



# World Health Organization

## Request for Proposal (RFP):

Technical support in implementation of pre-exposure prophylaxis (PrEP) for HIV prevention

Bid No.: 2017/HTM/HIV/017

**THIS RFP IS EXTENDED UNTIL 24 OCTOBER 2017**

The Key Populations and Innovative Prevention (KPP) Team works on a range of topics including biomedical prevention such as pre exposure prophylaxis, HIV testing services, and voluntary medical male circumcision, as well as all relevant prevention and treatment for key populations.

WHO has taken a lead in formulating normative guidance around novel interventions in prevention for HIV infection that apply to key populations. One of the critical pieces of work has been in the area of pre-exposure prophylaxis (PrEP), which is the use of antiretroviral (ARV) drugs by people who are not infected with HIV in order to block the acquisition of HIV. Since 2010, WHO's HIV Department has been active in this area, and the activities around guidance and technical assistance to countries are due to continue into 2020.

WHO has been a global leader and authority in assessing the body of evidence on the efficacy of PrEP. Since the publication of the global iPrex study results, clinical trials have demonstrated that PrEP is safe and efficacious in preventing HIV. Four randomized controlled trials have demonstrated efficacy of daily oral PrEP in reducing the risk of HIV acquisition among men and women across a range of settings. While two randomized clinical trials of daily oral PrEP among heterosexual women in Africa found no efficacy for HIV prevention; poor adherence to PrEP most likely explains these results.

WHO has a critical role in setting the research agenda for PrEP implementation, monitoring new evidence on the science of PrEP, convening experts and global stakeholders as well as developing guidance as evidence emerges. In 2012, based on available evidence, WHO issued guidance which recommended that countries should consider adding oral PrEP to their prevention approaches as additional prevention strategies where needed. More recently, WHO has made an enabling recommendation on the use of PrEP for all persons at substantial risk for HIV. This recommendation was included in the WHO Guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV released in September 2015.

The KPP team seeks technical support to work on a range of issues pertaining to its work on PrEP. The consultant will provide support to the development of normative guidance, systematic reviews, and technical assistance to WHO member States exploring how they can introduce PrEP into their own settings

### **Main areas for WHO technical support:**

1. Support the research design and modification of protocols and tools during the life cycle of UNITAID's PrEP implementation projects to ensure key, relevant research questions are addressed to further effective PrEP scale up
2. Support the ongoing work on HIV drug resistance surveillance within emerging PrEP services and programmes, with a focus in low-middle income countries.
3. Conduct systematic reviews and data synthesis, focusing on review of data generated by UNITAID-funded projects for future WHO PrEP implementation guidance and toolkits (analysis of evidence)
4. Provide technical assistance to the five demonstration projects in Thailand and Nigeria
5. Provide technical assistance to WHO HQ currently reviewing safety and efficacy data on the dapivirine vaginal ring as part of the 2nd phase of the European Medical Association (EMA) Article 58 procedure that



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will provide an opinion on the safety of the ring for use in low and middle income countries

6. Provide technical assistance and support to South Africa's national PrEP implementation programme, in coordination with Ministries of Health and other actors in-country
7. Support WHO HQ Global PrEP Coalition meeting at the 2018 International AIDS Society meeting to be held in Amsterdam, July 2018
8. Conduct annual survey on PrEP commodities procurement (e.g. TDF, TDF-FTC, TDF-3TC, HIV testing, HBsAg testing, creatinine testing, STI testing, HBV vaccination)
9. Quantify global PrEP market size (number of individuals who would benefit from PrEP being offered), with a qualitative focus on markets for UNITAID focus countries.

## **Objectives of the assignment:**

The consultant will assist WHO/HIV/KPP with technical expertise on PrEP, funded under grants from the Bill and Melinda Gates Foundation and UNITAID

The activity coordination will be done under the supervision of the Coordinator of the HIV Key Populations and Innovative Prevention (KPP) Unit of the HIV/AIDS department. The consultant will work with the technical leads of these areas in KPP, and report to the weekly coordination meetings. The consultant will, under guidance of the KPP Unit, provide technical support, and work in close collaboration with the other unit staff in the HIV department.

## **Main Tasks:**

Specific activities and deliverables for the first 12 months only:

**Main activity 1a:** Support the research design and modification of protocols and tools during the life cycle of UNITAID's PrEP implementation projects to ensure key, relevant research questions are addressed to further effective PrEP scale up

**Main activity 1b:** Develop relevant and common matrices (for monitoring uptake, safety, adherence, seroconversion rate etc.) for the UNITAID projects in order to maximise learning across PrEP sites (and to allow cross-learning with other PrEP implementation projects) and to enable safe and effective scale-up of PrEP for a range of population groups in different geographical location

**Deliverable 1a:** Draft protocols and tools for the UNITAID's PrEP implementation projects

**Deliverable 1b:** Final protocols and tools for the UNITAID's PrEP implementation projects

Timeline: Months 1, 6

**Main activity 2:** Support the ongoing work on HIV drug resistance surveillance within emerging PrEP services and programmes, with a focus in low-middle income countries.

**Deliverable 2:** Develop the PrEP section of the HIV drug resistance framework

Timeline: Month 2

**Main activity 3:** Conduct systematic reviews and data synthesis, focusing on review of data generated by UNITAID-funded projects for future WHO PrEP implementation guidance and toolkits (analysis of evidence)

**Deliverable 3a:** Review on event-driven PrEP evidence



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**Deliverable 3b:** Review on STI screening for HIV services and programmes

**Deliverable 3c:** Review on STIs and PrEP

Timeline: Months 3, 4, 5

**Main activity 4:** Provide technical assistance to the five demonstration projects in Thailand and Nigeria

**Deliverable 4a:** Technical assistance reports of two demonstration projects

**Deliverable 4b:** Technical assistance reports of three demonstration projects.

Timeline: Months 7, 8

**Main activity 5:** Provide technical assistance to WHO HQ currently reviewing safety and efficacy data on the dapivirine vaginal ring as part of the 2nd phase of the European Medical Association (EMA) Article 58 procedure that will provide an opinion on the safety of the ring for use in low and middle income countries

**Deliverable 5:** Draft 5 page document to formulate the response to the EMA

Timeline: Months 9

**Main activity 6:** Provide technical assistance and support to South Africa's national PrEP implementation programme, in coordination with Ministries of Health and other actors in-country

**Deliverable 6a:** Draft tools and prepare the WHO HQ mission to review South Africa's national PrEP programme

**Deliverable 6b:** Review report on the PrEP programme following WHO HQ mission in South Africa

Timeline: Months 9, 10

**Main activity 7:** Support WHO HQ Global PrEP Coalition meeting at the 2018 International AIDS Society meeting to be held in Amsterdam, July 2018

**Deliverable 7:** Develop a background document on country implementation of PrEP.

Timeline: Month 11

**Main activity 8:** Conduct annual survey on PrEP commodities procurement (e.g. TDF, TDF-FTC, TDF-3TC, HIV testing, HBsAg testing, creatinine testing, STI testing, HBV vaccination)

**Deliverable 8a:** Survey Tool

**Deliverable 8b:** Draft report including analysis of survey results

**Deliverable 8c:** Final report on survey

Timeline: Months 4, 8, 10

**Main activity 9:** Quantify global PrEP market size (number of individuals who would benefit from PrEP being offered), with a qualitative focus on markets for UNITAID focus countries.

**Deliverable 9a:** Draft report on market size estimation

**Deliverable 9b:** Final report on market size estimation

Timeline: Months 11, 12



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Key requirements for this consultancy:

## **EDUCATION**

### **Essential:**

Master University Degree in Medicine, Public Health and/or Social sciences or equivalent.

### **Desirable:**

Advanced studies in epidemiology or methodology.

## **EXPERIENCE**

### **Essential:**

7 years of relevant work experience in Public Health of which at least 5 years in the field of HIV and 2 years in PrEP.

### **Desirable:**

Work experience, Monitoring and Evaluation and LMIC would be an asset.

## **SKILLS AND COMPETENCIES**

- Good research and presentation skills
- Demonstrated capacity to write and communicate in English
- Good communication and interpersonal skills to work with Ministry of Health officials and partners

## **Additional information:**

This consultancy will be initiated for 12 months, and for 20 days per month. Upon successful completion, it may be prolonged up to a maximum of 24 months as agreed upon by both parties following the conditions in the first part of the contract (but adjusted based on annual inflation) and pending on the availability of resources and performance.

The place of performance of the work under the Contract shall be onsite, on WHO HQ premises (Geneva, Switzerland). Accessibility to WHO HQ when needed or requested will be arranged.

The implementation of the assignment may require international travel; costs for such travel will be borne by WHO according to its rules and regulations. The contractor has to be legally entitled to work in the country or countries where the work is to be carried out, and is expected to be in the possession of an unrestricted passport.

## **Submission of proposals:**

No later than **24 October 2017 (17:00 CET)**, the bidder shall complete and return by either email or hard copy to WHO (only when this step is completed the bidder is regarded as a prospective bidder):

- a) Covering letter signed by the respective authority.
- b) Proposal (including, but not restricted to, technical and financial documents).
- c) RFP Confidentiality Undertaking form completed/signed.
- d) RFP Acknowledgement form completed/signed as confirmation of the bidder's intention to submit a bona fide proposal and designate its representative to whom communications may be directed, including any addenda.



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- e) RFP Acceptance form completed/signed.
- f) RFP Completeness form completed/signed.

A prospective bidder requiring any clarification on technical, contractual or commercial matters may notify WHO via email at the following address ~~no later than 11 October (17:00 CET).~~ **Date already passed**

- Email for submissions of forms and/or proposal: [pdifin@who.int](mailto:pdifin@who.int)  
(use subject: Bid Ref 2017/HTM/HIV/017)
- Mailing address for submission of proposal:

World Health Organization  
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