

TERMS OF REFERENCE

International Consultant – Maternal and Adolescent Nutrition

(International candidates only)

CONTRACT MODALITY	Individual Consultancy
DUTY STATION	Maputo, Mozambique, with field travel to Nampula, Zambézia and Cabo Delgado & Office-based
DURATION OF CONTRACT	11 months

Purpose of Assignment

UNICEF Mozambique seeks an international consultant to provide 11 months of time-bound technical support on maternal and adolescent nutrition. The consultant will deliver defined outputs to prevent all forms of malnutrition in adolescent girls and women before and during pregnancy and while breastfeeding. The focus is on pregnant adolescents, young mothers and other nutritionally at-risk women.

The assignment responds to time-bound commitments under NutriNorte (EU), the Child Nutrition Fund partnership with Government of Mozambique, and the UN–Ireland Partnership on Child Wasting (2026–2030). It applies the UNICEF Programming Guidance on Maternal Nutrition (2021).

Scope of Work

Background

Maternal and adolescent undernutrition sustains the intergenerational cycle of poverty and stunting in Mozambique. Stunting among children under five fell from 50.1% in 2001 to 37.5% in 2022 but remains above the African average. Only 14% of children meet minimum dietary diversity (IDS 2021–22).

Early pregnancy is a central driver. Mozambique is among the five countries with the highest prevalence of child marriage, and around half of 18-year-old girls have already had a child. Coverage of adolescent-friendly health services (SAAJ) is limited, and most pregnant adolescents receive the same care as adult women.

UNICEF supports the Ministry of Health (MISAU) to deliver the Nutrition Intervention Package (PIN) under the Food Security and Nutrition Policy and Strategy – PESAN 2024–2030 and the Government’s Five Year Plan – PQG 2025–2029. Several investments carry explicit maternal and adolescent nutrition commitments:

- NutriNorte (EU): design and pilot an adolescent-friendly nutrition intervention package component for pregnant girls and young mothers aged 12–19 in two districts (Activity 2.11). The pilot links with the Global Action framework to prevent anaemia among women and adolescents’ girls.
- Child Nutrition Fund: iron and folic acid (IFA) or multiple micronutrient supplements (MMS) in antenatal and postnatal care, targeting 3.4 million pregnant and breastfeeding women. It also funds SBC by Permanentes focused on adolescents and young caregivers.
- UN–Ireland Partnership on Child Wasting (2026–2030): 150,000 pregnant and lactating women counselled on breastfeeding and MMS in Meconta, Nacala-a-Velha, Nicoadala and Milange. The partnership also links PIN with the Child Grant, whose caregivers are mainly young mothers.
- Vitamin A in a New Age: accelerators on targeting adolescent mothers and on empowering women and

girls.

The consultancy applies the UNICEF Programming Guidance on Maternal Nutrition (2021), which operationalises Results Area 3 of the UNICEF Nutrition Strategy 2020–2030. Its five programming priorities cover women’s nutrition before pregnancy, during pregnancy and while breastfeeding. They also cover adolescent mothers and other nutritionally at-risk women, and innovations for maternal nutrition.

Tasks

Under the supervision of the Nutrition Manager, the consultant will support development of:

- Situation analysis and policy: conduct a maternal and adolescents nutrition situation analysis covering diets, services and practices. Review national ANC and postnatal nutrition guidelines against the UNICEF guidance and WHO recommendations, and propose updates to MISAU.
- Pregnancy and breastfeeding (priorities 2–3): support development of recommendations to strengthen ANC and postnatal nutrition counselling on diets, weight gain, supplement adherence, breastfeeding and hygiene. Support the IFA-to-MMS transition and, where national policy allows, calcium, deworming, anaemia screening and treatment, and weight gain or MUAC monitoring.
- Adolescent mothers and at-risk women (priority 4): provide technical leadership to the implementation of a formative research and the human-centred co-design of the adolescent-friendly nutrition intervention package component with MISAU, MGCAS, adolescents and CSO partners. Support its pilot in two districts and targeted support for underweight and anaemic pregnant adolescents (including SQ-LNS where appropriate). Link these services with SAAJ, child protection, GBV services and the Child Grant.
- Before pregnancy (priority 1): contribute to writing the guidance for implementation of nutrition programmes targeting adolescent girls and young women through health, education, community and social protection platforms.
- Systems, capacity and supply: support the capacity building of health workers, community health workers (APS) and partners through training modules. Work with the Supply section on MMS and IFA forecasting, and with programme colleagues on delivering CNF, Irish Aid and NutriNorte commitments.
- SBC and gender: provide technical inputs and contribute to discussions with SBC team to addresses the diets of women and girls, food taboos, women’s workload and decision-making, and the engagement of men, boys and community leaders.
- Data, learning and innovation (priority 5): support technical discussions to integrate core maternal nutrition indicators into DHIS2 (SISMA) and programme frameworks. Document results and test innovations such as digital adherence reminders.
- Coordination and reporting: participate in technical working groups with MISAU, WHO, UNFPA, WFP and partners, and contribute to donor reports and proposals.

Work Assignments Overview	Deliverables/Outputs	Delivery deadline to complete the deliverable
Inception	Deliverable #1 Inception report with detailed workplan and mapping of maternal and adolescent nutrition activities, partners and districts across the portfolio	15 December 2026

Situation and policy analysis	Deliverable #2 Maternal nutrition situation analysis, and gap analysis of national ANC and postnatal nutrition guidelines against the UNICEF guidance and WHO recommendations, with proposed updates validated with MISAU	26 February 2027
Formative research	Deliverable #3 Formative research report on the needs of pregnant girls and young mothers in the two pilot districts, validated with MISAU and MGCAS	30 April 2027
MMS roll-out	Deliverable #4 MMS guidance note, training plan and supply forecast (MMS, IFA, and calcium or BEP where adopted) for UNICEF-supported districts, prepared with the Supply section	31 May 2027
Adolescent-friendly package	Deliverable #5 Adolescent-friendly nutrition intervention package, counselling and training materials, and pilot implementation plan, co-designed with adolescents, MISAU, MGCAS and CSO partners	30 June 2027
Monitoring	Deliverable #6 Core maternal nutrition indicators agreed and integrated into programme monitoring and DHIS2 (SISMA) reporting, with a monitoring plan for the pilot	30 July 2027
Pilot launch	Deliverable #7 Training of government and CSO staff in the two pilot districts completed; first quarterly pilot monitoring report submitted	30 September 2027
Coordination and reporting	Deliverable #8 Monthly progress reports, including inputs to donor reports (EU, Irish Aid, CNF) and technical working group notes	By the 5th of each month (Jan–Oct 2027)
Learning and close-out	Deliverable #9 Learning brief on the adolescent pilot and MMS roll-out, and final consultancy report with recommendations	29 October 2027

Payment Schedule:

Payment will be made on submission and acceptance of 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.

Important Notes

- 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 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.
- Contracts are conditional upon the selected candidate's willingness to comply with any current or future

vaccination requirements that may be established by UNICEF, where applicable. Failure to comply with applicable vaccination requirements, where required and without an approved medical exemption by UNICEF, may result in the withdrawal of the consultancy offer or termination of the contract in accordance with the General Terms and Conditions of Contract.

- 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.

QUALIFICATIONS / SPECIALIZED KNOWLEDGE / EXPERIENCE/ COMPETENCIES (CORE/TECHNICAL/FUNCTIONAL) / LANGUAGE SKILLS REQUIRED FOR THE ASSIGNMENT

Minimum requirements:

Education:

- Advanced university degree (Master's or higher) in Nutrition, public health, global health, maternal and child health, or a related field. A first university degree with two additional years of relevant experience may be accepted in lieu of a Master's degree.

Work Experience:

- Minimum five years of relevant professional experience in nutrition or public health programming in a developing country, including maternal nutrition (ANC/postnatal nutrition counselling, IFA or MMS) and/or adolescent nutrition.

Skills:

- Sound knowledge of the UNICEF Maternal Nutrition Programming Guidance and WHO recommendations on antenatal and postnatal nutrition, including MMS, calcium and BEP. Understanding of the nutritional needs of pregnant adolescents and of how gender and social norms affect nutrition. Ability to design formative research and translate findings into programme packages. Strong analytical and writing skills.

Language Requirements:

- Fluency in English and Portuguese, written and spoken.

Desirables:

- Experience with BEP, SQ-LNS or anaemia management; adolescent sexual and reproductive health, gender-transformative approaches and/or human-centred design; government and community health systems; the UN system. Knowledge of a northern Mozambique language.
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