



INDIVIDUAL CONSULTANT PROCUREMENT NOTICE

Date: 04 October 2016

Country: Republic of Moldova

Description of the assignment: National Short Term Consultant or a team of two Consultants to support prison system from the left bank to efficiently implement HIV/AIDS prevention, treatment and care services in prisons

Project name: Human Right in Transnistria, 3rd component of the project referring: Improving prevention, treatment and care services for PLHIV, PWIDs and people in prisons HIV/AIDS in Transnistria region, implemented with the support of the Swedish Government.

Period of assignment/services: 1st of November – 12th December 2016

Proposals should be submitted online by [pressing "Apply online" link by](#) , no later than **October 18, 2016.**

Any request for clarification must be sent by standard electronic communication to the following e-mail: veaceslav.paladi@undp.org. UNDP/UNODC will respond by standard electronic mail and will send copies of the response, including an explanation of the query without identifying the source of inquiry, to all consultants.

1. BACKGROUND

Eastern Europe and Central Asia is the only region where HIV prevalence clearly remains on the rise. The HIV epidemic that is mainly IDU-driven poses one of the most formidable challenges to the development, progress and stability of the countries of the region. Republic of Moldova is experiencing a concentrated HIV epidemic in the European region and the Commonwealth of Independent States, and requires a long-term, sustained national response. The epidemic is likely to cause significant damage to public health in Moldova, and may continue to expand in the absence of well-designed and managed HIV/AIDS services targeted to most-at-risk populations (MARPs).

In February 2013, Thomas Hammarberg, Senior UN expert on Human Rights, produced a report including 38 recommendationsⁱ, based on four missions to the Transnistrian region. Authorities from Tiraspol undertook this as an internal exercise across departments, which resulted in a plan requiring investments. Gradually, greater understanding was being built on what the human-rights based approach entails, as requests for support from the region are increasingly about accessing knowledge and experiences. During the assessment mission Senior UN expert in Human Right has also paid visits to TN prisons and concluded that tuberculosis (TB) and HIV infection situation is of grave concern and health care services in prisons must be improved.

There are 4 penitentiary institutions on the left bank, an educational institution for juvenile convicts in Camenca, penitentiary colonies for male convicts in both Glinnoe (prison no. 1) and Tiraspol (prison no. 2), another penitentiary institution in Tiraspol (no. 3) which holds (in separate sections) male convicts; female convicts and detainees held on remand. There is no official statistics with regards to the number of inmates detained in Transnistrian prisons. According to Hammarberg's report, as of October 1, 2013, 2 858 inmates in these institutions, of whom 2 224 were convicted and 634 held on remand. This means that incarceration rate is almost 500 prisoners per every 100 000 persons, one of the highest figures in Europe. The number had gone down during 2012 from an even higher figure as a consequence of releases through reduction of sentences and pardons granted to a considerable number of prisoners. Furthermore, Hammarberg's report, provide that there is limited communication with the civilian health system, which results in low coverage with testing and treatment. New TB infections were registered in prisons. Inmates are kept isolated from other prisoners but not separated from one another only cases with (MDR) infection are kept separately. TB may spread in society through infected ex-prisoners whose treatment programme remains unfinished.

Another major health problem in the prisons is HIV/AIDS. Antiretroviral treatment (ARV) is available in prisons, including in remand facilities. Access to ARV and treatment of opportunistic infections is contingent on people disclosing their HIV status. This requires the possibility of confidential and voluntary testing for HIV, also in prisons. Few human resources and limited capacities of existing medical personnel create barriers to enjoying access to quality medical services in penitentiaries. UNAIDS has noted that cooperation between the prison administration and the Tiraspol TB Institute and the Transnistrian Ministry of Health is limited. The consequence is substandard treatment and care while in prisons and poor referrals upon release.

There are a number of international standards, including the United Nations Standard Minimum Rules for the Administration of Juvenile, the Beijing Rules, and the Bangkok Rules, the Nelson Mandela Rules, standards and guidelines which could be of help when establishing a proper system. Health care must be improved and the competence of the Transnistrian Ministry of Health be better utilized in such efforts. A more systematic approach should be developed to prepare inmates for a life in society after release. This, in turn, speaks for another approach to the right of the prisoners to keep in regular contact with family members while in custody. Inhuman disciplinary measures should be abolished and staff recruited and trained to cope with the daily problems with dignity and fairness.

The project addresses programmatic aspects and capacity building needs of partners with the ultimate aim to improve availability, coverage and quality of HIV services for people who inject drugs and prisoners. The offered technical assistance shall contribute to improved policy and normative environment that protects the human rights and facilitates accessibility of evidence informed comprehensive HIV prevention, treatment, care and support services for IDUs and in prison settings. The assessment and follow up revision activities will be conducted under the 3rd component of the project referring: Improving prevention, treatment and care services for PLHIV, PWIDs and people in prisons HIV/AIDS in Transnistrian region. Such an analysis of the existent services and needs in prisons will be the stepping stone in further development of the action plan and adjustment of policies and the normative framework and guiding principles. The contracted consultant will assess the current situation of HIV services provision in TN prisons following the introduction of UNODC, ILO, UNDP, WHO and UNAIDS with regards to the Comprehensive package of service to HIV prevention in prisons, making use in the same time of the UN Standard Minimum Rules for the Treatment of Prisoners, Mandela Rules, 2015 and UN Human Right framework.

In 2015, following the recommendation provide by Thomas Hammarberg, Swedish Government has provided financial support in piloting a project on HIV and Human Right in TN. The project that is currently

implemented by UNODC, UNAIDS, OHCHR and UNDP has entered into the 2nd phase. The national consultant, to be recruited, will have two main responsibilities: (1) assist the international consultant who will undertake a mission to Transnistrian prisons, in collecting information, organizing the mission and reporting. (2) furthermore, based on the recommendations provided in the report, the national consultant will revise and update the current sectorial HIV/AIDS frameworks and other activities related to the implementation of the evidence based intervention related to the comprehensive HIV services in prisons.

2. SCOPE OF WORK, RESPONSIBILITIES AND DESCRIPTION OF THE PROPOSED ANALYTICAL WORK

MAIN OBJECTIVES OF THE ASSIGNMENT

UNODC seeks a contract a national consultant to support the prison and justice authorities from the left bank in assessing the existing services and implementing international recommendations on the HIV comprehensive package of services in prisons. The consultant is expected to provide full support and guidance to the international consult which will be recruited to conduct assessment of HIV services in prisons on the left bank.

For detailed information, please refer to Annex 1 – Terms of Reference.

3. REQUIREMENTS FOR EXPERIENCE AND QUALIFICATIONS

I. Academic Qualifications:

- University Degree in Law, Public Health, Public Administration or related field; Advanced university degree is an asset;

II. Years of experience:

- At least five years of work experience within or tangential collaboration with penitentiary system;

III. Competencies:

- Research or work experience on Justice system issues of Moldova including left bank;
- Experience in working in the national justice sector, including proven knowledge of recent developments and proposed sector reforms;
- Experience in research of theories, concepts and approaches relevant to HIV prevention, including among injection drug users and in prison settings;
- Experience in the field of HIV and harm reduction services provision;
- Previous experience in applying analytical skills and ability to work under tight deadlines;
- Being able to work independently, objectively as well as within a team, and take initiative;
- Fluency in Romanian and Russian languages. English shall constitute an advantage.

DOCUMENTS TO BE INCLUDED WHEN SUBMITTING THE PROPOSALS

Interested individual consultants must submit the following documents/information to demonstrate their qualifications:

1. Proposal explaining why they are the most suitable for the work;
2. Financial proposal;
3. Personal CV including past experience in similar projects and at least 3 references or the dully filled Personal History Form (P11).

5. FINANCIAL PROPOSAL

The financial proposal shall specify a total lump sum amount, and payment terms around specific and measurable (qualitative and quantitative) deliverables (i.e. whether payments fall in installments or upon completion of the entire contract). Payments are based upon output, i.e. upon delivery of the services specified in the TOR. In order to assist the requesting unit in the comparison of financial proposals, the financial proposal will include a breakdown of this lump sum amount (including travel, per diems, and number of anticipated working days).

All envisaged travel costs must be included in the financial proposal. This includes all travel to join duty station/repatriation travel. In general, UNDP should not accept travel costs exceeding those of an economy class ticket. Should the IC wish to travel on a higher class he/she should do so using their own resources.

In the case of unforeseeable travel, payment of travel costs including tickets, lodging and terminal expenses should be agreed upon, between the respective business unit and Individual Consultant, prior to travel and will be reimbursed.

6. EVALUATION

Initially, individual consultants will be short-listed based on the following minimum qualification criteria:

- University Degree in Law, Public Health, Public Administration or related field;
- At least five years of work experience within or tangential collaboration with penitentiary system.

The short-listed individual consultants will be further evaluated based on the following methodology:

Cumulative analysis

The award of the contract shall be made to the individual consultant whose offer has been evaluated and determined as:

- a) responsive/compliant/acceptable, and
- b) having received the highest score out of a pre-determined set of weighted technical and financial criteria specific to the solicitation.

* Technical Criteria weight – 60% (300 pts);

* Financial Criteria weight – 40% (200 pts).

Only candidates obtaining a minimum of 210 points would be considered for the Financial Evaluation.

	Criteria	Scoring	Maximum Points Obtainable
1.	University Degree in Law, Public Health, Public Administration or related field.	(University Degree – 10 pts, Master degree – 20, PhD - 30)	30
2.	At least five years of work experience within or tangential collaboration with penitentiary system.	(5 years – up to 40 pts, more than 5 years – up to 50 pts)	50
3.	Working or research experience in Moldova justice system issues, including the Left Bank.	(no – 0, each year of such experience – 10 pts yes - up to 50)	50
4.	Experience in working in the national justice sector, including proven knowledge of recent developments and proposed sector reforms.	(no – 0, each year of such experience – 10 pts, -up to 60)	60

5.	Experience in research of theories, concepts and approaches relevant to HIV prevention, including among injection drug users and in prison settings.	(no – 0, each year of such experience – 10 pts, up to 50)	50
6.	Experience in the field of HIV and harm reduction services provision	(no – 0, each year of such experience– 5 pts, up to 25 pts.)	25
7.	Previous experience in applying analytical skills and ability to work under tight deadlines	(no – 0, yes – 15 pts.)	15
8.	Knowledge of fluent Romanian and Russian languages. English shall constitute an advantage	(Romanian – 10 pts, Russian - 10 pts)	20
Maximum Total Technical Scoring			300

Financial

Evaluation of submitted financial offers will be done based on the following formula: $S = F_{min} / F * 200$

S – score received on financial evaluation;

F_{min} – the lowest financial offer out of all the submitted offers qualified over the technical evaluation round;

F – financial offer under consideration.

Winning candidate

The winning candidate will be the candidate, who has accumulated the highest aggregated score (technical scoring + financial scoring).

ANNEXES:

ANNEX 1 – TERMS OF REFERENCES (TOR)

ANNEX 2 – INDIVIDUAL CONSULTANT GENERAL TERMS AND CONDITIONS

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http://md.one.un.org/content/dam/unct/moldova/docs/pub/Senior_Expert_Hammarberg_Report_TN_Human_Rights.pdf