NNN WASH Working Group – Terms of Reference

Background: General

- The NTD NGDO Network (NNN) was established in October 2009. The NNN comprises a broad range of partners including the NGDOs that work with ministries of health of NTD-endemic countries, the pharmaceutical companies donating drugs for NTDs, the donor community, and operational research partners. See http://ntd-ngdonetwork.org/
- Each September the NNN hosts an annual meeting of its members, the individual disease specific coordination groups for leprosy, lymphatic filariasis, onchocerciasis, trachoma, schistosomiasis, and soil transmitted helminths. Between these meetings, the NNN is coordinated by an Executive Committee (ExCo), comprising the Chair and Vice-Chair of the NNN and each of the disease specific coordination groups (NNN members).
- Following the 4th Network meeting in Brighton, UK (September 2013) the NNN ExCo established two thematic working groups to progress matters of common interest to the members: the Morbidity Management and Disease Prevention (MMDP) Working Group and the Water, Sanitation and Hygiene (WASH) Working Group.

Proposed Terms of Reference

The initial terms of reference have been developed for discussion with the NNN ExCo and were proposed for discussion and adoption at the NNN meeting in Paris in September 2014. The ToRs will be regularly reviewed by the Chair and Vice-Chair and the NNN ExCo. Amendments to the ToRs are developed by the NNN WASH Working Group (WG), proposed by its Chair and Vice-Chair and endorsed by the NNN ExCo. Additional WG activities can be identified by the Chair and Vice-Chair or the NNN ExCo as needed. Any proposed activities will be agreed by the NNN Chair and Vice-Chair.

An updated terms of reference was presented for discussion and adoption to the WASH WG in Jan 2018.

(a) Purpose of the NNN WASH Working Group

The NNN WASH WG has been established to achieve the following objectives:

1. To advocate to policy makers, planners and funding partners, the importance and impact of WASH on NTD outcomes.
2. To provide technical guidance and support to the NNN on WASH practices, effective WASH programming, policy and practices, and other cross-cutting issues and considerations for scale up of WASH activities to achieve 2020 targets.
3. To support the WHO NTD department to integrate WASH activities into NTD programming, policy and practice.
4. To support the WHO WASH department to promote relevant opportunities for engagement in NTD programming, policy and practice.
5. To identify and communicate opportunities for the WASH and NTD communities to engage and seek collaboration.
6. To increase WASH organisations membership of the disease specific coordination groups and through them, representation within the NNN.
(b) Scope of engagement

A large proportion of the work within the NNN WASH WG works comes from the work of three (3) task teams.

Task Team 1: Communications

This task team will:

a) Compile WASH/NTD resources for wider circulation including francophone resources
b) Keep an up to-date summary of activities that have been and are currently being done by the WASH WG
c) Other communications activities as needed which may include summary of WASH/NTD research, WASH/NTD case studies, etc.

Task Team 2: Joint Indicators

This task team will:

a) Work towards the general uptake of the core joint WASH-NTD indicators that emerge from the Delphi process. This might include, for example, developing and implementing an uptake strategy.
b) Work towards identifying and supporting the uptake of any additional disease or group (i.e. morbidity management) specific indicators required. This might include, for example, getting WASH on your disease/group specific agendas, holding focus discussions around supplementing indicators required in addition to core indicators, etc. From our perspective this task team would require a representative from each NNN disease specific group.

Task Team 3: WASH & NTD Toolkit

This task team will:

a) Work towards broadening the F&E toolkit for wider NTD use. This might include drafting toolkit templates, design, and content, conducting needs assessments, engaging stakeholders, strategizing uptake, etc.

In addition, the broad scope of the NNN WASH WG has been identified as follows:

1. To liaise with the WHO and other relevant stakeholders e.g. partner countries, the WASH sector, the European Roundtable on WASH and NTDs, NNN members to develop measurable joint indicators and monitoring frameworks for WASH and NTDs.
2. To support NNN members, including the disease specific coordination groups and WHO to establish clear strategies for disease control, managing morbidity and disability prevention (MMDP) that outline the role of WASH and ways of engagement with WASH actors.
3. To stay informed of ongoing research and programmatic innovation and disseminate available opportunities to NNN members; and to identify opportunities for learning, research and innovation.
4. To explore the need for and support the development of capacity strengthening tools for NTD and WASH stakeholders.
5. To identify linkages with the WASH sector and develop opportunities to build relationships, encourage active engagement with the NTD community and to advocate for the inclusion of NTDs in WASH strategies.
6. To liaise with the Uniting to Combat NTDs Disease Specific Working Group on including WASH indicators in the scorecard through the NNN Chair and Vice-Chair.
7. To represent the NNN at relevant global meetings (if the WG Chair or Vice Chair are not available to participate in an external meeting, a point person from amongst the WG members will be identified to represent and report back to the group).
8. To provide an update of WASH sector activities and monitoring relevant to NTD control and MMDP to the annual NNN meeting.

(c) Membership

The key membership characteristics are:

1. The WG has a Chair initially appointed by the NNN Chair and Vice-Chair. The WG Chair will serve a two-year term, and then the WG Vice-Chair will succeed the Chair. The WG Vice-Chair will be elected by the WASH WG committee by way of nominations.
2. The WG membership will be no greater than 12 people and need to include representatives from the general WASH sector.
3. The make-up of the working group will take into account the need for due representation of the key constituencies within the NNN. Each disease specific coordination group is invited to provide a representative to this working group. There is a limit of two representatives per NNN member.
4. In addition, The WG aims to utilise NNN members’ collective expertise and resources, to achieve the purpose and scope of engagement of the WG. There will be an open call for individual representatives to join the working group when it is established and then each year prior to the NNN to fill vacancies as they arise.
5. The following attributes and criteria will apply to individual representatives: (i) Technical skills and experience to progress the focus areas of the working group, and (ii) Willingness and support from individual’s employer to enable them to contribute actively and on a voluntary basis without compensation.
6. Potential new members can submit expressions of interest to the Chair and Vice-Chair for their recommendation to the NNN ExCo for approval. EoIs should indicate their interest, experience and the commitment of their employers to supporting their participation in the working group.

(d) Roles and responsibilities of the Chair and Vice-Chair

The key roles and responsibilities of position holders include: split the roles and responsibilities between chair vice-chair

1. The Chair is responsible to lead the development and execution of a work plan reflecting the purpose and scope of the WG.
2. The Chair will review the tasks and progress of the WG on a monthly basis and update the NNN ExCo each quarter.
3. The Chair and Vice Chair will schedule and manage WG meetings including drafting agendas, setting up and facilitating meetings, and preparing and circulating a brief record of discussions.
4. The Vice-Chair will manage WG membership including reviewing membership applications, liaising with NNN ExCo, inducting new members, and fostering their engagement.
5. The Chair and Vice Chair will prepare and present the WG’s progress at the annual NNN meeting.
6. The Chair will participate in NNN ExCo meetings and update WG members on relevant discussions.
(e) **WG ways of working**

These are the agreed ways of working for the NNN WASH WG:

1. This is one of two standing working groups of the NNN with clearly defined and active terms of reference.
2. The WG is not a decision making forum. It can make recommendations to the NNN ExCo for consideration and endorsement.
3. The WG will actively engage and coordinate with any disease specific WASH WG of NNN members e.g. the ICTC WASH Practices WG.
4. The WG will have a timetable of regular teleconferences/Skype to achieve identified outputs.
5. There is a possibility of face to face meetings linked to existing meetings and additional communication amongst members by email.
6. Additional participation in meetings or activities of the WG, including by non-NNN members, is by invitation of the WG Chair and Vice Chair for specific activities or initiatives.
7. There is an expectation of open discussion within the WG with collective responsibility for final WG outputs.
8. WG members will proactively identify potential vested interests or perceived conflicts of interest relevant to agenda discussions.
9. A record of issues, updates and recommendations should be sent to the NNN ExCo at the earliest opportunity following any WG meeting.
10. Communication with NNN stakeholders, the NTD community and the WASH sector will be determined by content as appropriate through the WG committee and coordinated through the NNN Chair/Vice-Chair.
11. The NNN doesn’t have funded administrative or project coordination support or a budget to support WG meetings. Relevant activities will need to be undertaken on a voluntary basis and within the resources of the WG membership.

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