



TERMS OF REFERENCES

Job title: National consultant to revise the data collection methodology and statistical

toolkit in the field of disability statistics

Potential Applicants: Specialists in health with knowledge/experience of statistics

Application Deadline: November 11, 2012

Duration of Assignment: 45 full working days, during November 2012 - February 2013

Reference to Project: UN Joint Project on Strengthening the National Statistical System,

Participating agencies UNDP, UN Women, UNICEF

Project Activity: Activity 4: Strengthening of administrative data collection processes

Contract type: Individual Contract

Beneficiaries and Government of the Republic of Moldova, Ministry of Labour, Social Protection and partners: Family, National Council of Medical Expertise on Vitality, National Center for Health

Family, National Council of Medical Expertise on Vitality, National Center for Health Management, National Bureau of Statistics, Ministry of Education, general population

BACKGROUND

Joint UN Project on Strengthening the National Statistical System of RM (Statistics Project) is currently implemented by the UNDP, UN Women, UNICEF, UNFPA and ILO, in partnership with the National Bureau of Statistics (NBS) and aims at improving data production, dissemination and use of statistical information with particular attention to national needs and overall conformity of official statistics with international standards. One of the Statistics Project's intended results is the **improved capacity** of the National Bureau of Statistics and other line ministries, involved in production of information (through administrative reporting system, surveys and censuses) **to produce**, in a timely manner, **data** of appropriate quality being multi-dimensionally disaggregated. The second expected result would be the **improved use of** available disaggregated **statistics** by different categories of data users, in particular for evidence-based monitoring of policies, development strategies, programmes, necessary to analyze and monitor such phenomena as poverty, social exclusion, gender equality, etc.

Moldova's ratification of the European Social Charter¹ and UN Convention on the Rights of Persons with Disabilities² represents a step towards the alignment of the national legal framework to the European standards and imposes a series of measures which the state has to undertake in order to respect and guarantee the social rights of the population and the persons with disabilities in particular.

To achieve this goal and aiming at improving the living conditions and promotion of the social welfare of the disabled persons in particular, the medium-term national *Strategy on Social Inclusion of Disabled People*³ has been approved in 2010 with the actions compliant with the policy framework of the UE⁴, as well as the *Law of Social Inclusion of Persons with Disabilities*⁵.

Qualitative and timely statistical data represents an indispensable input for the decision-making process and continuous monitoring of achievements. The role of the national data producers becomes increasingly important for the implementation of national development strategies & programs, given their duties and responsibilities to measure the impact of the major challenges that are affecting the Moldovan society and to support the efforts of policy makers to adopt relevant and pertinent decisions, based on knowledge and using the available statistics.

Context

The new Law of Social Inclusion of Persons with Disabilities aims at establishing guarantees, secure/protect and promote the rights of disabled people, being focused on active participation of disabled people in community life,

http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=344149

¹ European Social Charter (revised), CETS No.: 163, http://conventions.coe.int/Treaty/Commun/QueVoulezVous.asp?NT=163&CL=ENG

² Law no. 166 as of 09.07.2010 on ratification by the Republic of Moldova of the UN Convention on the Rights of Persons with Disabilities, http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=335376

³ Strategy on Social Inclusion of Disabled People for the period of 2010–2013. Approved by the Law no. 169 as of 09.07.2010, http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=336276

⁴Recommendation Rec(2006)5 of the Committee of Ministers to member states on the Council of Europe Action Plan to promote the rights and full participation of people with disabilities in society: improving the quality of life of people with disabilities in Europe 2006-2015, dopted by the Committee of Ministers on 5 April 2006

at the 961st meting of the Ministers' Deputies, https://wcd.coe.int/ViewDoc.jsp?id=986865

⁵Law no. 169 as of 30.03.2012 on Social Inclusion of Persons with Disabilities,

increase in their employment and stimulation of their participation at the labour market. The Government is responsible for elaboration of national policies on prevention and treatment of disabilities, rehabilitation, reasonable adaptation and social inclusion of people with disabilities, following their rights and obligations.

Under Chapter II of the respective Law, the National Council of Medical Expertise on Vitality (NCMEV), the body assigned with the tasks to determine the disability level and work capacity of people, elaboration of the individual rehabilitation and social inclusion plans, but also to ensure the electronic and paper-based recording/registration of expertized persons, should follow the new procedures on disability determination. According to the new approach, different from the previous system being based on medical factors which was not favorable for (re)integration of disabled people into society and their employment on the labour market, the disability will be determined on the basis of medical, psycho-pedagogical, habitual, professional and other social factors. Thus, disability levels/grades will be replaced by the severe, accentuated and average disability terms. In order to respond to the Law's purpose, the examined persons will be also provided recommendations regarding their professional guidance and training, medical and professional rehabilitation.

To facilitate the adjustments to the European and international standards in the field of social protection of disabled people it becomes significantly important to produce and use the relevant evidences which would reflect the new vision on disability in Moldova. Along with the legal framework harmonization, the adjustment of the data collection systems is a mandatory phase aimed to enable decision-makers to formulate and implement policies to give effect to ratified Conventions and implement the agreed upon standards.

Given the above context, the need has occurred to adjust the existing statistical tools on disability of the Republic of Moldova in compliance with the European and international standards in this area of statistics and responding to the new concept and vision on disability recently introduced in Moldova on legal basis. Such improvements will help the policy-makers and the state overall to comply with the stipulations of Article 13 on "Statistics and data collection" of the UN Convention on the Rights of Persons with Disabilities and to make available sufficient information needed for the planning and monitoring purpose.

Thus, the Republic of Moldova would undertake actions to collect appropriate statistical information, multidimensionally disaggregated as appropriate, and use it to identify & address the barriers faced by persons with disabilities in exercising their rights, as well as to support the evidence-based process of monitoring and evaluation of Government's policies and the impact of undertaken actions/ measures on the life of the targeted group of population – people with disabilities, including adults and children.

Current situation on data collection related to disabilities

In Moldova the statistical data on health, including disabilities, is produced by the Ministry of Health, through its specialized institution — the National Center for Health Management (NCHM) — which has the necessary infrastructure to centralize the key data on health using an integral system on data collection and processing of primary data. The health statistics complies with the international standards, in particular those defined by the World Health Organization.

Besides the own data, the Ministry of Health is gathering data from other administrative sources. Such a source is available in the case of disability statistics represented by the National Council of Medical Expertise on Vitality and its territorial units which are reporting to the NBS and the Ministry of Health on regular basis. Currently, there are a few annual statistical questionnaires used to produce disability statistics:

Questionnaire / report	Presented by	Key statistical indicators
No.27 "Primary council of medical expertise on vitality"	territorial councils of medical expertise on vitality and the National Council of Medical Expertise on Vitality	No & type of primary medical expertise No of new cases of disability, by diseases, disability grade, age, sex, rural/urban
No.28 "National council of medical expertise on vitality"	National Council of Medical Expertise on Vitality	 No of re-examined cases, by disability grades, as a result of control or complain No of cases accepted as disability, by disability grades, as a result of control or complain No of staff of the institution, by specialization
No.46 "Health services for children with disabilities"	Municipal/raion-al medical- sanitary institutions which hospitalize disabled children and medical institution of other ministries	 No of children of 0-17 years recognized as disabled for the first time, by diseases, disability grades No of disabled children of 0-17 years who received recovering treatment during the year, by diseases No of disabled children of 0-17 years taken under supervision, by diseases, age (0-6+11m & 7-17+11m y.o.), disability grades No of people under supervision who needed and who were provided support, by type of support

The statistical surveys in the field of health cover all legal entities, regardless of their ownership, which according to the Classification of Economic Activities of Moldova (CAEM) are performing the activity under code 85 "Health and social assistance".

For the purpose of international statistics, on annual basis, the Republic of Moldova is also providing data on disability at the request of CIS under questionnaire "19.3 Traumatism in production and primary disability".

Based on the above mentioned, it is extremely important to undertake the next step and to revise the data collection methodology and toolkit in the field of disability, related national concepts and definitions and their harmonization with the international standards and European norms.

Within the described context, UNDP is to provide the necessary support and to strengthen national capacities to improve the availability, reliability and quality of produced statistical information and contribute to the enhancement of statistical data use for official monitoring and evaluation of strategic (national and sectorial) documents' implementation focused on people with disabilities.

SCOPE OF WORK AND EXPECTED OUTPUTS

The scope of work of the national consultant is to revise the statistical data collection toolkit (including concepts, definitions, classifications, methodology, questionnaires, instructions) in the field of disabilities in compliance with the national legal and policy framework and applicable international standards and European norms.

Specific objectives

The specific objective of the assignment is to provide national stakeholders with an improved statistical instrument (including data collection methodology, questionnaires and corresponding filling-in instructions) required to pilot the new *bio-psycho-social concept* on disability recently introduced in Moldova which would respond to the data needs of the internal users and policy-makers in particular, and which would comply with the WHO, UN, EU standards and best practices in the respective field.

Updated statistical tools of recording and reporting information on disabilities of adults and children that will be used for production of basic indicators needed to implement the Government's objectives and to monitor the social protection reform and implement policies and programs of prevention, treatment, rehabilitation, accommodation and social inclusion of people with disabilities.

Respectively, the *final objective* would be to establish the appropriate prerequisites for NCMEV to complete the transition to the new methodology of determination of disability, and, respectively, to the revised data collection, which will provide timely and accurate records on the situation of persons with disabilities and allow the development of an efficient data production system.

Note: Gender and age are the key dimensions of all statistics on individuals, in particular health related statistics is the one that includes the individuals' data. Therefore, the tasks envisaged under the present assignment will include the gender and age perspectives at the extent possible and will, thus, contribute to mainstreaming of these two dimensions into this area of statistics.

National stakeholders to benefit of the results of the given assignment include: National Council of Medical Expertise on Vitality, Ministry of Labour, Social Protection and Family, Ministry of Health, National Center for Health Management, NBS, Ministry of Education, others.

The consultancy will be based on the knowledge and experience of the selected consultant, including legislation, policy and regulatory framework, practical application and use of disability statistics. On behalf of National Council of Medical Expertise on Vitality, the participation and involvement of the relevant specialists will be ensured.

Activities envisaged under the present task will contribute to the achievement of mid-term priorities of the MLSPF and NCMEV and will be carried out in accordance with the Law of RM on Official Statistics and confidentiality principles to be applied on the process of collecting and maintaining information on people with disabilities stipulated in UN Convention on the Rights of Persons with Disabilities.

Main Tasks and Responsibilities

Under the overall supervision of the UNDP, in partnership with the Project's counterparts, the consultant is expected to perform the following activities:

1. Desk review

- Get acquainted with the results of previous activities undertaken so far by the NCMEV and involved stakeholders in the area of concern for the present assignment in Moldova;
- Analyze international and European standards as regards statistics on disabilities for concrete list of reference please see Annex to ToR;
- Propose own approach for the expected activities and detailed work plan that encompasses the abovementioned objectives and discuss them with Project stakeholders;

2. Review the available statistical questionnaires and methodological notes in the field of disability

- The content of statistical questionnaires on disability thematic no. No.27, 28, 46 (definitions, concepts and its methodological instruction/guidelines), as well as classification of diseases used, will be analysed from the perspective of their relevance, appropriateness and compliance vis-à-vis the new methodology of disability determination (involving percentage scores for the maintained functional capacity), Current needs of the national stakeholders and related regulatory framework:
 - Strategy on Social Inclusion of Disabled People for the period of 2010–2013;
 - Law on Social Inclusion of Persons with Disabilities;
 - Law on ratification by the Republic of Moldova of the UN Convention on the Rights of Persons with Disabilities;
 - Other legislation and policy framework;
- The national definitions and concepts and corresponding classifications will be also subject to review from the perspective of their compliance and harmonisation with internationals standards and norms;
- Consultations with the data providers (who fill in the disability questionnaire) and users of resulted information on disabilities will be undertaken to determine the actual purpose of use of such data, level of satisfaction with it and needs for new improvements and updates. Stakeholders to be consulted in this respect are: Ministry of Labour, Social Protection and Family, National Center for Health Management, Ministry of Health, Ministry of Education, National Bureau of Statistics, councils of national consultants on medical expertise on vitality, public medical institutions others;
- Undertake the analysis of the information flows regarding the 3 questionnaires on the basis of which disability data are collected at present.

3. Develop the new/updated statistical questionnaires on people with disabilities - adults and children

- Develop the updated concepts, notions and definitions used for reporting on disabilities and representing the data source for production of key statistical indicators on disability;
- Update national classifications used for the disabilities statistics;
- Design the methodology, new statistical questionnaires and guiding instructions (in Romanian & Russian) on how they should be filled in by the primary data providers:
 - O Develop the methodological description of the data production on disability, including quality control procedures to be applied during data processing activities;
 - Drafts of revised questionnaires on disability will be drafted for adults and for children;
 - The guidelines will contain more details on methodological aspects and should be written in an easy-touse manner in particular for the respondent-entities which will be filling in the revised forms and other users.
- Carry out the testing of the developed form through its filling in by at least 4 respondent-units at all levels (national and territorial). Testing results will be analyzed, discussed with the NCMEV's staff and designed forms will be adjusted correspondingly with the required changes;
- Consultation of the drafted products with relevant national stakeholders;
- The <u>gender</u> and <u>age</u> perspective should be considered during the revision and update of the statistical questionnaires on disabilities, which will facilitate further breakdown by gender of the respective statistics when new questionnaires are put in practice;
- Additionally, the updated statistical toolkit will be accompanied by the description of the information flow related to the operation of the new questionnaires.

4. Propose formulation of the normative acts necessary to promote and approve the revised statistical toolkit on disabilities

- In addition to the undertaken revision of the statistical toolkit and methodological aspects, the linkage with the appropriate regulatory framework will be described. For this purpose, normative acts for further approval by the Moldovan authorities of the revised and harmonized concepts and toolkit on disabilities will be drafted. It might include (but not be limited to) a joint order/disposition of the MLSPF/NCMEV, MH, NBS on approval of the designed toolkit and application for statistical purpose;
- Consult on the content and structure of future *Certificate for Disability and Function Capacity* and *Individual Rehabilitation Plan* under development by NCMEV.

5. Other activities

- Develop an activity report on consultancy undertaken, including attained outputs, conclusions and next stage recommendations. The desirable content of the report would cover:
 - a) Conclusions and recommendations for future utilization of the developed statistical toolkit by the national stakeholders and involved institutions;
 - b) Recommendations on further improvement of the availability and quality of statistical information measuring the disability status and characteristics of people, their social protection and inclusion.
 - Recommendations could be addressed to different institutions and national counterparts which are responsible for the implementation of social inclusion of people with disabilities in the areas:

- labour, education, health, socio-medical services, social protection, social cohesion and community integration, etc.
- o Recommendations could refer to quality, coverage, disaggregation dimensions (relevant for the target categories of population –sex, age, area, education, etc.), continuity of statistical reporting, comparability within the regions of the country, as well as compliance with international standards:
- c) Gaps in the legislation or policy-making framework related to the disability statistics and recommendations for their improvement aiming to ensure the harmonisation with the international/EU recommendations in the field.

The structure of the report will be in advance agreed with the Project and NCMEV.

The report might also briefly include: stages passed, resources used, results obtained versus expected, impact of obtained results, risks overcome, problems faced, lessons learned, plus documentation related to the developed outputs.

- Present the results of the assignment to the Project's national counterparts;
 - Support the organisation and facilitation of round-table (or practical workshop) with the participation of the social partners (mentioned above under point 2) and NBS aimed to present the undertaken revision process, results achieved and outputs delivered, to gather participants' feedback, as well as to advocate for the subsequent approval of the produced outputs by the competent institutions.

The success of given activity can be ensured only by team work of all partners involved via active participation at all the stages of the assignment and the contracted consultant should play the role of guarantor of these joint effort.

The contracted consultant will ensure a high level of analytical support, efficient communication and cooperation with the Project and national relevant institutions (NCMEV, Ministry of Labour, Social Protection and Family, National Center for Health Management, NBS, etc.) and is expected to perform a team-work together with the specialists of named institutions for the successful fulfilment of the formulated tasks.

DELIVERABLES

Performing the mentioned above activities, the contracted consultant will be responsible for delivering of the following outputs, comprising the main milestones:

Tollowing outputs, comprising the main milestones.			
Deliverable	Tentative timeframe		
1. Working approach and detailed Action Plan including timelines agreed with NCMEV and the Project	In 1 week from contract date		
2. Updated concepts and definitions to be used for the statistical data collection on disability, on the basis of toolkit revision, harmonised with the applicable international standards and European norms	In 2 weeks from contract date		
3. Two statistical toolkits , consisting of (i) methodological notes, (ii) revised questionnaires, (iii) filling-in instructions on: 3.1. Reporting on adult persons with disabilities – at national and territorial levels 3.2. Reporting on children with disabilities – at national and territorial levels	In 8 weeks from contract date		
4. Handouts for public presentation of outputs to the key stakeholders and <i>advices</i> on content of Certificate for Disability and Function Capacity and Individual Rehabilitation Plan	In 1 week from date of deliverable 3		
5. Report on consultancy undertaken, including attained outputs, linkage with the appropriate regulatory framework, conclusions and next stage recommendations, plus draft of normative acts necessary to promote and approve the revised toolkit	In 1 week from date of deliverable 4		

All the deliverables should be agreed with NCMEV, NBS, NCHM and the Project Team and be provided in Romanian, hard and electronic copy. Deliverable 3 should be additionally provided in Russian and deliverable 5 - in English.

Estimated Duration of the Contract

The activities under the present assignment are expected to commence at the **beginning of November 2012** and be fully completed by **end of February 2013**. The volume of consultancy has been estimated at up to **45 working days** overall per whole assignment (full days of 8 hours) during which all the activities and outputs/results envisaged under the present assignment are expected to be performed.

Note: The mentioned number of working days has been estimated as being sufficient/ feasible for the envisaged volume of work to be completed successfully and is proposed as a guideline for the duration of assignment, and it can not be used as criteria for completion of work/assignment. The provision of envisaged deliverables approved by the Project partners and concerned national stakeholders would be the only criteria for the Contractors work being considered completed and eliqible for payment/s.

QUALIFICATIONS AND SKILLS REQUIRED

The consultants are expected to comply with the following qualification criteria:

- Higher education or Masters degree in the area of health management, statistics, social sciences (demography, etc.) and/or other science related to areas of assignment;
- Other formal education relevant for the assignment;

Experience:

- At least 5 years of proved previous working experience consisting of substantial participation in analytical (thematic analysis, assessments, evaluations and/or reviews, etc.) and/or policy advisory works in the social area/s/fields, in particular health, social assistance etc., relevant to the present assignment;
- Proved practical experience of work related to the use of statistical data, evidences and informative materials, as well as related to data collection and/or production;
- Experience of collaboration with Government in area/s relevant for the present assignment;
- Experience in working with **development partners** (in particular UN/UNDP) and nongovernment organizations, in particular in area/s relevant for the present assignment;

Competencies and Skills:

- Excellent analytical, writing and communication skills;
- Good knowledge of the social inclusion/exclusion, cohesion, human rights and gender equality concepts;
- Knowledge and practical experience of work with statistical analysis software (SPSS, STATA) would be an asset:
- Familiarity with the national context (legal and policy framework) related to the areas of assignment concern and international practice;
- Romanian language proficiency; Good skills in oral and written English;
- Ability to analyse, plan, communicate effectively orally and in writing, draft reports, solve problems, organize
 and meet expected results, adapt to different environments (cultural, economic, political and social);

Personal Qualities and other requirements:

- Good interpersonal skills, solid judgment/decision making, initiative and creativity;
- Ability to be independent, impartial and credible in a challenging environment;
- Availability to work with UN and Project's national stakeholders during the indicated/approved period;
- Adherence to UN's values and ethical standards;
- Cultural and gender sensitivity.

Performance Evaluation

Contractor's performance will be evaluated against such criteria as: timeliness, responsibility, initiative, communication, accuracy, and quality of the products delivered.

Travel Requirements

During the contract period no travel is required.

Financial arrangements

Payments will be disbursed in installments upon confirmation of Joint UN Project on Strengthening the National Statistical System on delivering of the contract obligations, services and products in a satisfactory manner.

SUBMISSION OF PROPOSAL

The submission package will consist of:

- 1. Technical Proposal:
 - explaining how applicant responds to each of the qualification requirements and why he/she is the most suitable for the work;
 - describing a short vision on achievement of tasks.
- 2. Personal information (as a detailed CV or as a Personal History Form /P11) including records on past experience in similar projects/assignments and concrete outputs obtained;
- 3. Financial proposal (in USD, specifying a total lump sum amount and the number of anticipated working days).

Annex to Terms of References

List of reference materials relevant for assignment to be consulted and followed:

- 1. United Nations General Assembly. Resolution R 61/106: Convention on the rights of persons with disabilities. Geneva: United Nations General Assembly; 2006
- 2. World Health Assembly. Resolution R 58/23. Disability, including prevention, management and rehabilitation. Geneva: World Health Assembly; 2005
- 3. Convenția ONU privind drepturile persoanelor cu dizabilități ratificată de Parlament la 09 iulie 2010
- 4. Measuring Health and Disability. Manual for WHO Disability Assessment Schedule.WHODAS 2.0 (WHO, 2010)
- 5. WHO (2007). International Classification of Diseases, 10th edition
- 6. WHO (2001). International Classification of Functioning, Disability and Health
- 7. WHO (2007). International Classification of Functioning, Disability and Health. ChildrenandYouthVersion
- 8. Annual 2007, 2008, 2009, 2010, 2011 Social Reports of RM
- 9. GutenbrunnerC,Meyer T, Melvin J, StuckiG.Towards a conseptual description of physical and rehabilitation medicine. JournalofRehabilitationMedicine, No. 9, September, 2011
- 10. Meyer T, Gutenbrunner C, Bickenbach J, CiezaA, Melvin J, StuckiG. Towards a conseptual description of rehabilitation as a health strategy. Journal of Rehabilitation Medicine, No. 9, September, 2011
- 11. Skvarciany Z. Biopsychosocial model application in process of establishing disability, working capacity and special needs.2nd Baltic & North Sea Conference on PRM; Vilnius, September 30, 2011
- 12. Smychek V. The current state of medical and social assessment system in Republic of Belarus. 2nd Baltic&NorthSeaConferenceon PRM; Vilnius, September 30, 2011
- 13. Smychek V. Modern system of medical assessment and rehabilitation in Belarus. 2nd Baltic&NorthSeaConferenceon PRM; Vilnius, September 30, 2011
- 14. 2007, 2008, 2009, 2010, 2011 Social Reports of Republic of Moldova
- 15. Коробов М. Справочник по медико социальной экспертизе и реабилитации, 2005
- 16. Serbin V. Expertizamedicală a vitalității, 2006
- 17. Roadmap development