

REQUEST FOR PROPOSALS for CONSULTANCY SERVICES

To Conduct Review of the National Micronutrient Guidelines in Tanzania

About MI and ENRICH Project

Nutrition International is a Canadian-based not-for-profit organization dedicated to improving the health and nutrition of the world's most vulnerable- especially women and children. Nutrition International is part of a consortium of Non-Governmental Organizations (NGO) implementing the Enhancing Nutrition services to Improve Maternal and Child Health (ENRICH) project. The ENRICH project is funded by Global Affairs Canada (GAC) and World Vision Canada, targeting five countries in Africa (Kenya and Tanzania) and Asia (Bangladesh, Pakistan and Myanmar). The consortium includes World Vision, MI, Canadian Society of International Health, the University of Toronto and Harvest Plus. The project will be implemented over a four-year period, concluding in 2020.

The project is expected to increase the access to basic nutrition and health services to a total of 2.09 million people, including 835,000 women and 740,000 children. In Tanzania, ENRICH will be implemented in five districts of which three are in Shinyanga region (Kishapu, Kahama and Shinyanga District Council) and two are in Singida regions (Ikungi and Manyoni). The project is expected to directly benefit 707,000 pregnant and lactating women and children under two years, and nearly one million people in total.

ENRICH project activities include: (1) Recruiting, training and equipping frontline health workers to promote and provide essential nutrition and health services; (2) Training local health authorities in improved data analysis and reporting to inform planning and delivery of nutrition services; (3) Raising awareness of key nutritional practices, including dietary diversity and micronutrients intake; (4) Providing inputs and training in the development of home gardens with focus on nutrient dense and bio-fortified crops; and (5) Informing and increasing community participation in policy dialogue with governments on MNCH and nutrition issues.

Background and Rationale for In-depth Review of National Micronutrient Guidelines in Tanzania

Micronutrient malnutrition is a major impediment to socio-economic development and contributes to a vicious circle of underdevelopment, to the detriment of already underprivileged groups. It has long-ranging effects on health, learning ability and productivity. Micronutrient malnutrition leads to high social and public costs, reduced work capacity in populations due to high rates of illness and disability. Micronutrient malnutrition is still one of the problems of public health significance in Tanzania. The major documented micronutrient malnutrition problems include vitamin A deficiency (VAD), iron anaemia deficiency (IDA), and iodine deficiency disorders (IDD). According to the 2010 Tanzania Demographic and Health Survey data, about 33% of children under the age of five years and about 37% of women of child bearing age suffer from vitamin A deficiency. The Tanzania Demographic and Health Survey and Malaria Indicator Survey report of 2015-16 shows that anaemia affects 58% of children under the age of five years and about 45% of women of child bearing age.

At the national level, the proportion of households utilizing iodised salt in Tanzania increased from 90% in 2010 to 96% in 2015/16, and the proportion of households utilizing adequately iodised salt increased from 47% to 61% during the same period (TDHS 2010; 2015/16). At the subnational level, in low performing regions there was a significant improvement in the proportion of household utilizing adequately iodized salt between 2010 and 2015/16, from 6% to 23% in Lindi, and from 13% to 27% in Mtwara between (TDHS 2010; 2015/16).

Micronutrient deficiencies are associated with under-five mortality and collectively affect many children in Tanzania annually and those who survive undernutrition in early life often face irreversible consequences in cognitive and physical development. In Tanzania the deficiencies especially of iron, vitamin A and folic acid is estimated to cost the country over US\$ 518 million or more than TZS 800 billion annually, which is around 2.7% of the country's gross domestic product (GDP) as reported in Tanzania Food Fortification Action Plan (2009). Beyond these economic losses, vitamin and mineral deficiencies are a significant contributor to infant mortality.

To address the problem of micronutrient deficiencies, the government through Tanzania Food and Nutrition Centre (TFNC) in collaboration with development partners has worked on efforts towards prevention of micronutrient deficiencies by provision of micronutrient supplementation with vitamin A to under-fives and provision of iron folic acid to pregnant women. Also the Government in collaboration with the private sectors embarked on implementation of centrally processed wheat flour, maize flour and edible oil in large scale food processing industries, including piloting small scale maize flour fortification and home fortification of complementary foods in selected pilot districts.

Many global organizations recognize and emphasize the importance of meeting adequate nutritional needs in the first 1,000 days of life, including exclusive breastfeeding for 6 months followed by nutrient dense complementary foods. In many resource-limited community settings where predominant food are based on cereals it has been noted that the available foods contain insufficient amounts of micronutrients, particularly iron, zinc, calcium, vitamin B12, and vitamin A, which are typically found in animal-source foods. Thus, access to micronutrient interventions such as home fortification of complementary foods for children 6-23 months is crucial to meet the needs for early nutrition life. Early life nutrition supports intellectual and physical development, as well as lifelong health, and is crucial in combating undernutrition. Therefore, adequate intake of essential micronutrients is vital in supporting maternal and infant health during this unique window of opportunity.

Currently Tanzania does have various guidelines on micronutrients although they are in separate documents and some of them need to be updated. MI seeks to develop a micronutrient guideline in one document and also to update the outdated guidelines to be in line with new WHO guidelines.

Objectives of Consultancy

- To develop a comprehensive national micronutrient guideline for Tanzania
 - To identify potential guidelines that can be used to complete the gaps in existing national guidelines in Tanzania

- To engage key stakeholders in the development of the guidelines and to disseminate the new guidelines

Scope of Work

The consultant/team is expected to undertake the following:

1. Desk Review
 - a. Identify and review of existing national guidelines on micronutrient nutrition in Tanzania and from other countries, to identify strengths and gaps. Some of the key questions to be addressed include;
 - i. Are the guidelines in line the with WHO recommendations?
 - ii. If No, identify gaps to be filled in the existing guidelines?
 - iii. What are the delivery models for the micronutrients in the existing guidelines?
 - iv. What are the best delivery models for the various micronutrients that can be used country wide without affecting future sustainability
2. Draft a Micronutrient Guidelines
 - a. Convene a meeting with the micronutrient working group in Tanzania to discuss the proposed outline for the draft of the National Micronutrient Guideline
 - b. Develop the 1st draft of a comprehensive National Micronutrient guideline for Tanzania, which incorporates possible micronutrients (Vitamin A, Iron, Iodine, Folic acid, etc.) deficiency control strategies, namely; supplementation, fortification, dietary diversification, etc.
3. Convene technical stakeholder's consultative meeting
 - a. Convene a 1-day working session with national and selected district-level stakeholders to review and further refine the existing national micronutrient guidelines. The stakeholders must include, but not limited to: MOHSWGEC, TFNC, UNICEF, WHO, MI, HKI, TFDA, TBS, SUA, World Bank, PORALG, RNuOs (Singida & Shinyanga), DNuOs (Manyoni, Ikungi, Shinyanga DC, Kishapu DC, Kahama DC).
4. Produce a final draft of the Micronutrient Guidelines for Tanzania and disseminate the Guideline
 - a. Prepare a summary brief of the micronutrient guideline (preferable one page) and a powerpoint presentation with the key components from the guideline
5. Share the draft guideline with the key stakeholders for the final feedback
6. Submit National Micronutrient guideline to government

Expected Deliverables:

1. Desk Review of current guidelines of micronutrients nationally and globally
2. Outline of first draft of the micronutrient guideline for Tanzania
3. Convene a meeting with micronutrient working group; provide minutes/key recommendations
4. First draft of Guideline for micronutrients in Tanzania
5. Minutes and key recommendations from workshop to review the draft
6. Final draft of micronutrient guideline, with highlighted changes based on the stakeholder meeting and any other follow up meetings

Duration of Assignment: 6-8 weeks

Collaborating Institutions.

For the purpose of this assignment, the in-depth review of Micronutrient guidelines should be done in close consultation with TFNC and the Ministry of Health, Community Development, Gender Elderly and Children. The principal consultant should have a minimum of 10 years post-graduate experience that includes substantial experience in nutrition programming or public health or any other relevant field.

Either the PC or a team member must be a Food scientist/nutritionist with a master's degree in the area of food science and technology/nutrition with experience in micronutrient supplementation or food fortification.

Guidelines for Submission

Interested consultancy firms should send submit the following:

1. Curriculum Vitae (max 5 pages) and a description of the role of each team member (if applicable)
2. The consultant should fill out annex A in lieu of a full proposal.

Applications should be submitted via email to:

Tanzania@NUTRITIONINTL.ORG

cc. llucas@nutritionintl.org

Deadline for submission of proposal is COB Friday 16th June, 2017.

Question regarding this Call for Proposal may be sent via email to the following email address:

nlema@nutritioint.org

Annex A: Consultancy Proposal Template

- 1. Consultant's Proposed Overall Approach to meet the overall objective and sub-objectives as listed in the Terms of Reference (this should be no more than a page).**
- 2. Key resources and previous experiences the Consultant is offering to the Consultancy (consultant should add 3-5 sentences or bullet points highlighting relevant qualifications and summarizing previous relevant experiences).**

Table of Deliverables and Proposed Approach:		
Deliverables	Staffing and Operational requirement overview* (number of working days workshop; travel etc.)	Proposed Approach : (3-5 bullet points to be added by the consultant for each deliverable)
Deliverable 1: Desk Review of current guidelines of micronutrients nationally and globally	Working days: Operational needs:	
Deliverable 2: Outline of first draft of the micronutrient guideline for Tanzania	Working days: Operational needs:	
Deliverable 3: Convene a meeting with the micronutrient working group; provide minutes and key recommendations	Working days: Operational needs:	
Deliverable 4: First draft of Guideline for micronutrients in Tanzania	Working days: Operational needs:	
Deliverable 5: Minutes and key recommendations from workshop with key technical stakeholders to review the draft	Working days: Operational needs:	
Deliverable 6: Final draft of micronutrient guideline, with highlighted changes based on the stakeholder meeting and any other follow up meetings	Working days: Operational needs:	

***Shortlisted candidates will be requested to provide a full budget.**