

**Terms of Reference**  
**Regional Validation Committee (RVC) for elimination of mother-to-child transmission (EMTCT)**  
**WHO South-East Asia Region**

The process for validation of elimination of mother-to-child transmission (EMTCT) of HIV, syphilis and hepatitis B requires validation structures at national, regional and global levels. As per WHO governance guidance, at national level, a National Validation Secretariat (NVS), and National Validation Committee (NVC), and at the regional level, the Regional Validation Committee (RVC) should be renewed at intervals. WHO South-east Asia Regional Office (SEARO) shall provide the secretariat for the South-East Asia RVC (SEA RVC), including necessary scientific, technical, administrative and other support.

The Regional Validation Committee (the “RVC”) will act as an advisory body to WHO in this field.

**I. Functions**

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

1. To review national validation reports from the National Validation Committee (NVC) to determine and advise WHO on their compliance with the global criteria for validation of EMTCT through expert desk review and in-country mission or virtual validation assessment using the four validation assessment tools.
2. To advise WHO on working with the NVCs to assist the country efforts to prepare and complete validation activities, get additional information as required, and supervise country validation assessments.
3. To advise WHO on how countries could address gaps or barriers to global validation discovered through the evaluation process, in case the NVT report does not meet the criteria.
4. To advise WHO on ways of working with the RVS through the corresponding channels.
5. To prepare the regional validation report to inform WHO regarding compliance with global criteria for validation of EMTCT before submission of the report by WHO to the RVS.
6. To advise WHO as to whether candidate countries’ achievements in EMTCT of HIV, syphilis and hepatitis B can be recommended to GVAC for validation.
7. To advise WHO on the liaison with the RVS and the provision of updates about validation activities in Member States; to advise WHO on assisting the RVS in communicating between national, regional and global partners as required.
8. To advise WHO on collaboration with the RVS, NVS and NVC to ensure the monitoring for maintenance of validation, including re-evaluation of impact and process indicators.
9. To review and provide feedback to WHO on the validation assessment tools.
10. To support WHO in the determination of a detailed operational practices including evaluation approach and methods, organization of in-country missions or virtual validation assessment and communicating with the NVS, NVC and global partners.

## II. Composition

1. The RVC shall have up to 15 members<sup>1</sup>, who shall serve in their personal capacities to represent the broad range of disciplines relevant to the elimination of mother-to-child transmission of HIV, syphilis and hepatitis B virus. In the selection of the RVC members, consideration shall be given to attaining an adequate distribution of technical expertise, geographical representation and gender balance.
2. Members of the RVC, including the Chairperson, 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 RVC;
  - 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 RVC shall be appointed to serve for a period of 3 years and shall be eligible for reappointment. A Chairperson is eligible for reappointment as a member of the RVC, 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.
4. RVC 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.
5. Following a determination that a proposed member's participation in the RVC 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 RVC. Their appointment to the RVC is subject to WHO receiving the countersigned invitation letter and letter of agreement. Notwithstanding the requirement to complete the WHO declaration of interest form, RVC members have an ongoing obligation to inform the WHO of any interests real or perceived that may give rise to a real, potential or apparent conflict of interest.
6. As contemplated in paragraph II.4 above, WHO may, from time to time, request RVC members to complete a new declaration of interest form. This may be before a RVC meeting or any other RVC-related activity or engagement, as decided by WHO. Where WHO has made such a request, the RVC member's participation in the RVC 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 a RVC member is invited by WHO to travel to an in-person RVC meeting, WHO shall, subject to any conflict-of-interest determination as set out in paragraph II.6 above, issue a letter of

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<sup>1</sup> Members serve as full participants and partake in the deliberations and the adoption of the recommendations of the meeting in which they are involved.

appointment as a temporary adviser and accompanying memorandum of agreement (together 'Temporary Adviser Letter'). WHO shall not authorize travel by an RVC member, until it receives a countersigned Temporary Adviser Letter.

8. RVC members do not receive any remuneration from the Organization for any work related to the RVC. 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 RVC shall normally meet at least once each year. However, WHO may convene additional meetings. RVC meetings may be held in person (at WHO headquarters in Geneva or another location, as determined by WHO) or virtually, via video or teleconference.

RVC 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 RVC and essential WHO Secretariat staff.

2. The quorum for RVC 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 RVC 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 RVC.

4. The RVC may decide to establish smaller working groups (sub-groups of the RVC) 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 RVC for review at one of its meetings.
5. RVC members are expected to attend meetings. If a member misses two consecutive meetings, WHO may end his/her appointment as a member of the RVC.

6. Reports of each meeting and a yearly report shall be submitted by the RVC to WHO (the Regional Director, WHO SEAR). All recommendations from the RVC 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 RVC.
7. The RVC 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 RVC members, including in working groups, teleconferences, and interaction over email. RVC members may, in advance of RVC meetings, be requested to review meeting materials and to provide their views for consideration by the RVC.
9. WHO shall determine the modes of communication by the RVC, including between WHO and the RVC members, and the RVC members among themselves.
10. RVC members shall not speak on behalf of, or represent, the RVC or WHO to any third party.

#### **IV. Secretariat**

WHO shall provide the secretariat for the RVC, 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 RVC 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, RVC 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 RVC-related activities shall be exclusively vested in WHO.
2. RVC members and Observers shall not quote from, circulate or use RVC 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 RVC, including deciding whether or not to publish them.