**TERMS OF REFERENCE (TOR)**

**OF THE [Name of Country] NATIONAL NUTRITION CLUSTER**

**BACKGROUND**

The cluster approach, introduced as part of the humanitarian reform, aims at ensuring clear leadership, predictability and accountability in international responses to humanitarian emergencies by clarifying the division of labour among organisations and better defining their roles and responsibilities within the different sectors involved in the response. It aims at improving the effectiveness of humanitarian response while at the same time strengthening partnerships between NGOs, international organisation and UN agencies, the international Red Cross and Red Crescent Movement.

 *[Brief details on emergency: key events and dates, crisis level, affected population, immediate priorities, if Flash Appeal or HRP have been developed, etc.]*

*[Fill in with details on cluster approach in country: which clusters have been activated and when, lead and co-lead agencies, SRSG and/or HC and/or RC, OCHA presence, Government role, sub-national level clusters]*

*[If the cluster is led by UNICEF]* UNICEF as nutrition cluster lead agency and in line with the Core Commitments for Children in Humanitarian Action, is fully committed to interagency humanitarian reform and supports this through provision of leadership and participation in assigned clusters and sectors.

**NUTRITION CLUSTER OBJECTIVE(S)**

*List the objective(s) that the NC (Nutrition Cluster) wishes to reach. The objectives can be time bound to reflect a short/medium term workplan.*

*The two following generic objectives could be used in most contexts, other may be added if need be:*

* *Ensure effective and strategic coordination of nutrition in emergency response including: programs to prevent and treat undernutrition, IYCF, advocacy actions, nutrition data management, financing, etc.*
* *Build and update NC members and national capacities with regard to nutrition assessment, preparedness, nutrition in emergency response, etc.*

**HUMANITARIAN PRINCIPLES**

The NC shall pursue its coordination mandate upholding the following humanitarian principles:

* Humanity: all girls, boys, women and men of every age shall be treated humanely in all circumstances by saving lives and alleviating suffering, while ensuring respect for the individual.
* Impartiality: ensuring that assistance is delivered to all those who are suffering, based only on their needs and rights, equally and without any form of discrimination.
* Neutrality: a commitment not to take sides in hostilities and to refrain from engaging in controversies of a political, racial, religious or ideological nature.
* Independence: Humanitarian action must be autonomous from the political, economic, military or other objectives that any actor may hold with regard to areas where humanitarian action is being implemented.

**NUTRITION CLUSTER FUNCTIONS**

Describe here the tasks of the NC as agreed by the cluster members. The tasks could be built around the IASC 6 core functions common to all national clusters:

1. To support service delivery
2. To inform the HC/HCT’s strategic decision-making
3. To plan and implement cluster strategies
4. To monitor and evaluate performance
5. To build national capacity in preparedness and contingency planning
6. To support robust advocacy

*Mainstreaming accountability to affected populations across all phases.*

*Else, a more nutrition-based description of tasks, like the one below, could be used and adapted:*

**NIE coordination**

* Coordinate the nutrition in emergency response of cluster members.
* Coordinate the prevention, preparedness and contingency planning actions.
* Identify and address response and/or response gaps.
* Ensure decentralization of the nutrition cluster coordination to zonal and/or regional levels with involvement of the Government where possible.
* Enhance the links and coordination between nutrition, health, WASH, food assistance and agriculture and livelihoods clusters/sectors.
* Provide regular and active follow up on actions coming out of the meetings.
* Ensure coordinated key nutrition policy, strategy, workplan development.

**Information management**

* Develop, update and share 4W (who, what, where, when) maps for effective resource management and to avoid duplication.
* Collect, analyse and disseminate information on the nutrition situation & response to the nutrition cluster members and to other stakeholders within and without the country (e.g. regional offices, HQs, …).
* Share updates on new developments in nutrition.
* Archive and make available reports of assessments, evaluations and any other document relevant to NIE in the country.

**Capacity building**

* Map partners capacities and identify gaps.
* Develop capacity building plans and trainings to enhance programme quality.

**Nutrition assessment**

* Develop standard guidelines for nutrition assessment and ensure partner’s compliance.
* Support the implementation of inter-agency and multi-sectoral assessments.
* Encourage joint review of all nutrition assessment results and reports prior to broader circulation.
* Identify areas requiring more detailed nutrition investigation and analysis.

**Nutrition programme implementation**

* Develop and review on a regular basis the strategy and workplans for the nutrition response.
* Share regular updates on interventions and discuss their performance, appropriateness, challenges.
* Promote lesson learning and best practices sharing in programme planning, implementation, monitoring and evaluation.
* Provide of technical support and tools to the nutrition response actors in nutrition and key horizontal issues such as protection, gender, disability, resilience, etc.
* Facilitate development of protocol and guidelines for programme implementation in line with international standards and latest evidence.
* Provide technical review of new project proposals, where requested.
* Liaise with other clusters on topics of common interest (e.g. joint assessments, nutrition-sensitive programming, etc.).
* Set up a common monitoring and evaluation framework and agree on common objectives, tools, timeline, etc.
* Contribute to the HNO, HRP and any other NIE relevant product (e.g. sitreps).
* Ensure AAP is considered throughout the humanitarian project cycle.
* Ensure cross cutting issues like gender and age, GBV, environmental protection and global commitments (e.g. grand bargain commitments, humanitarian development nexus...) are mainstreamed into operations.

**Advocacy**

* Advocate for nutrition cluster priority projects’ resource mobilization.
* Advocate for and promote appropriate interventions in accessible areas of identified need.
* Advocate for innovative strategies of providing nutrition services in insecure areas.
* Advocate for appropriate inter-sectoral strategies to address underlying causes of malnutrition.
* Encourage nutrition-sensitive programming primarily with WASH, health and food assistance, agriculture and livelihoods clusters.
* Advocate for key nutrition issues to be included in the long-term health sector strategies as necessary.

**Funding**

* Provide a forum to share and discuss funding opportunities.
* Establish a cluster review committee to review nutrition cluster member projects submitted for common humanitarian funding, pool funds, etc.
* Outreach to external actors (donors, private sector, etc.) for advocacy, briefing purposes.

**NUTRITION CLUSTER STRUCTURE**

The Cluster Lead Agency (CLA) is [*UNICEF or change if needed].*

*This section should clarify the following points*

* *Who’s co-leading or co-chairing? How is it selected (usually elected by members)? The TOR should be agreed upon.*
* *What is the role of national authorities?*
* *What are the other membership levels? The following is a generic description of three common levels that can be adapted to the context:*
	+ Partners: Organizations currently providing nutrition in emergency services. They can be UN agencies, NGOs and relevant technical Ministries. They can participate in the SAG and TWG. Each partner organization is responsible to nominate one focal person and one substitute to ensure consistency in representation and facilitate communication within the cluster. Each partner is entitled to a single vote on cluster related matters. Cluster Partners support the Cluster Coordinator in fulfilling the Cluster mission by actively participating in Cluster initiatives. They share relevant information (assessment, program data, etc.) with the NC. They identify core advocacy concerns, including resource requirements, and contribute to key messages for broader advocacy initiatives of the cluster. They support training of national and international staff and promote transfer of skills. They follow the priorities, guidelines, standards and tools collectively agreed and issued by the cluster. List of partners as of *XX/XX/XX: [name here or refer to the cluster website or contact list, if available online].*
	+ Members: Organizations who currently don’t implement any nutrition activity and are interested in participating to the NC. If an organization starts implementing nutrition activities and starts reporting to the cluster, its status will be changed to a cluster partner. Cluster Members don’t have the right to vote. List of members as of *X* XX/XX/XX: [name here or refer to the cluster website or contact list, if available online].
	+ Observers: Organisations who don’t want to be affiliated with the cluster system, but want to be part of some cluster activities, including sharing of certain information. Observers can be active in nutrition without being partners. They can be part of TWG and SAG. Cluster Observers don’t have the right to vote. List of members as of XX/XX/XX: [name here or refer to the cluster website or contact list, if available online].
* *Who is part of the NC coordination team (NCC, IMO, Cluster Support Officer…)?*
* *Is there a Strategic Advisory Group (SAG)? Who’s part of it?*
* *Are there Technical Working Groups (TWG)? Who’s part of it? What are the expected outputs?*
* *Are there sub-national NC? Who’s leading each? How do they coordinate with the national NC?*

**OPERATIONS**

Meeting will take place every [month, or change] . Meeting will take place at [xx:yyh] at [specify location. If on rotational basis, please specify the modality for choosing the location].

An agenda will be drafted by the NCC, circulated by email for inputs at least one week before the meeting, and then validated at the beginning of the meeting.

Ad-hoc meetings can be requested by the NCC. Partners can propose ad-hoc meetings but these have to be validated by the NCC.

Data from nutrition programs [specify what data are required: CMAM admission, performance, assessments, etc or provide a link to the partner reporting tools.] need to be sent to the [specify, IMO?] by the [specify date] so that these will be analysed and presented during the [monthly] meeting.

Minutes will be taken by [specify if one person will be in charge, or if on rotational basis]. These will be reviewed by the NCC, then by all partners, and finally validated by the NCC and shared or made available online.

Decision are made as much as possible based on the co0ncensus. In some situations, a voting might be required, then it should be made by majority vote, each organisation having the right to one vote. The denominator to determine the preferred option is the number of organisation present at the meeting or responded to an email or online survey. The NCC and the members of the Cluster Coordination team do not have a voting right. If the same percentage of organisation vote for the two or more options, the NCC vote will be considered.

*Please specify here*

* *the email communication rules (e.g. management of NC mailing lists, who should be data sent to?...) and the use of other channels (e.g. Whatsapp).*
* *the IM system: where are data, reports and NC common documentation stored? How to access, who can upload/delete?*