

**TERMS OF REFERENCE  
FOR SPECIAL SERVICE AGREEMENT**

Post title	Consultant for assessment of technical capacity and organizational structure of self-support groups of people who use drugs in Viet Nam
Agency	United Nations Office on Drugs and Crime (UNODC) Viet Nam Country Office
Project	Drug abuse and HIV/AIDS prevention in Viet Nam – GLOG32FVN
Country of Assignment	Viet Nam
Duration	40 working days from September – November 2012
Application Deadline	19 <sup>th</sup> September 2012

**1) GENERAL BACKGROUND**

Overall, Viet Nam is on track to meet most of the Millennium Development Goals by 2015, except for the goal number 6 of Combat HIV/AIDS, malaria and other diseases which might not be able to achieve by 2015 if the coverage and access to the services haven't been improved, especially towards most-at-risk population including drug users and sex workers.

According to the Ministry of Public Security, by the end of 2011, there were 158,000 people who use drugs registered nationwide, indicating an increase of 8,500 people since 2010. Drug users living in the community account for 62% of the total; 26% are in detoxification centres and 11% in prison or "educational centres". Male users account for 95%, female 5% (2010). Eighty-five per cent (85%) of people who use drugs nationwide is IDUs, which accounts for approximately half of all reported cases of HIV. At present, HIV cases have been reported nationwide in all 63 provinces and cities of Viet Nam. By December 2011, there were 246,035 people living with HIV/AIDS in the country (VAAC). The main transmission mode for the reported HIV cases continues to be blood-born transmission (46.7%), the second risk is sexual transmission (41.4%). Meanwhile, proportion of HIV infection through injecting drugs makes up 41%.

Though people who inject drugs make up a large proportion of all reported cases of HIV in Viet Nam, the involvement and participation of people who inject drugs in the policy development and programmatic aspects of the national HIV response has not been optimal. While people who inject drugs have begun to organise through formation of self-support groups, and at national level, a Viet Nam Network of People who Use Drugs is emerging, there is no database of these emerging self-support groups of people who use drugs in the country. Lack of information about the groups is hampering efforts to coordinate and enhance engagement of representatives of this key affected population in the HIV response.

Yet, there is increasing evidence globally and within the Asia region that the most effective HIV programmes are those that have been designed, implemented and monitored in partnership with of key affected populations. Participation of people who inject drugs in national policy and strategy debates and development is also an important component of the national HIV response.

## **2) OBJECTIVES OF THE ASSIGNMENT**

With the overall goal to guide evidence informed responses that effectively address stigma, discrimination, inequality and inequity and to ensure full engagement and participation of key stakeholders and affected population to support a sustainable HIV response relating to people who use drugs, the contractor will map the situation in Viet Nam with respect to self-support groups of people who use drug and their network and its potential contribution to HIV responses. The consultancy will identify challenges and opportunities for the development of meaningful, coordinated and effective participation of members of the affected population, men and women who inject drugs, in the planning, implementation, monitoring and evaluation of a gender-sensitive, human-rights-based and sustainable responses to HIV in Vietnam. Involvement of affected population by drug use in the intervention programme is expected to speed up progress towards achieving optimal programmatic coverage through harnessing uptake of HIV prevention, treatment and care services.

The deliverables of this consultancy will provide an evidence-based informed programme advice to relevant stakeholders and counterparts on technical and organizational capacity of groups of people who use drugs. Based on that to identify suitable intervention and provide evidence for policy development.

## **3) SCOPE OF WORK**

Under the supervision of UNODC Regional HIV Advisor and National HIV Programme Officer and in consultation with relevant UN staff in Viet Nam, the consultant will:

1. Prepare a detailed work plan for carrying out the assignment.
2. Map the geographical presence, technical and organizational capacity of and the connections, if any, among groups of people who use drugs, including self-support groups and other emerging networks of people who use drugs
3. Identify similarities and variations of these groups in terms of size, membership, group activities, development tendency, and future plan
4. Identify their needs for sustainable development
5. Identify government authorities (provincial levels downwards)'s experience, approach and perspectives on the role of the affected drug user population in relation to effective HIV programmes
6. Act as facilitator at workshops to disseminate results of the assessment

## **4) DURATION OF ASSIGNMENT, DUTY STATION AND EXPECTED PLACES OF TRAVEL**

The duration of the assignment will be 40 (forty) working days including travel days to provinces. The assignment is expected to start on 24<sup>th</sup> September 2012 and to finish on 30 November 2012.

Per diem and transport costs will be covered additionally for required travel missions, depending on the location of the mission, according to the rate stipulated in UN-EU Cost Norms.

## **5) FINAL PRODUCTS\*\*\***

The final product will take the form of a report summarizing presence, connections, capacity, features and needs of people who use drugs, including self-support groups and other emerging networks of people who use drugs. The report should also make recommendations how to address their needs and how to

support these groups in getting connected and developing sustainably.

## **6) PROVISION OF MONITORING AND PROGRESS CONTROLS**

Under the supervision of UNODC Regional HIV Advisor and National HIV Programme Officer, the consultant will:

- Submit a detailed work plan within one week after the start of the consultancy services.
- Report on a fortnight basis to UNODC on progress and closely consult with UNODC in carrying out the assignment.
- Submit a project progress report after 1 month describing the progress so far achieved in data collection and analysis.
- Submit a draft of the report for UNODC's review no later than 3 weeks before the end of his/her assignment.
- Finalize the report and submit it for UNODC's approval no later than 1 week before the end of his/her assignment.

Indicators to evaluate the incumbent's performance are:

- Quality of the documents produced
- Technical competence
- Timeliness of delivery.

## **7) DEGREE OF EXPERTISE AND QUALIFICATIONS**

The consultant should possess a combination of technical expertise in HIV and drug related matters and in research. S/he should have:

- Master degree or higher in development studies, sociology or public health related fields
- A minimum of 7 years of professional experience, specifically in the field of HIV, drug use and community development
- Proven work experience with self-support groups of drug users, high risk groups, PLWH
- Extensive knowledge of, and experience in applying quantitative and qualitative research methodology;
- Ability to plan and conduct all works related to data collection and analysis;
- Solid experience in working with stakeholders: government agencies at national and local level, civil society, multilateral institutions, ethnics etc;
- A track record of conducting various types of research and studies;
- Excellent communication and interviewing skills.
- Excellent Vietnamese writing and analytical skills. Good English speaking and writing skills required.
- Good at computer use, especially Word, Excel, PowerPoint and data analysis applications.

## **8) REVIEW TIME REQUIRED AND PAYMENT TERM**

The payment schedule by bank transfer will be as follows:

- 20% of the contract value upon submission and UNODC's approval of the final workplan and draft research design
- 40% of the contract value after approval of the draft report
- 40% of the contract value upon approval of the final reports and satisfactory completion of the contract.

Travel costs for required missions in Viet Nam namely airfare (economy class), terminal expenses and perdieme will not be included in the financial offer of the candidate; they will be covered separately by UNODC, depending on the location of the mission, according to the rate stipulated in UN-EU Cost Norms via reimbursement. The reimbursement with UNODC's approval will be made after each mission.

## **9) ADMIN SUPPORT AND REFERENCE DOCUMENTS**

UNODC may provide administrative support during his/her performance, where applicable and necessary. UNODC will support consultant with list of groups and provincial focal points for field visits and interviews during process of data collection.

## **10) CONSULTANT PRESENCE REQUIRED ON DUTY STATION/UNODC PREMISES**

**NONE**       **PARTIAL**       **INTERMITTENT**       **FULL-TIME**