Classified Job Descriptions

Job Description Type:	Specific Job Description	Region:	ESAR
Category:	IP (International Professionals)	Country:	Kenya
Reason for Classification:		Duty Station:	Nairobi
Level:	P-4	Office:	Global Programme Division
Title:	Health Specialist	Section:	Health
Title Information in Parenthesis:	Information Systems	Unit:	Digital Health Transformation, Access and Equity
CCOG Code:	1I	Case Number:	
UNICEF Code:	HEA	Post Number:	00133458
Classified by:		Classified Date:	

Organizational Context:	The Global Programme Division (GPD) plays a central role in driving programme excellence across UNICEF. It provides global strategic leadership and policy direction, develops and monitors frameworks and standards, and ensures coherence and alignment across sectors, regions, and partners. GPD generates high-impact, evidence-based solutions and serves as a hub of specialised expertise, offering technical guidance on policy reform and scalable programming. GPD leads UNICEF's policies, standards, and negotiations for programmes, ensuring that the organisation's assets and priorities align with, and contribute to, child development goals. In addition, GPD strengthens country-level implementation through integrated technical support, linking global policy with on-the-ground action to deliver results for children at scale.

As part of this structure, UNICEF has established Centres of Excellence (CoEs) to provide high-quality, demand-driven technical assistance to countries, governments and partners. Located strategically in Nairobi, Panama, Amman, and Bangkok, the CoEs bring together cross-cutting expertise across time zones. Global Programme Practices in CoEs function as a single point of entry for support, delivering tailored assistance in priority areas such as policy reform in matters that advance the well-being of children, at-scale programme design, public finance, workforce development and institutional strengthening, and timely humanitarian response while promoting resilient development. In doing so, the CoEs also contribute to global policy standards, ensuring that UNICEF's support is grounded in practical knowledge.

Strategic office context:
UNICEF's mission is to uphold the rights of every child, everywhere. Equity sits at the heart of this work, ensuring that the most disadvantaged and excluded children are reached with essential services.

Children's rights to health, protection, and survival depend on health systems that can see, reach, and protect every child. In many low- and middle-income countries, weak digital systems, fragmented governance, and limited monitoring capacity undermine this principle, leading to systemic failures in health service delivery and accountability.

An estimated 14.3 million zero-dose children received no vaccine at all in 2024, with many more undercounted, because the systems meant to identify, track and follow them are missing or incomplete (WHO/UNICEF WUENIC, 2025). Where health management information systems, community health platforms, and the foundational registries that connect them do not function together, malnourished children go undetected, referrals are never completed, and the frontline worker cannot see the child in the record Incumbent is expected to act on.

UNICEF's Strategic Plan 2026 to 2029 positions digital health systems as central to Impact Result 1: saving 10 million lives and ensuring 500 million children are healthy, well-nourished, and developmentally on track. UNICEF supports countries in strengthening health information systems, building digital tools that equip frontline workers, and embedding digital monitoring frameworks that improve effectiveness and accountability across entire health systems.

The UNICEF Digital Health Strategy 2026 to 2030 sets out how this is delivered, through five sequenced Big Bets running from finding unreached children to financing and scaling the systems that serve them, and through a repositioning of UNICEF from technology deliverer to trusted government advisor. This post sits within the Digital Health Transformation, Access and

	Equity Section (DHx), which the Strategy identifies as the health domain anchor for that work, backstopping Country Office health teams who lead the government relationship rather than substituting for them.
Purpose of the Job:	The Health Specialist (Information Systems) provides specialist technical advisory support, through UNICEF Country Offices, to governments strengthening the digital platforms that carry primary health care service delivery. The role translates the normative standards set by WHO and the architectural commitments of the UNICEF Digital Health Strategy 2026 to 2030 into documented functional and interoperability requirements that governments can specify against, procure against, and hold suppliers accountable to, working platform by platform across the national digital health landscape. The position is the operational counterpart to the Centre of Excellence's blueprint, governance and financing advisory work. Where that work establishes what a national architecture should look like and how it should be governed, sequenced and financed, this role addresses how each platform within that architecture is specified, aligned to standards, connected to the systems around it, and sustained beyond the investment that built it. Its focus is the systems that generate health information and the clinical decision support they carry to the point of care, rather than the analysis and use of the data those systems produce, which is led by the Office of Strategy and Evidence together with the relevant health programme teams. Consistent with the Centre of Excellence model, the position backstops Country Office health teams and does not assume Country Office accountabilities for government engagement, programme delivery, or in-country implementation, nor does it substitute for the specialist build, configuration and deployment capacity that governments and Country Offices source from firms and consultancies. The role is hands-on in the artefacts it produces rather than in the systems it advises on: requirements specifications, target software standards, conformance and technical review assessments, and structured implementation guidance that Country Offices and their government counterparts apply. Requests are received and prioritized through the Country Office demand pathway.
Key functions, accountabilities and related duties/tasks:	The Health Specialist (Information Systems) will be accountable for the following functions, in alignment with UNICEF's Strategic Plan 2026 to 2029, the UNICEF Digital Health Strategy 2026 to 2030, and the programme offer of the Centre of Excellence. All support described below is initiated by Country Offices, delivered as technical advice and technical products rather than as direct implementation, and scoped so that it complements rather than duplicates the Centre of Excellence's blueprint and governance, health workforce

and learning, and geospatial systems workstreams.

1. Platform Requirements and Technical Specification
- Advise on documented functional, non-functional and interoperability requirements for national and subnational health information platforms, so that governments specify what a system must do before selecting who will build it, in line with the Strategy's commitment that UNICEF reasons from the requirement to the solution rather than from a preferred solution backward.
- Support countries to operationalize UNICEF target software standards for priority health information platform categories, including community health information systems and supply chain systems, so that Country Offices and governments assess candidate solutions against a documented and current benchmark rather than a bespoke specification written for each procurement.
- Advise Country Offices on the technical content of procurement documentation, supplier evaluation criteria and acceptance testing, without participating in supplier selection or endorsing individual products or vendors.

2. Platform Landscape Assessment and Rationalization
- Assess the installed base of health information platforms in a country against documented functional and interoperability requirements, establishing which systems are conformant, which can be aligned, and which are candidates for integration or retirement.
- Advise on the alignment of individual platforms with the national platform rationalization and blueprint processes led by the Centre of Excellence governance and planning workstream, contributing the platform-level technical evidence on which retention, integration and sunset decisions draw.
- Contribute platform-level and interoperability findings to national digital health maturity and readiness assessments led by other Centre of Excellence workstreams, rather than leading those assessments.
- Advise on integration pathways from existing platforms into the national health information exchange reference architecture, sequencing the technical work so that foundational registries and exchange components precede application-layer investment.

3. Standards Conformance and Interoperability Implementation
- Advise on the implementation of interoperability standards once established in national policy, including FHIR profiling, terminology and code system alignment, identifier management, and the conformance testing that determines whether a platform meets the standard in operation rather than on paper.
- Support the practical application of national health data governance and data protection requirements at platform level, including access controls, audit provisions, consent handling

and child data safeguards, in coordination with the Centre of Excellence governance workstream and the Digital Impact Division on Digital Guardrails.
- Advise on the technical dimensions of platform-level cybersecurity and resilience requirements, including offline-capable operation and backup provisions, in coordination with the Digital Impact Division.
- Document and disseminate interoperability implementation guidance, reference profiles and lessons across countries, so that each engagement lowers the cost of the next.

4. Point-of-Care Digital Tools and Decision Support
- Advise on the design, standards alignment and integration of community health information systems (eCHIS) and facility-level point-of-service platforms, applying WHO SMART Guidelines and Digital Adaptation Kits as the normative content standard for digitized clinical protocols, decision logic, core data elements and indicator definitions.
- Support governments, through Country Offices, to embed clinical decision support into point-of-care tools across the maternal, newborn, child and adolescent health continuum, so that the tool in a health worker's hand improves the care a child receives rather than functioning primarily as a reporting instrument.
- Advise on the technical requirements for HMIS and DHIS2 platform alignment with global metadata packages, immunization data management and zero-dose child tracking, focusing on system configuration standards and integration requirements rather than on in-country configuration and deployment.
- Advise on the platform and interoperability requirements for campaign digitalization, including integration of campaign data into routine national health information systems, in coordination with the campaign digitalization workstream.
- Advise on how digital supply chain systems, including eLMIS, cold chain and commodity visibility platforms, fit within the national health information system architecture and exchange data across it, with Supply Division leading on individual supply chain solutions and this position contributing the cross-system interoperability requirements that connect commodity data to service delivery data.
- Support the design and interpretation of implementation research on point-of-care platforms, including provider workload and usability outcomes alongside coverage measures, with transparent reporting of what did not work.

5. Platform Sustainability and Government Stewardship
- Advise on platform sustainability requirements from design stage, including the five-year costed maintenance plan, the government counterpart capacity assessment, the domestic budget integration pathway, and vendor independence provisions that the Strategy requires of every supported investment.
- Support governments, through Country Offices, to build the institutional capability to

	steward, maintain and extend their own platforms, so that systems remain operational once the financing that established them ends. - Assess, at engagement closure, whether supported platforms remained operational and whether government stewardship was achieved, contributing findings to the Centre of Excellence evidence base including where results fell short. - Advise on continuity and resilience requirements for health information platforms in humanitarian and fragile settings, prioritizing offline-capable operation, data protection and rapid reintegration into national systems as capacity is restored. - Data analytics, visualization and dashboard development requirements are led by the Office of Strategy and Evidence, with this position contributing the platform-side data availability and integration requirements those products depend on. 6. Foundational Registries, Identity and Continuity of Care - Advise on the technical design, data governance and interoperability of the foundational registries that a national health information exchange reference architecture depends on, covering the client registry and master patient index, the terminology service, the product catalogue, and the registry-side requirements of the health facility and health worker registries. - Coordinate registry work with the Centre of Excellence geospatial and health workforce workstreams, which lead on the health facility registry as a geo-enabled planning asset and the health worker registry as a workforce planning and learning asset respectively, with this position contributing the identifier, conformance and interoperability requirements that allow both to function as authoritative reference registries within the national architecture. - Contribute health sector requirements to CRVS, digital identity and unique patient identification work, including birth notification and its linkage to immunization and child health records, in coordination with the Digital Impact Division, Supply Division and the Child Protection birth registration workstream, with the division of labour defined engagement by engagement. - Advise on the platform-level requirements for longitudinal child health records that follow a child from birth notification through adolescence, including record continuity for children in motion across displacement and migration.
Impact of Results:	The Health Specialist (Information Systems) strengthens the capability of governments, supported by UNICEF Country Offices, to specify, connect and sustain the digital platforms that primary health care delivery depends on. By anchoring platform investment in documented requirements, normative clinical standards and interoperable foundations rather than in product selection, the role reduces the risk that digital health investment produces systems that cannot integrate, cannot scale, and do not survive the funding cycle that built them, and it does so in service of the children whom fragmented systems currently fail to see.

Competencies and level of proficiency required:	Core Values: Care Respect Integrity Trust Accountability Sustainability Core Competencies: Demonstrates self-awareness and ethical awareness (1) Works collaboratively with others (1) Builds and maintains partnerships (1) Innovates and embraces change (1) Thinks and acts strategically (1) Drive to achieve impactful results (1) Manages ambiguity and complexity (1)
Recruitment Qualifications:	Education requirement: An Advanced university degree (Master's or higher) in Public Health, Social Sciences, Information Technology, Computer Sciences, International Development or a related field. Experience required: Minimum eight years of progressively responsible experience in digital health, health information systems, interoperability, or digital health transformation within the health sector including demonstrated experience supporting the design, implementation, integration, or assessment of digital health solutions and providing technical advisory support to government counterparts in low- and middle-income countries is required. Additional requirements: - Developing or deploying functional, non-functional and interoperability requirements for digital health platforms. - Applied hands-on experience with DHIS2 as a national health management information system, including metadata package adaptation, system configuration, and integration with adjacent platforms, alongside experience with community health information systems (eCHIS), CRVS, or digital identity systems. - Providing technical advisory support to government counterparts on digital health platform assessment, systems architecture, or digital health transformation in low- and middle-income countries. Desirable experience:

	Adapting WHO SMART Guidelines and Digital Adaptation Kits into conformant digital health implementations. Implementing interoperability standards and health information exchange reference architectures, including FHIR profiling, terminology services, and foundational registries. Developing target software standards, benchmark requirement sets, or normative guidance for digital health platform categories at global or multi-country level. Applied experience with campaign digitalization and real-time monitoring, including integration into national HMIS and DHIS2 systems. Supporting digital health interventions in humanitarian and fragile settings, including Level 3 emergencies. Assets: Certification in HL7 FHIR, Open Health Information Exchange (OpenHIE Academy), DHIS2 Academy Fundamentals, or Digital Health: Planning National Systems. Contributions to international digital health guidance, normative standards, toolkits, or communities of practice, for example with WHO or ITU. Engagement with digital public goods and open-source health platforms deployed at national scale. Experience working with UN agencies, multilateral organizations, governments, donors, or global technical partnerships. Required skills: Strong understanding of health information systems architecture, interoperability frameworks, and standards-based digital health solutions, including the governance, cybersecurity, data protection and sustainability principles that govern them. Ability to translate normative guidance and architectural standards into documented, testable functional and interoperability requirements. Demonstrated ability to conduct technical assessments of digital health platforms and translate findings into practical recommendations for government counterparts. Ability to engage effectively with government counterparts, technical partners and software vendors on complex digital health systems issues. Ability to present complex technical information clearly to both technical and non-technical audiences, including in written technical products. Language requirements: Fluency in English is required. Knowledge of another official UN language (Arabic, Chinese, French, Russian or Spanish) or a local language is an asset.
Is this role a Representative, Deputy Representative, Chief of	No

Field Office, the most senior Child Protection role in the office, Child Safeguarding Focal Point, or Investigator (OIAI)?:	
Is this post a Direct contact role in which incumbent will be in contact with children either face-to-face, or by remote communication, but the communication will not be moderated and relayed by another person?:	No
Is this post a Child Data role in which incumbent will be manipulating or transmitting personal-identifiable information on children such as names, national ID, location data, or photos)?:	No
The selected candidate for this position will be required to engage with vulnerable children:	No
Competencies and level of proficiency required:	
Recruitment Qualifications:	

Attachments:

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