Terms of Reference for the Malaria Policy Advisory Group
to the World Health Organization

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The scale-up of malaria control efforts in recent years, coupled with major investments in malaria research, have produced impressive public health impact in a number of countries, and have led to the development of new tools and strategies aimed at achieving further impact. As a result, the malaria policy setting process must rapidly review increasing amounts of evidence. The development of formal WHO policy recommendations follows a dedicated process described in the WHO Handbook of guideline development and overseen by the department of quality, norms and standards.¹

WHO-GMP, in keeping with its mandate to articulate ethical and evidence-informed policies for malaria control, established the Malaria Policy Advisory Committee (MPAC) as a mechanism to increase the comprehensiveness, timeliness, transparency, independence and relevance of its recommendations to WHO Member States for malaria control and elimination.

Now named the Malaria Policy Advisory Group (MPAG), it provides independent advice to WHO to enhance the control and elimination of malaria. The mandate of MPAG is to provide strategic advice and technical input to WHO, and extends to all aspects of malaria control and elimination, as part of a transparent, responsive and credible process.

The Advisory Group (the “AG”) will act as an advisory body to WHO in this field.

I. Functions

In its capacity as an advisory body to WHO/GMP and the WHO Director-General, the AG will advise on:

1. appropriate malaria policies and standards based on data from malaria programme implementation by Member States and malaria control partners as well as reviews of the best available evidence;
2. engagement of WHO in malaria-related initiatives;
3. major issues and challenges to achieving global malaria goals; and
4. identification of priority activities to address identified challenges.

II. Composition

1. The AG shall have up to 20 members,² who shall serve in their personal capacities to represent the broad range of disciplines relevant to malaria. In the selection of the AG members, consideration shall be given to attaining an adequate distribution of technical expertise, geographical representation and gender balance.

¹ WHO handbook for guideline development, 2nd edition (https://apps.who.int/iris/handle/10665/145714)
² Members serve as full participants and partake in the decision-making process of the meeting in which they are involved.
2. Members of the AG, including the Chairperson, shall be selected and appointed by WHO\textsuperscript{3} following an open call for experts and selected by a nomination panel, appointed by the GMP Director. The Chairperson’s functions include the following:

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

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

3. Members of the AG shall be appointed to serve for a period of 4 years and shall be eligible for reappointment for an additional 2 years.\textsuperscript{4} A Chairperson is eligible for reappointment as a member of the AG. The appointment of members 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.

4. AG 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 member/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.

5. Following a determination that a proposed member’s participation in the AG 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 AG. Their appointment to the AG is subject to WHO receiving the countersigned invitation letter and letter of agreement. Notwithstanding the requirement to complete the WHO declaration of interest form, AG 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.

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

7. Where an AG member is invited by WHO to travel to an in-person AG 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 an AG member, until it receives a countersigned Temporary Adviser Letter.

\textsuperscript{3}[\text{Internal Note: selection/appointment/termination should be made by the concerned ADG, or RD for AGs established at the regional level. This function can be delegated to directors}].

\textsuperscript{4}[\text{Internal Note: If any limitation is felt to be preferable, possible limitations, depending on the Department’s wish, could be: “only once”; or “may not serve more than two consecutive terms”}].
8. AG members do not receive any remuneration from the Organization for any work related to the AG. 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 AG shall normally meet at least twice each year. However, WHO may convene additional meetings. AG meetings may be held in person (at WHO headquarters in Geneva or another location, as determined by WHO) or virtually, via video or teleconference.

AG meetings include open sessions for which Technical partners, UN agencies, and other members of the malaria community may register and be invited as observers and includes a final closed session for decision making.

(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 AG and essential WHO Secretariat staff.

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

3. WHO, in its sole discretion and subject to internal due diligence and conflict of interest considerations, may from time to time invite external individuals, representatives from intergovernmental organizations and from non-state actors to attend the open sessions of the advisory group, or parts thereof. For the purposes of these terms of reference, such invitees will be referred to as “observers”. WHO may request observers to complete a confidentiality undertaking prior to attending a session of the advisory group. Observers shall attend meetings of the AG 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 or the views and policies of their organization. Observers will not participate in the process of adopting decisions and recommendations of the AG.

4. The AG may decide to establish smaller working groups (sub-groups of the AG) to work on specific issues. Their deliberations shall take place via teleconference or video-conference. For these sub-groups, no quorum requirement will apply. The outcome of their deliberations will be submitted to the AG for review at the next meeting.

5. AG members are expected to attend meetings. If a member misses two consecutive meetings, WHO may end his/her appointment as a member of the AG. Membership in the AG may also be terminated by WHO, including:
   - Change in affiliation resulting in a conflict of interest;
   - A lack of professionalism involving, for example, a breach of confidentiality.

6. Reports of each meeting shall be submitted by the AG, with support from the secretariat to WHO (the Assistant Director-General, UCN) and are published online. All recommendations from the AG are advisory to WHO, who retains full control over any subsequent decisions or actions regarding any proposals, policy issues or other matters considered by the AG.
7. The AG 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 AG members, including in working groups, teleconferences, and interaction over email. AG members may, in advance of AG meetings, be requested to review meeting documentation and to provide their views for consideration by the AG.

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

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

IV. Secretariat

WHO shall provide the secretariat for the AG, 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 AG 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, AG 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 AG-related activities shall be exclusively vested in WHO.

2. AG members and Observers shall not quote from, circulate or use AG 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 AG, including deciding whether or not to publish them.