1) INTRODUCTION

In December, 2019, the Swedish International Development Agency approved the APRM-SIDA Project. The Project will help strengthen the APRM and contribute to the delivery of its mandate. It will support the implementation of the 2020-2023 Strategic Plan and reposition APRM as an instrument for monitoring AU Agenda 2063 and SDGs. Apart from addressing the immediate challenges faced by the Mechanism, the grant will help in the review and refinement of the APRM tools and processes, to ensure that the Mechanism remains relevant in a rapidly changing world and is also to take on board the expanded mandate and expectations of the member countries. In this regard, the project is expected to support the following key areas of the APRM (1) Deepening the APRM Review, (2) Strengthening Civil Society Participation (3) Strengthening Gender Participation (4) National Governance Reporting (6) Development of the Au Guidance Notes for State Owned Enterprise (SOEs). These programmes are designed to shape the work of the Mechanism.

In the context of the implementation of the APRM-SIDA Project, the APRM intends procure an Individual Research Governance Consultant to Undertake a Study on Governance and Disaster Management: A Case of COVID 19 Pandemic in Africa

2) PURPOSE OF THE STUDY

The study seeks to provides content for the development and implementation of an African Union integrated framework on the governance response to disaster management, including governance of public health
crises. Specifically, the study seeks to examine Africa’s governance response to the new coronavirus, SARS-CoV-2, (herein referred as COVID-19 or the pandemic) within the framework of disaster management. The study, essentially, undertakes this assessment building on the four areas mapped out in the Preliminary Study on Africa’s Governance Response to COVID-19; legal and institutional mechanisms; disease prevention and containment measures; social and humanitarian measures; and economic and fiscal measures. The study framework is thus derived from the United Nations Disaster Risk Reduction (UNDRR) framework, the World Health Organisation (WHO) international regulations for health on the health governance dimensions of Agenda 2063, UN SDGs, AGDEC and the APRM governance framework.

Disaster risk governance at the national, regional and global levels is of great importance for an effective and efficient management of disaster risk. Clear vision, plans, competence, guidance and coordination within and across sectors, as well as participation of relevant stakeholders, are needed. Strengthening disaster risk governance for prevention, mitigation, preparedness, response, recovery and rehabilitation is therefore necessary and fosters collaboration and partnership across mechanisms and institutions for the implementation of instruments relevant to disaster risk reduction and sustainable development1.

The operational definition of governance employed in this paper was conceived by the Commission on Global Governance (1995), governance is the sum of the many ways individuals and institutions, public and private, manage their common affairs. It is a continuing process through which conflicting or diverse interests may be accommodated and cooperative action may be taken. It includes formal institutions and regimes empowered to enforce compliance, as well as informal arrangements that people and institutions either have agreed to or perceive to be in their interest2.

3) BACKGROUND OF PROJECT

The comprehensive study follows a preliminary report on Africa’s governance response to COVID-19 whose purpose was to generate content that can be used to enrich the debate on the governance response to COVID-19 on the continent. The provides data that could contribute to evidence-based governance responses in African member states and facilitate sharing of tested approaches on the governance response to COVID-19.

The WHO declared COVID-19 a Public Health Emergency of International Concern on 30th January 2020 and a global pandemic on 12 March 2020. It was declared a pandemic because the virus has spread over several countries or continents and affected a large percent of the population3. Although the actual parameter

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of ‘large population’ remains undefined, COVID 19 is already a pandemic in both geographical and demographic terms. It is important, however, to note that the WHO declaration of a pandemic did not necessarily have to indicate the severity of a disease, but only the degree to which it is spreading. Since the WHO declaration of a pandemic, COVID 19 has rapidly swept across the globe with impact of an unprecedented scale to 210 countries and territories around the world⁴.

In response to the COVID-19 pandemic, the African Union, and the Africa Centre For Disease Control and Prevention have developed several guidelines which include; Recommendations for Stepwise Response to COVID-19 By African Union Member States⁵ and a Guidance on Community Social Distancing⁶. These strategic documents and guidelines outline measures that have translated into: Partial or total nationwide lock downs (curfews, border closures, deployment of security forces); social distancing; virtual offices and student learning; suspension of all business trading activities and closure of non-essential services; and protocols for public interaction.

According to the African Union Commission (AUC), Department of Political Affairs, the overall impact of COVID-19 on the continent, if poorly responded to, would include; huge loss of life; stress and/or collapse of health infrastructure; disruption of public life impacting on community cohesion and nationhood; heightened nationalism and diminished multilateralism; declining trade, deindustrialisation; eminence of health and security over other political and socio-economic rights; deepening poverty, unemployment, inequality, food insecurity; plummeting revenue from African airlines, tourism and hotel industry.

4) PROJECT DETAILS

The comprehensive study on Governance and Disaster Management; The Case of the COVID-19 Pandemic in Africa is necessitated by the understanding that emerged from the Preliminary study on Africa’s Governance Response to COVID-19, launched on 8 June 2020. The study recognises that managing the pandemic requires international cooperation and whole-of-government measures that cut across a variety of disciplines, sectors and actors. Thus, following the publication of the preliminary study, the APRM elected to undertake a comprehensive study that examines and situates the governance aspects of managing the COVID-19 pandemic in these broad international frameworks. First, it recognises the World Health Organisation International Health Regulations (IHR 2005). Second, it evokes the United Nations Disaster Risk Reduction Office Sendai Framework for Disaster Risk Reduction 2015 – 2030. Third, it employs the APRM Governance Framework which includes the AU Agenda 2063 and the UN SDGs 2030.

The WHO central and historic responsibility has been the management of the global regime for the control of the international spread of disease. Under Articles 21(a) and 22, the Constitution of WHO confers upon the World Health Assembly the authority to adopt regulations “designed to prevent the international spread of disease” which, after adoption by the Health Assembly, enter into force for all WHO Member States that do not affirmatively opt out of them within a specified time. The IHR (2005) were adopted by the Fifty-eighth World Health Assembly on 23 May 20057. They entered into force on 15 June 2007. The purpose and scope of the IHR (2005) are “to prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoid unnecessary interference with international traffic and trade.” The IHR (2005) contain a range of innovations, including: (a) a scope not limited to any specific disease or manner of transmission, but covering “illness or medical condition, irrespective of origin or source, that presents or could present significant harm to humans”; (b) State Party obligations to develop certain minimum core public health capacities; (c) obligations on States Parties to notify WHO of events that may constitute a public health emergency of international concern according to defined criteria; (d) provisions authorizing WHO to take into consideration unofficial reports of public health events and to obtain verification from States Parties concerning such events; (e) procedures for the determination by the Director-General of a “public health emergency of international concern” and issuance of corresponding temporary recommendations, after taking into account the views of an Emergency Committee; (f) protection of the human rights of persons and travellers; and (g) the establishment of National IHR Focal Points and WHO IHR Contact Points for urgent communications between States Parties and WHO.

The Sendai Framework for Disaster Risk Reduction 2015–2030 was adopted at the Third United Nations World Conference on Disaster Risk Reduction, held from 14 to 18 March 2015 in Sendai, Miyagi, Japan. The framework seeks to achieve a substantial reduction of disaster risk and losses in lives, livelihoods and health and in the economic, physical, social, cultural and environmental assets of persons, businesses, communities and countries. It thus seeks to Prevent new and reduce existing disaster risk through the implementation of integrated and inclusive economic, structural, legal, social, health, cultural, educational, environmental, technological, political and institutional measures that prevent and reduce hazard exposure and vulnerability to disaster, increase preparedness for response and recovery, and thus strengthen resilience. The framework has as its Priority for Action 2: strengthening disaster risk governance to manage disaster risk.

The comprehensive study recognises the intricate and intimate linkages and relationship between international health regulations for managing pandemics and disaster management frameworks. Accordingly, the study seeks to analyse the implications of the nexus between the WHO and UNDRR frameworks on Africa’s preparedness for, response to and recovery from COVID-19 using the APRM governance lens. The Study will be undertaken within the context of the broad mandate of the APRM which includes country assessments in democracy and political governance, economic governance and management, corporate governance and sustainable socio-economic development policy.
5) OBJECTIVES OF THE SERVICE

The overall objective of the service is to map out the policy environment; adoption, adherence and implementation, relevant to the preparedness for, response to and recovery from the COVID-19 pandemic among African Union Member States. The consultant will examine the feasibility of disaster management and international health regulations policy frameworks in African Union member states with specific reference to the COVID-19 pandemic. The contribution of the consultant to the comprehensive study report shall cover the entire spectrum from the governing preparedness, response and recovery as defined by the UNDRR, WHO and APRM governance Frameworks.

6) SCOPE OF WORK/ DUTIES AND RESPONSIBILITIES

i. Assess the COVID-19 related key public policy provisions in the United Nations Disaster Risk Reduction (UNDRR) framework, the World Health Organisation (WHO) international regulations for health on the health governance dimensions of Agenda 2063, UN SDGs, ACDEG and the APRM governance framework across all AU member states;

ii. Map the disaster management and international health regulation policy coordination and strategy implementation arrangements employed in addressing COVID-19 pandemic at the continental, regional and national levels;

iii. Contribute to a position paper to feed into the comprehensive study, focusing on the political, economic, corporate governance implications of disaster management and public health regulations as it pertains to preparedness, response and recovery in the management of COVID-19.

iv. Support the development of draft recommendations for the model guidelines and integrated disaster management framework in Africa;

v. Participate, as required, in drafting meetings (telephonic and physical) with various stakeholders and entities, including civil society groups and work with the technical working group (APRM task Force on COVID-19) to ensure that the consultations outcomes inform the analysis and recommendations in the comprehensive study.

7) EXPECTED OUTPUT/ DELIVERABLES AND PAYMENT SCHEDULE

i. Inception report

ii. Findings of the assessment of the COVID-19 related key public policy provisions

iii. Findings of the mapping of the disaster management and international health regulation policy coordination and strategy implementation arrangements

iv. Draft Position Paper

v. Drafting sections of the Comprehensive study focusing on the political, economic, corporate governance implications of disaster management and public health regulations as it pertains to preparedness, response and recovery in the management of COVID-19

vi. Participation in the stakeholder consultations and validation processes of the study and integration of feedback from policy organs and the APRM network

The Consultant to be paid upon satisfactory completion of the assignment.
8) DURATION OF THE WORK
The duration of contract shall be for a 33 days Starting October 2020. The Consultant will work closely with APRM Continental Secretariat, the technical leads and will from time to time submit the progress of activities as agreed.

9) DUTY STATION
The Consultant may undertake distance (online) mode of working based on agreed workplan and methodology
The Consultant is expected to use own laptop and other required equipment/facilities to carry out the task.

10) PAYMENT SCHEDULE
The consultant will issue a once off payment on delivery of satisfactory deliverables.

11) QUALIFICATIONS AND EXPERIENCES
Education:
- A PhD or double master's degree in public administration, international relations, international development management, public health or security studies is required;

Experience:
- Have at least 10 years progressively responsible experience in policy research across a variety of disciplines;
- Academic research and work with research institutions, universities, think tanks or policy groups is desired;
- Experience with the African Union or other international institutions is an added advantage.
- Knowledge of the architecture of international protocols and instruments. Knowledge of disaster management frameworks of the United Nations Disaster Risk Reduction (UNDRR) framework, international health regulations of the World Health Organisation (WHO), AU Agenda 2063, UN SDGs 2030 and the APRM governance framework is desirable;
- Broad knowledge of international relations, economics, universal standards and codes, practices and, development issues in Africa and in general global terms is required;
- Excellent data management, analysis and interpretation as well as web-based applications skills;
- Demonstrate effective ability to work independently;
- Project management experience and able to respect deadlines;
- Strong communication (Written and verbal) and IT skills, including editing skills and capacity to convene virtual/remote meetings and consultations;
- Good interpersonal and diplomatic skills, including ability to work in diverse teams in a consultative and collaborative manner observing protocol;
- High degree of confidentiality, ethics & integrity, as well as adherence to and practice of the three main core values of integrity, professionalism and respect for diversity; and
- Fluency or professional working proficiency in English and French is desirable;

12) SELECTION/ EVALUATION CRITERIA ARE AS FOLLOWS:

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<th>Mandatory requirements:</th>
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<td>• A PhD or double master's degree in public administration, international relations, international development management, public health or security studies is required;</td>
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**Applicants must submit up-to-date Curriculum Vitae, Relevant Academic Certificate and any other relevant supporting documents - (Note: do not send originals) with the names and addresses of referees**
2 | Technical Evaluation | Max Score | Marks |
---|---|---|---|
1 | **Qualification and Experience** - A PhD or double master’s degree in public administration, international relations, international development management, public health or security studies is required; Minimum of 10 years progressively responsible experience in governance research in various capacities; | 25 | |
2 | Academic and/or policy research experience with research institutions, universities, think tanks or policy advisory services on corporate governance in Africa is required. | 35 | |
3 | Familiarity and knowledge of the architecture of international protocols and instruments. Knowledge of disaster management frameworks of the United Nations Disaster Risk Reduction (UNDRR) framework, international health regulations of the World Health Organisation (WHO), AU Agenda 2063, UN SDGs 2030 and the APRM governance framework. | 10 | |
4 | Extensive knowledge of the Constitutive Act of the African Union as well as the overall objectives of the APRM | 5 | |
5 | Understanding of the ToRS - Responsiveness to the Terms of Reference and methodology for undertaking assignment including detailed workplan | 15 | |
6 | Proven ability in preparing robust project proposals and in managing project implementation. -Project Management Skills/ | 10 | |
7 | **Total Marks** | **100** | |
8 | **Minimum Technical Score** | **80** | |

**13) CLARIFICATION**

Clarification can only be sought through Email: tenderinfo@aprm-au.org during working hours- Monday to Friday time 8.00a.m hrs to 5.00 p.m hours local time, at least seven day before the closing date. All response to clarification shall be posted on the same portal the advert was published.
14) MODE OF APPLICATION/ SUBMISSION & DOCUMENTS TO BE SUBMITTED BY CONSULTANTS

The consultant should submit an expression of interest, containing a technical proposal and a Financial proposal through Email: tender@aprm-au.org. The technical proposal should, among others, list the profile of the consultant, understanding of the ToRS, understanding of the methodology, detailed workplan, references and contact persons.

The financial proposal should give a cost breakdown consultant fee and other relevant expenses. The proposal should be in USD and inclusive of all taxes and other statutory obligations as may apply.

The Technical & financial Proposal clearly marked/titled: ‘REOI: Procurement Number: APRM/010B/SDDA/GDMR/2020: INDIVIDUAL CONSULTANT TO UNDERTAKE A STUDY ON GOVERNANCE AND DISASTER MANAGEMENT: A CASE OF COVID 19 PANDEMIC IN AFRICA: Shall be submitted through Email: tender@aprm-au.org on or before 2nd October 2020 at 11.00hrs local time. Eligible women are encouraged to apply. The REOI shall be opened immediately after the closing date and time.

All applications in writing should be accompanied by up-to-date certified Curriculum Vitae and supporting documents (Note: do not send originals) with the names and addresses of referees, one of which should be the last consultancy and addressed to:

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