

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS

Title: UN Joint Programme on Mental Health and Psychosocial Wellbeing and development of children and Adolescents	Funding Code 6890/09/07/400/002/027 GS 220006 Regular Resources (RR)	Type of engagement <input checked="" type="checkbox"/> Individual Consultant	Duty Station: Maputo
Purpose of Activity/Assignment: Support country-level delivery of the UNICEF and WHO Joint Programme on Mental Health and Psychosocial Well-being and Development of Children and Adolescents in Mozambique			
<p>Scope of Work:</p> <p>Positioned within the WHO-UNICEF Strategic Collaboration Framework, the UNICEF and WHO Joint Programme on Mental Health and Psychosocial Wellbeing and Development of Children and Adolescents has a bold vision: By 2030, children, adolescents, and their caregivers living in countries targeted under the Joint Programme will experience reduced suffering and improved mental health and psychosocial wellbeing and development.</p> <p>The Joint Programme aims to achieve this by strengthening the capacity of countries to implement evidence-informed and human-rights based multisectoral strategies to deliver opportunities, support and services for children, adolescents and their caregivers. The Joint Programme will also advance visibility, awareness and investment at the national and global level through joint action. In pursuit of its vision, the UNICEF and WHO Joint Programme establishes mutual commitments, a shared framework, and a coordinated strategy to transform laws, policies, services, and family and community environments for improved mental health and psychosocial well-being and development trajectories for the next generation.</p> <p>In a phased implementation over 10 years, four core strategies will expand capacity to deliver at all levels and have real impact for children and adolescents' mental health and psychosocial wellbeing: (i) strengthening effective leadership, governance and advocacy; (ii) strengthening service delivery and care systems; (iii) implementing strategies for promotion and prevention in mental health; and (iv) strengthening information systems, evidence on children and adolescent mental health and psychosocial wellbeing and research.</p> <p>Leveraging on the strengths of both agencies and building on ongoing collaboration and learning, the Joint Programme is being rolled out across six global regions, with at least two countries per region targeted for intensive support. Seven countries have already been selected where there is strong commitment from government and other stakeholders to work for change: Bhutan, Colombia, Ivory Coast, Guyana, Jordan, Maldives and Mozambique.</p> <p>In Phase 1 of the Joint Programme (2021-2023), mapping of needs and priorities conducted by UNICEF and WHO programme staff at regional and country level has revealed significant technical capacity gaps which are impeding progress towards delivery of the Joint Programme's vision, gaps that have been exacerbated by the impacts of the COVID-19 pandemic. Recognizing this, WHO and UNICEF will recruit a consultant to support development and implementation of the Joint Programme in the countries thus far identified for intensive support over a 6 months' period. Consultants will be based in-country and will have a reporting line to both the WHO and UNICEF respective focal points for the Joint Programme in country offices.</p> <p>The Consultant will be responsible for leading on and coordinating the development and initial implementation of a country-level plan for the Joint Programme in Mozambique. This will include:</p> <ul style="list-style-type: none"> • Working with UNICEF and WHO country office technical staff on development of a detailed, costed country-level plan for the Joint Programme and its monitoring and evaluation framework, • Liaising between WHO and UNICEF country offices and supporting engagement and coordination with country stakeholders 			

- Facilitating stakeholder consultations on priority interventions and planning and review Joint Programme meetings
- Supporting the implementation of the Joint Programme workplan
- Narrative reporting against the [Joint Programme's Monitoring Framework](#)
- Supporting resource mobilization efforts at country, regional and HQ levels.
- Supporting the development of the case for support on Mental Health and Psychosocial Well-being and Development of Children and Adolescents for further advocacy and fundraising

Child Safeguarding

Is this project/assignment considered as "[Elevated Risk Role](#)" from a child safeguarding perspective?

☐ YES ☒ NO If YES, check all that apply:

Direct contact role ☐ YES ☒ NO

If yes, please indicate the number of hours/months of direct interpersonal contact with children, or work in their immediately physical proximity, with limited supervision by a more senior member of personnel:

Child data role ☐ YES ☒ NO

If yes, please indicate the number of hours/months of manipulating or transmitting personal-identifiable information of children (name, national ID, location data, photos):

More information is available in the [Child Safeguarding SharePoint](#) and [Child Safeguarding FAQs and Updates](#)

Budget Year	Requesting Section/Issuing Office:	Reasons why consultancy cannot be done by staff: The collaboration on this subject matter is new. To operationalize this collaboration, set up the conditions to implement the ambitious multi-agency and multisectoral workplan, a dedicated coordinator will be required for at first 6 months																	
Included in Annual/Rolling Workplan: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, please justify:																			
Consultant sourcing: <input type="checkbox"/> National <input checked="" type="checkbox"/> International <input type="checkbox"/> Consultant selection method: <input type="checkbox"/> Competitive Selection (Roster) <input checked="" type="checkbox"/> Competitive Selection (Advertisement/Desktop Review/Interview)		Request for: <input checked="" type="checkbox"/> New Individual Contract <input type="checkbox"/> Extension/ Amendment <input type="checkbox"/> Low Value Contract (LVC)																	
If Extension, Justification for extension:																			
Supervisor: Gerson Nombora, CP Specialist	Start Date: 15.10.2023	End Date: 15.04.2024	Number of Days (working) 140																
Work Assignment Overview <table border="1"> <thead> <tr> <th>Tasks/Milestone:</th><th>Deliverables/Outputs:</th><th>Timeline</th><th>Estimate Budget</th></tr> </thead> <tbody> <tr> <td>Review ongoing mental health interventions by and across key sectors, gap analysis regarding integration and cross sectoral approach to mental health and psychosocial wellbeing and development, existing entry points and opportunities for improved and cross sectoral mental health service delivery, scale up and acceleration within and across relevant sectors</td><td>A summary report with list of interventions by sectors and a gap analysis with regards to integration and cross sectoral approaches</td><td>30 days</td><td></td></tr> <tr> <td rowspan="2">Develop and kick-start a roll out of a detailed monitoring framework to track on progress of work plan implementation and the activities and indicators set in relation to assessment, provision of mental health services, promotion and prevention and that guides/informs the efforts for strengthened coordination between sectors and layers of programming in development and humanitarian action</td><td>A detailed monitoring framework (with indicators) to track on the progress of the UNJP and the activities set as well as the cross-sectorality of MHPSS.</td><td>20 days</td><td></td></tr> <tr> <td>Compiled Info/data on progress after 6 months implementation (both on the plan and activities/indicators set)</td><td>10 days</td><td></td></tr> </tbody> </table>					Tasks/Milestone:	Deliverables/Outputs:	Timeline	Estimate Budget	Review ongoing mental health interventions by and across key sectors, gap analysis regarding integration and cross sectoral approach to mental health and psychosocial wellbeing and development, existing entry points and opportunities for improved and cross sectoral mental health service delivery, scale up and acceleration within and across relevant sectors	A summary report with list of interventions by sectors and a gap analysis with regards to integration and cross sectoral approaches	30 days		Develop and kick-start a roll out of a detailed monitoring framework to track on progress of work plan implementation and the activities and indicators set in relation to assessment, provision of mental health services, promotion and prevention and that guides/informs the efforts for strengthened coordination between sectors and layers of programming in development and humanitarian action	A detailed monitoring framework (with indicators) to track on the progress of the UNJP and the activities set as well as the cross-sectorality of MHPSS.	20 days		Compiled Info/data on progress after 6 months implementation (both on the plan and activities/indicators set)	10 days	
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Document UNJP meetings and technical reviews/discussions between UNICEF and WHO and country level stakeholders regarding the action plan implementation, progress, challenges, opportunities and the follow up done by partners on deliberations and agreed follow up actions	Minutes of UNJP meetings (Steering Committee, Joint Programme Coordination Group and technical groups) and regular update on status of progress/implementation of deliberations and follow up actions	20 days	
Lead the development of a joint national level advocacy plan for policy and legislation reform and increased fiscal space for mental health and psychosocial wellbeing and development of children and adolescents, for integration of children and adolescents mental health in universal health care (including across Education and Social Welfare sectors), for the upholding of rights of all persons to good physical and mental health, for the strengthening of monitoring and accountability and dissemination of best practices.	A comprehensive advocacy strategy informed by the finding of the review of ongoing interventions (by sectors and across sectors), gap and cost analysis, current expenditure relating to mental health and psychosocial wellbeing by sector (indicative figures), policy and legislation review relating to provision of mental health and psychosocial wellbeing services to children and adolescents in Mozambique, international standards and good practices etc.	25 days	
Support the finalization of the national level campaign strategy (including supporting the post-production of the pieces worked out during the workshop held) on children and adolescents' mental health and psychosocial wellbeing and its roll out	Strategy document outlining the various interventions to be carried out under the campaign, locations, actors to be involved, expected results and targets, timelines.	15 days	
	A three months' detailed analytical report (after the kick-off) of the campaign reflecting on progress made (results versus targets), challenges and bottlenecks, opportunities and plans ahead	10 days	
Support the development of the case for support on Mental Health and Psychosocial Well-being and Development of Children and Adolescents for further advocacy and fundraising	Updated version of the draft case for support document	10 days	

Estimated Consultancy fee			
Travel International (if applicable)			
Travel Local (please include travel plan) 15 days of local travel to 3 provinces covering the three regions			
DSA (if applicable) -			
Total estimated consultancy costsⁱ			
Minimum Qualifications required: <input type="checkbox"/> Bachelors <input checked="" type="checkbox"/> Masters <input type="checkbox"/> PhD <input type="checkbox"/> Other Mental health and psychosocial support in humanitarian settings Clinical or Community Psychology Social Sciences	Knowledge/Expertise/Skills required: <ul style="list-style-type: none"> • 10 years' experience on children and adolescent mental health and psychosocial support advocacy programming and the cross sectoral collaboration to addressing it • Knowledge of national legislation and policies that relate to mental health and psychosocial wellbeing of children and adolescents • Experience with national level advocacy on mental health (for government buy in and increase in the investment in mental health) and communication campaigns to address stigma, improve public awareness on the subject matter and increase demand for related services. • Demonstrated experience in developing and use monitoring and evaluation tools • Analytical and reporting skills • Portuguese speaking and writing skills is an advantage 		
Administrative details: Visa assistance required: <input type="checkbox"/> Transportation arranged by the office: <input type="checkbox"/>	<input type="checkbox"/> Home Based <input checked="" type="checkbox"/> Office Based: If office based, seating arrangement identified: <input checked="" type="checkbox"/> IT and Communication equipment required: <input type="checkbox"/> Internet access required: <input checked="" type="checkbox"/>		
Request Authorized by Section Head	Request Verified by HR:		
<i>Review by Social Policy Social Protection (for evaluation related TORs)</i> <hr/> <i>Approval of Chief of Operations (if Operations):</i> <hr/> <i>Approval of Deputy Representative (if Programme)</i> <hr/> <i>Representative (in case of single sourcing/or if not listed in Annual Workplan)</i>			

ⁱ Costs indicated are estimated. Final rate shall follow the “best value for money” principle, i.e., achieving the desired outcome at the lowest possible fee. Consultants will be asked to stipulate all-inclusive fees, including lump sum travel and subsistence costs, as applicable.

Payment of professional fees will be based on submission of agreed deliverables. UNICEF reserves the right to withhold payment in case the deliverables submitted are not up to the required standard or in case of delays in submitting the deliverables on the part of the consultant

Text to be added to all TORs:

Individuals engaged under a consultancy 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 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.