**Terms of Reference**

**Sub-national Nutrition Cluster Coordinator (UNICEF)**

The nutrition cluster approach was adopted and initiated in Yemen in August 2009, immediately after the break-out of the sixth war between government forces and the Houthis in Sa’ada governorate in northern Yemen. Since then Yemen has continued to face complex emergencies that are largely conflict-generated and in part aggravated by civil unrest and political instability. These complex emergencies have come on the top of an already fragile situation with widespread poverty, food insecurity and underdeveloped infrastructure. Since mid-March 2015, conflict has spread to 20 of Yemen’s 22 governorates, prompting a large-scale protection crisis and aggravating an already dire humanitarian crisis brought on by years of poverty, poor governance and ongoing instability. This escalation of the conflict has affected the provision of the nutrition services, and increase the children vulnerability to malnutrition due to the deteriorated access to the safe water supply, food and basic health services, which is further complicated by the increased cost of living.

The Nutrition cluster is currently well established at national level, with five sub national clusters at the zonal level in Hodeidah, Ibb, Aden, Saada and Sanaa, holding regular scheduled meetings and calling extraordinary meetings when necessary. The nutrition cluster is co-led by UNICEF and MOPHP.

For more information on the National Nutrition Cluster, consult Cluster TOR at <https://www.humanitarianresponse.info/en/operations/yemen/document/nutrton-cluster-tor>

Effective and efficient cluster management is a shared responsibility held by all Nutrition Cluster partners. The Sub-national Nutrition Cluster Team, led by the Sub-national Nutrition Cluster Coordinator, are the impartial representatives of the cluster as a whole and are responsible for the day-to-day coordination and facilitation of the work of the cluster.

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The Nutrition Cluster Coordination team at sub-national level consists of

* Nutrition Cluster Coordinator from UNICEF
* Nutrition Cluster co-Chair from MoPHP/GHO
* Nutrition Cluster co-coordinator, from an NGO
* Nutrition Cluster Information Management Officer from UNICEF.

Modifications to the composition of the Coordination Team are possible, subject to partners and cluster lead agencies agreement.

The **overall purpose of Nutrition Cluster Coordinator** is to improve the timeliness and impact of appropriate humanitarian nutrition assistance for crisis-impacted communities and to strengthen the collective nutrition outcomes of the response.

The Nutrition Subnational Cluster Coordinator will be expected to work with the Nutrition Subnational Cluster co-Chair and co-Coordinator. The major tasks and responsibilities include:

1. **Supporting service delivery:**

* Organise and facilitate regular sub-national cluster coordination meetings and information sharing in all crisis-affected sub-national s to ensure appropriate coordination between all nutrition humanitarian partners at sub-national level;
* Provide regular inputs from the sub-national sub-national cluster to the national-level cluster meetings, cluster bulletins, raise key issues required support from the National level with National Coordination team, etc.;
* Conduct mapping of all current and potential actors – government, national and international humanitarian organizations as well as national institutions, the private sector through provision of regular inputs/updates to the cluster’s 4W (Who, What, Where, When) matrix and other tools;
* Act as focal point for inquiries on the Nutrition Cluster’s response plans and operations at the sub-national level for OCHA and Area HCT.

1. **Informing strategic decision-making of the HC/HCT for the humanitarian response:**

* Support the coordination of assessments at sub-national levels and provide support in identification of needs for cluster and SMART assessments, multi-cluster initial rapid assessments (MIRA), humanitarian needs overview (HNO), IPC analysis, etc, and provide required information for national level analysis such as the IPC, HNO etc. and promote the use of the agreed cluster tools and guidance for surveys and assessments.
* Ensure effective links with other clusters at the sub-national level (with OCHA support), especially Health, Food Security and Livelihoods, WASH, Child Protection and Education by making sure the other clusters at operational level contribute interventions that have influence on nutritional status.;
* Ensure full integration of the IACS’s agreed priority cross-cutting issues, namely human rights, HIV/AIDS, age, gender and environment, utilization participatory, people-centred and community-based approaches by liaising with sub-national - level partners and ensuring that cross-cutting issues are addressed in planning, implementation and monitoring of NiE interventions (collection of sex- and age-disaggregated data, gender-sensitive NiE programmes, etc). In line with this, promote gender equality by ensuring that the needs, contributions and capacities of women and girls as well as men and boys are addressed;
* Develop sub-national cluster workplan in line with the National workplan for the cluster

1. **Prioritization, grounded in response analysis:**

* Provide the National Nutrition Cluster with inputs from governorates for the development, revision and/or update of the Yemen Humanitarian Response Plan (YHRP) and Nutrition Cluster Response Strategy and plans, so that sub-national inputs are adequately reflected in the overall country and cluster strategies, including identification of people in need at the sub-national levels (sex-, and age-disaggregated, caseload calculation, etc);
* Ensure that Nutrition Cluster participants at the sub-national level are aware of relevant policy guidelines, technical standards and relevant commitments;
* Ensure that the Nutrition Cluster responses at the sub-national level are in line with the Yemen Humanitarian Response Plan (YHRP) and Nutrition Cluster Response Strategy and plans, existing policy guidance and technical standards
* Regularly monitor implementation of Nutrition in Emergencies (NiE) activities in all four governorates to ensure that cluster members are adhering to national and international best practice;
* Draw lessons learned from past activities and provide inputs to the national Nutrition Cluster for revising strategies and action plans accordingly;
* Developing contingency planning and preparedness plans for the sub-national clusters when required.

1. **Supporting Advocacy:**

* Support GHOs and cluster partners in identification of core advocacy concerns, including resource requirements, and communicate those to the National Nutrition Cluster;

1. **Monitoring and reporting the implementation of the cluster strategy and results:**

* Undertake regular monitoring visits to all governorates;
* Ensure regular quality reporting against the Nutrition Cluster indicators of service delivery (quantity, quality, coverage, continuity and cost) through communication and discussions with cluster partners and provision of technical support for timely and quality reporting;
* Identify supply pipeline issues and bring them to the attention of the national Cluster and supply managers;
* Support analysis of the Nutrition Cluster at the sub-national level in closing gaps and measuring impact of interventions.

1. **Training and capacity building of cluster partners, Sub-National /local authorities and civil society:**

* Develop capacity building plan for the cluster in line with the national capacity building plan and in consultation with National NCC
* Coordinate partners’ capacity development for NiE programme implementation by regularly conducting a gap analysis on capacity for NiE;
* Liaise with the GHOs and national nutrition cluster to ensure the capacity for NiE is enhanced based on the mapping and understanding of available capacity;
* Support efforts to strengthen the capacity of the cluster partners and local authorities on NiE.

1. **Accountability to Affected population**

* Facilitating feedback mechanism, ensuring that response focused on affected population and partners use the AAP in their planning, implementation and monitoring

**Responsibilities and accountabilities**

The sub-national Nutrition Cluster Coordinator is expected to closely collaborate with the with the Nutrition Cluster co-Chair, co-coordinator and Nutrition Cluster Lead Agency (CLA).

The Nutrition sub-national Cluster Coordinator is a leadership role for coordination, technical development and delivery of response in emergencies. It is not a decision-making role as this leadership is kept neutral and represent the wider humanitarian nutrition community.

Overall accountability for cluster performance rests with UNICEF as Cluster Lead Agency.

Avoiding Conflicts of Interest

* Individuals in the Nutrition Coordinator position should act, and be perceived, as impartial and fair representatives of the cluster, not as representatives of their organization or institution.
* When a Coordinator is attending a meeting in more than one capacity, it must be made clear when they are acting as a representative of that agency, rather than as a Coordinator.

Expected Commitments from MoPHP, UNICEF and the NGO co-coordinator are to work together per the ‘Principles of Partnership’, endorsed by the Global Humanitarian Platform.

**Dispute resolution**

The relationship between the chair, cluster lead agency, cluster coordinator, co-coordinator and cluster partners should be based on transparency, respect and a commitment to resolve disputes by mutual agreement.

The Cluster Coordinator, Cluster CO-lead and the NGO Co-coordinator commit to joint decision-making in all aspects of cluster management, strategy and activities. In specific cases the Cluster Lead Agency maintains the right to take a final decision given that it is directly accountable to the Humanitarian Coordinator.