Expression of Interest:

Call for **Community and Civil Society Representatives** to serve on the **Regional Manufacturing for Equitable Access Portfolio Advisory Committee**

1. Background and Introduction

Africa carries approximately one-quarter of the global disease burden and is home to nearly 1.5 billion people, yet continues to depend heavily on external suppliers. More than 95% of active pharmaceutical ingredients and 70% of medicines used on the continent are sourced from abroad. This dependency exposes countries to supply disruptions, delays, and increased costs, particularly during global crises.

To strengthen regional manufacturing of diagnostics and medicines in Africa, in July 2025, Unitaid launched a foundational investment of nearly US$50 million. These investments aim to support African countries to increase their capacity to produce essential medical tests and treatments locally, reducing reliance on imported health products.

Unitaid's investment strives to address these vulnerabilities by strengthening regional manufacturing capacity across initial priority health areas including HIV, malaria, and maternal health. The initiative supports production across the value chain from key input materials including active pharmaceutical ingredients to finished medicines and diagnostic tests, with the objective of strengthening equitable access to quality-assured health products and enhancing long-term health system resilience.

The investment consists of two flagship programmes:

- **Manufacturing to Accelerate Diagnostic Excellence (MADE) in Africa**, led by PATH, which supports African manufacturers to develop and scale high-quality diagnostic tests, improve access to key input materials, and strengthen their participation in regional and global markets.
- **Medicines Supply Resilience (MedSuRe) Africa**, led by the United States Pharmacopeia (USP), which supports African manufacturers to produce essential medicines and active pharmaceutical ingredients, strengthen quality and regulatory systems, and expand regional bioequivalence testing capacity. Complementary activities are supported through the Medicines Patent Pool.

Both programmes are implemented in partnership with governments, Regional Economic Communities, alongside collaboration with continental and global health institutions including Africa CDC, the African Medicines Agency (AMA), AUDA-NEPAD, WHO, development finance institutions, and civil society organisations.

These investments are structured to deliver:

- Development, quality assurance and market entry of at least 15 quality-assured products across malaria, HIV and maternal health.
- Strengthened manufacturing practices across key product platforms, including active pharmaceutical ingredients (APIs) and injectables.
- Improved strategic sourcing of inputs and raw materials to enhance quality and cost-competitiveness.
- Blended financing solutions in partnership with development finance institutions to crowd in additional capital.
- Expanded regional capacity to undertake bioequivalence and bioavailability testing.
- Strengthened preparedness and manufacturer commitment to respond to future health emergencies.
- Climate-smart regional manufacturing through lower-carbon and more resilient production systems.

Together, these investments contribute to a broader vision of strengthening regional manufacturing ecosystems, enhancing pandemic preparedness, promoting climate-conscious production, and ensuring that access to essential health technologies is faster, fairer, and closer to home.

Unitaid recognises that communities and civil society organisations (CSOs) are essential partners in advancing equitable, people centred health innovation. Communities bring lived experience, contextual knowledge, and leadership that help ensure health innovations are relevant, accessible, acceptable, and responsive to the needs of those most affected by diseases and health system barriers.

Meaningful Community and Civil Society Engagement (CCSE) is therefore a core principle of Unitaid's work. It strengthens the quality, impact, and sustainability of investments by ensuring accountability to the people Unitaid aims to serve.

2. Purpose of this Expression of Interest

Unitaid is inviting Expressions of Interest from community and civil society representatives to serve on the Regional Manufacturing for Equitable Access (RMEA) Portfolio Advisory Committee (PAC).

The RMEA PAC serves as an advisory body providing strategic, technical and contextual guidance to the RMEA portfolio, including perspectives from affected communities and civil society organisations. Its role is to ensure that investments are coherent, impactful

and aligned with national, regional and continental priorities, while supporting equity and stakeholder engagement.

The PAC does not have decision-making authority over funding or grant management matters, which remain the responsibility of Unitaid and grant recipients.

The detailed mandate, composition, functions, meeting modalities, reporting arrangements and expected time commitment of the RMEA PAC are set out in the attached Terms of Reference, which should be reviewed prior to submitting an application under this EOI.

The first meeting of the Portfolio Advisory Committee (PAC) is planned for May 2026. PAC members are expected to participate in approximately two meetings per year, typically one in-person meeting and one virtual meeting. Engagement is anticipated to continue for the duration of the current project period, running until June 2029.

This EOI is open to community and civil society organisations seeking to nominate representatives to serve on the RMEA PAC. Four representatives will be selected, specifically, two representatives from community organisations and two representatives from civil society organisations. A separate Expression of Interest is being launched for membership in the Community of Informed Partners (CIP), a broader non-decision-making platform that supports inclusive dialogue, coordination and information sharing across stakeholders in the regional manufacturing ecosystem.

The four selected community and civil society representatives will serve on the PAC and contribute constituency perspectives to its deliberations. They will also support structured information exchange between the PAC and the CIP, helping to channel stakeholder inputs, alongside implementing partners, into PAC discussions and ensure that feedback flows back to the wider ecosystem.

Applicants to this EOI who meet the eligibility requirements for CIP membership will also be invited to join the CIP, regardless of the outcome of the PAC selection process.

Participation in both bodies is voluntary and non-remunerated. Where in person meetings are convened, reasonable and accessible support will be provided to enable the full and equitable participation of community and civil society representatives, in accordance with applicable policies.

3. Eligibility Criteria

Unitaid values inclusive participation. The composition of the PAC will aim to reflect diversity across gender, geography, institutional affiliation, and stakeholder perspectives.

Applicants must meet the following criteria:

a. **Affiliation and Representation**
   - Be affiliated with, or formally represent, a civil society or community organisation, network, or coalition engaged in health, access to medicines or diagnostics which align with Unitaid's programmatic priorities, regional manufacturing, or health systems strengthening.
   - Demonstrate the ability to represent and articulate constituency perspectives.
   - Demonstrate commitment to inclusive, ethical, and meaningful engagement practices.

b. **Relevant Experience**
   - Demonstrate experience related to equitable access to health products and a strong understanding of regional manufacturing dynamics in Africa.
   - Experience engaging in policy dialogue, advisory platforms, or multi stakeholder forums at national, regional or continental level.

c. **Availability and Compliance**
   - Be available to participate in two PAC meetings per year, including at least one in person meeting, and commit time for preparation and document review.
   - Be willing to comply with confidentiality requirements under Chatham House Rules and complete required declarations of interest.

4. Application and Selection Process

4.1. Application

Individuals whose expertise, profile and availability align with the requirements outlined in the attached Terms of Reference are invited to complete the online application form, which includes initial screening questions and requires the upload of a CV (maximum two pages) highlighting relevant experience and organisational affiliation.

The application form can be accessed here:
Expression of Interest: RMEA Portfolio Advisory Committee (PAC) – Fill out form

The deadline for submission of expressions of interest is 6 April 2026.
Late submissions will not be considered.

4.2. Selection

Applications will be reviewed by a selection panel comprising representatives from Unitaid and implementing partners. Shortlisted candidates may be invited for a brief follow up discussion, if required.

Final selection of the four community and civil society representatives will be confirmed by the PAC Co Chairs and communicated by 14 April 2026.

5. Timeline

- **Launch of EOI:** 16 March 2026
- **Deadline for submission:** 6 April 2026
- **Review period:** 7 –13 April 2026
- **Notification of outcomes:** 14 April 2026
- **First PAC meeting:** 22 May 2026 (TBC), Geneva

Terms of Reference (TOR):

Regional Manufacturing for Equitable Access (RMEA) Portfolio Advisory Committee (PAC)

1. Purpose of the RMEA Portfolio Advisory Committee

The RMEA Portfolio aims to strengthen regional manufacturing capacity and ecosystems in low- and middle-income countries (LMICs), with a focus on equitable access to quality-assured health products. In July 2025, Unitaid launched the first wave of investments. As part of this effort, a Portfolio Advisory Committee (PAC) is being established to provide strategic, technical, and contextual guidance, ensuring that Unitaid-funded RMEA investments are impactful, coherent, and aligned with stakeholder priorities.

While the RMEA PAC may provide important technical insights, its role is advisory and will include sharing information and providing advice, feedback, and recommendations related to RMEA. Each Unitaid-funded grant recipient is encouraged to engage in the RMEA PAC (and action recommendations arising from it, where relevant), but ultimately remains responsible for managing their programme of work with the respective approved scope, budget, and terms of the respective grant/award agreements, and in line with each institution's established governance structures and program management processes. The RMEA PAC does not have decision-making authority over funding, grant management, or contractual matters, which remain the responsibility of Unitaid.

The scope of the RMEA PAC will initially be limited to grants in Unitaid's first wave of RMEA investments, being Medical Supply Resilience Africa (MedSuRe) implemented by USP and Manufacturing to Accelerate Diagnostic Excellence (MADE) implemented by PATH. The scope and composition of the RMEA PAC may be reviewed, expanded or adjusted as the RMEA portfolio evolves.

2. Functions

The RMEA PAC will function as an advisory body during the RMEA portfolio duration, which currently runs until June 2029, focusing on:

- Strategic guidance on the RMEA portfolio.
- Ensure alignment with and across national, regional, and continental priorities in manufacturing and access.
- Support coherence across the Unitaid grants portfolio, as well as other relevant government and partner initiatives.
- Provide insights to inform course correction, scale-up, or risk mitigation.

- Provide advice on leveraging partnerships, financing, and policy engagement to maximize the impact of the investment from Unitaid and other relevant stakeholders.
- Provide advice and recommendations related to support provided to manufacturers of health products under the RMEA investments including:
    - design and implementation of support.
    - equitable access and commercialisation strategies for the Focus Products (noting that any final decisions and approvals relating to the use of grant funding will be made by Unitaid in accordance with the terms of the Grant Agreement with the relevant grant recipient).

The PAC will engage in the following activities:

- Review and advise on the RMEA portfolio implementation approach and progress.
- Provide inputs on operational bottlenecks, and technical alignment.
- Advise opportunities for leveraging financing, partnerships, and policy engagement.
- Recommend actions to strengthen impact, equity, sustainability, scale-up, and regional coordination.
- Support engagement with governments, regional and continental institutions, the private sector, and community stakeholders.
- Meet twice a year.

Note that (a) routine performance monitoring of grants and (b) objective technical appraisal of grant progress is beyond the scope of the RMEA PAC.

- For the former, this will be tracked through the formal legal agreements already signed between Unitaid and grant recipients, independent from partners' engagement through the RMEA PAC.
- For the latter, grant recipients will manage activities directly per their respective governance structures (for example, through project-specific expert advisory groups/networks). In that context, grant recipients retain full discretion to bring related discussions to the RMEA PAC only if/when the recipient determines that such engagement is appropriate.

The RMEA PAC operates alongside other engagement or technical bodies established under the RMEA portfolio, including the Community of Informed partners (CIP), with complementary and distinct roles.

3. Membership

The RMEA PAC will comprise Co-chairs and Standing Members as detailed in Table 1 below.

Table 1. RMEA PAC membership composition

Category	Composition	Role
Co-chairs of PAC	• One representative from Unitaid and • USP and PATH	Responsible for facilitating RMEA PAC communications and for the reporting requirements outlined in section 4.
Standing members (Grant recipient organisations) (One to two representatives per project/organisation[1])	• United States Pharmacopeia (USP), • PATH, • Africa Centres for Disease Control and Prevention (Africa CDC) • African Union Development Agency-NEPAD (AUDA-NEPAD) • World Health Organisation (WHO) • African Medicines Agency	Responsible for sharing the programmatic context critical to supporting the RMEA PAC in developing their recommendations.
Standing members (Non-grant recipients)	• 2 Community representatives • 2 Civil society representatives	Responsible for sharing the perspectives of the constituency they represent.
Co-financing partnerships	• 3 Financing institution representatives • German Agency for International Cooperation (GIZ)	Responsible for sharing the perspectives of the constituency they represent.

Representatives of each organisation will be confirmed via written nomination from their respective organisation, with final approval by the PAC Co-Chairs, subject to the signing of required NDAs and declarations of interest. Membership will be reviewed prior to each PAC meeting to ensure relevance and participation.

Standing members membership is permanent; however, participants may change for each meeting depending on the needs.

[1] Except in the case of WHO, whereby the number of representatives associated with RPQ and WHO Enabler grants may be defined according to the RMEA PAC meeting agenda

Civil society and community representatives will be selected through a public Expression of Interest process, with selection based on current affiliations and demonstrated work relevant to regional manufacturing and the objectives of the RMEA portfolio.

4. Meetings and Operations

Bi-annual meetings, the PAC will meet twice annually, at least once in-person:

- 1 in-person 1-day meeting per year, preferably on the margins of another larger meeting.
- 1 online meeting per year held over 2 days of 3 hours each.

Unitaid and the Grant Recipients will convene the PAC meetings collaboratively. A meeting of the PAC will be considered quorate if both of the following criteria are met:

- At least one representative from Unitaid, PATH and USP are present.
- At least three members of the standing member organisations are present.

4.1. Reporting & Communications

USP and PATH will provide secretariat services for the PAC on a rotating basis. USP and PATH will take turns scheduling meetings based on members' availability, providing an agenda, and preparing a Note for Record summarizing the key points raised and any decisions taken during the meeting.

Beyond the bi-annual meetings, specific e-mail correspondence or ad hoc teleconferences may be required to advise or follow up on specific issues.

The anticipated time commitment for participating in PAC activities (meetings, calls, and reviewing related documents) is up to 10 working days over a year.

4.2. Confidentiality

Meeting will be under Chatham House Rules.

5. Resources

All resources required to carry out the activities of the PAC should be budgeted for within MedSuRe and MADE programs.

Procurement of services to support the RMEA PAC functions must be conducted in accordance with Unitaid's rules and regulations.

6. Wider Stakeholder Engagement

Wider stakeholder network representatives and/or subject matter experts may be invited to present, participate, or observe RMEA PAC sessions, as relevant to meeting-specific agenda. Such individuals may include:

- Representatives/advocates per disease-affected community
- Technical experts (e.g. disease-specific, clinical trials, CMC, intellectual property, advocacy)
- Regulatory agencies
- (Other) donor agencies and financing institutions
- Country representatives (e.g., MoH representative from a project country, others)
- Regional or Continental Institutions (e.g., African Continental Free Trade Area "AFCFTA", East African Community representatives, etc.)

The RMEA PAC may convene sub-groups and/or special ad hoc meetings, if necessary, to either provide a forum for further discussions on topics that cannot be adequately addressed during RMEA PAC meetings, or to support Unitaid and partners in addressing key topics in between/alongside RMEA PAC meetings

7. Review and Evolution

The Terms of Reference for the PAC will be reviewed annually in consultation with participants and updated as needed to reflect evolving priorities, participation needs, and feedback from stakeholders.