Strategic and Technical Advisory Group for
Maternal, Newborn, Child and Adolescent health and nutrition (STAGE)
Working Group on the Prevention and Management of Anaemia

Terms of Reference

Purpose of the work

1. To advise the interdepartmental working group on technical, strategic, programmatic and scientific considerations regarding the development of a Global action plan on the prevention and management of anaemia led by the World Health Organization (WHO). The STAGE working group on anaemia will be composed of experts acting in their individual capacity.

Background

2. The 65th World Health Assembly approved an action plan and global targets for maternal, infant, and young child nutrition. These global targets center around priority areas where improvements are most needed, including the reduction of anaemia. Although effective interventions are currently available and efforts have been made to increase awareness and action, the world is not on track for reaching the global target of a 50% reduction of anaemia in women of reproductive age by 2025. (There are currently no global targets set for childhood anaemia.)

3. Although iron deficiency is considered the leading cause of anaemia globally, the cause of anaemia varies considerably by country, making it challenging for national governments to know which determinants should be prioritised in the design of preventative and therapeutic interventions. Anaemia due to infection is the second most common cause of anaemia, accounting for about 13% of total cases in 2013, with significant variations seen by setting and disease burden. While many infectious diseases are associated with anaemia, malaria, hookworm, and schistosomiasis are the most common. To achieve global targets to reduce anaemia, reliable and disaggregated estimates of the contribution of nutritional and non-nutritional causes of anaemia are needed to guide interventions. There is not only a need for more sensitive and specific diagnostics and preventive and therapeutic interventions but a need for increased collaboration among stakeholders and coordination in support to countries in the integrated management of anaemia across the life course.

4. In November 2021, WHO announced a commitment to develop a Global action plan on the prevention and management of anaemia and, in partnership with UNICEF, to establish an Alliance for Anaemia Actions to foster accelerated and integrated efforts to reduce anaemia. WHO formed an interdepartmental working group on anaemia to oversee the development of the action plan. The objective is to work collaboratively with internal WHO partners and with relevant external partners and stakeholders to provide strategic, effective and implementable actions for reducing anaemia in countries to achieve better health and well-being, and make progress towards the global target on anaemia.
5. STAGE advised WHO to set up a STAGE working group on anaemia to engage STAGE members on the development of the global action plan and on matters related to addressing the global public health problem of anaemia.

Functions

6. In its capacity as a STAGE working group on anaemia, they will have the following functions:
   a. To act as thought partners to the WHO Interdepartmental working group on anaemia in defining the problem, the diverse root causes and risk factors of anaemia, and what can be done to effectively address anaemia (and why it hasn’t been successfully implemented before);
   b. To make recommendations to STAGE during the development of a global action plan to reduce the prevalence and severity of anaemia, including technical advice on social and behaviour change interventions to address the root causes of anaemia; and
   c. To advise on the challenges and risks related to the recommendations and programmatic approach to enhance coordination and implementation across relevant ministries and country-level impact.

Composition

7. The STAGE working group on anaemia will have up to 15 members who will serve in their individual capacity to represent the broad range of disciplines relevant to the prevention and management of anaemia. In the selection of STAGE working group members, consideration will be given to attaining an adequate distribution of technical expertise (both programmatic and academic/research), geographical representation and gender balance.

8. Members of the STAGE working group on anaemia are expected to be experts with experience in one or more of the following areas and domains in order to ensure a multisectoral approach:
   a. Academia and research: experts who have conducted or are currently conducting research to understand the root causes of anaemia and how they impact prevalence and severity, including experts from the following fields: anthropology, social sciences, gender, norms and social determinants of health, primary health care, access to blood supplies, infectious diseases, neglected tropical diseases, sexual and reproductive health, food systems and nutrition.
   b. Program design, implementation, monitoring and evaluation: experts in evaluating and documenting the impact of integrated policies and programmes; experts with experience designing and implementing national health (including malaria, NTD, RMNCH, nutrition), agriculture, education, environment and/or social protection policies and programmes and/or establishing and managing relevant units in large organizations, governments and/or government agencies.

9. Members of the STAGE working group on anaemia, including the Chair, will be selected and appointed by the STAGE chair and WHO, based on the recommendations from members of the WHO Interdepartmental working group on anaemia. The Chair will be a member of STAGE and his or her role includes the following:
a. To facilitate the meeting of the STAGE working group on anaemia and guide development of recommendations
b. To liaise with STAGE members and the WHO Interdepartmental working group on anaemia and present the recommendations to STAGE.

Operation

10. As a sub-group of STAGE, the STAGE working group on anaemia will meet virtually, via video or teleconference. The STAGE Secretariat will facilitate these meetings.

11. The outcome of their deliberations will be submitted to STAGE for review at one of its meetings and shared with the WHO Interdepartmental working group on anaemia.

Secretariat

12. WHO will serve as the STAGE Secretariat for the working group on anaemia and provide the necessary technical, administrative and other support. The Secretariat, working in collaboration with the WHO Interdepartmental working group on anaemia, will provide the members in advance of each meeting with the agenda and working documents via email.

Information and documentation

13. Information and documentation will be available to working group members through a shared online folder.
STAGE Working Group on Anaemia Technical Advisors

1. Narendra Arora† – Chair
2. Zulfi Bhutta
3. Fred Binka
4. Mariam Claeson
5. Helen Cox
6. Theresa Gyorkos
7. Dalia Haroun
8. Caroline Homer*
9. Daniel Raiten
10. Laura Reichenbach
11. Marie Ruel
12. Harshi Sachdev
13. Stephanie Topp
14. Peter Waiswa
15. Dilys Walker†
16. Joyce Wamoyi
17. Jennifer Yourkavitz
18. Stanley Zlotkin
19. Ipsita Parida

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