Terms of Reference for the Strategic and Technical Advisory Group on HIV, Viral Hepatitis and Sexually Transmitted Infections (STAG-HHS)

The Strategic and Technical Advisory Group on HIV, Viral Hepatitis and Sexually Transmitted Infections (STAG-HHS) is convened to help WHO effectively guide the global response towards ending AIDS and the epidemics of viral hepatitis and sexually transmitted infections by 2030 in line with the global health sector strategies on HIV, viral hepatitis, and sexually transmitted infections for the period 2022-2030.

The STAG-HHS will act as an advisory body to WHO in this field.

I. Functions

In its capacity as an advisory body to WHO, the STAG-HHS shall have the following functions:

1.1. to provide to the Director-General independent evaluation of the strategic, scientific, and technical aspects of the WHO programme of work on HIV, viral hepatitis, and sexually transmitted infections.

1.2. to advise WHO on the strategic, technical, and capacity building priorities and guidance needed for supporting countries to respond optimally to their HIV, viral hepatitis, and sexually transmitted infections epidemics.

1.3. to review and make recommendations on establishing committees, working groups and other means through which scientific and technical matters relating to HIV, viral hepatitis and sexually transmitted infections are addressed.

1.4. to advise on priorities for WHO’s programme of work on HIV, viral hepatitis, and sexually transmitted infections in the context of: (a) WHO’s mandate and corporate strategy; (b) the relevant activities and programmes of partner organizations; (c) trends in HIV, viral hepatitis and sexually transmitted infections epidemics; (d) and the health sector response to HIV, viral hepatitis and sexually transmitted infections epidemics.

1.5. pursuant to the above functions, to submit to the Director-General, through the Division of Universal Health Coverage/Communicable and Noncommunicable Diseases, such technical documents, reports, and recommendations as it deems necessary.

II. Composition

1. The STAG-HHS shall have 45-60 members¹, who shall serve in their personal capacities to represent the broad range of disciplines relevant to HIV, viral hepatitis, and sexually transmitted infections. In the selection of the STAG-HHS members,

¹ Members serve as full participants and partake in the deliberations and the adoption of the recommendations of the meeting in which they are involved.
consideration shall be given to attaining an adequate distribution of technical expertise, geographical representation, and gender balance.

2. Members of the STAG-HHS, including the Chairperson and two vice-chairs, shall be selected and appointed by WHO following an open call for experts. The Chairperson’s functions include the following:

- to chair the meeting of the STAG-HHS;
- to liaise with the WHO Secretariat between meetings.

In appointing a Chairperson, consideration shall be given to gender and geographical representation.

3. The Director-General will nominate one STAG-HHS chair and two vice-chairs selected from among the STAG members, ensuring that one has a clear HIV focus, one with a hepatitis focus and a third with a focus on sexually transmitted infections. Members of the STAG-HHS, including the Chair and vice-chairs, will be appointed to serve as members for a period of up to three years and will be eligible for reappointment but may not serve more than two consecutive terms. One third, or more, of the members of the STAG-HHS will be rotated off the STAG-HHS every three years. The position of chair should also be rotated every three years.

4. The Chairperson is eligible for reappointment as a member of the STAG-HHS but is only permitted to serve as Chairperson for one term. Their appointment and/or designation as Chairperson may be terminated at any time by WHO, if WHO’s interest so requires or, as otherwise specified in these terms of reference or letters of appointment. Where a member’s appointment is terminated, WHO may decide to appoint a replacement member.

5. STAG-HHS members must respect the impartiality and independence required of WHO. In performing their work, members may not seek or accept instructions from any Government or from any authority external to the Organization. They must be free of any real, potential or apparent conflicts of interest. To this end, proposed members/members shall be required to complete a declaration of interests form and their appointment, or continuation of their appointment, shall be subject to the evaluation of completed forms by the WHO Secretariat, determining that their participation would not give rise to a real, potential, or apparent conflict of interest.

6. Following a determination that a proposed member’s participation in the STAG-HHS would not give rise to a real, potential, or apparent conflict of interest, the proposed member will be sent a letter inviting them to be a member of the STAG-HHS. Their appointment to the STAG-HHS is subject to WHO receiving the countersigned invitation letter and letter of agreement. Notwithstanding the requirement to complete the WHO declaration of interest form, STAG-HHS members have an ongoing obligation to inform the WHO of any interests real or perceived that may give raise to a real, potential, or apparent conflict of interest.

7. As contemplated in paragraph II.4 above, WHO may, from time to time, request STAG-HHS members to complete a new declaration of interest form. This may be before a STAG-HHS meeting or any other STAG-HHS-related activity or engagement, as decided by WHO. Where WHO has made such a request, the STAG-HHS member’s
participation in the STAG-HHS activity or engagement is subject to a determination that their participation would not give rise to a real, potential, or apparent conflict of interest.

8. Where a STAG-HHS member is invited by WHO to travel to an in-person STAG-HHS meeting, WHO shall, subject to any conflict-of-interest determination as set out in paragraph II.6 above, issue a letter of appointment as a temporary adviser and accompanying memorandum of agreement (together ‘Temporary Adviser Letter). WHO shall not authorize travel by a STAG-HHS member, until it receives a countersigned Temporary Adviser Letter.

9. STAG-HHS members do not receive any remuneration from the Organization for any work related to the STAG-HHS. However, when attending in-person meetings at the invitation of WHO, their travel cost and per diem shall be covered by WHO in accordance with the applicable WHO rules and policies.

III. Operation

1. The STAG-HHS shall normally meet once each year. However, WHO may convene additional meetings and webinars. STAG-HHS meetings may be held in person (at WHO headquarters in Geneva or another location, as determined by WHO) or virtually, via video or teleconference.

STAG-HHS advisory group meetings may be held in open and/or closed session, as decided by the Chairperson in consultation with WHO.

(a) Open sessions: Open sessions shall be convened for the sole purpose of the exchange of non-confidential information and views and may be attended by Observers (as defined in paragraph III.3 below).

(b) Closed sessions: The sessions dealing with the formulation of recommendations and/or advice to WHO shall be restricted to the members of the STAG-HHS and essential WHO Secretariat staff.

2. The quorum for advisory group meetings shall be two thirds of the members.

3. WHO may, at its sole discretion, invite external individuals from time to time to attend the open sessions of an advisory group, or parts thereof, as “observers”. Observers may be invited either in their personal capacity, or as representatives from a governmental institution / intergovernmental organization, or from a non-State actor. WHO will request observers invited in their personal capacity to complete a confidentiality undertaking and a declaration of interests form prior to attending a session of the advisory group. Invitations to observers attending as representatives from non-State actors will be subject to WHO internal due diligence and risk assessment including conflict of interest considerations in accordance with the Framework for engagement with non-State actors (FENSA). Observers invited as representatives may also be requested to complete a confidentiality undertaking. Observers shall normally attend meetings of the STAG-HHS at their own expense and be responsible for making all arrangements in that regard.
At the invitation of the Chairperson, observers may be asked to present their personal views and/or the policies of their organization. Observers will not participate in the process of adopting recommendations of the STAG-HHS.

4. The STAG-HHS may decide to establish smaller working groups (sub-groups of the STAG-HHS) to work on specific issues. Their deliberations shall take place via teleconference or videoconference. For these sub-groups, no quorum requirement will apply; the outcome of their deliberations will be submitted to the STAG-HHS for review at one of its meetings.

5. STAG-HHS members are expected to attend meetings. If a member misses two consecutive meetings, WHO may end his/her appointment as a member of the STAG-HHS.

6. Reports of each meeting shall be submitted by the STAG-HHS to WHO through the Assistant Director-General for Universal Health Coverage, Communicable and Noncommunicable Diseases. All recommendations from the STAG-HHS are advisory to WHO, which retains full control over any subsequent decisions or actions regarding any proposals, policy issues or other matters considered by the STAG-HHS.

7. The STAG-HHS shall normally make recommendations by consensus. If, in exceptional circumstances, a consensus on a particular issue cannot be reached, minority opinions will be reflected in the meeting report.

8. Active participation is expected from all STAG-HHS members, including in working groups, teleconferences, and interaction over email. STAG-HHS members may, in advance of STAG-HHS meetings, be requested to review meeting materials and to provide their views for consideration by the STAG-HHS.

9. WHO shall determine the modes of communication by the STAG-HHS, including between WHO and the STAG-HHS members, and the STAG-HHS members among themselves.

10. STAG-HHS members shall not speak on behalf of, or represent, the STAG-HHS or WHO to any third party.

IV. Secretariat

WHO shall provide the secretariat for the STAG-HHS, including necessary scientific, technical, administrative, and other support. In this regard, the WHO Secretariat shall provide the members in advance of each meeting with the agenda, working documents and discussion papers. Distribution of the aforesaid documents to Observers will be determined by the WHO Secretariat. The meeting agenda shall include details such as: whether a meeting, or part thereof, is closed or open; and whether Observers are permitted to attend.

V. Information and documentation

1. Information and documentation to which members may gain access in performing STAG-HHS related activities shall be considered as confidential and proprietary to WHO and/or parties collaborating with WHO. In addition, by counter signing the letter
of appointment and the accompanying terms and conditions referred to in section II(5) above, STAG-HHS members undertake to abide by the confidentiality obligations contained therein and also confirm that any and all rights in the work performed by them in connection with, or as a result of their STAG-HHS-related activities shall be exclusively vested in WHO.

2. STAG-HHS members and Observers shall not quote from, circulate, or use STAG-HHS documents for any purpose other than in a manner consistent with their responsibilities under these Terms of Reference.

3. WHO retains full control over the publication of the reports of the STAG-HHS, including deciding whether or not to publish them.