

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS

Title: National Consultant for Nutrition Review-Costing of National Nutrition Programme	Type of engagement <input checked="" type="checkbox"/> Consultant (ZCNT)	Duty Station: The consultant will work remotely from home with possible travel in selected provinces/districts in Indonesia and will not be provided with an assigned desk or office space.
Purpose of Activity/Assignment: Providing technical assistance to support the Ministry of Health (MoH) with costing the nutrition programme and enhancing nutrition planning and budgeting within the existing primary healthcare transformation agenda.		
Background: Indonesia is a large and diverse country, consisting of 38 provinces and 514 districts spread across more than 17,000 islands. Despite significant economic growth in recent years, Indonesia continues to face substantial challenges in nutrition. The country is a prime example of a nation with the triple burden of malnutrition, as undernutrition (stunting and wasting), overweight/obesity, and micronutrient deficiency affect millions of children, adolescents, and women. Data from the 2023 Indonesia Health Survey (SKI)* shows that 21.5 percent of children under the age of five in Indonesia are stunted, 8.5 percent are wasted, and 4.2 percent are overweight or obese. Micronutrient deficiencies are also widespread among children and adolescents of all ages, with 23.8 percent of those aged 0-4 years, 16.3 percent of children aged 5-14 years, and 15.5 percent of young people aged 15-24 years being anemic, respectively. Moreover, primary school age children also suffer from malnutrition, with 18.7 percent being stunted, 11 percent thin, and 19.7 percent overweight or obese. A similar situation is found among adolescents, with 24.1 percent of those aged 13-15 years being stunted, 7.6 percent thin, and 16.2 percent either overweight or obese. Children who do not have access to adequate nutrition may experience undernutrition associated with impaired cognitive development and learning capabilities throughout their childhood and adult life and will not develop the skills needed to succeed in life. Malnutrition among childbearing women and pregnant women is also a major public health issue. National estimates* revealed that more than one quarter (27.7 per cent) of pregnant women in Indonesia suffer from anemia and almost one in five pregnant mothers are thin. Evidence shows that poor nutritional status among pregnant mothers can have significant impacts on pregnancy outcomes. Anemic and malnourished mothers have a higher risk of giving birth to low-birth-weight babies, which in turn can increase the risk of wasting and stunting during early childhood. Anemic mothers also have a higher risk of hemorrhage during labor, which increases the risk of maternal and neonatal mortality. Over the past years, the Indonesian government has taken significant political and financial commitment to implement various programs to address nutritional problems among children, adolescents, and women. Therefore, a number of policies and programs have been established to prevent and reduce all forms of malnutrition. In 2009, the law No. 36/2009 on Health was set as the legal framework to regulate efforts to improve public nutrition in terms of directions, objectives and strategies. In 2011, Indonesia joined the Scaling Up Nutrition (SUN) movement to confirm the government commitment to guarantee the right to sufficient and nutritious food to every Indonesian. Later, the law No. 18/2012 was established to request the central government and regional governments to formulate Food and Nutrition Action Plans (RANPG) every five years. In the same vein, the Presidential Regulation No. 42/2013 was established to launch the National Movement on Accelerating Nutrition Improvement (GERMAS PPG) with a specific focus on stunting reduction. The aforementioned initiative was renewed with the Indonesian National Strategy to Accelerate Stunting Reduction (STRANAS) through the Presidential Decree No. 72/2021 with the goal to reduce child stunting to 14% by 2024 and improve the nutrition status of children and women across Indonesia using a multisectoral approach integrating both nutrition specific and sensitive interventions. These interventions include a multi-sectoral approach on prevention, early detection, and treatment of wasting, school nutrition programme for school-age children and adolescents, prevention, and treatment of anemia, and prevention of overweight and obesity. As a result, several line ministries, including the Ministry of Health, have been implementing several essential nutrition interventions. These interventions contribute to reduce all forms of malnutrition as outlined by the Ministry of Health’s last health survey carried out in 2023 (Survei Kesehatan Indonesia). Stunting prevalence declined from 37.6 per cent to 21.5		

* The Ministry of Health Republic of Indonesia, 2024. Survey Kesehatan Indonesia (SKI) 2023. Jakarta, Indonesia

percent between 2013 and 2023. Wasting has gone down from 12.1 percent to 8.5 per cent and overweight and obesity from 11.9 per cent to 4.2 per cent during the same period.

To underscore and maintain this commitment, the government has integrated nutrition indicators into the National Medium-Term Development Plan (RPJMN) 2025 – 2029 and the Long-Term Development Plan (RPJPN) 2025 – 2045. In addition, the newly elected President's has pledged to provide school meals to all school going children as well food supplementation for under five children and pregnant women nutrition remains a top priority for the country.

Hence, recognizing its critical role to achieve the planned results, and 2024 as the last year of the National Strategy to Accelerate Stunting Prevention, the Ministry of Health would like to take stock of existing interventions and carry out a comprehensive review of the nutrition program to provide a better understanding of the status of the country's nutrition program and identify factors that drive sustainable change for the country. . The assignment will include an analysis of current nutrition budget practices, budgetary allocations and expenditure vis a vis the resources needed to deliver the program, and the costing of the roadmap on the integrated management of acute malnutrition and maternal nutrition including scaling up the multiple micronutrient supplementation for pregnant women. Against this backdrop, UNICEF is looking for a national consultant, to support the nutrition budget analysis and programme costing.

Scope of Work:

The National Consultant will work as part of a team of experts, under the overall coordination of the International Team Lead, and in close coordination with UNICEF, supporting the review on costing of nutrition programme in Indonesia.

The National Consultant, working closely with expert from UNICEF HQ, will be requested to:

1. Work with a team of both international and national experts to develop a comprehensive review of the Indonesia nutrition programme under the coordination of the team lead.
2. Assess the level of government financial resources allocated to and spent on the nutrition programme at both national and selected provinces.
3. Assess the adequacy of nutrition program financial allocation against the resources required to achieve the intended outcomes defined by the National Strategy to Accelerate Stunting Prevention 2018 – 2024 and other strategies.
4. Examine the planning and budgeting mechanisms employed by national and subnational stakeholders responsible for implementing the nutrition program to identify bottlenecks and areas of improvement.
5. Provide comprehensive cost estimates for the maternal nutrition and the integrated management of acute malnutrition programmes encompassing capacity-building of frontline workers, procurement and distribution of essential supplies and commodities, monitoring and evaluation, and other relevant activities to support the scale up of these two programmes, and integrate term into nutrition program budget estimates.
6. Develop actionable recommendations to enhance the costing, planning, and budgeting processes for the nutrition program, ensuring alignment with long-term program sustainability.
7. Contribute to focus group discussions (FGDs) and key informant interviews (KIIs) with key stakeholders such as Ministry of Finance, Ministry of Home Affairs, Bappenas at national and subnational levels, providing technical input and analysis, as agreed with the Ministry of Health.
8. Contribute to the preparation of a comprehensive final report presenting key findings to the task team and other entities identified by the Ministry of Health.

The methodology will draw upon global best practices, such as the WHO Nutrition Landscape Information System (NLIS), while aligning with Indonesia’s national priorities and policy frameworks. The review process will employ desk-based analyses, key informant interviews, focus group discussions, and field visits at both national and subnational levels, providing a contextual and in-depth evaluation of the nutrition program's implementation and overall effectiveness. The national consultant for programme costing will be required to develop a workplan to align with the nutrition review framework and methodology.

Supervisor:	Start Date:	End Date:
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Mamadou Ndiaye, Chief of Section	February 2025	May/June 2025	
Work Assignment Overview			
Tasks/Milestone	Deliverables/Outputs	Timeline	Estimate Budget
1. Inception Outline approaches to undertake the assignment with a work plan, milestones, and methodology. The plan should be aligned with the overall national nutrition review framework and methodology.	Inception report with a timeline submitted and presented to UNICEF and MoH for endorsement	Two weeks after the contract signed	15%
2. Desk review and secondary data analysis. a. Collaborate with the nutrition review team and the MoH to gather and review existing data on programme costing. b. Conduct a comprehensive document review of current programme costing, and planning and budgeting system of nutrition programme. c. Perform national consultation and field visits to collect data and identify gaps, challenges, and opportunities in selected provinces as agreed with UNICEF and MoH	A detailed report of a comprehensive situational analysis on the current nutrition programme costing including an analysis of key challenges and opportunities to enhance programme resource allocation.	Five weeks after the contract signed	20%
3. Interim Progress Report Contribute findings and analysis to the overarching nutrition review report on costing of national nutrition programme. Synthesise desk review and primary data findings to identify key trends, challenges, and actionable recommendations. Develop costing matrix for nutrition programme, that includes procurement of supplies and commodities for IMAM and maternal nutrition.	Draft findings report focused on costing of national nutrition programme. Specific recommendations on critical actions that need to be implemented to improve the nutrition programme costing at national and decentralized level.	Seven weeks after the contract signed	20%
4. Draft National Nutrition Review Report and Validation Workshop In close coordination with UNICEF, the team of consultants and MoH develop a presentation summarizing the preliminary findings. a. Identify a comprehensive list of recommendations to enhance nutrition programme costing in Indonesia.	a. A presentation deck summarizing the draft findings for validation workshops. b. The outputs will include key findings summarizing stakeholder inputs and recommendations	Nine weeks after the contract signed	20%

<p>b. Support the national nutrition review team leader to organize stakeholder meetings, focus group discussions, and consultations.</p>			
<p>5. Final report submission</p> <p>a. Address comments and recommendations from the Technical Advisory Group (TAG) to improve the quality of the report.</p> <p>b. Provide a specific report on the programme costing in close collaboration with the team of experts.</p>	<p>Finalized report on costing for national nutrition programme, including budget and financial plan for maternal nutrition and IMAM</p>	<p>twelve weeks after the contract signed</p>	<p>25%</p>
<p>Minimum Qualifications required: <input type="checkbox"/> Bachelors <input checked="" type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other</p> <p>Enter Disciplines: A postgraduate qualification in a relevant discipline (including but not limited to Nutrition, Global/Public Health, Health Financing, Public Finance, Economics, Social Sciences or a closely related field.</p>		<p>Knowledge/Expertise/Skills required:</p> <ul style="list-style-type: none"> • A master’s degree or higher in Public Health, Nutrition, Health Economics, Development Studies, Finance, or a related field. • Strong understanding of health and nutrition financing, including cost analysis methodologies. • A minimum of 7 years of experience in costing, budgeting, or financial analysis for government programme. • Proven track record of working with government institutions, development agencies, or non-governmental organizations on program costing and financing. • Familiarity with the design and implementation of nutrition programs, especially in low- or middle-income countries. • Prior experience with multi-stakeholder collaboration involving government agencies, donors, and technical partners. • Expertise in costing analysis for program planning and implementation and knowledge of health systems and nutrition interventions at national and subnational levels. • Understanding of national budget processes and funding mechanisms for nutrition programs. • Experience in synthesizing nutrition data including secondary analyses of nutrition programme budget/expenditure • Able to work effectively with people internal and external. • Communicates clearly and concisely. • Excellent analytical and conceptual skills • Proven ability to work independently under difficult conditions. • Have strong writing skills in English. • Previous work with UN and Donor Agencies, especially, or government counterparts on program costing. 	

Individuals engaged under a consultancy or individual contract will not be considered “staff members” under the Staff Regulations and Rules of the United Nations and UNICEF’s policies and procedures and will not be entitled to benefits

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provided therein (such as leave entitlements and medical insurance coverage). Their conditions of service will be governed by their contract and the General Conditions of Contracts for the Services of Consultants and Individual Contractors. Consultants and individual contractors are responsible for determining their tax liabilities and for the payment of any taxes and/or duties, in accordance with local or other applicable laws.

The selected candidate is solely responsible to ensure that the visa (applicable) and health insurance required to perform the duties of the contract are valid for the entire period of the contract. Selected candidates are subject to confirmation of fully-vaccinated status against SARS-CoV-2 (Covid-19) with a World Health Organization (WHO)-endorsed vaccine, which must be met prior to taking up the assignment. It does not apply to consultants who will work remotely and are not expected to work on or visit UNICEF premises, programme delivery locations or directly interact with communities UNICEF works with, nor to travel to perform functions for UNICEF for the duration of their consultancy contracts.

UNICEF offers [reasonable accommodation](#) for consultants with disabilities. This may include, for example, accessible software, travel assistance for missions or personal attendants. We encourage you to disclose your disability during your application in case you need reasonable accommodation during the selection process and afterwards in your assignment.