Measuring different aspects of the health of mothers and their newborn babies is essential to construct a reliable picture of the state of women’s and babies’ health at global, regional, national and sub-national levels and to track progress towards achieving the aims of the new Global Strategy for Women’s, Children’s and Adolescents’ Health. Accurate measurement improves our knowledge of whether the effective interventions are being received by pregnant and post-partum women and their babies, and enables the targeting of resources to those most in need. Various institutions are already engaged in many validation and other measurement improvement activities. In order to develop a set of norms and guidance for the measurement and monitoring of maternal and newborn health, WHO will convene a group of technical experts well versed in such measurement challenges. The guidance and norms will be used to gear the improvements in maternal and newborn health metrics needed to help achieve the relevant objectives set out in the updated Global Strategy.

The Mother and Newborn Information for Tracking Outcomes and Results (MONITOR) technical advisory group will act as an advisory body to WHO on matters of measurement, metrics and monitoring of maternal and newborn health for the Departments of Maternal, Newborn, Child and Adolescent Health (MCA) and Reproductive Health and Research (RHR).

**Functions**

1. The MONITOR technical advisory group shall have the following functions:
   - Advise on global guidance for improving measurement, for proposed data collection on indicators relevant to maternal and newborn health
   - Convene the maternal and newborn measurement community initiatives in relation to metrics, measurement and monitoring to avoid duplication of efforts and confusion in messages to the national and international communities
   - Recommend priority areas related to metrics, measurement and monitoring in maternal and newborn health and how to address them
   - Catalyse efforts to improve monitoring of maternal and newborn health at global and national levels especially on issues related to measurement tools, indicators and implementation of measurement guidelines
   - Provide independent advice to WHO on monitoring-related guidance and norms for maternal and newborn health
   - Offer advice on metrics-related research priorities and capacity building for effective implementation of monitoring and evaluation guidance and norms
   - Evaluate the utility and quality of existing measurement tools, indicators and data

2. The MONITOR group shall work closely with the Health Data Collaborative and other appropriate stakeholders in its endeavours.

3. The MONITOR group shall work closely with other initiatives testing and revising maternal and newborn indicators to follow-up on findings and recommendations.

**Composition**

1. The MONITOR technical advisory group shall have up to 12 members, who shall serve in their individual capacities to represent the broad range of disciplines relevant to the MONITOR functions and objectives. The membership of MONITOR shall seek to reflect a representation of major areas of relevant expertise such as metrics research, epidemiology,
statistics, metrics, measurement, monitoring, evaluation, maternal and newborn health, among others.

In the selection of the members, consideration shall be given to attaining an adequate technical distribution of expertise, geographical representation and gender balance.

2. Members of the MONITOR, including the Chairperson and Vice-Chairperson, shall be appointed by WHO Assistant Director-General (ADG) for the Family, Women’s and Children’s Health cluster (FWC). Members shall be selected by WHO upon a public call for nomination. WHO staff and United Nations staff members are not eligible to serve on MONITOR.

3. Members of MONITOR, including the Chairperson, shall be appointed to serve for an initial term of one to three years, and shall be eligible for reappointment only once. One-third of the members will transition annually. 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.

4. Representatives from inter-governmental organizations, as well as nongovernmental organizations in official relations with WHO, WHO Regional Offices, and other relevant technical experts may be invited by WHO to participate in MONITOR meetings as observers. Upon invitation of the Chair, they may present the views and policies of their organizations and contribute to the discussions. They will not participate in the process of adopting the final decisions or recommendations of the MONITOR. Major global stakeholders such as UNICEF and UNFPA and representatives of civil society organizations may also be invited to attend and contribute to MONITOR meetings. The selection of the institutions that are invited to send a representative shall be based on objective and justifiable criteria.

**Operation**

1. The MONITOR shall usually meet at least once each year. WHO shall provide any necessary scientific, technical and other support for the MONITOR group. WHO may convene additional meetings, including through teleconferences and videoconferences, on an ad hoc basis or recruit or appoint specific sub-groups. Open meetings can be attended by anyone interested in monitoring and evaluation issues and are intended for discussion of issues related to the agenda item(s) of the open meeting. Closed meetings will follow the open meetings and will be restricted to the MONITOR group members and the other independent experts invited by the MONITOR group as well as the Secretariat. Reports of each meeting will be submitted by the MONITOR group to WHO ADG FWC.

2. The MONITOR group recommendations will, as a goal, be reached by consensus. In the exceptional situation that agreement by all participants cannot be reached the Chairperson shall report the majority and minority views.

3. Members must respect the impartiality and independence required of WHO. In performing their work, they may not seek or accept instructions from any Government or from any authority external to the Organization. They must be free of real, potential or apparent conflict of interest. To this end, proposed members will be required to complete the WHO Declaration of Interest (DOI) form (Annex 1) and their appointment, or continuation of their appointment, will 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. The MONITOR group 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 the MONITOR group reports.
4. Information and documentation to which members may gain access in performing MONITOR-related activities will be considered as confidential and proprietary to WHO and/or parties collaborating with WHO. MONITOR members shall not purport to speak on behalf of, or represent, the MONITOR or WHO to any third party. Although all papers presented at the MONITOR Group may be made publicly available on the WHO website, pre-publication manuscripts or confidential documents will be clearly labelled as such and will only be provided to MONITOR group members for discussion. All recommendations from the MONITOR 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 group. WHO also retains full control over the publication of the reports of the MONITOR, including whether or not to publish them. All proposed members will be required to sign an appropriate confidentiality undertaking and provisions on ownership. Prior to confirmation by WHO of their appointment as MONITOR group members, nominees shall be required to sign a WHO confidentiality agreement (Annex 2). A register of members’ interests and signed confidentiality agreements shall be maintained by WHO.

5. Members are expected to attend meetings. If a member misses two consecutive meetings, WHO may end his/her appointment as a member of the MONITOR group. WHO may decide to appoint a new member as replacement. Membership in MONITOR may also be terminated due to change in affiliation resulting in a conflict of interest or involvement in activities resulting in a conflict of interest incompatible with serving on MONITOR; and a lack of professionalism involving, for example, a breach of confidentiality.

6. Further active participation will be expected from all MONITOR members throughout the year, including participation in MONITOR working groups, video and telephone conferences as well as frequent interactions via e-mail. Review of documents may also be solicited.

7. MONITOR working groups may be established as resources intended to increase the effectiveness of MONITOR deliberations by reviewing and providing evidence-based information and options for recommendations together with implications of the various options to be discussed by MONITOR during one or more of its meetings. These working groups shall be established on a time-limited basis to help address specific questions identified by MONITOR. The need and charge for a working group shall be discussed and agreed during MONITOR meetings.

Roles and responsibilities

1. Members of MONITOR have a responsibility to provide WHO with high quality, well considered advice and recommendations on matters described in these terms of reference. Members play a critical role in ensuring the reputation of MONITOR as an internationally recognized advisory group in the field of measurement, metrics and monitoring.

2. MONITOR has no executive or regulatory function. Its role is solely to provide advice and recommendations to WHO ADG FWC.

3. MONITOR members will not be remunerated for their participation in MONITOR; however, reasonable expenses such as travel expenses incurred by attendance at MONITOR or related meetings will be compensated by WHO.

4. The Chairperson’s role includes the chairing of the meetings of the MONITOR and liaising with the WHO Secretariat between meetings.

5. The secretariat of MONITOR is ensured by the Departments of Maternal, Newborn, Child and Adolescent Health (MCA) and Reproductive Health and Research (RHR).
Outputs and deliverables

1. The Monitor group shall produce a meeting report for WHO with key recommendations on guidance, norms and systems for monitoring maternal and newborn health; metrics-related research required to address priority areas in monitoring and evaluation of maternal and newborn health; priorities for capacity building; and on effective implementation of monitoring and evaluation guidance and norms.

2. A brief summary report of the MONITOR meetings, including the conclusions and recommendations shall be posted on the MONITOR website, unless a decision is made by WHO not to publish them.

3. Recommendations and advice of the MONITOR group will be disseminated widely.

Evaluation of The MONITOR Group

The relevance of the MONITOR Group will be assessed after 2 years by the ADG FWC. The terms of reference may be revised based on the findings of the evaluation.