Malaria Policy Advisory Committee to the World Health Organization

Terms of Reference

Aims and Functions

The Malaria Policy Advisory Committee (MPAC) provides independent advice to the World Health Organization (WHO) to develop policy recommendations to control and eliminate malaria. The mandate of MPAC 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 policy setting process.

MPAC will advise the WHO Director-General through the Global Malaria Programme (GMP) specifically on:

- 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;
- engagement of WHO in malaria-related initiatives;
- major issues and challenges to achieving global malaria goals; and
- identification of priority activities to address identified challenges.

Rationale

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.

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

Membership

The MPAC will normally comprise of up to 15 members. The MPAC members shall not be representatives of governments, organizations or institutions but rather shall serve in an independent, personal and individual capacity and shall represent a broad range of disciplines, expertise, and experience encompassing many aspects of malaria control and elimination. The chair of the Certification Elimination Panel will be a standing member on MPAC.

These experts will be malariologists with a broad view of the relationship between scientific, political, economic and financial considerations. As such, membership will:
1. comprise individuals who possess a broad range of relevant expertise (e.g., epidemiology; malariology; maternal, paediatric and international public health; pharmacology and internal medicine; parasitology, tropical and infectious diseases; immunology and vaccinology; safety and pharmacovigilance; health systems, economics and financing; surveillance, monitoring and evaluation; vector control and biology; laboratory, social and behavioral sciences; health communication) acquired through credible and sustained professional experience in academia, the medical profession, clinical practice, NGOs, research institutes, and governmental bodies including national malaria control programmes, public health departments and regulatory authorities;

2. ensure appropriate geographic representation, in particular strong endemic country representation, and an adequate gender balance; and

3. comprise persons who have a demonstrated professional commitment, including the ability to actively contribute to strategy and policy formulation for malaria control and elimination, and the capacity to dedicate significant personal time in preparing for and attending MPAC meetings.

A nominations panel will be appointed by the Director, GMP to select MPAC members using a set of criteria following an open call for nominations and thereafter appointed by the ADG/HTM. The Chairperson will be selected from among appointed MPAC members. The list of MPAC members and related biographical information will be made publicly available on the WHO-GMP website.

Members of MPAC, including the Chairperson, shall be appointed to serve for an initial term of up to four years, renewable once. The first set of re-appointments will be staggered such that five persons each will be renewed for one, two, or three years during their second term in order to avoid a full turnover. To ensure sufficient institutional knowledge, the last five original members of MPAC will be offered a fourth year to their renewed term.

Prior to being appointed as MPAC members and prior to renewal of term, nominees shall be subject to conflict of interest assessment by WHO based on information that they will disclose on the attached WHO Declaration of Interest (DOI) form. In addition, MPAC members have an ongoing obligation throughout their tenure to inform WHO of any changes to the information that they have disclosed on the DOI form. Summaries of relevant disclosed interests that may be perceived to give rise to real or apparent conflicts of interest will be noted in MPAC reports which will be made public on the WHO-GMP website.

In addition, prior to confirmation by WHO of their appointment as MPAC members, MPAC nominees shall be required to sign a WHO confidentiality agreement and the standard agreement for WHO temporary advisers. Although all papers presented at the MPAC may be made publicly available on the WHO-GMP website, documents which are pre-publication manuscripts or confidential documents from private companies will be clearly labeled as such and will only be provided to MPAC members for discussion.

Membership in MPAC may be terminated by WHO, including, for any of the following reasons:

- failure to attend two consecutive MPAC meetings;
- change in affiliation resulting in a conflict of interest;
Roles and responsibilities of MPAC members

Members of MPAC have a responsibility to provide WHO with high quality, well considered, evidence-informed advice and recommendations on matters described in these terms of reference. Members play a critical role in ensuring the reputation of MPAC as an internationally recognized policy advisory committee in the field of malaria.

MPAC has no executive or regulatory function. Its role is to provide advice and recommendations to WHO-GMP and the Director-General of WHO. MPAC members may be approached by non-WHO sources for their views, comments and statements on particular matters of public health concern and asked to state the views of MPAC or of details related to MPAC discussions. MPAC members should refer all such enquiries to WHO-GMP.

Meetings and operational procedures

MPAC will meet normally twice annually for three days, with dates generally set at least six months in advance. The frequency and duration of meetings may be adjusted as necessary. MPAC recommendations to WHO-GMP will, as a rule, be taken by consensus. In the exceptional situation that a consensus on a particular issue cannot be reached, the Chairperson shall report the majority and minority view. It is the also the Chairperson’s responsibility to ensure there is clarity for MPAC members on what exactly is being decided.

Representatives of the Roll Back Malaria Partnership Secretariat (RBM), the Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM) Secretariat and UNICEF will be invited to participate as observers in MPAC meetings. Relevant staff from WHO Headquarters and Regional Offices will attend as members of the Secretariat. In addition, at least three rotating National Malaria Control Programme managers will be invited as resource persons to observe and participate in the meeting.

Other observers to MPAC meetings, including representatives from WHO regional technical advisory groups, non-governmental organizations (NGOs), international professional organizations, technical agencies, and donor organizations. Additional experts, and technical resource persons, may also be invited to meetings, as appropriate, to contribute to specific agenda items. Observers shall not take the floor unless requested to do so by the Chairperson and shall not participate in the formulation of MPAC recommendations to WHO-GMP.

MPAC will work with WHO-GMP to develop its priorities of work and meeting agendas, with input from malaria endemic countries. MPAC will be kept informed by WHO-GMP and partner agencies of progress in the implementation of strategies and the attainment of objectives at country and regional level. WHO-GMP, together with the MPAC Chairperson, will determine which policy recommendation issues and information from other WHO technical advisory groups should be brought to the attention of the MPAC.

In order to seek broader input and allow for the exchange of information and views and to ensure transparency and inclusivity, the majority of discussions will occur in open sessions. However, the actual deliberations of and development of recommendations by the MPAC to WHO-GMP will take place in a closed session in order to protect the integrity and independence of the committee from
pressure and undue influence. Transparency will be ensured as minutes will be taken, circulated among MPAC members, approved by WHO, and published on the GMP website following the meeting. Approved meeting agendas, documents, minutes and recommendations will be archived and continue to remain publicly available and easily accessible on the WHO-GMP website.

In addition to attendance of meetings, active participation will be expected from all MPAC members throughout the year, including potential participation in Technical Expert Groups, Evidence Review Groups, video and teleconferences, as well as interactions via e-mail. Review of documents may also be solicited. MPAC members may be requested to participate as observers in other important WHO departmental or cross-departmental meetings. It is estimated that the time commitment required from MPAC members is up to a total of three weeks over the course of a year.

MPAC members will not be remunerated for their participation in MPAC; however, reasonable expenses such as travel expenses incurred by attendance at MPAC or related meetings will be compensated by WHO-GMP in accordance with WHO applicable rules and policies.

MPAC reports to the WHO Director-General (or designee) through the WHO-GMP Director. The MPAC Chairperson will debrief the WHO Director-General (or designee) and the WHO-GMP Director following each MPAC meeting.