Terms of Reference

Community Based Management of Acute Malnutrition (CMAM)

Technical Working Group

Maiduguri, Borno (August 2016)

Background:

The conflict in North-East Nigeria has caused unprecedented displacement, claimed thousands of life and created a huge humanitarian crisis in the 3 North-East States of Borno, Yobe, and Adama, as well as in the neighboring countries of Niger, Cameroun and Chad.. This is Africa's fastest growing displacement crisis. Over 2.6 million people have been forced to flee their homes as a result of violent acts by a group called Jama'atu Ahli es Sunna Lidda'awatiwal-Jihad (commonly known as Boko Haram) and the resulting counter-insurgency operations. The number of displaced people has tripled in the worst-affected areas over the last two years. The conflict has caused widespread destruction of vital infrastructure, such as hospitals, schools, roads, markets and farmland. Across the region, people are on the move trying to escape threats to their lives, liberty and other human rights in search of safety and protection. Since the start of the conflict in 2009, more than 20,000 people have been killed as a direct result of the violence. In 2015, around one in every 15 people who died throughout the world as a direct result of violent conflict died in Nigeria. Countless more are dying or face permanent disability as a result of hunger, disease and a lack of healthcare, the secondary impacts of war. For example, unless urgent food and nutrition support is provided, 67,000 children under five are predicted to die by September [2016] as a result of malnutrition in Nigeria's Borno and Yobe states alone – that means 184 children dying every day.

OBJECTIVE

Provide a forum for coordination, exchange, and problem solving among the SPHCDA, UNICEF, WFP, NGOs implementing community-based management of acute malnutrition (CMAM) including OTP, SC/inpatient care, BSFP, Mass MUAC screening and CMAM trainings.

ACTIVITIES

Technical working group members will initially meet every week or as decided by the sector members at a designated venue. Working group members will:

- Standardization of OTP, SC, BSFP and Screening activities in Borno states.
- Discuss implementation challenges and collaborate with other sub-group members to overcome those challenges e.g selling of RUTF, double registration
- Discuss and share implementation modalities for BSFP programme areas to ensure effective referral between OTP/SC and BSFP.
- Represent the CMAM agenda within the Nutrition Sector, and follow up on technical and policy issues raised within the sector forum;
- Keep the sector informed of developments in CMAM programming both globally and locally;
- Exchange CMAM performance data on a monthly basis;
- Share program plans and identify areas for collaboration and alignment (CMAM, BSFP, Screening);
- Stay abreast of the state of the art and discuss implications for the Nigeria context;

- Collaborate in the monitoring and evaluation of CMAM activities;
- Provide input to the national CMAM task force (or the National Nutrition Taskforce) on development of guidelines and national roll out of CMAM;
- Identify capacity gaps, and develop strategies for improving the monitoring, evaluation, and delivery of CMAM services.

MEMBERSHIP

Sub-Group Members: Sub-group membership will include interested stakeholders directly engaged in the delivery of CMAM services – government, donor agencies, faith-based organizations, and nongovernmental organizations. Sub-group membership will be granted to organizations rather than individuals; however, each organization will be asked to nominate one focal person to ensure consistency in representation and facilitate communication. Sub-group members will agree to regularly attend sub-group meetings, endorse the sub-group ToR, and contribute to the realization of the ToR.

Sub-Group Observers: Stakeholders not directly engaged in the delivery of CMAM programming are welcome to attend sub-group meetings, but they will have an observer status within the group.

Working Modalities

The CMAM sub-group will be convened by the State Nutrition Officer (SNO) in consultation with the Director SPHCDA and Nutrition sector co-coordinator. The group will have a rotating chair drawn from standing sub-group members. Each chair will serve a six month term with the possibility of renewal. The chair will work closely with the cluster coordinator, and will receive full administrative support from the Nutrition Cluster Coordinator. The venue of the sub-group meetings will be decided by the members; agencies, UNICEF, government are encouraged to provide venue on a rotational basis.

Quorum will consist of two thirds of sub-group members for key sub-group decisions. The group, however, can proceed to business without quorum.

- CMAM Technical Working Group to meet weekly and meeting schedule to be reviewed after 1
 months
- Timing: TBDLocation: TBD
- Decision making: General consensus
- Production of minutes & circulation Secretary

Current Representation in the Group

Possible Members

SPHCDA	Save the Children	ALIMA	IMC
UNICEF	WFP	ACF	IRC
NRC	CRS	Mercy Corp	