Technical Rapid Response Team (Tech RRT) approach to technical assistance to nutrition emergencies during the COVID-19 pandemic

Version 3.0

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Introduction: The corona virus disease (COVID-19) has been spreading in China since November 2019, extending to neighboring countries in January 2020 and developing rapidly globally since early March. The Tech RRT Steering Committee and Technical Advisors acted rapidly to adapt on-going deployments to the outbreak and develop approaches for future deployments. This document outlines how the Tech RRT will continue to provide technical support to nutrition emergencies in the COVID-19 context. This will enable requesting partners to know what they can expect from the Tech RRT support during the COVID-19 pandemic.

Nutrition actors should continue to contact the Tech RRT for technical support. We can work together to identify, and develop, approaches to ensure technical support can still be provided, and nutrition outcomes improved for affected populations. While the development of technical support package can be completed in days, it usually takes several weeks to develop deployments from initial concept to a fully formed terms of reference. Therefore, it is advised to start discussions as soon as a technical gap is identified.

The Tech RRT approach to the COVID-19 pandemic: The Tech RRT is determined to continue functioning under the conditions imposed by the COVID-19 pandemic whilst safeguarding Tech RRT and partner staff, and not contributing to the public health crisis. Nutrition in emergency needs will persist and therefore the Tech RRT will continue to provide technical support in infant and young child feeding in emergencies (IYCF-E), community-based management of acute malnutrition (CMAM), nutrition assessments and social behaviour change (SBC). The Tech RRT will make a case-by-case consideration balancing risk to staff, in-country need and available alternatives to direct technical support.

Risk to staff: the case numbers and community transmission within the country will be considered, as well as the evacuation procedure to the advisor’s home country, and the availability of health care within the country, should the advisor contract COVID-19.

In-country need: The Tech RRT responds to design and strengthen the technical quality, effectiveness and scale of programs and assessments. This includes, but is not limited to, life-saving interventions, such as treatment of acute malnutrition, and infant and young child-feeding. Some of the support provided by the Tech RRT may be deemed more urgent than others, therefore, an assessment of the urgency of the technical support will be made in collaboration with the requester.
Available alternatives to direct technical support: The Tech RRT currently provide both in-country and remote technical support. In-country accounts for most of our support, but remote remains a viable and important option for the Tech RRT. In this regard, the Tech RRT proposes several alternative approaches to direct technical support to ensure the continuation of technical support provision.

- Literature reviews and secondary data analysis;
- Virtual trainings by the Tech RRT Advisor through video call and use of multimedia (video, presentation, audio, polls, etc.) to increase interaction and engagement;
- Webinar and teleconference sessions facilitated by the Tech RRT Advisor for meetings, stakeholder engagement, and planning and programme prioritization;
- Data review, analysis and report writing;
- Drafting and review of relevant documents, guidance or plans;
- Support with design, implementation, data processing and analysis of online surveys for activities such as, capacity and policy reviews, program evaluation and stakeholder consultation;
- Support with developing presentations and orientations on specific technical matters, new guidelines or findings (for example);
- Facilitation of a technical forum, remotely, with in-country specialists on specific themes and issues;
- Trainer of Trainers virtually (with smaller group e.g. 1-3 participants) followed by in-person training (led by those virtually trained) supported virtually by the Tech RRT Advisor;
- Identification of key stakeholders in country for Tech RRT Advisors to mentor through certain activities with daily remote support;
- Various approaches to increase stakeholder engagement with Tech RRT Advisors such as using video messages for introductions at the outset of the technical support;
- Use of communication channels to promote collaborative work that suit participants e.g. Skype, WhatsApp, Facebook or Teams.

And in certain contexts that may allow:

- Shorter deployments could be considered to reduce risk, when feasible;
- A combination of remote and in-country support later (once crisis has subsided).

The Tech RRT, in collaboration with our donors, commits to explore new avenues for remote support including new technological solutions and upskilling Tech RRT Advisors in online training and facilitation techniques.

Tech RRT technical support specific to COVID-19: Whilst at the time of writing the COVID-19 pandemic has yet to hit areas typically affected by nutrition emergencies in a significant way, it is likely that it will start to as cases increase across Africa, the Middle East and South Asia. To support actors in these contexts the Tech RRT currently has two strands of work:
• Provision of webinars supporting nutrition practitioners to make sense of current guidance related to COVID-19;
• Development of technical support that can be provided to contexts already facing a nutrition crisis to tackle the additional challenges imposed by the COVID-19 pandemic. This will likely include:
  1. IYCF-E (e.g. breastfeeding, non-breastfed infant management and complementary feeding in COVID-19 context)
  2. Social behaviour change approaches (e.g. developing communications or counselling materials on COVID-19)
  3. Treatment of acute malnutrition cases with COVID-19
  4. Assessments (e.g. undertaking surveys in COVID-19 context).