



Terms of Reference

Senior Expert on CMAM Training

June 2016

Lilongwe, Malawi

1. Context

Over the years, malnutrition remained a challenge in Malawi with current wasting rates at 3.8 percent and stunting at 42 percent¹. With these rates, approximately 121,721 children under-five are at risk of acute malnutrition. Micronutrient deficiencies are also common, with anaemia at 63 percent² in children under five years old (levels above 30 percent are defined as serious). Many factors contribute to high rates of under-nutrition including infections and inadequate dietary intake caused primarily by household food insecurity, limited diversity of food crops, low purchasing power and poor child care practices, as it is in Malawi at the moment.

Acute malnutrition (i.e. wasting) is a major risk factor for child mortality, and according to the Cost of Hunger (COHA) study (May 2015), 23 percent of child mortality cases in Malawi are associated with undernutrition (i.e. wasting, underweight, stunting). Furthermore, a child with Moderate Acute Malnutrition (MAM) is up to four times more likely to die than a well-nourished child, while a child with Severe Acute Malnutrition (SAM) is nine times as likely to die as a well-nourished child. While the immediate risk of mortality is higher for a child with SAM than MAM, the total number of children affected by MAM is much greater. Currently, nearly 2.9 million people are in need of food assistance, and the number is expected to increase at the peak of 2016/17 lean season. The Malawi Vulnerability Assessment Committee (MVAC), which undertakes national food security surveys, is planning to undertake the assessment earlier than usual (end of April) in response to the crisis.

2. Current Challenge

In January 2015, the Government of Malawi declared an emergency as a result of the devastation caused by flooding that affected over 100,000 people in several districts, especially in the southern parts of the country. A multi-sectorial response was implemented in the flood affected areas, to mitigate the negative impacts of the floods. In September 21th, Malawi's President appealed for international help to cope with an

1 National Statistical Office. 2014. Malawi MDG Endline Survey 2014, Key Findings. Zomba, Malawi: National Statistical Office.

2 National Statistical Office (NSO) and ICF Macro. 2011. Malawi Demographic and Health Survey 2010. Zomba, Malawi, and Calverton, Maryland, USA: NSO and ICF Macro.

expected food shortage that could affect 17% of the country's population. A national response plan for the two emergencies overlapped has been on-going since October 2015.

The already precarious nutrition situation, especially for children, will be further compromised this lean season by the drought. President of Malawi has declared the state of disaster due to intense food insecurity situation and massive crop failure on April 13th 2016. During the course of time, since October 2015 and till date, the percentage of acute malnutrition has increased, as it can be observed through a significantly increased number of admissions in to CMAM treatment facilities across the country.

Following a request by the Government of Malawi and UNICEF, ACF Spain has re-started operations in the country as of January 2016. The purpose of this consultancy is to support the launch of activities of the CMAM Capacity Building project of ACF Spain mission in country.

3. Scope of this consultancy

This is a consultancy request that would be better suited for a consultant with proven expertise in the following area of interest:

- Training of Trainers in Community Management of Acute Malnutrition (CMAM)

The trainings are to be conducted in English based in the revised National protocols and in line with WHO guidelines and recommendation to Malawi. Thus, it shall incorporate ample demonstration and practice of the theoretical knowledge and be supported by appropriate and sufficient teaching aids.

Trainings will take place in Lilongwe and they will include around 20 participants per session. These trainings will take around 10 days each and could be carried out consecutively for up to period of 20 days.

4. Objectives:

The objective of this consultancy is to provide technical support to the Malawi mission in the launch of activities of the CMAM Capacity Building project:

- Evaluate the training needs of the staff of the Nutrition Rehabilitation Units (NRU).
- Develop, in close collaboration with the Ministry of Health and UNICEF, the standardized training modules and materials on the reviewed CMAM for the trainers and for the trainees.

- Develop a CMAM training plan according to:
 - The identified training needs
 - The WHO guidelines, the reviewed CMAM
 - The level of the trainings: 1) at national level for the trainers and DNO and 2) regional/district for the staff of the NRU.
- Conduct the training of trainers at national level on the reviewed CMAM protocol.
- Develop the mentoring and coaching guidelines and checklist for the on job training in order to equip health care workers of the NRU with the skill set and knowledge necessary to deliver high-quality care management of children and adults with acute malnutrition in line with the Community Management of Acute Malnutrition (CMAM) guidelines
- Develop the supervision guidelines and checklist for the District Nutrition Officers.

5. Expected Deliverables

Selected consultant will be expected to produce the following:

- Before the training - at least three weeks prior to the start of the training
 1. Evaluation report of the training needs identified.
 2. Training plan and agenda
 3. Training modules and curriculum (in English) with the all the pedagogical tools
 4. Guidelines and checklist for mentoring and coaching
 5. Copies of educational materials and evaluation tools to be used (in English)
- After the training - within two weeks from the completion of the training
 6. A comprehensive report including a description of the training methodology, a summary, the pedagogic tools, the challenges encountered, lessons learned and recommendations.
 7. A thorough description of the training outcomes with a comparative analysis of the pre- and post-training knowledge and skills assessment, as a group and individually.

6. Calendar

- Beginning date: First week of August 2016
- Ending date: End of October 2016
- Estimated Duration: 3 months

7. Qualification Requirements

Education

- Advanced university degree in health or nutrition relevant to the trainings' subject
- Specialization in Nutrition planning with PhD in Nutrition is an asset.
- ToT or other trainer certification

Skills and Experience

- Strong nutrition technical level
- Experience in management of public health capacity building programs.
- Five or more years of clinical experience in pediatric health care and treatment of acute malnutrition in infants and children under 5 years old
- Demonstrated experience in the design and delivery of CMAM training workshops
- Good observation and analytical skills
- Excellent oral and written communication skills, including public speaking
- Motivated, creative and dynamic.
- Competent in concise and accurate report writing
- Relevant professional experience in Southern Africa or similar context
- Proficient in English, both written and spoken

8. Role and responsibilities of ACF

ACF will have supportive/supervisory role for this consultancy:

- Provide on a timely manner all the information and documents available related to this consultancy.
- Collaborate with the task planning and scheduling of visits/meetings within relevant stakeholders.
- Accompany for meetings with key partners in order to facilitate the development of this consultancy.
- Facilitate the communication between Unicef and Ministry of Health for the development of the activities

9. Application procedures and conditions

ACF invites proposals from suitable candidates with substantial experience in the training subjects up to **July 4th, 2016 (Madrid time)**.

The proposal should be submitted electronically and include the following:

- Technical Offer
- Updated CV(s)
- Technical Proposal with the methodology to be used, and the economic proposal including consultancy fee, transportation, visa, accommodation, insurance and all other costs related to the consultancy
- Samples of training materials and/or reports supporting the proposal

Selection of the preferred trainer(s) will be based on a rigorous vetting process conducted by ACF and based on technical quality and reasonable cost of the proposal.

ACF will pay 25% of the agreed consultancy fee at the start of training and the remaining 75% upon completion of the training report to ACF's satisfaction.

For any clarifying questions related to this Terms of Reference and for submission of proposals,

10. Proposal submission:

Proposals or information requests have to be sent to licitaciones@achesp.org, copy to Nadia Jamil, Deputy Procurement Officer: njamil@accioncontraelhambre.org.
Subject: ESMD00581- NUT consultancy, Malawi.