



ToR- Community Hygiene Workers

Approved by SAG: 25th of April

1. Objective

- Create ownership of WASH infrastructure by the community.
- Motivate the community to ensure participatory monitoring of WASH infrastructure.
- Help the community to take responsibility for hygiene practices and become change-makers in their own community.

2. Formation

- 1 volunteer would ideally be responsible for 200 HH (or 1000 people)
- Community Hygiene Workers are Rohingya volunteers unskilled or semi-skilled (according to experience) and report to the “hygiene promotion and community engagement team leader”

3. Roles and Responsibilities:

- Under the supervision of “hygiene promotion and community engagement team leader” (or equivalent), support community engagement for WASH activities.
- Collaborate with the community and WASH User group committees to mobilize and strengthen their leadership through regular meetings (monthly or according to their autonomy) with WASH Committee, Latrine user groups, Water user groups, MHM groups (or any WASH committee created in your area of operation). Discusses on progress and challenges.
- Engage and motivate the community and their leaders to participate in activities aimed at preventing AWD, dengue, and other WASH-related diseases (e.g., seeking and destroying mosquito larvae, community cleaning campaigns).
- Help WASH user groups and community leaders maintain the cleanliness of the camps. Make sure that policy on “[community engagement on Solid Waste](#)” is applied at camp and household levels.
- Ensure regular meetings with latrine/bathing cubicle user group representatives:
 - Keep a chart outside every latrine door to make a list of who is responsible for which week to clean the latrine.
 - Encourage them to take action and make small latrine improvements or repairs (guidance to be developed).
 - Monitor and protect different fixtures of the facility of the latrine.
 - Share any findings related to the latrine quality, need for desludging, stealing of fixtures etc. (link between repairs/desludging team if needed).

- Female volunteers will engage with the existing MHM facilitator group, and associate with getting any feedback related to MHM practices to discuss:
 - MHM kit quality and whether the frequency is adequate
 - How to properly dry the reusable pads during difficult weather
 - Teaching younger girls about personal hygiene related to MHM.
- Engage with Water user group representatives to identify successes and challenges.
 - Make sure all the water networks have active water committee, and they are consulted on access to water and challenges faced by the water provider.
 - Make sure shallow and/or contaminated hand-pump are identified by “sticker: not for drinking” and community is aware of its meaning (WASH actors not repairing anymore the hand-pump but committee can organized itself to fix-it however, water is unsafe for drinking) – refer to [WASH strategy](#)
- Make sure that the communal infrastructure should remain communal. If there is any finding related to privatization of WASH infrastructure, the community should be mobilized to consult with the infrastructure occupier to return it to the community, if needed seek support from CIC. Refer to [privatization policy](#).
- Make sure beneficiaries do not build private infrastructures (especially latrines and water points) that could be of poor quality and have more negative impact on the family and community. Refer to [privatization policy](#).
- Join monthly one-to-one sharing session with the CHW who is responsible for the same area. Together they will share their experience with the HH and community to identify joint solutions
 - Identify campaign ideas that are necessary based on the community's needs
 - Identify areas with poor environmental hygienic situations
- Work with CHWs during courtyard sessions to share WASH related knowledge with the community.
- Promote hygiene promotion according to needs (cholera outbreak, water container cleaning campaign...) through mass campaign/information (Household visits should be led by Community Health Volunteers)
- Through all the activities, share the community feedback with “hygiene and community engagement Team leader”.

More information: <https://rohingyaresponse.org/sectors/coxs-bazar/wash/>