

Malaria in Pregnancy Working Group (MiP WG)

Terms of Reference

I. Purpose

The purpose of the RBM Partnership to End Malaria - Malaria in Pregnancy Working Group (MiP WG) is to provide the RBM Partnership with strategic advice on best practices to accelerate MiP programming in both control and elimination settings.

The MiP WG will at all time ensure that its work is aligned with, and complements, that of WHO.

The MiP WG is accountable to the RBM Partnership Board through the RBM CEO.

II. Rationale

Malaria infection during pregnancy is a major public health problem with substantial risks for the mother and her baby. Each year, MiP is responsible for: 20% of stillbirths in sub-Saharan Africa, 11% of all newborn deaths in sub-Saharan Africa and 10,000 maternal deaths globally. Since 2003, the RBM MiP WG has played a key role in: a) advocating for and prioritisation of MiP programming; b) engendering partnerships between reproductive health and malaria control programs c) disseminating best practices in MiP programming to help advance MiP programming globally and d) synthesizing and sharing results of current research to update MiP policy documents.

This TOR is aligned with the emerging priorities of the RBM Partnership, as outlined in the RBM *Action and Investment to defeat Malaria 2016–2030 (AIM)* and its commitment to leading the global fight to end malaria for good together with the direct engagement of all interested malaria partners. This includes continued support and prioritisation of the *Global Call to Action to increase national coverage with Intermittent Preventive Treatment of Malaria in Pregnancy* and comprehensive care for pregnant women including MiP control, as outlined in *WHO's Recommendations on Antenatal Care for a Positive Pregnancy Experience* and *WHO's Policy Brief for the Implementation of IPTp-SP*.

III. Functions of the Working Group

The MiP WG will act as an advisory body to the RBM Partnership Board, through the RBM CEO, on all matters pertaining to the implementation and scale-up of interventions for the prevention and control of malaria during pregnancy at the global, regional, and national levels.

The MiP WG prioritises the following key areas:

Advocacy

- Create and disseminate MiP Advocacy Guide
- Strengthen ANC platform for integrated service delivery, including MiP interventions.
- Advocate for increased supply for quality assured SP for IPTp, the provision of ITNs to pregnant women during ANC, and improved ITN coverage for all women of child bearing age

- Synthesize and update new research findings to inform MiP policy documents and programme implementation
- Create and disseminate MiP success stories

Products: Develop key tools and products targeting policy makers and programme managers with the most up to date information in MiP programming, such as:

- MiP Infographic
- Case Management Job Aid
- Early IPTp Uptake Toolkit
- ANC MiP Brief
- MiP Advocacy Guide

Country Support:

- Promote partnerships between reproductive health and malaria control programs
- Support documentation and dissemination of country experiences and best practices
- Provide guidance to the application of WHO ANC guidelines to country MiP interventions

Coordination:

- Collaborate with other RBM mechanisms and align RBM partners on best practices in MiP programming
- Support RMNCAH integration

Policy Development and Promotion:

- Participate in WHO ANC guidelines development
- Promote the translation of new evidence and new WHO policy guidance to help countries expand MiP programming
- Identify linkages with research for effective implementation and policy development
- Incorporate findings from pilot studies, e.g.: community approaches, to influence policy dialogue at the global and country levels

IV. Membership

MiP WG Membership is open to all individuals, organisations and Ministries of Health with expertise and experience in reproductive, maternal, newborn and child health and/or malaria control related to scaling-up MiP interventions. There are no term limits for MiP WG members. Participation in the MiP WG is voluntary, and, as such, members of the MiP WG will not be compensated for their participation or contribution. Membership to the MiP can be requested through the contact information available on the RBM Partnership website.

All MiP WG members actively advocate for the inclusion of MiP in national reproductive health and national malaria control plans and reviews, and for commitment to end MiP.

The member fee for the Annual Meeting, which seeks to cover the cost of organising and running the meetings, as well as offsetting costs such as translation and venue will be an annual fee of \$350 per member, will be collected by the Secretariat.

V. Structure

Co-chairs of MiP WG

Two co-chairs will be elected from MiP WG membership. The Co-chairs will serve a two-year term and are limited to two consecutive terms. There is no limit on the number of non- consecutive terms a co-chair may serve. Elections will be held during the MiP WG Annual Meeting. The Co-chairs will:

- Determine the strategic direction of the MiP WG
- Develop, in collaboration with Task Force leads, as appropriate, and membership, a MiP WG workplan
- Assume responsibility for endorsing and facilitating, with assistance of the Secretariat, the implementation of the MiP WG workplan
- Convene General MiP WG meetings or General calls at least once every two months
- Endorse MiP WG meeting and call agendas and reports
- Foster coordination, dynamic interaction, and exchange among all members of the MiP WG and the RBM Partnership Coordinating mechanism, and other stakeholders as relevant
- Participate in the quarterly coordination meetings between the Working Group and Partner Committee Co-Chairs, chaired by the RBM CEO
- Represent the MiP WG to the RBM Board, the RBM Partner Committees and other working groups

MiP WG Secretariat

The MiP WG Secretariat will be housed by a member organisation with the capacity and resources to do so. The MiP WG Secretariat receives guidance from and works in close collaboration with MiP WG Co-chairs. In the event that no partner organisation is selected to be the MiP WG Secretariat, the responsibility shall be shared among partners.

The role and functions of the Secretariat are centered on coordination and communication and can be defined as follows:

- Organise the bi-monthly meetings or calls of the MiP WG and other special or ad hoc calls, as requested and appropriate, and provide appropriate services, including translation and note taking
- Prepare the agenda and relevant documents for bi-monthly and annual MiP WG meetings and calls
- Support the logistics for the MiP WG Annual Meeting
- Produce quarterly update on the MiP WG work for the RBM CEO
- Produce and distribute Annual Meeting reports
- Monitor and update the MiP WG page on the Roll Back Malaria website
- Update and maintain a database of members and contact information, and
- Promote year-round engagement of members by sharing best practices, resources, and success stories

Sub-Working Groups/ Taskforces

Sub-Working Groups/Taskforces may be established to work on specific issues of MiP workplan.

- Responsibilities are dependent on Sub-Working Group/ taskforce tasks.
- Co-chairs propose the creation of Sub-Working Groups /Taskforces

VI. Operating Procedures

The MiP WG will host bi-monthly meetings or calls focused on a specific topic relevant to the MiP WG. The MiP WG may invite representatives from RBM Partnership member organizations or non-members organisations or RBM technical working groups to present on their malaria MiP activities or research. During the bi-monthly calls or meetings, the MiP WG Co-chairs, or their designee, will provide a brief update on news of note and recent activities of the MiP WG and/or RBM. MiP WG members will also communicate as necessary by mail.

The MiP WG will attempt to meet in-person at least once for the MiP WG Annual Meeting per year based on available resources. The Co-chairs will determine the meeting dates in consultation with the Secretariat.

Facilitated by the WG Co-chairs, the WG must develop an annual workplan and accompanying budget. This workplan will be the results of a defined consultative process, defined in the governance of the WG, including the opportunity for the RBM CEO to provide comments and inputs to ensure harmonisation and consistency with RBM and Partner Committee workplans.

The Management Team will monitor the performance of the Working Groups and may request the Partnership Board to remove accreditation if a Working Group is either inactive or does not fulfil the requirement to ensure adequate participation of malaria-affected countries in its activities.

The identification and management of conflicts of interest should be undertaken in accordance with the RBM declaration of interest process, as overseen and directed by the RBM Secretariat.

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