

Terms of Reference for the Global Validation Advisory Committee (GVAC) for validation of elimination of mother-to-child transmission (EMTCT) or vertical transmission of HIV, syphilis and hepatitis B virus (HBV)

The Global Validation Advisory Committee (GVAC) for validation of elimination of mother-to-child transmission (EMTCT) or vertical transmission of HIV, syphilis and hepatitis B virus (HBV) provides independent, expert advice to the World Health Organization (WHO) global secretariat to support country efforts toward achieving and maintaining global validation standards for EMTCT of HIV, syphilis and HBV

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

I. Functions

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

- 1. To provide independent evaluation of the scientific, technical and strategic aspects of Regional Validation Committee (RVC) reports and to assess for compliance with the global criteria for validation of elimination of mother-to-child transmission, or Path to Elimination (PTE) of mother-to-child transmission of HIV, syphilis and/or HBV and the maintenance of validation;*
- 2. To make recommendations to WHO on countries' performance in the validation process of EMTCT, and provide guidance for ongoing monitoring and maintenance of validation;*
- 3. To review tools for assessment for EMTCT validation and recommend updates to the global criteria, processes and tools;*
- 4. When requested by WHO, to participate in country validation missions or regional validation meetings, through the GVAC Chair and/or some of its members operating on behalf of the GVAC, as needed;*
- 5. To advise WHO on capacity building of countries or regional structures where needed*

II. Composition

1. The AC shall have up to 25 members, including two women living with HIV who shall serve in their personal capacities to represent the broad range of disciplines relevant to EMTCT of HIV, syphilis and/or HBV and validation. In the selection of the AC members, consideration shall be given to attaining an adequate distribution of technical expertise, geographical representation and gender balance.
2. Members of the AC, including the (2) Chairpersons, shall be selected and appointed by WHO following an open call for experts. The Chairpersons' functions include the following:
 - to chair the meeting of the AC;
 - to liaise with the WHO Secretariat between meetings.

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

3. Members of the AC shall be appointed to serve for a period of 3 years and shall be eligible for reappointment for two additional consecutive terms. A Chairperson is eligible for reappointment as a member of the AC, 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. AC 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 AC 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 AC. Their appointment to the AC is subject to WHO receiving the countersigned invitation letter and letter of agreement. Notwithstanding the requirement to complete the WHO declaration of interest form, AC 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 AC members to complete a new declaration of interest form. This may be before a AC meeting or any other AC-related activity or engagement, as decided by WHO. Where WHO has made such a request, the AC member's participation in the AC 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 AC member is invited by WHO to travel to an in-person AC 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 AC member, until it receives a countersigned Temporary Adviser Letter. Appointment as temporary advisers applies not only to travels to attend GVAC meetings but also to travels for country visits.
8. AC members do not receive any remuneration from the Organization for any work related to the AC. 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 AC shall normally meet at least quarterly, including one in person meeting each year. However, WHO may convene additional meetings. AC meetings may be held in person (at WHO headquarters in Geneva or another location, as determined by WHO) or virtually, via video or teleconference.

AC 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 AC and essential WHO Secretariat staff.

2. The quorum for AC 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 internal due diligence and conflict of interest considerations in accordance with FENSA. Observers invited as representatives may also be requested to complete a confidentiality undertaking. Observers shall normally attend meetings of the AC 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 decisions and recommendations of the AC.

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

6. Reports of each meeting shall be submitted by the secretariat of the AC to WHO (the Assistant Director-General of the responsible Cluster). All recommendations from the AC 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 AC.
7. The AC 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 AC members, including in working groups, teleconferences, and interaction over email. AC members may, in advance of AC meetings, be requested to review meeting documentation and to provide their views for consideration by the AC.
9. WHO shall determine the modes of communication by the AC, including between WHO and the AC members, and the AC members among themselves.
10. AC members shall not speak on behalf of, or represent, the AC or WHO to any third party.

IV. Secretariat

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