



## **Terms of Reference**

### **Investigating Public Private Partnerships (PPPs) and its implications to the right to Health in Uganda**

#### **Introduction**

Public-Private Partnership (PPP) is a cooperative arrangement between two or more public and private sectors typically of a long-term nature which most governments have used throughout history. A number of laws and policies have been instituted to strengthen PPPs such as the United Nations Commission on International Trade Law (UNCITRAL) Guidance on PPPs in 2000 which assist in the establishment of a legal framework favorable to private investment in public infrastructure. However, in the late 20<sup>th</sup> and 21<sup>st</sup> century, governments across the globe have made a greater use of various PPP arrangements in infrastructure provision such as building and equipping of schools, hospitals, transport systems, water and sewerage systems. From 1990 to 2009, nearly 1,400 PPP deals were signed in the European Union representing a capital value of approximately £260 billion and since the onset of the financial crisis in 2008, a number of PPP deals were closed by 40% because most private investors obtained a higher rate of return than the government bond rate.

The government of Uganda recognizes PPPs in national development with the adoption of Public-Private Partnership Framework Policy in 2010 that provides public services and infrastructure to remain with the relevant government departments and state enterprises, with local government authorities tasked with the responsibility of identifying, developing and managing public-private partnership projects. The Public-Private Partnership Act was as well enacted in 2015 with the purpose of raising money to finance infrastructure development. The National PPP policy in Health provides a framework that enables Public and Private Actors in health to work together to improve service delivery by exploiting the comparative advantages that each has, focusing on common national health goals. In the health sector, PPPs have been crafted in a manner that diminishes the role of the State to regulate the health sector, thus making health a private and tradable good, to the disadvantage of poor Ugandans in terms of Quality, accessibility and availability.

A case of Mulago National Referral Hospital founded in 1913 as a treatment center for STDs has since expanded to provide referral services to both national and international patients. The hospital is the largest public hospital in Uganda with a total bed capacity of 3,000 and receives over 10,000 visitors on a daily basis. Preliminary findings indicate that following its renovation by Arab Consults of Egypt in 2018, the government has partly privatized some departments especially the Uganda Cancer Institute and the new Mulago specialized Women and Neonatal

hospital associated with new charges imposed on treatment which initially were purely government and offering free services to Ugandans. New charges such as 50,000 shillings for consultation, admitted patients 80,000 shillings per day and 1.3 million for patients seeking for In-vitro fertilization are imposed on a huge number of inpatients and outpatient visits majority who are disadvantaged poor Ugandans which hinders full enjoyment of their right to health.

Therefore, PPPs in health infrastructure, equipment and human resource need to be investigated and examined regarding their implication to health rights in Uganda. It is against this background that SEATINI-Uganda is undertaking this investigative study.

### **Objectives**

- To understand the status and dynamics of PPPs in their broader sense of Uganda.
- To understand PPPs in the health sector and implication on the right to health.
- To investigate government's capacity to regulate PPPs in the health sector.
- To come up with recommendations on how to make PPPs work for promoting the right to health in Uganda.

### **Expected deliverables**

- **Draft study:** The consultant shall produce a first draft by **14<sup>th</sup> December 2018**. This shall be reviewed and comments sent **16<sup>th</sup> December 2018**.  
The consultant shall submit the final draft report not later than **18<sup>th</sup> December 2018**.  
**The final draft should not exceed 13 pages including references.**

### **How to Apply:**

Bidders with qualifications and verifiable experience in research related to Trade, Aid/Development Assistance; Health governance and Human rights are encouraged to send their expression of interest (EOI) by email, not later than **7<sup>th</sup> December 2018** to SEATINI Uganda (E-mail: [seatini@infocom.co.ug](mailto:seatini@infocom.co.ug) with a copy to Kiiza Africa E-Mail: [africakiiza@gmail.com](mailto:africakiiza@gmail.com) and Mr. Kenneth Kapuuru E-mail: [kapurukenneth@gmail.com](mailto:kapurukenneth@gmail.com)).

*The Expression of Interest should show the study which the applicant is applying to undertake. Applicants should attach a CV of not more than 3 pages indicating past research they have undertaken.*

### **Additional requirements are as follows**

- A Masters in Health Science/ Human Rights/Economics/Public Policy, or other relevant graduate degrees
- Knowledge and experience of development work, multi-sectoral policies and an understanding of the Uganda policy advocacy environment

- An understanding of the key Health policies, issues, processes and dynamics at the national, regional and global levels.
- Excellent written and verbal communication skills
- Familiar with demand-driven and participatory approaches.
- Excellent communication and facilitation skills, able to address the institutional complexity and multi-disciplinary environment of the Project.
- Excellent interpersonal and teamwork skills, with the ability to establish and develop relationships and work under tight deadlines to meet objectives.