

VACANCY ANNOUNCEMENT



E-Zone HRM Limited is a management consulting group providing one-stop solutions to clients who seek improved and sustainable profitability through the effective use of their people and resources. We specialize in delivering innovative and value added services that promote revenue growth and cost containment.

E-Zone HRM Limited has a formal agreement with one of the United Nations Agency to provide outsourcing services under a third party contract.

E-Zone HRM Limited is now accepting applications from Bangladeshi Nationals for the following vacancies under third party outsourcing contract modality.

National Consultant-Maternal Nutrition & MMS

Duty Station: Office base (Bangladesh country office)

Contract Duration: 12 Months

Number of Vacancies: 02

Contract Type: Contract with E-zone

Contract Start Date: Immediate

Reporting to: Nutrition Specialist (Maternal, School and Adolescent Nutrition), Dhaka

A. Purpose

The main objective of hiring National Consultant (QA+QC-tools) and National Consultant (Private Hospital Engagement and Urban) is to provide support to the government (IPHN, DGHS, DGFP, BNNC etc.) to finalize the Maternal Nutrition, CBE, MMS, LBW and ECD learning tools under the GOB-WB-CNF match financing for rolling out quality maternal nutrition services including MMS, support multi-sectoral and multi-ministerial coordination, training and support monitoring priority nutrition interventions- MMS, CBE, LBW and ECD at national levels under the GoB-UN AGENCIES RWP 2025-2026.

B. Background

While Bangladesh has achieved significant reductions in child Stunting (low height for age) in the past two decades, women and child malnutrition continue to be a critical public health problem in Bangladesh, with nearly half of pregnant women suffering from anaemia, and 13% by wasting. Persistent maternal anaemia, poor-quality diets, and low coverage of essential nutrition services including micronutrient supplementation are contributing to high maternal mortality, morbidity, and adverse birth outcomes such as the high prevalence of low birth weight (23%). To address this issue, the Government of Bangladesh will gradually scale up quality maternal nutrition services including Multiple Micronutrient Supplementation (MMS) through CBE approach countrywide to accelerate the reduction of anaemia and the prevalence of low birth weight (LBW) towards achieving nutrition related WHA and SDG targets. This nationwide scale-up is supported through matching financing from the Government of Bangladesh (GoB), the World Bank (WB), and UN AGENCIES's Child Nutrition Fund (CNF), as outlined in the multi-year Health and Nutrition Services Improvement and System Strengthening Project (2025-2029) under the Ministry of Health and Family Welfare.

In 2026 (Y-1), under UN AGENCIES's Child Nutrition Fund, quality maternal nutrition services including Multiple Micronutrient Supplementation (MMS) through CBE approach will be rolled out in sixteen districts across 120 subdistricts. This initiative is also part of the key activities in the 2025-2026 Joint Rolling Workplan (RWP) between UN AGENCIES and the Government of Bangladesh (Lead by Institute of Public Health and Nutrition under the Ministry of Health and Family Welfare).

Furthermore, UN AGENCIES Bangladesh's prioritized actions on nutrition have been aligned with government priorities for nutrition as reflected in its 8th Five Year Plan, UN AGENCIES's Nutrition Strategy 2020-2030, and the UN Sustainable Development Cooperation Framework (UNSDCF). In supporting the Government's priorities, the UN AGENCIES Nutrition programme aims to support scale up of quality maternal nutrition services including MMS, through increased community-based engagement using existing platforms, including the integration of Growth Monitoring and Promotion (GMP) into EPI sessions, the use of multiple micronutrient supplements (MMS) for pregnant and lactating women, innovation to care for pregnant women and prevent low birth weight (LBW), as well as integration of early childhood care and development (ECD) for 0-3yr through Primary Health Care (PHC).

National Consultants will be based at national level to finalize the technical CBE, MMS, LBW And ECD learning tools for various levels of service provides across five ministries, capacity building support for multi-sectoral and multi-ministerial national trainings and develop a comprehensive training material (MMS, LBW care, complementary feeding, MCBP linkage) for private sector providers and NGOs.

C. Purpose and Expected Results:

The main objective of hiring National Consultant (QA+QC-tools) and National Consultant (Private Hospital Engagement and Urban) is to provide support to the government (IPHN, DGHS, DGFP, BNNC etc.) to finalize the CBE, MMS, LBW and ECD learning tools under GoB-WB-CNF project, support multi-sectoral and multi-ministerial coordination, private hospital engagement, training and monitoring at national on priority nutrition interventions- Maternal Nutrition, MMS, CBE, LBW and ECD under the GoB-UN AGENCIES RWP 2025-2026. The National Consultant will work under supervision and guidance of Nutrition Specialist (Maternal, School and Adolescent Nutrition) and will support quality and coverage of nutrition interventions through system approach.

D. Key Tasks and Responsibilities

The assignment is designed for 12 months with the key tasks and responsibilities-

1. Governance

- Support organization and functioning of District/Upazila/Union Nutrition Coordination Committee meetings collaboration with other relevant stakeholders and develop action plans to support multisectoral nutrition governance through systems approach.
- Support the district health and family planning authority to use Nutrition Information System and build capacity for evidence-based planning and actions for responsive services.
- Coordinate with respective district authorities from MoLGRD&C, MoWCA, MoSW to mobilize resources and create necessary linkages with social safety net schemes and nutrition programme.
- Support to maintain strong coordination with the government counterpart IPHN, DGHS, DGFP, BNNC, Islamic Foundation, DSHE for smooth implementation of the programme and make sure the programme is well presented and reflected in SCNI meetings
- Support IPHN and UN AGENCIES to organize quarterly meetings and performance review workshops at national level including preparation of action plans based on the discussions from the meeting/workshops, subsequent follow up to track progress and facilitate to prepare government orders based on the decisions of the meetings/workshops
- Facilitate IPHN to maintain strong coordination with the health/family planning managers at national level.

2. Strengthening CBE, MMS, ECD, LBW programmes

- Support IPHN, DGHS, DGFP technical CBE, MMS, ECD, LBW learning tools, recording, reporting tools for service provides across five ministries.
- Support IPHN and ZNOs assess the training needs and complete all the necessary CBE, MMS, ECD, and LBW training in the intervention districts.
- Facilitate the procurement of supply items and prepare the distribution list, timely distribution and continuous tracking both at national and district level to prevent stock out in the intervention districts
- Support finalizing the performance review templates, and capacity building on public dashboard, driven decision making etc.
- Attend the national coordination/performance review meeting, review the meeting minutes to prepare district specific quarterly action plans for the intervention districts
- Document the good practices from the intervention districts and share other districts for cross-learning on quarterly basis
- Work closely with IPHN and UN AGENCIES to review and finalize the national level DCTs

3. Strengthen supervision and monitoring:

- Facilitate IPHN, DGHS, DGFP for supervision visits to intervention districts to monitor the progress of the project implementation
- Undertake periodic supervision visit to the intervention districts (at least 6 UZs in 3 districts/month) for ensuring quality implementation of the programme, identify gaps and prepare corrective measures
- Monitor the performance of key nutrition indicators and facilitate sharing the findings with relevant stakeholders

4. Donor Mission/visit

- Assist Field Office in preparation of donor mission and important GOB/UN AGENCIES visits.

E. Deliverables

Tasks	Deliverables/outputs	Timeline
I. Maternal, Child, ECD and adolescent nutrition		
1. Training and System strengthening		
Develop, and field test the technical CBE, MMS, ECD, LBW learning tools for service provides across five ministries	CBE, MMS, LBW, ECD technical learning tools drafted	Month 1 (June 26)
Proofread and finalize the technical CBE, MMS, LBW, ECD learning tools for service provides across five ministries	CBE, MMS, LBW, ECD technical learning tools finalized	Month 2 (July 26)
Support national ToT on quality maternal nutrition through CBE approach	National ToT completed on quality maternal nutrition through CBE approach	Month 3 (Aug 26)
Support engagement with Director, Private hospitals and clinics for improving coverage of MMS and monitor nutrition supply chain management system	Orientation completed and action plan developed for private hospitals and clinics on maternal nutrition and MMS	Month 4 (Sep 26) and monthly, from beginning
Support training on strategic use of data, supportive supervision and mentorship applications for the frontline supervisors of both health and family planning departments.	Training on Strategic use of data, support supervision and mentorship application rolled out	Month 5 (Oct 26)
Support training and implementation of the school-based nutrition programme (primary and secondary) with especial focus on IFA supplementation	Report on gaps and challenges in supply delivery, capacity, adherence.	Month 6 (Nov 26)
Support training and implementation of ECD programme focusing 0-3 yrs through primary health care in the piloting Upazilas.	ECD programme rolled out through the PHC in selected sub-districts	Month 7 (Dec 26)
Support training of the focal person in the relevant ministries including UP representatives and community groups on quality maternal nutrition including MMS through CBE approach	Local government and community groups oriented on MMS, CBE, ECD etc.	Month 8 (Jan 27)
Monitor community workers in using community outreach tools and document challenges and lessons learned	Report on monitoring of 50% of community workers annually	Monthly, from beginning
Monitor integration process of GMP into EPI platforms at targeted areas and LBW nutritional care intervention package at household level	Monitoring report on implementation, challenges, and drivers of integration of GMP into EPI platforms and LBW nutritional care	Month 9 (Feb 27) and Monthly, from beginning
II. Governance		
Support organization Multisectoral Coordination Committee/SUN meetings in collaboration with other relevant stakeholders and develop action plans to support multisectoral nutrition governance.	Multisectoral Coordination Committee/SUN meetings organized, and action plan prepared	Month 10 (March 27)
Support IPHN, DGHS, DGFP authority to use Nutrition Information System and build capacity for evidence-based planning and actions for responsive services.	Report/minutes on CBE, ECCD, PNRI discussions in quarterly review meetings	Quarterly, from beginning
Coordinate with authorities from MoLGRD&C, MoWCA, MoSW to create necessary linkages with social safety net schemes and nutrition programme.	District/Upazila/Union Multisectoral Nutrition work plan finalized	Monthly, from beginning
III. Wasting		
Support training on SAM management with special focus on under-6 management	Report on facilitation (including challenges, barriers, mitigation measures) of improvement of SAM service provision	Month 11 (April 27)
Support implementation of the protocol on wasting management of children under six months, and strengthen SAM management through establishing SAM model units in CBE districts	SAM management for under six months rolled out in CBE districts	Month 12 (May 27)

F. Payment

Take-home pay:	The consultant will get BDT 225,000.00 per month as a consolidated package excluding TA which will be provided at actual.
DSA	No separate DSA will be paid

G. Administrative issues

- National Consultant will be located at Dhaka, Bangladesh (at least 1 day at UNICEF BCO and two days at IPHN, DGHS, DGFP, MIS on a weekly basis and monthly field trips to visit at least three districts, will work closely with Nutrition Specialist
- National Consultant will get **225,000 BDT per month** (consolidated).
- National Consultant will receive TA cost at actual in addition to the above remuneration for field visits as per third party consultancy policy
- National officer will be entitled to 1.5 days of leave per month and total of 10 days of emergency leave
- Computer and communication will be bear by the Consultant.
- Stationary and other office equipment will be bear by the Consultant.
- Travel cost and travel arrangement in field, will be bear by the consultant.

H. Qualification requirement

- University degree in Nutrition, Public Health, or any relevant field
- At least 3-4 years' experience in community nutrition/ public health in UN organizations/reputed INGOS/NGOs is essential.
- Excellent writing and data analytics skills including sound knowledge of DHIS2, e-MIS, PNRI are essential.
- Demonstrated competency with working with people.
- Strong computer skills
- Experience of planning and coordination
- Knowledge of primary health care systems is important
- Efficient in communication-Bangla and English (oral and written)
- Willingness to locate to district of assignment and field travel frequently, including hard to reach and remote areas.

I. Desirable:

- Experience working in maternal health/nutrition/immunization programme
- Experience working in multisectoral coordination for nutrition/local government institutes etc.

J. Language Requirements

- Fluency in Bangla and good English communication skills are required.

This position is open for Bangladeshi Nationals only. All candidates, irrespective of gender, religious and ethnic backgrounds can apply for the vacancies.

The UN Agencies prides itself as fostering a multicultural and harmonious work environment, guaranteed by a zero-tolerance policy on sexual exploitation and abuse, and on any kind of harassment, including sexual harassment and discrimination. All selected consultants will undergo rigorous reference and background checks.

<https://ezjobsbd.com/job/312>

Last Date of Application: May 14, 2026

No phone calls please. Only short-listed candidates will be contacted. All applications will be treated according to the merit and with strict confidentiality.