“Develop Training Modules and Conduct training on Buprenorphine substitution therapy for medical staff of prisons with special emphasis on women in closed settings”

Call for Proposals

Background and Context
Substitution maintenance treatment is an efficacious, safe and cost-effective modality for the management of opioid dependence. Such treatment is a valuable and critical component of the effective management of opioid dependence and the prevention of HIV among people who use drugs. Pharmacological agents used as substitution substances in the management of opioid dependence are: methadone, buprenorphine, levo-alpha-acetyl-methadol (LAAM), dihydrocodeine and tincture of opium.

Methadone is the most employed agent in substitution treatment around the world. Results of many surveys have shown that methadone maintenance therapy leads to a decrease in illegal substance consumption, improved rehabilitation of intravenous opiate dependents, a decrease in HIV infection, and a decrease in criminal and antisocial behaviour. Although methadone maintenance therapy has been overall extremely successful, it may be less suitable for a group of people dependent on drugs especially, if they do not happen to be heavy users and thus might not be ideal for all people dependent on opioids. Moreover, buprenorphine seems to have less side effects during pregnancy for the foetus and be associated with milder neonatal abstinence syndrome (NAS). Buprenorphine is emerging as a useful complementary or alternative option to methadone.

With estimated 2.8 million people with drug use problems, Iran has one of the highest opiate use prevalence’s worldwide. The statistics show that half of prisoners are addicted to drugs and one of the most important reasons for imprisonment of these people relates directly to this addiction (62% incarcerated due to drug related crimes). The prevalent drug use disorders treatment and harm reduction used in closed settings is methadone maintenance therapy. Given the proved benefits of buprenorphine substitution therapy due to its reduced toxicity, better retention in treatment, and potential for reducing HIV among people with opioid use disorders, the option of buprenorphine maintenance therapy besides methadone maintenance has been considered for Iranian prisons, especially for women even though if more costly than methadone.

Duration of work
The work will be accomplished between end-August to end September 2021.

Location:
The work will be conducted in Tehran, Iran home-based.

Tasks
It is expected that the contracted institution develops training materials on Buprenorphine substitution therapy for medical staff of prisons in Farsi. The institution subsequently conducts two series of training for medical staff of prisons.
Activities/Responsibilities
It is expected that the contracted institution:

I. Preparat training materials covering the following:

1. Opioid dependence – concept, course and consequences
2. Opioid substitution treatment – definition, benefits and risks
3. Outline of the safety and effectiveness of buprenorphine in the management of heroin and other opioid dependence.
4. Training topics on drug intervention including other agonists treatment with buprenorphine.
5. Buprenorphine interaction with drug use
6. Drug poisoning
7. Assessment of a patient with opioid use and criteria for buprenorphine substitution
8. Guidelines and procedures for substitution therapy with buprenorphine.
9. Special considerations on treatment with buprenorphine for women, pregnant women and women who breastfeed.
10. Regulatory procedures
11. Documentation and record keeping
12. Directly observed treatment of buprenorphine
13. Issues relating to buprenorphine administration and a rollout plan.
14. Buprenorphine in the context of dependence care and HIV services
15. Enhancing ‘quality’ in patient care and liaison services and linkages
16. Best practices and experiences of other countries

II. Conducts online training considering the following:

1. Online interaction with the training participants
2. Interactive sessions like break room discussions
3. Coordinate all necessary preparation and arrangements for the training to be hosted live online, including logistics, administrative and practical organization

Eligibility Criteria for applying institutions

- Minimum experience in providing buprenorphine treatment services
- Active and operational drug use disorders treatment services including buprenorphine substitution therapy
- Experience of holding training for clinicians
- Experience in developing training manuals
- Certification for provision of training on opioid substitution therapy especially buprenorphine.
Outputs/Deliverables

<table>
<thead>
<tr>
<th>No</th>
<th>Output/deliverable</th>
<th>Fraction of work</th>
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<tbody>
<tr>
<td>1</td>
<td>Submit training modules/materials including training agenda</td>
<td>25%</td>
</tr>
<tr>
<td>2</td>
<td>Conduct two full series training</td>
<td>60%</td>
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<td>3</td>
<td>A Comprehensive report of the outcome of the meeting, including list of participants</td>
<td>10%</td>
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<td>Total</td>
<td>100%</td>
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Verification
Each output needs to be verified before the next step is taken. The final report should be verified/endorsed by UNODC based on the final terms of reference.

Submission

Interested institutions/organisations are encouraged to submit their proposals in **two separate documents for technical and financial proposals**, to the email address: unodc-iran.procurement@un.org. State the title of the call as the subject of your email.

**Email Subject: Technical and Financial proposal for “Develop Training Modules and Conduct training on Buprenorphine substitution therapy for medical staff of prisons with special emphasis on women in closed settings” – IRN/Z78-2021-3**

Containing a cover email and four attachments:
1. Brief Proposal
2. CV of the Institution/organisation
3. Budget table in IRR

Application deadline
25 August 2021