipment to be transported. This would fill about 12 Olympic swimming pools.

UNICEF awarded contracts to seven equipment suppliers based on considerations like reducing waste and transport volumes, among other criteria. Including such criteria in the tender evaluation criteria and early engagement with manufactures generated positive outcomes. It is expected to achieve an estimated 12 percent reduction of contaminated waste from injection devices and a 6 percent reduction in transport volumes compared to previous years.

Early engagement with suppliers and manufactures prior to tenders; know the market and its level of maturity and capability to implement more sustainable production and business practice; be upfront with sustainability requirements; and last but not least, reward above and beyond minimum sustainability commitment and performance by suppliers throughout the life of the contract so that they are motivated to do better.

Recently, in Indonesia and Philippines, six hospitals under Global Green and Healthy Hospitals network conducted plastic waste audit the results of which showed that at least 50 percent of health care facility waste stream is composed of plastic, many of which of are single use plastic bag, disposable plastic bottles and plastic medical packages and devices.

Among the key recommendations out of the report audit is to “negotiate with manufacturers to reduce amount of packaging in the products they purchase and avoid over-packaged products”, and to “develop a sustainable procurement policy that will facilitate replacement of unnecessary plastic products with safer and environmentally friendly alternatives.” Considering that plastic is derived from petrochemicals, and that plastic use and its waste comprised significant carbon footprint, then health care sector leadership in combating plastic pollution is one good example that would contribute in addressing climate change.

In the Southeast Asia region, the most significant sustainable procurement initiative has to do with specific recommendations in the heading “Industry Action” in the Plastics in Health Care Report. These are: 1) Phase out the use of toxic plastics, such as PVC, polycarbonates and polyurethane; 2) Phase in new non-toxic polymers such as thermoplastic elastomers (TPEs); 3) Redesign products including medical products, to maximise reusability and recyclability. We will pursue these recommendations when we begin implementing the SHIPP in Philippines, Indonesia and Korea in 2019.

Hospital administrators within our network are anticipating the collaborative engagement with pharmaceutical companies and suppliers that will begin in 2019. They are particularly keen on negotiating medical tubings, dialyzers to find alternatives, and for the private sector to help in the disposal of these specific products. There are also initiatives next year to relate with private sector entities who can supply technology to improved energy efficiency in hospitals, and better waste management treatment as such as biodigesters and autoclaves.
The current health procurement practices focused on driving down price of product do not capture impact of products on society and environment over the life cycle of the product. These practices, in fact, have promoted linear model of growth as this does not incentivize industry to design, develop, manufacture and sell products that consume less energy, less water, fewer resources and has no impacts on the health of people. Many of these challenges could be addressed by internalising these concerns while making purchasing decision. This is particularly true in the context of climate change as Scope 3 emissions, which comes from supply chain, constitutes more than 50 percent.

But I am glad that awareness around this topic among stakeholders in the health sector has been growing and this is the first sign to affect any change. The second important thing to bring about change is to know the impacts of health sector on climate change. Except few countries such as the UK, USA, Canada and Australia, we don’t know total GHG emission from health sector in remaining countries. It is estimated that health sector globally constitutes about 5 percent of total GHG emission, which is huge. The third thing is to take responsibility for your impacts and take actions for reducing those impacts. Finally, it is important that we communicate and measures progress. I think we need to be doing a lot more on the last three aspects for making meaningful change in the health sector.

I think risks associated with the health sector supply chain are no more hidden and well known to stakeholders. This is good in a sense because stakeholders are now putting pressure on the health sector to take meaningful actions to reduce those risks. However, in recent time I believe Antimicrobial Resistance (AMR) has emerged as a major risk endangering river streams, crop productions, food safety, livestock etc.

In my mind, procurement has emerged as the most important instrument to drive change in the market for sustainable practices be it sustainable manufacturing, end of life management, extended producer responsibility, sustainable logistics, minimising packaging etc. This is also due to its cross-cutting nature. I don’t have doubt that in coming years procurement will be used strategically to enforce environmental and social sustainability consideration in greening supply chain practices.

The private sector is an important stakeholder and without their active participation we cannot achieve any of the SDGs or Paris Climate Change commitments. In fact, many businesses are already leading in embedding sustainability concerns in their product value chain. One of the major drivers for such change has been the business case for integrating sustainability. It reduces exposure to supply chain risks, enhances brand reputation, increases employee satisfaction and saves money too.

As stated above, many of the sustainability challenges come from supply chain and that is why managing supply chain sustainably makes good business sense. Put simply, risks associated with supply chain can only be addressed when both health sector and private sectors work in collaboration and risks and rewards shared.
LOOKING FORWARD*


* SPHS Member Agencies will participate in activities on a voluntary and informal basis and to the extent possible.

1. Development of universally adaptable criteria and standards for sustainable production, procurement and disposal of products procured by the health sector

- Develop the Sustainable Procurement Index for Health, in collaboration with the key stakeholders from the health sector (policymakers, civil-society organisations, suppliers and manufacturers, academia, etc.), as globally adopted index which will monitor sustainable and responsible health procurement practices.

2. Collective engagement with the supply chain to ensure more sustainable and responsible procurement and sustainable production of health commodities

- Guided by the WHO FENSA and the High-Level Statement of Intent on Engaging with Suppliers and Manufacturers to Promote Environmentally and Socially Responsible Procurement of Health Commodities, organize the 2nd Saving Lives Sustainably: Global Forum 2019 Tanzania, in July 2019, with the aim of fostering social, economic and environmental benefits in production, procurement and disposal of health commodities.

- Address the issue of the Antimicrobial Resistance Pollution by providing technical inputs, nominating relevant partners and stakeholders and joining the discussions at the High-Level Antimicrobial Resistance meeting in Hyderabad India, in Q1/Q2 2019.
3 Capacity development in sustainable production, procurement and disposal in the health sector

- Develop Guidance Note on Sustainable Health Procurement for procurement officers to understand the environmental and social impacts of health procurement and include sustainability aspects in their decision-making process.
- Develop the SPHS training toolkit and harmonize currently offered Sustainable Health Procurement Trainings with any other relevant procurement programmes coordinated through the UN HLCM, professional development working groups, etc. And coordinate the group of trainers.
- Pilot the Total Cost of Ownership Tool in health procurements and disseminate lessons learnt and next steps for further development and scale-up of tool’s implementation in 2019.
- Conduct expert webinars on sustainable production, procurement and disposal in the health sector.

4 Scale-up of success and impact through communications and partnerships

- Further expand the SPHS global technical network to include country-level technical staff to share knowledge, opportunities for collaboration and to strengthen initiatives on sustainable production, procurement and disposal in the health sector.
- Guided by One Planet Secretariat, establish a Non-UN Multi-Stakeholder Partnership Platform to serve as a mechanism to enable discussions, exchange knowledge and practice and enhance a wider uptake of good practices on sustainable procurement among various stakeholder organisations operating in the health sector.
Members List

Gavi, the Vaccine Alliance
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Andrew Mends, Director of Operations
Aurelia Nguyen, Director, Policy & Market Shaping
Deepali Patel, Senior Program Officer, Policy
Pan American Health Organization (WHO PAHO)
Jordi Balleste, Unit Chief
Daniel Rodriguez, Director, Procurement & Supply Management (PRO)
The Global Fund to Fight AIDS, Tuberculosis and Malaria
Philippe Francois, Head, Sourcing and Supply Chain
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Nick Jackson, Ethics Officer
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Dr. Melissa Murray, Specialist, Sourcing and Supply Chain
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Francesca Racioppi, Senior Policy and Programme Adviser, Environment and Health Policy and Governance

Names of the member representatives are listed alphabetically.

SPHS Roadmap

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Engaging with Suppliers and Manufacturers to Promote Environmentally and Socially Responsible Procurement of Health Commodities

Statement of Intent

Recognizing the importance of “leading-by-example” as UN and international health development agencies and other organizations that are engaged with procurement of health commodities in the development sector (‘the Signatories’) in enacting policies and practices that promote sustainable development;

Cognizant of existing international agreements, declarations, and commitments that reaffirm the above¹;

Understanding that procurement can contribute to sustainable development, particularly where it promotes responsible consumption and production patterns, as called for in Sustainable Development Goal 12, and where it positively influences the application of environmental and social standards to products and services², including in the health sector;

Aware that in leveraging our collective positioning and purchasing power in the international health development sector, we can help advance environmentally and socially responsible procurement principles and practices, including through our engagement with suppliers and manufacturers of health commodities;

Mindful that such engagement is part of our collective commitment to ensuring environmental and social responsibility of our own procurement practices;

We, the undersigned Signatories, agree to align our approach to engagement and communication with suppliers and manufacturers of health commodities in our efforts to collectively advance environmentally and socially responsible procurement;

The approach we will take to this engagement will:

- o Take into account compliance by manufacturers with applicable national and international legislation and regulations addressing environmental issues associated with manufacturing;
- o Be supportive of wider principles of value for money and effective competition based on equal treatment, transparency and accountability;
- o Balance important environmental, social, health, and economic priorities;
- o Recognize the different mandates of the Signatories, and opportunities for engagement with suppliers and manufacturers available to each;
- o Build upon existing good practice, including relevant ongoing interagency efforts to advance environmentally and socially responsible procurement.³

We further agree to make efforts to reflect this common commitment to advancing environmental and social responsibility as part of our engagement with suppliers and manufacturers in our respective, related institutional (or organizational) strategies and policies, as applicable.

Launched in Geneva on 7th December 2016,

¹ For example in Agenda 21, the outcome document of RIO+20 ‘The Future We Want’, the Millennium Development Goals Sustainable Development Goals, and in other related commitments such as the U.S Declaration on Fundamental Principles and Rights at Work, as well as other protocols for the protection of the environment, such as the Basel, Stockholm, Vienna and Montreal Conventions and Kyoto Protocol.
³ For example: Greening the Blue and the UN’s wider initiative on Moving Forward to a Carbon Neutral UN; The HLCM Procurement Network Statement on Sustainable Procurement; interagency efforts underway as part of the UN Environmental Management Group (EMG); work being carried out within the Informal Interagency Task Team on Sustainable Procurement in the Health Sector (iIATT-SPHS); etc.
Saving *lives* Sustainably