

TERMS OF REFERENCE FOR INDIVIDUAL CONSULTANTS

Title of Assignment	National Consultancy: Consultancy to review the multisectoral maternal, infant & young child nutrition and adolescent nutrition strategies	
Requesting Section	Nutrition	
Location	Place of assignment: Remote. The consultant will not be fully in the office; however, he/she will be expected to conduct field visits in 3 districts (Mzimba, Lilongwe rural and Blantyre), validation meetings and engagements with key stakeholders in Lilongwe.	
Contract Duration	4 Months	
Number of working days	52 days	
Planned Start and End Date	From: 12 March 2024	To: 22 June 2024

BACKGROUND

Malawi has had a history of high prevalence of various forms of malnutrition due to multiple factors ultimately affecting the health and survival of children. According to the 2020 Multi Indicator Cluster Survey (MICS), the prevalence of stunting is staggering at 35.5 percent and the prevalence of underweight is at 12.8 percent. Undernutrition shows significant socioeconomic disparities as well as rural (36)/urban (29). Besides, out of those live-born infants weighed at birth, approximately 14 percent are estimated to weigh less than 2,500 grams. Micronutrient deficiencies are common, with anemia affecting 28 percent of children under the age of five years, 35 percent of adolescent girls (10-14 years), and 32.7 per cent among women of reproductive age (WRA) aged 15-49 years.

Despite the persistent high level of stunting, Malawi has experienced a marked reduction over the past ten years. The proportion of children under five years of age who are stunted decreased from 47 percent in 2010 to 35.5 percent in 2020; wasting from 4 percent to 2 percent and underweight from 13 percent to 12 percent (Malawi Demographic Health Survey 2010 compared to Multiple Indicator Cluster Survey- MICS 2019-2020). However, undernutrition, mainly stunting, remains a public health issue. This can be explained, among others by the inappropriate access and use of a diversified diet. The quality of diets for children remains sub-optimal with only nine percent of children aged 6-23 months meeting the minimum acceptable diet (MAD) standard and 64.1 percent being exclusively breastfed¹. Poor water, hygiene and sanitation, insufficient childcare and health-seeking practices leading to childhood diseases (diarrhea, malaria, pneumonia, HIV) are also major contributors to malnutrition.

In 2019, a regional review of the alignment of country policies/guidance documents with the 2016 WHO nutrition recommendations for Antenatal Care (ANC) revealed variances such as non-inclusion of physical activity in the counseling sessions, balanced energy protein supplementation for undernourished populations and provisions for task shifting to auxiliary nurses for nutritional supplements and intermittent preventive treatment in pregnancy (IPTp) for malaria prevention—and inclusion of multiple micronutrient supplements (MMS) in maternal nutrition programming. Poor maternal nutrition is linked to adverse health outcomes for both the mothers and their children and imperative to close gaps observed in various assessments.

It is with this background that the government of Malawi, through the Department of Nutrition, HIV and AIDS (DNHA) has prioritised the revision of the Multi-sectoral Maternal, Infant and Young Child Nutrition (MIYCN) Strategy (2019-2023) and Multi-sectoral Adolescent Nutrition Strategy (2019-2023) both ending in 2023 in order to provide frameworks for improving maternal, infant, young children and adolescent nutrition status. The

development of the strategies will be through UNICEF in close coordination with the Department of Nutrition, HIV, and AIDS (DNHA) of Ministry of Health (MoH).

JUSTIFICATION

The Government of Malawi has finalised the review and updating of the multi-sectoral Nutrition Policy, which is now undergoing approval process within the Government System. It is equally important to update the related nutrition strategies that inform nutrition programming for infants, young children, adolescent, and women of reproductive age based on new global and regional recommendations.

The Multi-sectoral Maternal, Infant, and Young Child Nutrition (MIYCN) Strategy (2019-2023) and Multi-sectoral Adolescent Nutrition Strategy (2019-2023) are both ending in 2023. It is, therefore, important to update these strategies based on new multi-sectoral Nutrition Policy and related recommendations.

PURPOSE OF THE ASSIGNMENT

The purpose of the assignment is to review two strategies, namely the Multi-sectoral Maternal, Infant, and Young Child Nutrition (MIYCN) Strategy and the Multisectoral Adolescent Nutrition Strategy, with the aim of attaining optimum nutrition for infants, young children, adolescents, and women of reproductive age in Malawi.

SCOPE OF WORK/OBJECTIVES

Objectives

- (i) Stakeholder Consultations to assess the extent of the systematic, organizational, and integration of MIYCN and adolescent nutrition across different sectors and delivery platforms within the Ministries of Health, Agriculture, Local government, Water and Sanitation, Education, and Gender, Children, disability and social welfare.
- (ii) Develop revised and updated comprehensive Multi-sector Maternal, Infant, and Young Child Strategy and the Multi-sector Adolescent Nutrition Strategy
- (iii) Develop Maternal, Infant, and Young Child and Adolescent Nutrition (MIYCAN) results log frame and monitoring tools to track implementation of activities.

Scope of work

Specifically, the review and development process will be undertaken as follows:

A. Stakeholder Consultations and data collection phase

- (i) Develop the tools for data collection and information gathering ahead of the stakeholder consultations which will be cleared by DNHA & UNICEF.
- (ii) The consultant(s) will convene meetings with key Government officials of Malawi through the leadership and coordination of DNHA.
- (iii) Conduct interviews and consultations with DNHA, IYCF TWG, Micronutrient TWG, School health and Nutrition Coordinator and National Nutrition Committee to assess programming for MIYCN and Adolescent nutrition in the country both at health facility, schools, and community levels.
- (iv) Review both best practices and challenges of MIYCAN during the consultation to inform the

- revision of the strategies.
- (v) Compile and analyse data to inform the strategies development

B. Field visit regarding implementation of MIYCAN programmes

- (i) Conduct field visits to sampled health facilities, schools and communities in three districts to observe, assess services, and identify best practices.
- (ii) Develop tools for data and information gathering during the field visits.

C. Contribute to the Development and Finalise the Multisectoral- MIYCAN Nutrition strategy

- (i) Draft the Multisectoral- MIYCAN Strategy based on the programmatic findings – literature review, consultations, and field visits. The strategy should be comprehensive and provide guidance in both development and humanitarian contexts in Malawi
- (ii) Provide recommendations for sectoral responses/interventions to improve MIYCAN across several delivery platforms within the Ministries of Health, Agriculture, Water and Sanitation and Education and Gender, Children, disability, and social welfare.
- (iii) Provide programmatic interventions as aligned to the 16 WHO nutrition recommendations for ANC to improve the positive experience during pregnancy, including the newest recommendations for the use of MMS.
- (iv) The consultant will work with the identified stakeholders, such as the Infant and Young Child Nutrition Technical Working Group (IYCN TWG), to conduct and facilitate validation with partners. Their feedback will be consolidated and taken into account before finalization of the MIYCAN Strategy. The Final document will be endorsed by the National Nutrition Committee.

REPORTING REQUIREMENTS

To whom will the consultant report (supervisory and any other reporting/communication lines):

Chief of Nutrition, OIC

Other reporting/communication lines:

Nutrition Specialist

What type of reporting will be expected from the consultant and in what format/style will the submissions of reports/outputs be done:

All reports will be submitted electronically, i.e., the Inception report, the draft and final multi-sector MIYCN, and adolescent Nutrition strategies.

How will consultant consult and deliver work and when will reporting be done:

The reporting will entail both virtual to report progress and update throughout the assignment and written documents (inception reports, draft and final strategies) that will be submitted by the consultants according to the agreed timelines.

EXPECTED DELIVERABLES

In alignment with the scope of work as described above, the consultant will be expected to perform the following activities and deliverables as per the schedule and estimated dates below:

National Consultant				
Task/Milestone	Deliverable/Outcome (e.g. Inception, progress, final reports, training material, workshop, etc.)	Estimated # of days	Planned Completion date	% of total fee payable
Review and contribute to drafting the strategies(s) including stakeholder consultations to inform the strategies.	Prepare national stakeholder engagement meetings and field visits	18 days	1st April 2024	15 %
	Review and contribute to the draft MIYCAN strategies to reflect local context.			
Field visits regarding implementation of MIYCAN programmes	Conduct field visits to sampled health facilities, schools and communities in 3 districts to observe, assess services and identify best practices.	5 days	5th April 2024	15 %
Stakeholder consultation & validation	Stakeholder workshop – participate in the consultation workshop and capture the deliberations and recommendations.	2 days	28 April 2024	10%
	Stakeholder workshop – participate in the validation workshop	2 days	10 May 2024	15%
Finalise the Multi-sector MIYCN strategy	Review and contribute to the final Multi-sector MIYCN strategy incorporating comments from all stakeholders.	23 days	22 May 2024	45%
Finalise the Multisectoral-Adolescent Nutrition Strategy	Review and contribute to the final Multisectoral- Adolescent Nutrition Strategy incorporating comments from all stakeholders.			

However, as the actual starting date may impact the dates estimated in the TOR, a detailed workplan with exact timeframes and actual delivery dates will be jointly agreed upon between the consultant/ individual contractor and the supervisor upon contract signature.

PERFORMANCE INDICATORS FOR EVALUATION OF RESULTS

The performance of work will be evaluated based on the following indicators:

- Completion of tasks specified in TOR
- Compliance with the established deadlines for submission of deliverables
- Quality of work
- Demonstration of high standards in cooperation and communication with UNICEF and counterparts

PAYMENT SCHEDULE

All payments, without exception, will be made upon certification from the supervisor of the contract of the satisfactory and quality completion of deliverables and upon receipt of the respective and approved invoice.

Travel (international and local) costs will be reimbursed on actual expenditures and upon presentation of original supporting documents. As per UNICEF operational guidelines, travel for international consultancies, will be in economy class and will use the most economical route.

DESIRED COMPETENCIES, TECHNICAL BACKGROUND AND EXPERIENCE

Academic qualification:

- An Advanced University Degree in Public Health or Nutrition

Work experience:

- A minimum of 8 years of relevant professional experience in public health/nutrition planning, management, and policy research at the international level, including in low and middle-income countries with proven experience in MIYCN and adolescent nutrition programming.
- Familiarity with nutrition strategy development and SUN frameworks. Prior experience of working in Malawi is an asset.

Technical skills and knowledge:

- Strong analytical and technical abilities, particularly on maternal nutrition and adolescent nutrition
- Expertise in working with Government, UN, Development Partners and research agencies
- Ability to use prioritize, multi-task, and work well independently under pressure to meet deadlines.
- Proactive with a commitment to quality and accuracy with close attention to detail.

Competencies: The Consultant (s) must have the following competencies:

- Work collaboratively with others
- Thinks and acts strategically
- Manages ambiguity and complexity
- Drive to achieve results for impact

Languages: English, both oral and written, is a must, and the ability to read, analyse, and interpret complex documents.

ADMINISTRATIVE ISSUES

UNICEF will regularly communicate with the consultant and provide feedback, guidance, and necessary support to achieve the work's objectives, as well as remain aware of any upcoming issues related to the performance and quality of work.

As per policy on consultants, the individual will be expected to complete a list of mandatory training, including policies on Prohibiting and Combatting Fraud and Corruption, Prohibition of discrimination, harassment, sexual harassment, and abuse of authority, and other relevant policies for their information and acknowledgment upon acceptance of the offer.

Before the issuance of the official contract, the individual consultant is requested to:

- Complete the applicable mandatory trainings
- Self-certify that he/she is fully vaccinated against SARS-CoV-2 (Covid-19) with a World Health Organization (WHO)-endorsed vaccine. 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.

CONDITIONS

- The national consultant will support the activities related to the preparation and submission of draft strategies(s), including stakeholder consultations to inform the strategies, stakeholder validation workshop, and support finalisation of strategies with a total work period of 52 days.
- The candidate selected will be governed by and subject to UNICEF's General Terms and Conditions for individual contracts.
- No contract may commence unless the contract is signed by both UNICEF and the consultant.
- Consultants will be paid an all-inclusive fee (stationary, travel, communication, and other miscellaneous expenses) per the stipulated deliverable and payment schedule.
- Under the consultancy agreements, a month is defined as 21.75 working days, and fees are prorated accordingly for actual days worked.
- The consultant is not entitled to payment for overtime, weekends or public holidays.
- Travel expenses for official in-country trips, including living costs, will be inclusive in the consultancy fee.
- Transport will be provided to the consultant during in-country field travel, if planned and approved.
- No travel should take place without an email travel authorization from section prior to the commencement of the journey from the duty station.
- Standard UNICEF procedures will apply for invoicing and all other financial management requirements set out in the contract.
- Standard penalty clauses will also apply for late and poor-quality deliverables. The supervisor of the contract will provide the consultant with the criteria for the evaluation of the quality of each deliverable.
- Additional details of UNICEF rules, regulations and conditions will be attached to the contract.
- Consultants will not have supervisory responsibilities or authority on UNICEF budget.

- 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 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. Consultants 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.
- UNICEF will not provide the consultant with a laptop, data or other electronic equipment.
- The assignment is an off-site support.

HOW TO APPLY

Interested consultants should provide the following:

1. Curriculum Vitae
2. Brief technical proposal (no longer than five pages) demonstrating the consultant’s understanding of the assignment and approach/methodology to the assignment
3. Financial proposal including a breakdown of their all-inclusive fees (including professional fees, travel, living cost, visa and other costs). Complete the attached form.



Financial
Proposal.xlsx

4. References details