



Saving *lives* Sustainably

ANNUAL REPORT 2017





All rights reserved © 2018 UNDP

Authors:

The SPHS Secretariat,
UNDP Istanbul Regional Hub

Dr. Rosemary Kumwenda,
SPHS Coordinator
Ms. Mirjana Milić,
SPHS Associate Coordinator
Ms. Nevra Gomdeniz,
Communications Specialist
Mr. Junaid S. Mahmood,
Planetary Health Assistant

Design & Layout:

Ms. Cansu Topaloglu,
Graphic Designer, UNDP
Vectors and graphics:
www.freepik.com

Disclaimer:

The content, analysis, opinions and policy recommendations contained in this publication do not necessarily reflect the views of the United Nations Development Programme or any of the member organizations of the SPHS Task Team.

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 dedicat-

ed 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

10YFP SPP: 10-Year Framework of Programmes on Sustainable Consumption and Production

AIDS: Acquired Immune Deficiency Syndrome

AMR: Anti-Microbial Resistance

ARV: Antiretroviral

DFID: The United Kingdom Government's Department for International Development

eVIN: Electronic Vaccine Intelligence Network

FSC: Forest Stewardship Council

GAVI: Global Alliance for Vaccines and Immunization

GEF: Global Environment Facility

GF: The Global Fund to Fight AIDS, Tuberculosis and Malaria

GF/HIST: Global Fund/Health Implementation Support Team

GPEI: Global Polio Eradication Initiative

HHD: HIV, Health and Development Group

HCWH: Health Care Without Harm

HCWM: Health Care Waste Management

HIV: Human Immunodeficiency Virus

HPV: Human Papillomavirus

IGSS: The Guatemala Social Security Institute

ITB: Invitation to Bid

LTA: Long Term Agreement

MDVP: Multi-dose Vial Policy

MNTE: Maternal and Neonatal Tetanus Elimination

NCMCH: National Centre for Maternal and Child Health

NFM: New Funding Model

NGO: Non-Governmental Organization

PAHO: Pan American Health Organization

PAGE UN: Partnership for Action on Green Economy

RUTF: Ready-to-Use Therapeutic Foods

uPOPs: Unintentionally-Produced Persistent Organic Pollutants

SDGs: Sustainable Development Goals

SPHS: Informal Interagency Task

Team on Sustainable Procurement in the Health Sector

SIWI: Stockholm International Water Institute

SPP: Sustainable Public Procurement

SPPEL: Sustainable Public Procurement and Ecolabelling

TB: Tuberculosis

TLE: Efavirenz + Lamivudine + Tenofovir Disoproxil Fumarate

UN: United Nations

UNDP: United Nations Development Programme

UNEP: 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

VII: Vaccine Independence Initiative

WHO: World Health Organization



CONTENTS

9

The Year in Review

New initiatives, tools, platforms and partnerships to support countries in strengthening sustainability in their health systems, in building procurers' capacities and in supporting sustainable supply chain performance.

12

Spotlight on Good Practice

Personal perspectives of champions and beneficiaries introducing more sustainable health care practices.

30

Innovative Health Procurement Tools

Development of novel tools to monitor and evaluate sustainable performance of suppliers and manufacturers of health commodities.

33

Capacity Development for Sustainable Health Care

Building capacity of public procurers to design and implement sustainable health procurement practices and policies.

36

The High Impact Procurement

Examining how health procurement can help the world overcome global challenges - for good.

Message from the SPHS Steering Committee Meetings Chairs.....Page 4

Health Procurement and Supply Overview.....Page 6

Key Results.....Page 10

The SPHS Voices.....Page 38

Looking Forward.....Page 40

Annexes

Annex 1.....Page 42 The SPHS Member Agencies

Annex 2.....Page 42 The SPHS Route Map

Annex 3.....Page 43 Statement of Intent



SAVING LIVES SUSTAINABLY



Dedication to safeguarding our planet and acknowledging the effects of procurement on human and environmental health.

The United Nations Population Fund (UNFPA) has been procuring reproductive health supplies for the developing world for over 40 years. We have helped double the modern contraceptive use worldwide from 36 percent in 1970. In 2017, UNFPA procured US\$77.9 million worth of contraceptives and medicines for maternal health. This helped to prevent 7.5 million unintended pregnancies, 2.3 million unsafe abortion and 114,000 child deaths.

While protecting the fundamental human rights of millions by enabling access to sexual and reproductive health services around the world, we are fully dedicated to safeguard our planet and acknowl-

edge the effects of procurement on human and environmental health. That is why we have been a proud member of the Sustainable Procurement in the Health Sector (SPHS) initiative since its establishment in 2012.

Looking back at 2017, UNFPA continued to work closely with the SPHS Member Agencies on strengthening sustainable delivery of health programmes. In line with the SPHS' mandate of promoting sustainable procurement in the global health sector, we collaborated with our suppliers and manufacturers to reduce the environmental impact of our supply chain, as supply chain sustainability is a major opportunity to contribute to the 2030 Agenda.

As a Chair of the SPHS Steering Committee Meeting, I had the privilege to lead discussions on the expansion of stakeholder engagement to ensure global, regional

and national adoption/adaptation and scale-up of sustainable health procurement practices. We recognized that public, private, civic, and academic actors in the global health sector often operate in silos and sought a mechanism through which diverse stakeholders operating in the health sector can align and harmonize their policies and practices. An opportunity to overcome this issue and enhance cross-sectoral collaboration was found in an establishment of a multi-stakeholder platform, which will be in the SPHS focus in 2018 and beyond.

As one of the Chairs, I am delighted to reiterate that UNFPA's ambition is to be at the forefront of the 2030 Agenda for Sustainable Development. In 2018, we are looking forward to collaborating with the SPHS Member Agencies and their global network of collaborators to continue to protect our planet by saving lives sustainably.

Mr. Roberto Mena

Procurement Specialist - Strategic Procurement, UNFPA



Re-emphasizing through Sustainable Development Goals, the strong connection between sustainable development, planetary health and public procurement.

Environmental sustainability starts with commitment. Since its launch in 1972, UN Environment has been committed to providing guidance to the world on environmental issues and assist with environmental best practices across the UN system. Moreover, UN Environment recognizes that sustainable public procurement could become a major contributor to the Sustainable Development Goals (SDGs), and continuously tackles target 12.7, which focuses on promoting public procurement practices that are sustainable, in accordance with national policies and priorities.

2017 was a year of advancement in terms of sustainable public procurement (SPP) in the world. As an SPHS member agency, we

continued to strongly advocate that sustainable public procurement represents a strategic tool to drive sustainability and meet the goals of the Paris Agreement. As a Chair of the SPHS Steering Committee Meeting, I had their honour to lead discussions on the establishment of sectoral working groups on SPP. UN Environment recognizes multi-stakeholder engagement to be vital for a successful upscale of sustainable public procurement and we applied this approach to revise the UN Environment Sustainable Public Procurement Guidelines. In collaboration with the UN Agencies and our partners, we also supported capacity strengthening of procurement specialists in sustainable public procurement.

We have also been proud to support the organization of the 1st Saving Lives Sustainably: Asia Forum 2018. This international conference focused on sustainable production of health commodities and was designed as the space for participants to share concrete examples of the

benefits and savings resulting from sustainable practices, as well as develop a better understanding as to how manufacturers can implement changes in production in order to be more cost effective, while at the same time reducing their environmental and social impacts. Through the joint SPHS Task Team's efforts, we committed to bring together suppliers, manufacturers, technical experts, academics and policymakers to learn, share and discuss the latest research and best practice in sustainable production in the health sector, and its links to climate change and the SDGs.

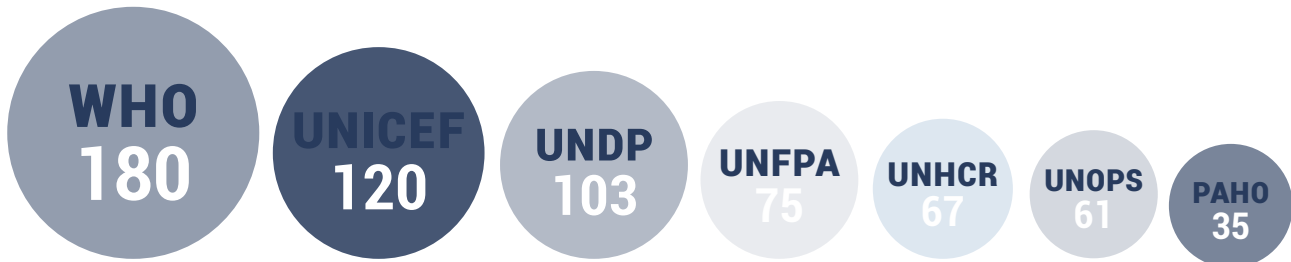
I believe that the SPHS 2017 Report helps raise awareness about the great potential of public procurement in helping drive markets in the direction of sustainability. The Report offers valuable insight into good practice examples in introducing sustainable production and procurement, which we hope to scale-up across diverse sectors, as we achieve the set targets of the 2030 Agenda.

Mr. Farid Yaker

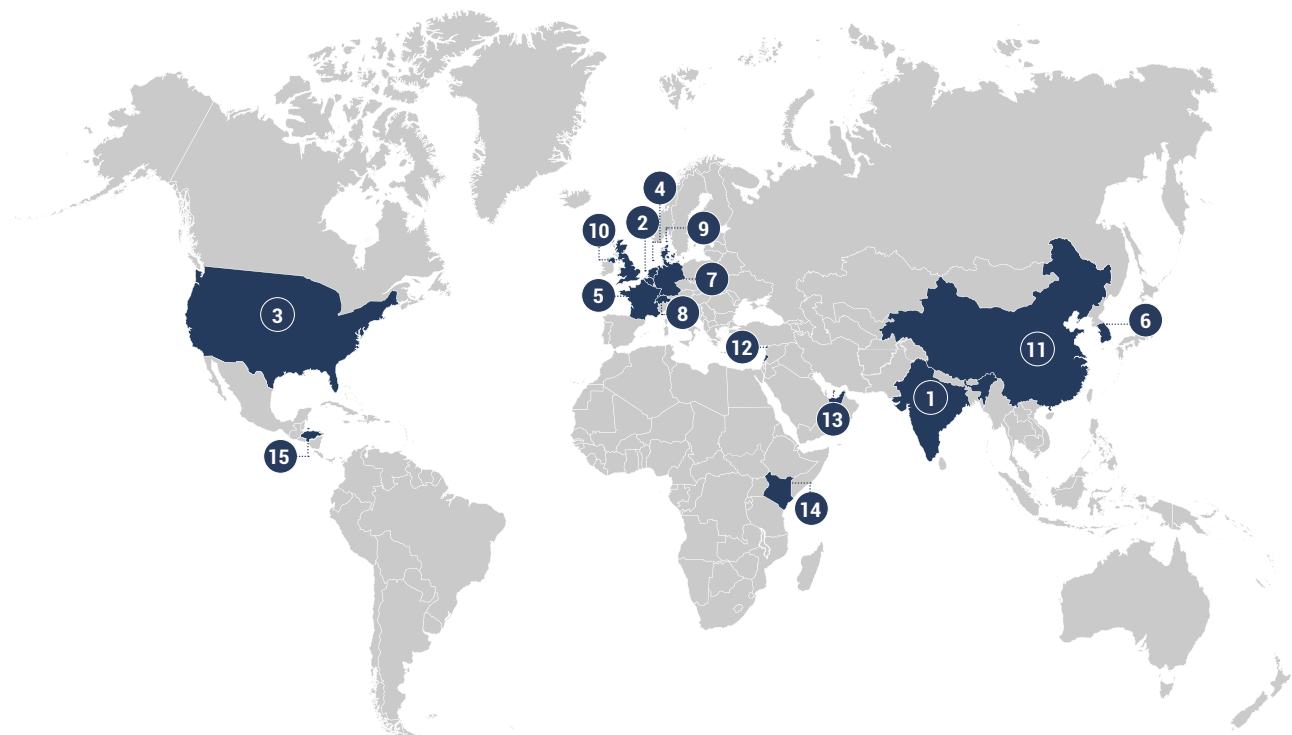
Programme Officer, Sustainable Public Procurement, UN Environment

2016 UNITED NATIONS SPHS MEMBER AGENCIES HEALTH PROCUREMENT AND SUPPLY OVERVIEW

Total Number of Countries Covered by Health Procurement
of the SPHS



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

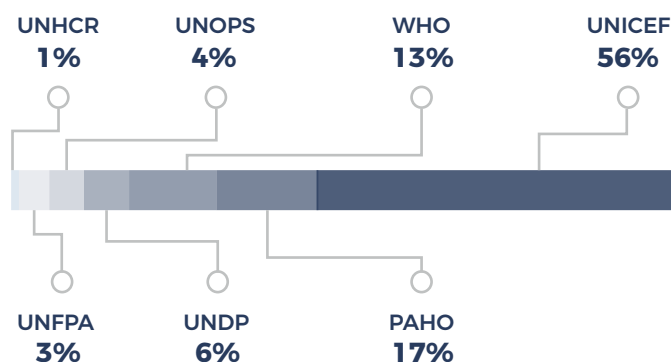
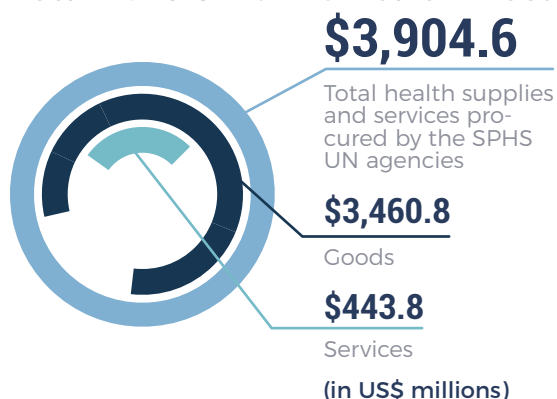


1 India	\$802.8	7 Germany	\$92.0	11 China	\$49.8
2 Belgium	\$754.2	8 Switzerland	\$69.3	12 Lebanon	\$42.4
3 United States of America	\$505.3	9 Denmark	\$66.4	13 United Arab Emirates	\$35.4
4 The Netherlands	\$280.2	10 United Kingdom of Great Britain and Northern Ireland	\$57.7	14 Kenya	\$33.9
5 France	\$271.8			15 Honduras	\$30.9
6 Republic of Korea	\$180.7				

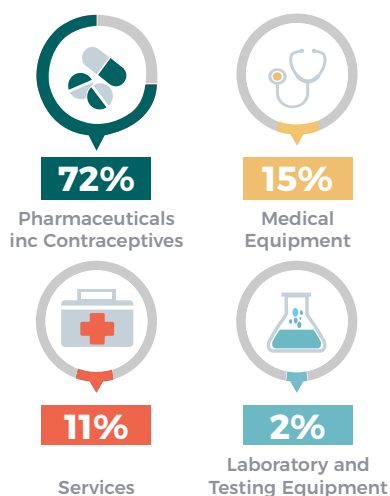
All data is extracted from the 2016 Annual Statistical Report on United Nations Procurement. Product segments taken into consideration are: Medical Equipment, Health Care Services, Pharmaceuticals including Contraceptives, and Laboratory and Testing Equipment.



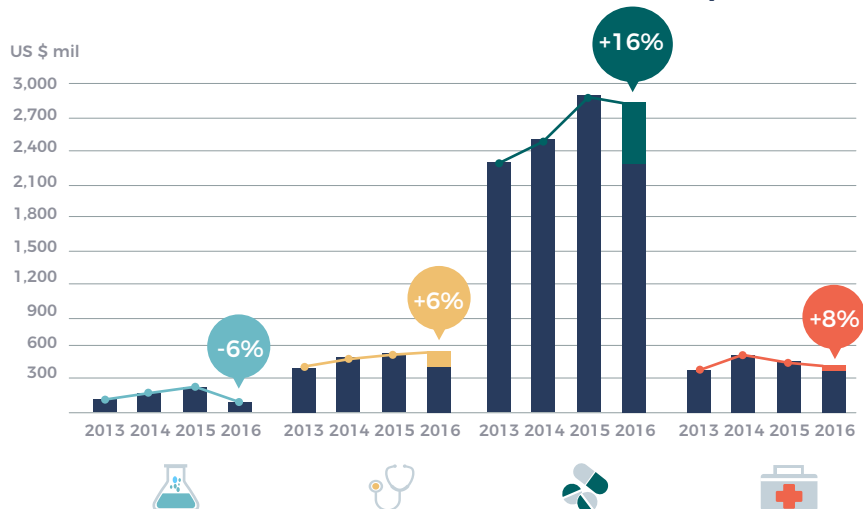
Total 2016 UN SPHS Health Procurement and Distribution Among Members



Total Share of Segments in the UN SPHS Health Procurement



Health Procurement Volumes and Growth (2013-2016)



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

Pharmaceuticals incl. Contraceptives and Vaccines

Immunomodulating drugs	\$603.1
Amebicides and trichomonocides and antiprotozoals	\$136.7
Estrogens and progestins and internal contraceptives	\$92.9
Hormones and hormone antagonists	\$49.8
Antiviral drugs	\$40.1
Agents affecting water and electrolytes	\$2.1
Antiarrhythmics and antiangi-nals and cardioplegics and drugs for heart failure	\$0.7

Health Care Services

Comprehensive health services	\$434.0
Medical practice	\$4.4
Disease prevention and control	\$4.2
Food and nutrition services	\$0.5

Medical Equipment and Accessories and Supplies

Clinical nutrition	\$151.1
Mobile medical services products	\$74.7
Patient care and treatment products and supplies	\$46.1
Patient exam and monitoring products	\$17.5
Medical facility products	\$13.6
Respiratory and anesthesia and resuscitation products	\$2.4
Medical diagnostic imaging and nuclear medicine products	\$1.8
Surgical products	\$0.8
Medical cleaning and sterilization products	\$0.7

Laboratory and Measuring and Observing and Testing Equipment

Laboratory and scientific equipment	\$36.1
Measuring and observing and testing instruments	\$10.5
Laboratory supplies and fixtures	\$0.7



▶ Vaccine Superheroes. Frontline health workers on the way for Measles Rubella vaccination sessions in hard-to-reach villages through a wire rope-hanging bridge, at Pongging village in Upper Siang district, in India's north-eastern state of Arunachal Pradesh. The Ministry of Health and Family Welfare initiated campaign is supported on the ground by UNICEF and WHO and is one of the largest vaccination campaigns in the world. © UNICEF/ Biju Boro



THE YEAR IN REVIEW

2017 was a year of change since it marked a shift in leadership at the United Nations system. As the world goes through delicate challenges, the new leaders profiled planetary health and climate change in their agendas, emphasizing the critical impacts on world activities on human and environmental health. This shift in leadership and the new commitment to planetary health further provided the corporate support for the implementation of the SPHS High-Level Joint Statement on Engaging with Suppliers and Manufacturers to lower the environmental and social impact of the global health procurement.

While the delayed response to climate change over the past 25 years has risked human and environmental health, the past year brought us good news. 2017 has seen an accelerated response to climate change, building momentum with clear and unprecedented opportunities for health. Moreover, in light of combatting climate change, countries reiterated their commitment to rapidly implement the Paris Climate Change Agreement at November's UN Climate Change Conference COP23 in Bonn. Our efforts to strengthen sustainability in the global health care sector were highlighted at the Sixth Ministerial Conference on Environment and Health and CleanMed Conference, offering a global perspective on SPHS' path to low carbon health care.

2017 proved to be a year of success, advancement and innovation. We capacitated procurement specialists through training and webinars to

develop sustainable procurement policies and strategies, raising awareness to the importance of the whole life cycle approach and involvement of all stakeholders in the sustainable public procurement to achieve success. To emphasize the importance of social and environmental factors the global production of health commodities, we invited top technical experts to present the latest knowledge and practice in the area of ensuring fair-play, human rights and gender equality, and effective communication for innovation in the global health supply chains.

We continuously tackled challenges regarding our focus areas ranging from procurement to resource efficiency. We established a renewable energy project in Sierra Leone to electrify half a million people over the next four years. The game-changing Electronic Vaccine Intelligence Network (eVIN) of India which enables health workers

to manage vaccine stocks online, became a global best practice in immunization. We developed an overarching environmental questionnaire to assess the performance of suppliers and manufacturers in the health sector, which aims to be a new online tool to support the UN health procurement process. These initiatives further strengthened the foundation of our online engagement platform, which continued to grow its community and database of good practice examples in sustainable procurement and production, every day.

As we look back at the past year, we are beyond proud of how our global community of collaborators has grown and all that we have accomplished together. We are grateful that we contributed to a more sustainable global health sector, and we look forward to being there in the years to come.

Sustainable Development Goals

We contribute to:



Focus Areas of Our Work

We contribute to:

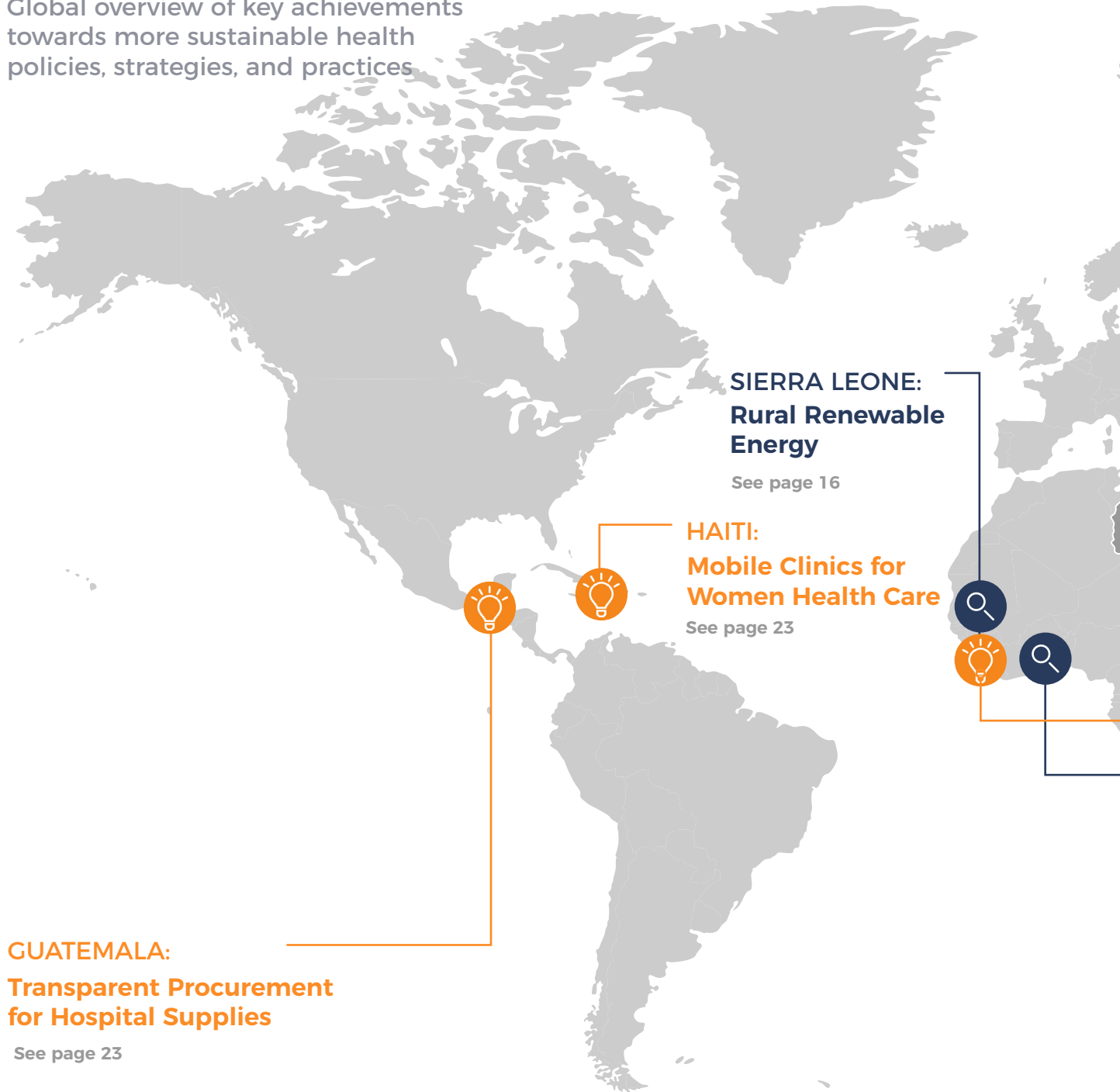


The graphic shows the complexity of the interface between Sustainable Development Goals and the SPHS focus areas. For more information about other good practice examples in sustainable procurement and manufacturing of health commodities, please visit <http://savinglivesustainably.org/knowledge-practice.html>



KEY RESULTS: IN A GLANCE

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



SIERRA LEONE:
Rural Renewable Energy

See page 16

HAITI:
Mobile Clinics for Women Health Care

See page 23

GUATEMALA:
Transparent Procurement for Hospital Supplies

See page 23

GHANA, MADAGASCAR, TANZANIA, ZAMBIA:

Mercury-Free Health Care

See page 12

 **SPOTLIGHT**

 **PROJECTS**

 **SUCCESS STORIES**

 **TRAININGS**



INDIA:
Strengthening sustainable health procurement

See page 32

Reducing Emissions from Antibiotic Production

See page 25

eVIN App for Better Health

See page 14

MONGOLIA:
Telemedicine Network

See page 20

BANGLADESH, SIERRA LEONE:
Halting the spread of cholera

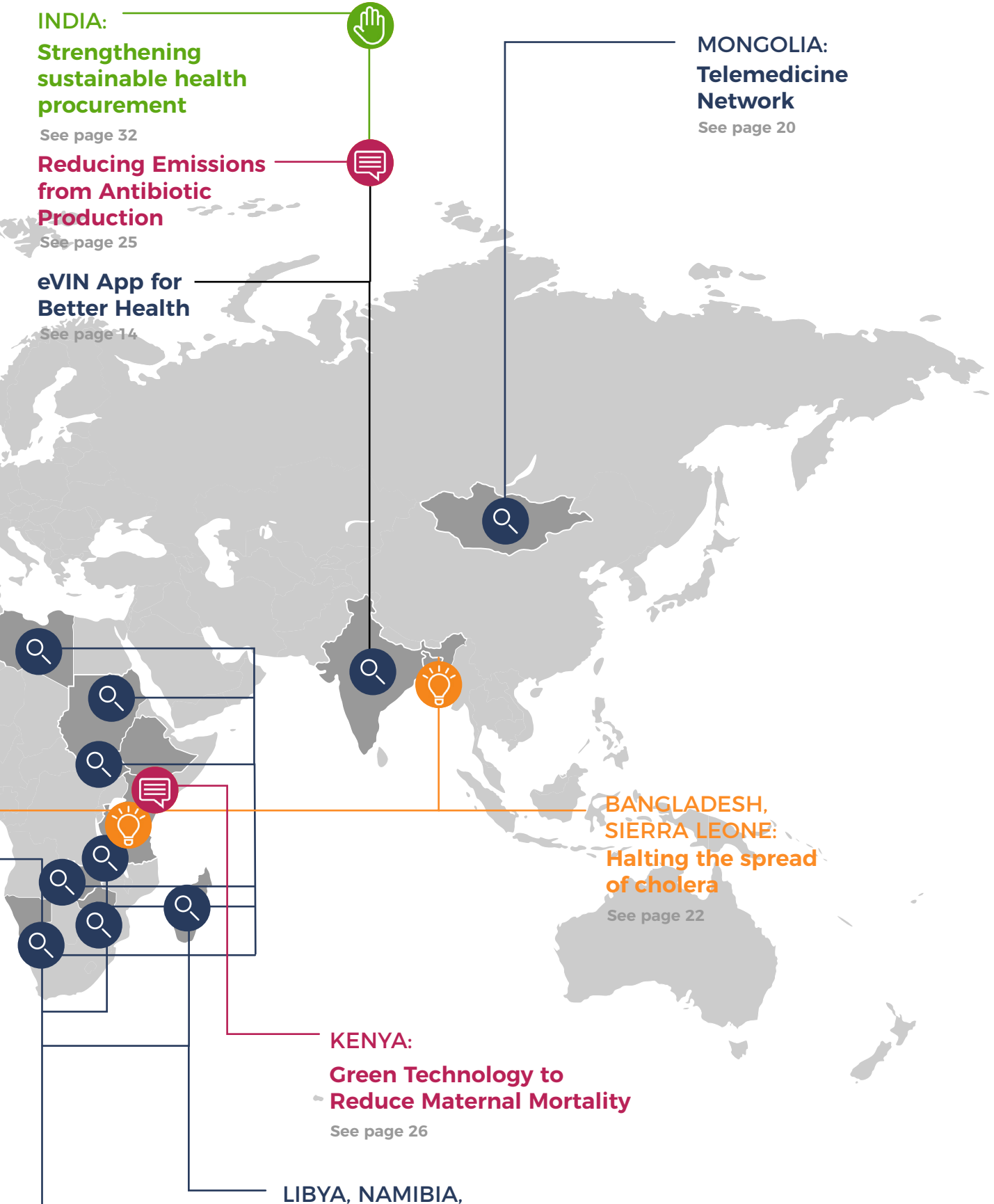
See page 22

KENYA:
Green Technology to Reduce Maternal Mortality

See page 26

LIBYA, NAMIBIA, SOUTH SUDAN, SUDAN, ZAMBIA, ZIMBABWE:
Solar for Health

See page 18



PUSHING FOR MERCURY-FREE HEALTH CARE IN AFRICA



GEF funded UNDP project, 'Reducing uPOPs and Mercury Releases from the Health Sector in Africa', in partnership with WHO and the Health Care Without Harm (HCWH) is supporting four African countries (Ghana, Madagascar, Tanzania and Zambia) to phase out the use of mercury-containing medical devices.

The use of mercury-containing devices such as thermometers and sphygmomanometers (blood pressure testing devices) is widespread in the African health care sector. When mercury-containing medical products break, liquid elemental mercury evaporates, exposing health care workers, patients, and visitors to potentially highly toxic levels. If mercury-containing products are discarded, the toxic waste is disposed of in uncontrolled dumpsites or burned in simple incinerators, resulting in high environmental burdens. The limited availability of low-cost mercury-free devices, unfamiliarity with their use and missing experience in their procurement are the barriers for introducing safer alternatives.

Rajaobelina Sehenolivia is a nurse in University Hospital CHU-HJRA Ampefiloha in Antananarivo, Madagascar. She has spent seven years in the nephrological reanimation unit where she used to monitor the temperature of patients twice a day. She experienced many troubles with mercury thermometers due to frequent breakages and difficulties in cleaning up the spillage: "I was always afraid of hurting myself or the patient with the broken glass and above all the reprimands of my supervisor. Until January 2017, I was never confident in cleaning spilled mercury, and I was not even aware of the hazard from the liquid mercury release from the broken thermometer. This changed when Dr. Hanta Ravaosendrasoa, one of the master trainers of the UNDP-GEF project in Madagascar, gave us training in our hospital about how to deal with a mercury spill and introduced mercury-free affordable and easily available alternatives which the project will deliver to the hospital soon to exchange mercury-containing devices."

Since the Minamata Convention came into force in August 2017, participating countries are required to phase out the manufacture, import, and export of mercury-containing devices by 2020. The health care sector must be prepared for this change and ready to procure, operate and validate the mercury-free thermometers and sphygmomanometers to ensure high-quality medical services.

Project Details

With financial support from the **Global Environment Facility (GEF)**, and in partnership with **WHO** and the **Health Care Without Harm (HCWH)**, **UNDP** started a regional project 'Reducing uPOPs and Mercury Releases from the Health Sector in Africa' in 2016. The project which covers four African countries (Ghana, Madagascar, Tanzania, and Zambia) aims to demonstrate best practices to reduce emissions of unintentionally-produced Persistent Organic Pollutants (uPOPs), and mercury releases from the health care sector. Baseline analysis suggests that in the four project countries the health care sector releases a total of up to 287 kg mercury per year. The project is already supporting the participating countries in phasing-down/out the use of mercury-containing medical devices; improving practices for mercury-containing wastes; preparing awareness-raising materials on the dangers of mercury; conducting training on the use of mercury-free devices and on mercury spill management; adopting procurement processes and technical specifications to avoid the future releases of mercury.

ELECTRONIC VACCINE INTELLIGENCE NETWORK (eVIN): EMPOWERING HEALTH WORKERS FOR STRONGER HEALTH SYSTEMS



Every year, more than 650 million doses of vaccine are procured and managed at more than 27,000 vaccine storage centers in India, reaching out to over 156 million mothers and children. A dedicated cadre of health workers, at the last mile, ensure that no child is left behind from an equal chance at healthy living.

50-year-old Potia Kundo belongs to a tribal community in India's northern state of Bihar. She is an auxiliary nurse and a midwife and also doubles up as a vaccine cold chain handler at a public health centre in the state. When the eVIN app was first introduced in the state, Potia was nervous. "I had never used a smartphone, let alone do my work with it!" But after a little nudge from other health officials, Potia went for the trainings and now manages the vaccine stocks with much ease.

eVIN or Electronic Vaccine Intelligence Network is a smart, easy to use technology which aims to digitize vaccine stocks in the country. The innovation is making the jobs of thousands of health care workers, like Potia, more efficient and helping secure the future of 156 million beneficiaries every year.

The game-changing technology enables health workers to manage vaccine stocks at the click of a button, in real time. "I can monitor the number of vaccines and the temperature they are stored at from anywhere through the app" says Potia. "Since we get real-time updates on stocks, temperature and power supply, vaccine stockouts and wastage are now rare. In fact, in just over a year, eVIN solution has been able to reduce the frequency of vaccine stock outs by almost 72 percent across 11 implementing states.

At the forefront of India's immunization efforts are thousands of such cold chain handlers. Each roll-out of the technology is accompanied by training, sometimes with personal attention, to build confidence in the technology among frontline health workers. "I may have been scared then but, I am now fearless. Technology and I are friends."

Project Details

India's Ministry of Health and Family Welfare is committed to ensuring vaccine availability to every mother and child. With the support from **UNDP**, the Ministry has introduced a unique technological innovation, the Electronic Vaccine Intelligence Network (eVIN). This path-breaking innovation is digitizing vaccine stocks at more than 10,500 vaccine storage points in the country. UNDP aims to support the Universal Immunization Programme (UIP) through designing and implementing eVIN and strengthening the evidence base for improved policy-making in vaccine delivery, procurement, and planning for new antigens. The project plans to ensure efficient temperature monitoring at cold chain points through the complete installation of temperature loggers on cold chain equipment and promote the improved efficiency of vaccine and cold chain management. The project is supported by **CAVI – The Vaccine Alliance**.

LIGHTING UP RURAL SIERRA LEONE



The Ministry of Energy's Rural Renewable Energy Project, funded by UK Aid, will benefit up to 360,000 people in Sierra Leone by using solar energy to tackle energy poverty in rural communities across the country.

Half a million people over the next four years will benefit from at least 90 mini-grids powered with renewable energy. Initially 50 communities were electrified in 2017 using mini-grids that will be operated by local entrepreneurs. Funded by the United Kingdom Government's Department for International Development (DFID), the project is being implemented in cooperation with UNOPS.

"Off-grid renewable energy is the future for countries like Sierra Leone," said Ambassador Henry Macauley, Minister of Energy.

"Our country suffered greatly during the Ebola crisis," Ambassador Macauley continued. "This project will increase accessibility to renewable electricity services and enhance economic growth in underserved rural communities. It will also allow us to better respond to future health emergencies by providing much needed electricity to community health centres, paving the way to universal access to basic services."

During Sierra Leone's Ebola outbreak, the lack of reliable power generation was a major obstacle to the country's ability to both deal with and quickly recover from the emergency.

"The UK Government launched an ambitious Energy Africa campaign in 2015. This aims to help Africa achieve universal energy access by 2030," said Guy Warrington, British High Commissioner to Sierra Leone.

"UNOPS is excited to assist the Ministry of Energy with developing such an ambitious and challenging project all over the country," said Ary Bobrow, former UNOPS Country Director. "We are looking forward to the positive impact that electricity will bring to rural communities in terms of economic development, health, education, empowerment of women and reduction of greenhouse gas emissions. Besides providing a source of power, the project will help bridge economic divides between the country's urban and rural areas."

Project Details

The project's overall goal is to improve rural renewable energy access through private sector involvement. The project will continue to use an integrated approach to enhance energy security, support business start-ups, reduce local pollution and improve the livelihoods and living conditions of local communities - with special attention to vulnerable groups, including women and young people. As a result of this Ministry of Energy-led project, up to 360,000 people in rural Sierra Leone will benefit from access to low-carbon electricity.

SOLAR 4 HEALTH: SAVING LIVES, SAVING MONEY, SAVING THE ENVIRONMENT



Without energy, many life-saving interventions for women, children, and other vulnerable populations simply cannot be undertaken. This poses barriers to the attainment of universal health coverage as well as to key health-related Sustainable Development Goals.

Health facilities need power. Clinics, maternity wards, operating rooms, medical warehouses, and laboratories rely on electricity to power lights, refrigerate vaccines and operate lifesaving medical devices. Yet all too often, health facilities – especially those in remote areas – face significant power shortages, putting lives at risk and undermining efforts made to Universal Health Coverage. A recent World Health Organization (WHO) study revealed that more than 70 percent of health facilities in sub-Saharan Africa lack reliable access to electricity, and one in four facilities doesn't have access to electricity at all.

UNDP's Solar for Health initiative is working with governments to install solar systems in health facilities across Africa, the Arab States and Central Asia, helping to provide reliable and cost-effective access to electricity while also mitigating the impact of climate change.

In 2017, UNDP has worked with governments to install 4 megawatts/h capacity solar PV systems in more than 400 health facilities in Zimbabwe, Zambia, Namibia, Libya, Sudan and South Sudan.

As a direct result of the project, Bimbe and Kapeta, employees at a rural health post in Zambia, are now able to provide maternity health care to pregnant women at night. Before solar systems had been installed, the health posts did not have vaccine fridges, meaning they could not carry out routine vaccinations for children. Today, with 24-hour power supply, they can store vaccines in the facility and are now providing vaccination services to children under five years of age.

The introduction of solar energy solutions is also resulting in a reduction in the electricity bills of health care facilities. These vital budget savings can then be reinvested to support other priority health programmes or infrastructure. UNDP estimates 100 percent return on investment for Solar for Health projects within 2 - 3.5 years on average.

Project Details

UNDP's Solar for Health initiative supports governments to increase access to clean and reliable energy for quality health services while also ensuring cost-effective access to electricity. The project also helps to mitigate the impact of climate change and supports the advancement of multiple Sustainable Development Goals. In 2017, UNDP delivered Solar for Health projects valued at US\$30 million in Zambia, Zimbabwe, Sudan, South Sudan and Namibia. Health facilities in project countries have received support from UNDP in four critical areas: access to complete and scalable solar energy solutions, support in energy policy development, strengthening of local and regional markets, and development of local and regional solar capacity through south-south cooperation and local service providers. UNDP is utilizing the latest smart technology for the Solar PV systems which includes remote monitoring systems, load prioritization, efficient power storage system and energy efficient equipment.

THE DOCTOR WILL SEE YOU NOW - FROM AFAR



In remote Mongolia, telemedicine connects pregnant women to far away care.

Mongolia is one of the largest countries in Asia, yet it has fewer than 3 million people, making it the most sparsely populated nation on the planet. A journey to the capital for treatment can easily drain a family's resources, and the travel is often grueling, ranging from seven hours to three days on crowded buses, over unpaved roads. These difficulties are even more challenging for pregnant women experiencing complications.

When Myasuren Batjargal announced she was pregnant at age 44, her family and friends were distraught. They thought she might not survive. Ms. Myasuren had long suffered from serious hypertension and disability related to spinal problems. Health workers agreed the pregnancy was high-risk, but Ms. Myasuren was determined. "I know it's going to be difficult, but I really want this baby," she told the staff at the hospital in Khovd Province.

Specialists were available in the capital, Ulaanbaatar, some 1,500 kilometers away, but traveling that far would be grueling and costly. Fortunately, there was an alternative: an award-winning telemedicine project enabled her doctor, Nyamkhishig Jigmeddorj, to work closely with a team of experts in the capital at the National Centre for Maternal and Child Health. "It is very helpful in making correct clinical decisions, especially in complicated situations," Dr. Nyamkhishig said of the project, which is operated by the health ministry, with support from UNFPA and funding from the Government of Luxembourg. "Because of the high risks, I had to see Myasuren every two weeks, and did frequent blood and urine testing," she added. "She was very cooperative and never missed appointments."

Ms. Myasuren's baby, a girl, named Oyunchimeg, was born on 1 October 2015. Both mother and baby were healthy, and Ms. Myasuren's family was elated.

Project Details

In 2007, the Telemedicine Network began bringing critical maternal health care much closer to home. Supported by **UNFPA** and **the Government of Luxembourg**, the programme connects provincial hospitals with experts at NCMCH. Using software from partners at the Swiss Surgical Team, local doctors can consult with experts, in real time, without having to leave the examination room. Since its launch, the programme has reached at least 60 percent of all pregnant women, including over 1,800 cases of pregnancy-related complications. Maternal deaths have declined significantly since the project's launch. And the Network does much more than simply provide a remote connection to the capital. An online learning platform was developed with NCMCH, along with training materials and updated clinical guidelines. To date, hundreds of medical professionals around the country have received training through the Telemedicine Network, and new learning and treatment opportunities are introduced all the time.



SUCCESS STORIES

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

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



▲ 2017 © WHO Sierra Leone

Halting the Spread of Cholera After Emergencies with Vaccines

Cholera often affects the most vulnerable populations where access to clean water and sanitation is limited. Due to the quick progression of this disease, the majority of deaths occur in those without access to health services. **Gavi** began funding the global cholera stockpile in 2014, by providing US\$115 million until 2018. In response to outbreaks in 2017, the Ministry of Health with Gavi Alliance partners delivered nearly two million doses of the oral cholera vaccine (OCV) to Bangladesh and Sierra Leone.

Bangladesh

More than half a million people have crossed the border from Myanmar into Bangladesh since 25 August 2017 following violence in Rakhine State. Many were crowded into camps or temporary settlements with limited access to clean water and sanitation amid heavy rains, increasing the risk of deadly outbreaks such as cholera.

The Government of Bangladesh with support from Alliance Partners moved quickly on the urgent

need to protect this marginalized population and quickly accessed the Gavi funded doses from the global stockpile.

Approximately 900,000 Gavi-funded vaccine doses from the global stockpile were delivered to Cox's Bazar, on the southeast coast of Bangladesh, to prevent the spread of cholera among recently arrived vulnerable populations from Rohingya. One dose of Cholera vaccine provides immediate, short-term protection while interventions to improve access to safe water and sanitation are being put in place.

Sierra Leone

After one of Africa's worst mudslides, an estimated 500 people were killed when a mountain collapsed on the outskirts of Freetown, the capital of Sierra Leone, an area still recovering from the Ebola crisis. Limited access to safe water and sanitation meant millions of people were dangerously vulnerable to waterborne disease outbreaks especially as the coun-



try suffered a significant outbreak in 2012, killing almost 400 people and affecting more than 25,000. Over 1 million doses of Gavi funded OCV from the global stockpile was delivered, to prevent a potential cholera outbreak. Two rounds of vaccination were delivered in 25 affected communities by the Government of Sierra Leone with support from Gavi Alliance, the World Health Organization (WHO), UNICEF, the UK Government and other health partners.

In 2016, more than 40 percent of cholera doses from the global stockpile were Euvichol, a new oral cholera vaccine produced by Korean biopharmaceutical company, EuBiologics. Gavi Alliance partners have been instrumental in supporting the development of Euvichol. The CEO of EuBiologics, Yeong-Ok Baik said “Gavi’s decision to fund a stockpile through to 2018 greatly encouraged us to proceed with developing Euvichol.”

Guatemalan Hospitals Get Much-Needed Supplies at Half the Cost

The Guatemala Social Security Institute (IGSS) has reported an estimated 50 percent savings in the purchase of medicines with support from **UNOPS**. The organization

helped ensure that approximately US\$27 million worth of medicines were purchased at a fair market price. The medicines purchased include essential medicines and vital drugs of high commercial value. Therapeutically and socially, it is important these medicines are available to IGSS members and patients.

“Saving \$27 million for IGSS means many things: With these resources, the Institute could build a new hospital, reduce the cost of medical services, extend insurance coverage to migrant populations and much more,” said Fabrizio Feliciani, Director of UNOPS in Latin America and the Caribbean.

UNOPS is helping strengthen capacity by improving standardized procedures and monitoring tools, as well as training IGSS staff in public procurement and project management.

“We have detected many irregularities in the procurement processes of medicines, which is an issue we are correcting with the support of UNOPS in two components: The immediate implementation of transparent procurement; and the institutional re-engineering and analysis, so that IGSS can strengthen

its capacity, change and procure in a completely transparent way,” said Carlos Contreras, Director of IGSS.

Manfredo Marroquín, President of Transparency International Guatemala, added: “The UNOPS project helps fight the lack of transparency traditionally associated with public procurement in the social security.”

Mobile clinics deliver essential care to women and girls in remote Haiti

Haiti’s maternal and child mortality rates are the highest in the Western Hemisphere. Here only 36 percent of births take place in a health facility, according to a 2012 survey. The country also has a high rate of teen pregnancy, where 14 percent of adolescent girls, aged 15 to 19, are already pregnant or have children. Teen pregnancy phenomena intensify risks for both girls and their children, being the leading cause of death of girls in this age range.

In 2017, **UNFPA** continued working to improve the availability of sexual and reproductive health care and helped adolescent girls delay pregnancy by increasing access to family planning services. A mobile clinic organized by the Ministry of Public Health and Population, with support from UNFPA brought antenatal care, family planning services, and other essential care to areas without health facilities.

The mobile clinic provided free medical care to about 400 people in Belle-Anse and Macari for two days. Attending patients received medication and counseling on nutrition, as well as counseling on reproductive health and the range of contraceptive options available. UNFPA is the largest provider of family planning commodities in Haiti and is a major provider of maternal health medications and supplies.



▲ Yveka, 17, visits a midwife during the mobile clinic. © UNFPA



PROJECTS

We initiated and supported the implementation of a number of projects aimed at introducing more sustainable practices in the global health sector.

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



▲ 2016 © Gavi / Kate Holt

Combating Open-Vial Wastage

Open-vial wastage is caused by vials being discarded after being opened. Each country's national immunisation programme must establish proper monitoring of open-vial wastage to enable corrective actions and to plan vaccine supply and vaccination activities. Multi-dose vaccine vials must be discarded within six hours of opening if they do not contain preservatives. Those that contain preservatives can be kept for up to 28 days after opening under the World Health Organization's multi-dose vial policy (MDVP). However, this policy is not always followed in practice, either because countries have not adopted the MDVP or because individual health workers are not applying it, e.g. due to lack of awareness.

Gavi-supported countries provide their observed wastage rates in their annual reports submitted to the Gavi Secretariat. An analysis of these reports showed that many countries reported lower wastage rates than those indicated by WHO. Currently three quarters of Gavi's total vaccine expenditure is

used for vaccines with single-dose presentations (no wastage) and two-dose presentations (limited wastage), including human papillomavirus, pneumococcal and rotavirus vaccines. An increased range of vaccine presentations has become available in recent years, especially for pentavalent vaccine, thanks in part to the Alliance's market shaping efforts. This has given countries more flexibility in selecting the vial presentation that best fits their programme and average session sizes.

The Secretariat is currently in the early stages of exploring whether providing countries with a mix of lower- and higher-dose presentations would be helpful to reduce wastage. A recent study conducted by John Snow Inc. and the Ministry of Health in Kenya evaluated the feasibility and impact of using single-dose and 10-dose vials of pentavalent vaccine in a single health facility. The qualitative study found that using two pentavalent presentations in the same facility was feasible and acceptable and could have a positive in-



fluence on wastage rates. Open-vial wastage decreased from 14 percent to 8 percent due to health workers opting for one-dose vials when only a few children were present. On the flipside, having two presentations adds complexity for stock management and distribution. The study findings will need to be validated on a larger scale in more settings and consider the wider system costs (including for the supply chain) before they can be implemented more widely.

Reducing Inequality within and among Countries in Vaccine Supply

UNICEF procures vaccines on behalf of around 100 countries in support of their routine national immunization programmes, preventative campaigns and outbreak responses. This work supports global strategies for the eradication and elimination of infectious diseases, including the Global Polio Eradication Initiative (GPEI), the Maternal and Neonatal Tetanus Elimination (MNTE) initiative, and measles elimination. UNICEF is the procurement agency supporting the supply and pro-

urement of vaccines for Gavi, the Vaccine Alliance.

Reducing inequality within and among countries by ensuring equitable access to an uninterrupted supply of affordable, quality-assured vaccines is a priority of UNICEF's supply operations. To this end, UNICEF has been working tirelessly to reduce vaccine costs for children in partnership with Gavi and others. Between 2013 and 2017, UNICEF and partners were able to achieve affordable prices for routine recommended childhood vaccines (DTP, HepB, Hib, Measles/MR, BCG, Rota, PCV and IPV) for low-income countries, realizing significant savings for countries and donors. This is an important achievement, as cost savings can be translated into more resources for governments and partners to invest in children. UNICEF also provides fiscal support to countries via a pre-financing mechanism called the Vaccine Independence Initiative (VII). VII is a 'revolving fund' that enables governments to manage temporary budget shortfalls to facilitate timely procurement. This intervention is critical, particularly for countries transitioning from low-income to

lower-middle-income status in the coming years, because many of these countries will no longer be supported by multilateral partners such as Gavi.

Using Green Technology to Reduce Maternal Mortality in Eastern Africa

Kenya has a maternal mortality rate that is among the highest in the world, with approximately 360 women dying for every 100,000 births. UNOPS, in partnership with the **United Nations Children's Fund (UNICEF)** and with funding from DFID, is working to address this challenge and strengthen maternal health care services. In five counties in Kenya – Turkana, Garissa, Nairobi, Kakamega and Homa Bay – several health facilities were identified as 'Centres of Excellence' that link referral hospitals to community health facilities. They help strengthen the overall health system by enhancing technical capacity, assuring quality, and strengthening accountability and coordination.

UNOPS has also developed designs for green technology retrofits to improve 42 health clinics with solar-powered solutions intended to minimize electricity usage and improve access to water services.

Reducing Emissions from Antibiotic Production through Resource Efficiency

In the fight against antimicrobial resistance (AMR), the reduction of emissions from production sites is a key measure in avoiding the spread of antibiotics into the environment. Stockholm International Water



▲ Ayan Hassan and Sahro Ahmed, trained vaccinators, travel long distance to deliver polio vaccination in hard to reach areas in Somali region of Ethiopia. 2013 © UNICEF / Sewunet



Institute (SIWI) has developed a methodology to impact wastewater emissions significantly and reduce resource consumption and pollution while obtaining a high return on investment (first proven in the textile industry, see www.stwi.se).

Representing a health-related procurement volume of US\$800 million from India, 90 per cent of which are pharmaceuticals, UN Agencies have a strong interest in engaging their suppliers in promoting sustainable practices. Together with selected UN antibiotic pharmaceutical suppliers, SIWI and UNDP want to showcase how increased resource efficiency can contribute to the reduction of emissions from production sites. The project aims to adapt, test and validate a methodology to reduce the pollution caused by effluents from the pharmaceutical industry. This project will demonstrate ways to address inefficient treatment and management of effluents containing active pharmaceutical ingredients (APIs), to ultimately reduce the negative impact on the health of

communities and the environment.

SIWI will work in partnership with UNDP and other UN agencies to jointly leverage their procurement volumes and positively incentivize manufacturers to adopt more sustainable methods. This project will facilitate trust building and dialogue, helping manufacturers to comply with UN procurement regulations and to identify sustainability measures which will save them money and decrease reputational risk.

The pharmaceutical manufacturing sector has not yet been systematically evaluated from a sustainability perspective, so this project has the potential for significant impact on pharmaceutical supply chain sustainability going forward.

Using Green Technology to Reduce Maternal Mortality in Eastern Africa

Kenya has a maternal mortality rate that is among the highest in

the world, with approximately 360 women dying for every 100,000 births. UNOPS, in partnership with the United Nations Children’s Fund (UNICEF) and with funding from DFID, is working to address this challenge and strengthen maternal healthcare services. In five counties in Kenya – Turkana, Garissa, Nairobi, Kakamega and Homa Bay – several health facilities were identified as ‘Centres of Excellence’ that link referral hospitals to community health facilities. They help strengthen the overall health system by enhancing technical capacity, assuring quality, and strengthening accountability and coordination.

UNOPS has also developed designs for green technology retrofits to improve 42 health clinics with solar-powered solutions intended to minimize electricity usage and improve access to water services.

Sustainable Supply of Ready-to-Use Therapeutic Foods

Chronic malnutrition early in life leads to stunting, which prevents children’s bodies and brains from growing to their full potential. The damage caused by stunting is irreversible and has far-reaching consequences, from diminished learning and school performance, to lower future earnings. Globally, 155 million children under the age of five were stunted in 2016.⁴

Acute malnutrition leads to wasting, or low weight for height, and poses an immediate threat to survival. In 2016, 52 million children under five were classified as “wasted”, of which 17 million were classified as “severely wasted”.⁵



► Nyajak Thuok, 20, feeds her one-year-old son Pal Juneng a sachet of ready-to-use therapeutic food (RUTF) during a consultation at the World Relief health centre in the Protection of Civilians site in Bentiu, South Sudan, Wednesday 3 May 2017. The nutrition situation in South Sudan remains dire as the peak lean season approaches. Countrywide, an estimated 5.5 million people are now food insecure. The security situation across the country remains unstable, severely impacting sustained humanitarian access. UNICEF continues to build upon existing community networks and other community-based resources to assess, plan and implement the humanitarian response, in order to strengthen local capacities and ensure accountability to affected populations. 2017 © UNICEF / Hatcher-Moore



▼ April 2017: HPV vaccination in Kagasunzu primary school in Rwanda. Rwanda became the first low-income country to provide universal access to HPV vaccine and the first African country to begin an HPV national roll-out with Gavi support. Its nationwide HPV vaccination programme has successfully attained high coverage. 2017 © Rachel Wilkinson

UNICEF is working to make good nutrition a reality for the children, families and communities that need it most. Its programmes, spanning more than 90 countries, are supported by undisrupted and sustainable supply of ready-to-use therapeutic foods (RUTF) and other nutrition products.

In response to a growing preference for locally produced RUTF for in-country programme use, UNICEF and suppliers have been working together to establish local production capacity in programme countries. In 2017, 55 percent of the total quantity of RUTF procured by UNICEF came from local suppliers in countries where the product is used. Increased local supplier bases not only allow speedy emergency responses but also are expected to have positive impacts on economic, social and environmental sustainability in the long run, through job creation, local economic development, and supply chain efficiencies including less CO₂ emissions from reduced shipment distance.

UNICEF plans to implement more measures including supplier sustainability assessment that focus on environmental and social sustainability in coming years.

Human Papillomavirus Vaccine (HPV) Support

Cervical cancer is the fourth leading cause of cancer in women worldwide. 85 percent of cases occur in low-income countries, where women often lack access to early screening and treatment.

Gavi's human papillomavirus (HPV) vaccine programme targets a wide age range (9-14 years). This makes it a strong platform for integrating vaccine delivery with other adolescent health interventions, including nutrition, menstrual hygiene, and reproductive and sexual health. It also provides opportunities to reach vulnerable populations, including girls who do not attend school or who are HIV positive. Gavi is developing new models to incentivise countries to invest in adolescent

health integration, using HPV vaccine delivery as a platform.

Over the past two years, Togo has conducted HPV vaccine "demonstration projects", or pilot schemes, in two districts with guidance from Gavi partners - notably the UNFPA, UNICEF and WHO.

In partnership with the education ministry, vaccinators did not only immunise adolescent girls against cervical cancer but also worked hand-in-hand with teachers to educate the girls about health issues. For an hour before receiving their HPV vaccine shots, they were taught about puberty, menstrual health and importance of hand-washing.

In 2017, nine Gavi-supported countries submitted successful applications for HPV vaccine programmes with a total target population of nearly 20 million girls. Gavi aims to support countries to immunise 40 million girls against HPV by 2020. Thanks to the Vaccine Alliance, the poorest countries now have access to HPV vaccines for as little as US\$4.50 per dose. The same vaccines can cost more than US\$100 in high-income countries, and the previous lowest public-sector price was US\$13 per dose.

Innovation and Evolution

The Global Fund, which invests the world's money to defeat AIDS, tuberculosis and malaria, continues to make progress in advancing environmentally and socially responsible procurement.

In 2017, the Global Fund made significant progress in a market that



34th Board Meeting
Market Shaping Strategy

GF/SDM17 – Revision 1
For Board Decision
PURPOSE: To present the amended and revised Market Shaping Strategy to the Board for decision. This decision paper is accompanied by the full amended and revised strategy in Annex 1.



Global Fund's Sourcing Strategic Review is available for download <http://bit.ly/2nXnafV>

has traditionally been less subjected to regulatory requirements and oversight: the production of artemisinin. Artemisinin is a key ingredient for most of the medicines that are critical in the fight against malaria. It can be extracted from vegetal matter or produced semi-synthetically. Through a competitive tender process for suppliers of antimalarial medicines, the Global Fund included requirements that artemisinin be sourced only from manufacturers that had passed an environmental, health and safety assessment.

As part of its approach to partnership, the Global Fund also engaged another large buyer of artemisinin-containing medicines to include similar sourcing require-

ments for their suppliers of these products. This will mean that the anticipated benefits of the Global Fund's approach will be extended even beyond the malaria treatment purchases we make directly.

In addition, the Global Fund has incentivized the expansion of best practices with respect to long-term contracting further upstream in the supply chain for artemisinin-containing medicine beyond its traditional reach. The artemisinin market has historically been quite unstable, characterized by wide ranging supply and price variability for this raw material. To address this market challenge, the Global Fund included another innovative approach in its 2017 antimalarial medicines sourcing strategy. The Global Fund continues to contract directly with suppliers of finished medicines through multi-year agreements; however, it rewards suppliers that extend such multi-year approaches and benefits further upstream to the artemisinin manufacturers from whom they purchase materials. In this way, artemisinin manufacturers will now benefit from better visibility on anticipated volume to be purchased and agreed pricing, providing benefits and market stability to actors further upstream in the supply chain for this critical product. To expand these benefits within the global market, the Global Fund during its annual Sourcing Strategic Review meeting, held in October

2017 in Montreux, Switzerland, with key donors and partners, highlighted progress on implementation of its Market Shaping Strategy to date and its vision going forward. This included explicit mention of the Global Fund's intention to strengthen its approach to achieving desired responsible procurement based on the four dimensions of society, economy, ecology and business practices.

Sustainability Scorecard for Antiretrovirals (ARVs)

As new regulations are being implemented to combat the challenges of health and climate change, organizations are becoming more at risk to be scrutinized for accountability towards managing social and environmental risks in their supply chains. Thus, it is becoming imperative for **UNDP GF/HIST** to strive towards sustainable production and consumption practices by ensuring pharmaceutical and health products purchased have the lowest environmental impact and contribute towards positive social results. These risks can also affect the maintenance of a healthy market, as they can hinder the steady supply of essential medicines.

The UNDP GF/HIST Sustainability Scorecard, originally initiated in 2014, is used as an incremental, sustainable procurement mechanism within the contract manage-

Technical Highlights from Packaging Optimization

2015

Old packaging (30 Tabs)

- 12.03 kg per shipper
- 99 bottles in a shipper
- 81,972 Total packs in a container
- 2.46 Mill Total tabs in a container

2016

Reduced packaging (30 Tabs)

- 11.03 kg per shipper
- 120 bottles in a shipper
- 132,480 Total packs in a container
- 3.97 Mill Total tabs in a container

2017

Reduced packaging (100 Tabs)

- 8.60 kg per shipper
- 36 bottles in a shipper
- 55,200 Total packs in a container
- 5.52 Mill Total tabs in a container



◀ The UNDP GF/HIST Sustainable Procurement Initiative includes the Sustainability Scorecard and call-off criteria mechanism, CO2 emissions reduction in logistics, pharmaceutical packaging optimization pilot-project and the Solar for Health initiative. The goal of this programme is to strive towards sustainable production and consumption practices for the pharmaceutical and health industry.

ment phase of the TLE/ARV LTA framework that represents over US\$ 250 million to date. As of 2016, the sustainability scorecard had incorporated the UNDP Environmental Assessment Questionnaire for Suppliers and Manufacturers of Healthcare products into their scorecard tool and as of 2017, has incorporated compliance mechanisms for secondary bidding requirements by requesting for manufacturers to provide official documentation and third-party certifications.

Due to the success of the UNDP GF/HIST Sustainability Scorecard for manufacturers to implement and comply with incremental sustainability criteria, the scorecard has been executed within the new UNDP ARV LTA. This includes a section on the sustainable health procurement adherence, environmental assessment questionnaire and scorecard deadlines embedded in the contract with 10 ARV manufacturers. This section also requires for manufacturers to provide further qualitative data, quantitative data and supporting documentation based upon request for future projects towards eradicating the impacts of health and climate

change, and for the continuous maintenance of access to essential medicines.

Increasing the Efficiency of Health Logistics: Packaging Optimization for ARVs

The UNDP GF/HIST has continued to achieve significant cost and CO2 reductions through their health packaging reduction project. Major carbon reductions have been achieved as a procurement practice through the initial planning phase by reviewing the potential for inter-modal shipping, freight routing and packaging optimization. The impact and results of this exercise has been monitored throughout the contract management cycle by collecting, measuring data and establishing metrics, through the data provided in freight forwarder reports on CO2 emissions and conducting optimization calculations.

The UNDP GF/HIST Packaging reduction pilot-project had initially started as a carbon reduction project in 2016. This was initiated by collecting CO2 data from freight forwarders and reviewing the procurement planning process for opportunities to optimize from air to sea freight, which had resulted in CO2 savings achieved of 67 percent per TLE pack. A second opportunity was then identified through packaging optimization, where 30-tab bottles for TLE/ARVs were delivered without an individual outer package, reduced individual leaflets and shrink-wrapped to shippers. In 2017, the UNDP GF/HIST had initiated the optimization project a step further by increasing the capacity of the bottles from 30 tabs to 100-tabs.

As a result of the conducted phases of the packaging optimization pilot-project, this had led towards a 55 percent increase in shipping capacity per container, 29 percent decrease in packaging waste and additional reduction of 57 percent of CO2 per package. Overall, by implementing the carbon reductions exercises and packaging optimization pilot-projects as a practice, the UNDP GF/HIST have achieved transport savings of over US\$8.15 million from 2016 to 2018.



TOOLS

We applied eco-innovative approaches in health procurement and developed novel tools.

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




▲ © 2017 United Nations in Moldova

"Green Performance" in the Health Sector Addressed with a Novel Questionnaire

A considerable number of environmental standards and assessment tools for a broad range of products and services in the health sector are available. However, there has been a lack of a consensus when it comes to the environmental evaluation of suppliers. To assess the performance of its suppliers and manufacturers in the health sector, **UNDP** drew on internationally recognized environmental standards, reporting systems and assessment and tools and developed the "Environmental Questionnaire for UNDP Suppliers and Manufacturers of Health Care Products." The questionnaire applies to health care commodities purchased by UNDP, and on a broader level to any product or service in the health sector. After selecting the relevant aspects of an environmental impact assessment process and determining the diverse categories, this questionnaire should cover, specific questions were developed for each of these categories, and a limited number of possible an-

swers were defined. These categories have been chosen in accordance with the nine focus areas of the SPHS.

Aligned with the United Nations Supplier Code of Conduct and the Ten Principles of the United Nations Global Compact, the questionnaire is a critical milestone for the development of the Green Procurement Index Health.


Environmental Questionnaire for UNDP Suppliers and Manufacturers of Health Care Products.
 Download at: <http://bit.ly/2jl72jh>





Through the collection of relevant data on suppliers' environmental practices, it will be possible to not only define a baseline but also define a set of realistic environmental criteria to be included in upcoming tenders, and procurement practitioners will use the tool during the selection of suppliers. All responses will be held in strict confidence, and any reports will have all responses submitted anonymized to protect individual respondent confidentiality.

Waste Management Planning and Operations Guide

UNDP designed three parts of the Health Care Waste Management (HCWM) Toolkit to serve as framework and tools for all Global Fund programmes under the New Funding Model (NFM). The HCWM Toolkit – Part C, is based on international conventions, guidelines and recommendations published by different organizations including WHO. It builds on findings and recommendations from waste management assessments of UNDP-administered GF HIV, TB and malaria grants carried out in Belarus, Bosnia and Herzegovina, Kyrgyzstan, Tajikistan, Uzbekistan and Zimbabwe in 2014/2015.

The objective of these documents is to enable planners and implementers of GF grants to better manage health care waste generated by the grants and reduce its potential negative environmental impact. The aim is the introduction of environmental safeguarding policies, strategies and their implementation throughout the entire GF grant making process in compliance with international environmental conventions and standards as well



◀ Waste Management Toolkit for Global Fund Practitioners and Policy Makers: Part C. Download at: <http://bit.ly/2AVs6H5>

as with today's corporate environmental responsibilities of multinational, multi-billion-dollar agencies and companies in the development sector and beyond.

While Part A provides the rationale for environmental safeguard policies and strategies, Part B outlines the strategic concepts for managing different waste streams expected to occur during the implementation of GF HIV, TB and malaria grants. The country-specific context is taken into account. Finally, the HCWM Toolkit Part C: Waste management planning and operations guide provides practical know-how for grant planning and procurement as well as for operations of waste management during the grant implementation. Part C includes the budgeting for waste management as a standard component for each grant and offers guidance on planning and implementation of safeguard strategies for GF grant practitioners.

Smart Hospitals Toolkit

The **Pan American Health Organization (PAHO)**, under the DFID-funded Smart Hospitals Initiative,

developed a comprehensive Toolkit that provides guidance on achieving a balance between safety and an environmentally-friendly setting in health care facilities in the Caribbean. It is a practical guideline for hospital administrators, health disaster coordinators, health facility designers, engineers, and maintenance staff to achieve Smart Health Facilities by conserving resources, cutting costs, increasing operations efficiency and reducing carbon emissions.

Health care facilities are leading consumers of energy, with a large environmental footprint. The money spent in energy could be put to better use to improve health services. To be able to achieve smart (safe + green) hospitals, one should make both buildings and operations more resilient, mitigate their impact on the environment and reduce pollution. There are several 'win-win' ways to accomplish this, which, in the process, also save costs, reduce greenhouse gas emissions, and achieve adaptation, risk reduction, and development benefits.



◀ **Smart Hospitals Toolkit.** A practical guide for hospital administrators, health disaster coordinators, health facility designers, engineers and maintenance staff to achieve Smart Health Facilities by conserving resources, cutting costs, increasing efficiency in operations and reducing carbon emissions. Download the toolkit at: <http://bit.ly/2kqKtNy> and watch a Smart Hospitals Presentation video at: <http://bit.ly/2isT3HI>



TRAININGS

We organized sustainable public procurement trainings for procurement practitioners.

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



▲ 2015 © UNDP India / Prashanth Vishwanathan

India Strives for Sustainable Health Care

With almost US\$1 billion purchasing power in health commodities, India strives for sustainability. Being the largest country to supply health-related goods and services to UN organizations with a total volume of \$994 million in 2015, the health care sector in the country has been growing regarding both revenue and employment. At the request of UNDP Country Office and their national Counterparts, **UNDP, UN Environment, and HCWH** delivered training on sustainable procurement in the health sector. Training was attended by the officials from the Ministry of Health and Family Welfare, Ministry of Railways from the Government of India, and health and procurement professionals from academia, and international multilateral organizations.

The two-day training took place at the UNDP India office in New Delhi in April 2017 and focused on how to integrate sustainable practices in health care procurement processes and how to monitor the implementation at a national level. The learning outcomes were

aligned with the national targets for the achievement of Sustainable Development Goals.

The training guided participants through various steps: from the establishment of sustainable objectives, development of policies and national plans to the prioritization of product categories, sustainability assessment of suppliers and manufacturers and inclusion of sustainable procurement criteria. Participants also learned about the UNDP-UN Environment approach of integrating sustainability as the first step of the procure-



◀ Sustainable Procurement in the Health Sector - India Training Report: Interested to see the programme, lessons learnt and next steps in implementing sustainable public health procurement policies and practices in India? Download the report at: <http://bit.ly/2t9INdi>



ment process by working with practical cases studies and learning how to use evaluation and monitoring tools to guarantee the satisfactory implementation of sustainable procurement practices in the health sector. The workshops led to a lively exchange of experiences and knowledge between local Indian experts and their international counterparts.

Capacity Building for the UN System

In 2017, **UNOPS** continued to offer the official UN training in sustainable procurement, developed in partnership with ITC-ILO and UN Environment. Over the course of the full year, the training was conducted with representatives from more than 15 UN agencies. In line with its continued commitment to operationalizing sustainable procurement internally, this training was also delivered to UNOPS procurement officials in various country offices.

Capacity Development Toolkit

The **UNDP GF/HIST** Capacity Development Toolkit is designed to identify, capture, codify, document and make accessible the growing body of knowledge for developing resilient and sustainable systems for health. As of 2017, a new critical enablers section has been rolled out as part of the capacity development toolkit to support the protection of human rights and gender equality in health development programmes. The section aims to strengthen the capacity of partners with examples, case studies, guidelines, resources and tools on how to identify and remove human rights and gender-related barriers faced by key populations, foster enabling legal environments and develop effective plans and programmes to increase access to HIV, TB and malaria services.

Link: <http://www.un-dp-globalfund-capacitydevelopment.org/>

TRANSLATING AN IDEA INTO PRACTICE

The training brought forth a strategic dimension to my understanding of the public procurement process. It clearly outlined the broader aspects of sustainability that we can start to work with and provided the tools that could help us translate the idea into practice. It also encouraged me to think of the policy and regulatory framework that is required to incorporate environmental and social standards in 'Sustainable Health Public Procurement.'

Sasmita Patnaik, Programme Lead, Council on Energy, Environment, and Water, India

TOGETHER IN A PARTNERSHIP

This comprehensive and excellent training brought all participants closer together in a partnership for achieving the United Nations Sustainable Development Goals towards Sustainable Health Public Procurement. PHFI extends its wholehearted effort towards achieving the objectives, as it will help in improving human well-being, conserving resources and reducing adverse impacts on the environment from the unsuitable procurement practices in the health sector.

N Chatterjee, Lt General (Retd) Special Advisor-Government & NGO Relations and Head, Procurement Public Health Foundation of India

CAPACITY DEVELOPMENT STATISTICS 2017



2018 MOVING FORWARD, PARTICIPANTS REQUESTED VARIOUS LEARNING OPPORTUNITIES

- Implementing the Total Cost of Ownership tool in health procurement.
- Developing engagement strategies with suppliers of health commodities.
- Understanding ISO 20400 and its implementation.
- Understanding the role of health care workers as end users of health procurement.
- Incorporating anti-corruption principles in health procurement.
- Creating opportunities for local sustainable production of health commodities in developing countries.



EVENTS

We strengthened our engagement with key partners from the global health sector including policy makers, global leaders, suppliers and manufacturers and technical experts.

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



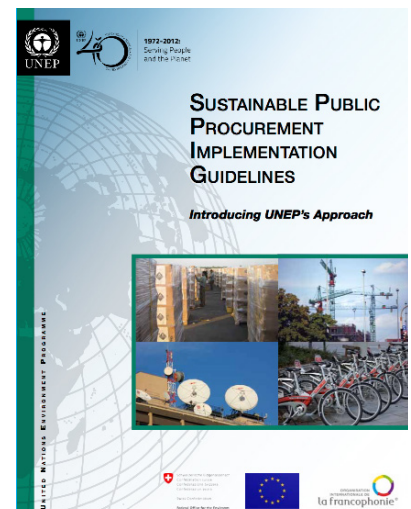
▲ Participants during a group discussion at the workshop in Paris © UN Environment

Revision of UN Environment's Sustainable Public Procurement Implementation Guidelines

Government representatives and experts from Asia, Western Europe, Northern Africa, Latin America and the Caribbean worked in October 2017 updating **UN Environment's** SPP approach during two workshops held in Paris and Bogotá. The objective was to collect the feedback of public procurement professionals on the use of the UN Environment SPP Implementation Guidelines. During the two workshops, participants exchanged experiences on the national implementation of the SPP component of the three UN Environment-led projects "Stimulating the supply and demand of sustainable products through Sustainable Public Procurement and Ecolabelling (SPPEL)", "Greening Economies in the European Union's Eastern Neighbourhood" (EaP GREEN) and UN Partnership for Action on Green Economy (PAGE). Representatives and national experts from Viet Nam, Morocco, India, Mongolia, Ukraine, Moldova,

Argentina, Brazil, Chile, Costa Rica, Ecuador, Paraguay, Peru, Uruguay and Colombia gathered either in Paris or Bogotá to shared success stories and challenges encountered when implementing SPP policies.

▼ Interested to learn more about the **UN Environment Sustainable Public Procurement Implementation Guidelines**? Take a look at the latest version <http://bit.ly/2krD6FF> and explore projects on "Greening Economies in the European Union's Eastern Neighbourhood" (EaP GREEN) <http://www.green-economies-eap.org/> and the Partnership for Action on Green Economy (PAGE) <http://www.un-page.org/>





UN Environment widely recognized the considerable progress of the participating countries on SPP implementation, and reiterated its commitment to continue supporting the countries in its application at the national, regional and global level through strengthened cooperation and new initiatives.

The outcomes of the workshops will inform the development of a revised set of SPP Implementation Guidelines. These guidelines aim to guide decision-makers and public procurement practitioners on how to effectively pave the way for a successful implementation of SPP at the national level.

UN Environment shared the revised implementation guidelines with the 10YFP network and the wider SPP community at the beginning of 2018.

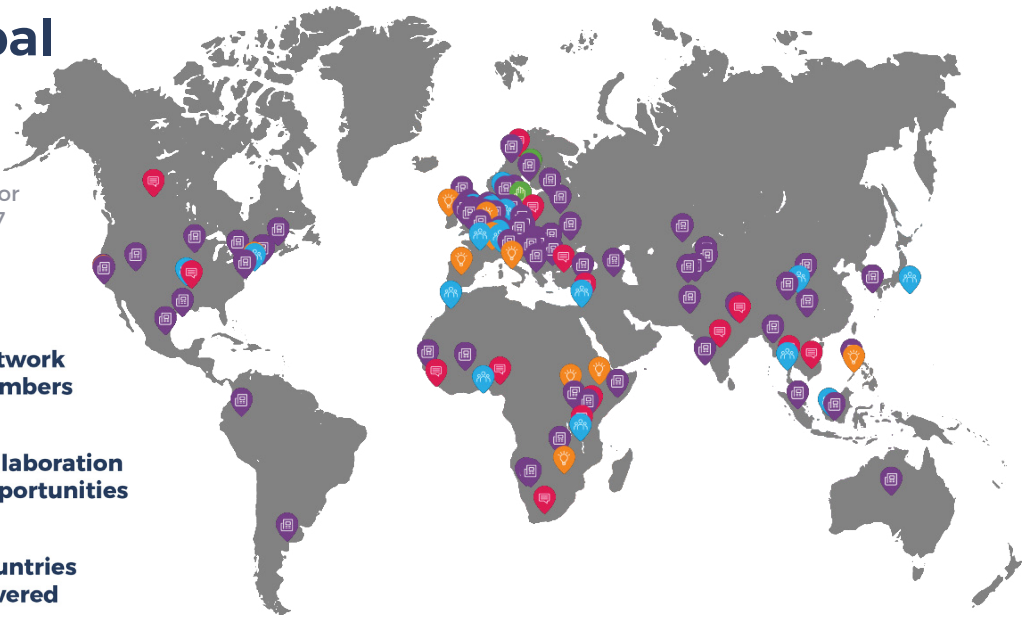
More Global Than Ever

Dive into Our Engagement Statistics for January-December 2017

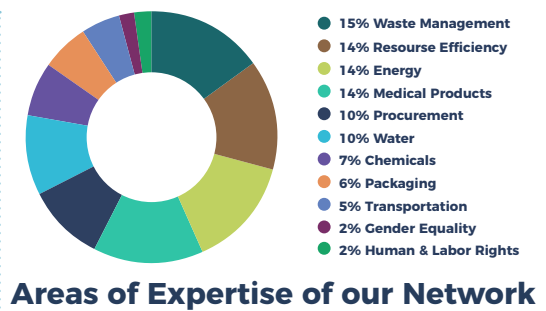
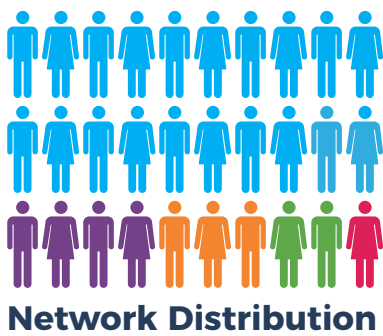
4,775 Network Members

408 Collaboration Opportunities

114 Countries Covered



6,092,379
Total # of Media Impressions



2,169,145 Total # of People Reached



PUBLICATIONS

We advanced knowledge and practice in sustainable health procurement and in the manufacturing of health commodities.

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



▲ © 2017 PAHO/WHO / Ary Rogerio Silva

High Impact Procurement: Why New Thinking is Needed to Achieve the SDGs

A **UNOPS** publication examines the vital role procurement plays in driving sustainable development – both for today’s generation and the ones to follow. The search for a peaceful, inclusive and sustainably developed world is far from over. Although progress has been made, achieving the 17 UN Sustainable Development Goals by 2030 requires innovative, transparent and efficient procurement. It’s a vital link that connects suppliers with buyers, donors with recipient governments, and the world’s most vulnerable with the goods and services they need. It’s key to the UN’s goal of ending poverty, protecting the planet, and ensuring peace and prosperity for all.

“Creative ideas are essential for achieving the Sustainable Development Goals – and that includes constantly striving for new solutions to procurement challenges,” said Grete Faremo, UNOPS Executive Director. “From using procurement as a poverty reduction tool to utilizing it as a means to address human rights abuses, procurement plays a key role in

sustainable development,” Ms. Faremo added.

In ‘High Impact Procurement,’ contributors from across the public and private sectors and academia examine how procurement can help the world overcome global challenges – for good. The work of SPHS was featured in the publication as a driver for transformational change towards more



◀ **High Impact Procurement.** How can procurement drive sustainable development? You can read all ten articles from the publication, which includes contributions from across the private, public and academic sectors, here: <http://bit.ly/2AB8yFy>



sustainable health systems and inclusive green and social economies. The publication also highlights the decision of UNFPA to procure environmentally friendly condoms to reduce carbon dioxide emissions, water consumption, hazardous chemical impacts and raw material consumption. Eric Dupont, Chief of UNFPA Procurement Services Branch, emphasized the agency's Green Procurement Strategy to collaborate with its suppliers and reduce the environmental impact of the UNFPA supply chain.

Towards a Pollution - Free Planet

Pollution has significant economic costs related to health, productivity losses, health-care costs and ecosystem damages. Highly hazardous chemicals, such as mercury, ammonium, ozone, and perchloric acid, used in a range of industries, are toxic and reactive and some have the potential to cause cancer, congenital disabilities, induce genetic damage, cause miscarriage, injury or death from relatively small exposures if released into the environment.

Despite the fact that some forms of pollution have been reduced, as technologies and management strategies have advanced, approximately 19 million premature deaths are estimated to occur annually as a result of the way societies use natural resources and impact the environment to support production and consumption.

"Towards a Pollution - Free Planet" report, developed by **UN Environment**, suggests a framework for actions on pollution, focused on a dual track of actions that the Member States and other stakeholders

could consider fighting pollution around the world. Better knowledge on alternative consumption and production models, as well as innovative technological solutions, will drive many countries, cities, and businesses to successfully tackle serious pollution issues.

2017 Global Review and SPP Factsheets

The **UN Environment** has released its review of the last five years of global procurement activity, building on the first edition released in 2013. Published in the context of the 10 Year Framework Sustainable Public Procurement Programme, the report aims to track the global progress of Sustainable Public Procurement (SPP) and to deepen the collective understanding of the current barriers, needs, opportunities and innovations to sustainable procurement.

The report identifies emerging topics and trends in SPP and considers the role of international organisations in supporting its implementation.



◀ Towards a Pollution-Free Planet. Download the report here: <http://bit.ly/2g7CAyD>

A supplement to the 2017 Global Review of Sustainable Public Procurement, the "Factsheets on Sustainable Public Procurement in national governments" has also been published by UN Environment. It features 40 country factsheets that illustrate the current state of SPP policies, activities, programmes, and monitoring and evaluation systems in national governments around the world.

▲ 2017 Global Review and SPP Factsheets are available to download at the 10YFP's SCP Clearing House website: <http://bit.ly/2jXn7LG> and <http://bit.ly/2BNQh7V>



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 Sustainable production and procurement practices are important for a sustainable health sector. In 2017, which practices do you consider to be good examples that support this statement?
- 2 What are some of the difficulties you have come across in 2018 in introducing more sustainable health care supply chains, and what is needed to overcome them?
- 3 As an SPHS Voice, which are the three main actions you are implementing to contribute to strengthening multi-sectoral collaboration in introducing more sustainable production, procurement and disposal practices in the global health sector?



KRISTINA DE GEER
Environmental Manager
Region Skåne, Sweden

1 Public procurement plays an important role in the development of sustainable products by working together at different levels, holistically, sharing experiences and knowledge. International agreements, Sustainable Development Goals, national goals and political decisions underpin the work. The Swedish National Agency for Public Procurement has a criteria library in the form of proposals for environmental and social requirements for a number of product areas. The county councils and regions join

forces to increase demands for products to be sustainable. We strengthen our work through the National Coordinator for Sustainable Public Procurement and the Coordinator promoting environmental responsibility.

2 For products manufactured in several countries before assembly - sustainable procurement requirements can be difficult to communicate and achieve in all parts of complex supply chains. There is a need to build more transparency and new approaches of sustainability work throughout the supply chains.

3 We work collaboratively and in dialogue to create understanding and insight so that we reach our environmental goals. We continue our work already started in these and many other areas:

- Our aim is climate-neutral activities phasing out materials with large CO₂ emissions, just

as we did in 2017 with innovation procurement when we replaced oil-based plastic single use aprons with a new product containing 91 percent renewable material.

- Follow up with online tool the selected 10 product groups with the largest climate impact. Work has started on reporting the climate impact of the energy used at final manufacture of these. We would like to see more fossil fuel-free energy in the manufacture of products for the healthcare sector, providing better air and less environmental impact at the places of manufacture.
- Waste prevention with guidelines that follow priorities set by the European Union and strive for less materials in products, better packing solutions and more reuse to contribute to a circular economy.



SONIA ROSCHNIK
Director, Sustainable Development Unit
NHS England

1 The innovation procurement mechanisms allow us to find solutions that go beyond addressing the impacts of individual products and support us to find more system orientated solutions. EcoQUIP is a good example. The EcoQUIP project set out to demonstrate how improvements in the efficiency, quality and environmental sustaina-

bility of healthcare could be achieved through the application of innovation procurement. Pilot innovation procurement projects were at the heart of the project and were undertaken in different types of healthcare organisations, in contrasting regions of Europe. More detail is available [here](#). Moreover, defining a future requirement for



patient centred and low carbon catering can bring solutions from the wider market that go beyond a simple specification (see p. 34 of report above). Also, case study on lighting from Rotherham sets another good example.

2 It would be useful to pull together the different information points on products/services which most need attention, so we can ensure we tackle them strategically and innovatively across our programmes thereby amplifying our voices and avoiding duplication. For instance, we are starting to look at the items that contribute most

plastic waste (e.g. gloves, aprons, wipes) to better understand how we could tackle these. Sharing experiences across countries like Sweden who have considered a 90 percent + recycled apron is very useful.

3 The NHS in England is focusing on ensuring low carbon services, reducing waste, water and air pollution whilst also considering how best to reduce our reliance on plastics. We aim to contribute to the 57 percent reduction in Co₂ by 2030 and will focus on hotspots such as multi dose inhalers, anesthetic gases as part of the approach. We

hope to support the ongoing global journey and learning from approaches and solutions elsewhere.



1 2017 saw the release of ISO standard 20400 for sustainable procurement. 2017 also brought medical supply shortages after Hurricane Maria devastated Puerto Rico, a location that manufactures a large number of drugs and IV bags in the USA. Sustainability is no longer optional, if organizations hope to remain viable. Achieving sustainability in any industry requires better practices in production and procurement of supplies, but this is especially true in the health sector. Health care is a service industry. This means most of the environmental emissions will originate in the supply chain – the production and procurement of supplies. Though health organizations might measure and report

only Scope I and II emissions (which account for emissions on site, like the release of anaesthetic gases, or through electricity use), their choice of supply procurement and disposal practices have a large effect on their actual footprint. Sustainability must be viewed holistically, and the supply chain is a vital piece of the health sector's ability to provide services.

2 Since sustainability is still a new concept in many industries, getting consensus on its meaning can be a struggle. Beyond that, even with a 'triple-bottom line' framework, there are many specific issues that can be (and need to be) tackled, ranging from safe labor practices to lowering greenhouse gas emissions. For organizations with large supply chains, tracking compliance with all of these issues across all suppliers and their contractors can be nearly impossible. Encouragingly, many health care organizations are interested in creating more sustainable supply chains, and as we continue to draw interest and test potential solutions, we all learn how to be more effective and can develop tools to

support our efforts.

3 I conduct life-cycle based research to provide quantitative data on environmental emissions from medical services. Using these data, I partner with leaders from various parts of my own organization to discuss ways to implement more sustainable practices here at NYU Langone Health and across the US. At a global level, I work with the newly formed Environmental Sustainability Work Group of the International Agency for Prevention of Blindness (IAPB) to promote sustainability in the clinical specialty of ophthalmology. The work group is creating case studies and guidelines for IAPB member organizations (global ophthalmic care providers) to encourage broader adoption of sustainability practices, whether it be energy sources, surgical processes, or supply chain and procurement. Through the IAPB work group, I educate health systems and individuals on what sustainability means and how they might start on the sustainable pathway.

LOOKING FORWARD*

2018 Plan: More Sustainable Health Policies, Strategies, and Practices

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

1 Climate-Smart Health Procurement

- Co-develop and co-organize with international partners, advocacy and awareness raising activities on low carbon procurement in the health sector.
- Provide support to governments for the development of legal, regulatory and policy frameworks for sustainable health procurement.
- Map available carbon footprint reduction methodologies of the SPHS global technical network.
- Conduct carbon footprint assessments of health supply chains and other health programmes.
- Develop Green Procurement Index for the Health Sector.

2 Capacity Development for Sustainable Health Procurement

- Develop guidelines on Sustainable Health Procurement for procurement officers to understand environmental and social impacts of health procurement and include sustainability aspects in their decision-making process.
- Ensure harmonization of the Sustainable Procurement Training for the Health Sector, with any other relevant procurement programmes coordinated through the UN HLCM, professional development working groups, etc.
- Conduct training and technical webinars on Sustainable Procurement for the Health Sector.
- Further expansion of the SPHS global technical network to share knowledge, opportunities for collaboration and to strengthen initiatives on sustainable health procurement.





3 Sustainable Health Care Manufacturing

- Develop and disseminate toolkit for Environmental Assessments of Health Suppliers and Manufacturers to develop realistic environmental procurement requirements that support SPHS Member Agencies in advancing the sustainability agenda and the transition to green economies.
- Organize Saving Lives Sustainably: Asia Forum 2018, with the aim of fostering social, economic and environmental benefits in health care manufacturing.

4 Health Care Waste Management

- Promote and support the implementation of sustainable waste management practices for health care waste to reduce environmental and health impacts of hazardous substances.
- Promote and disseminate good practices on health care waste management via the SPHS platform.

5 Whole Life Cycle Analysis and Costing for Health Commodities

- Identify and disseminate relevant Whole Life Cycle Analysis and Costing methodologies among the SPHS Member Agencies and their global network of partners.





Members List

Gavi, the Vaccine Alliance
Aaban Butt, Manager - Policy

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

The Global Fund to Fight AIDS, Tuberculosis and Malaria
Dr. Mariatou Tala Jallow, acting Chief Procurement Officer

Nick Jackson, Ethics Officer

Lin (Roger) Li Manager, Strategy, Analytics & Data Management at the GF Sourcing Department

Melisse Murray, Specialist, Sourcing Department

Nathan Vasher, Data Management Specialist

UNITAID
Robert Matiru, Director of Operations

Ademola Osigbesan, Supply Officer

Lorenzo Witherspoon, Supply Advisor

Names of the member representatives are listed alphabetically.

United Children's Emergency Fund (UNICEF)
Katinka Aanjesen Rosenbom, Chief Contracting, UNICEF Supply Division

Miho Abe, Sustainable Procurement Officer

Ignacio Gimenez, Contracts Specialist

United Nations Development Programme (UNDP)
Camilla Brückner, Director, Nordic Representation Office

Dominic Grace, Director, Procurement Support Office

Rosemary Kumwenda, HIV, Health and Development Team Leader, SPHS Coordinator

Amanda Lindstorm, Technical Officer, GF - HIST

John Macauley, Regional Programme Specialist, HIV, Health and Development

Mirjana Milić, SPHS Associate Coordinator

Gregory Soneff, Team Leader, Global Procurement Unit, Procurement Support Office

United Nations Environment Programme (UNEP)
Desiree Montecillo Narvaez, Programme Officer, UNEP Chemicals Branch Division of Technology, Industry and Economics

Claire Thiebault, Associate Programme Management Officer

Farid Yaker, Programme Officer

United Nations Office for Project Services (UNOPS)
Patricia Moser, Director

Jamieson Saab, Team Manager, Sustainability Team

United Nations High Commissioner for Refugees (UNHCR)
Stephen Ingles, Head, Procurement Management and Contracting Service

Martine Israel, Head of Unit, Procurement

Omkar Sivakumar, Senior Procurement Assistant

Javier Utande, Pharmacy Management Officer

United Nations Population Fund (UNFPA)
Eric Dupont, Chief, Procurement Services Branch

Roberto Mena, Procurement Specialist - Strategic Procurement

World Health Organization (WHO)
Michaela Pfeiffer, Technical Officer, Department of Public Health, Environmental and Social Determinants of Health

Francesca Racioppi, Senior Policy and Programme Adviser, Environment and Health Policy and Governance

SPHS Roadmap

Vision	<i>UN becomes a global leader in sustainable procurement</i>	<i>All agencies understand their individual role in sustainable procurement</i>	<i>UN practices and policies used for benchmarking</i>	<i>No Waste No Harm</i>	<i>Enhanced innovation and changed thinking</i>	<i>Technology an enabler of positive societal and env. change</i>
Measures of Success	<i>Normative approaches for the health sector become valid for other sectors including the agricultural sector</i>	<i>Our global health donors are integrated with our sustainable procurement practices</i>	<i>The overall UN footprint reduced through set targets and timelines</i>	<i>Baseline indicators in sustainable procurement established and shared publicly</i>	<i>Establish a Sustainable Index for suppliers as a reference.</i>	<i>All health systems have access to affordable technology (including drugs) to enable better care delivery</i>
Getting There	Embed/Integrate Sustainable Procurement into all levels of working		Sustainability integrated into all decision making processes	Value all resources and a 'No Waste' approach	Substitution and Innovation delivers more health with fewer resources	All products have a low environmental impact
On The Way	Systematic Joint Framework in place	Clear on contribution to joint approach	Account and regulate for total cost of ownership	Report impacts of decisions on health and the environment	Enhanced supply chain management	Enable and support new technologies and materials
Getting Started	Identify and engage with stakeholders	Raise Awareness and understand where you are and where you want to get to	Agree sustainable development definition and structures	Agree baseline and indicators. Act to reduce resource waste	Achieve more outcomes from the same investment – maximise efficiency	Adopt and Invest in more sustainable materials and technologies
	SYSTEM WIDE	INDIVIDUAL AGENCIES	GOVERNANCE	USE OF RESOURCES	PROCUREMENT PROCESSES	MATERIALS & TECHNOLOGY



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.

Dr Margaret Chan
Director-General WHO

Mr Anthony Lake
Executive Director UNICEF

Ms Helen Clark
Administrator UNDP

Dr Mark Dybul Executive
Director The Global Fund

Ms Grete Faremo
Executive Director UNOPS

Dr Babatunde Osotimehin
Executive Director UNFPA

Mr Erik Solheim
Head UN Environment

Dr Seth Berkley
Chief Executive Officer GAVI

Mr Leilo Marmora
Executive Director UNITAID

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 ILO Declaration on Fundamental Principles and Rights at Work, as well as in other protocols for the protection of the environment, such as the Basel, Stockholm, Montreal and Minamata Conventions and Kyoto Protocol.

² Recommendation # 28 in the United Nations Secretary-General’s High-level Panel on Global Sustainability (2012): Resilient People, Resilient Planet: A future worth choosing. New York: United Nations.

³ For example: Greening the Blue and the UNSC’s wider initiative on Moving forward to a Carbon Neutral UN. The HLCC 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 (IATT-SPHS); etc.

