Consolidated guidelines on HIV, viral hepatitis and STI prevention, diagnosis, treatment and care for key populations

Web Annex A. Summaries of declarations of interest



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This publication forms part of the WHO guideline entitled *Consolidated guidelines on HIV, viral hepatitis and STI* prevention, diagnosis, treatment and care for key populations. It is being made publicly available for transparency purposes and information, in accordance with the WHO handbook for quideline development, 2nd edition (2014).

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Guideline development group

WHO regions	Percentages
African Region	28%
Region of the Americas	24%
Eastern Mediterranean Region	4%
European Region	24%
South-East Asia Region	8%
Western Pacific Region	12%

Gender	
Female	56%
Male	36%
Transgender woman	4%
Transgender man	4%

Name	1. Employment and consulting	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products	Conflicts and management plan
Christopher Akolo (FHI360, USA)	0	0	0	0	0	0	Full participation.
Ochonye Bartholomew Boniface (Heartland Alliance, Nigeria)	0	0	0	0	0	0	Full participation.
Erika Castellanos (GATE, The Netherlands)	0	0	0	0	0	0	Full participation.
Judy Chang (International Network of People who Use Drugs (INPUD), Italy)	1a. INPUD is a network representing the interests of people who use drugs. We receive money to advocate for equitable access to HIV and Hepatitis C prevention, care and treatment services. Employees of the organisation are salaried to work towards fulfilling the above objective. £54,106 annually, 2021.	0	0	5a and 5b. The end beneficiaries of all recommendations and users of all recommended services are key population members and so it is crucial to understand their values and preferences, particularly in relation to the new potential recommendations of the updated guidelines. The principal investigators will be senior staff and consultants from four global key populations networks representing gay and bisexual men (MPACT), people who use drugs (INPUD), sex workers (NSWP) and trans communities (GATE). For the qualitative research key populations values and preferences for the services and approaches investigated in the PICO questions will be assessed using focus group discussions and semi-structured interviews. The time frame for this project will be from 30th January, 2021 to 15th of August 2021.		0	Full participation.

¹ The individuals response has been edited to the information most essential to the WHO secretariat for evaluating conflicts.

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Name	1. Employment and consulting	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products	Conflicts and management plan
Frances Cowan (The Centre for Sexual Health and HIV/AIDS Research Zimbabwe (CeSHHAR), Zimbabwe)	0	2a.Viiv Healthcare, research grant - Zvandiri trial, \$2 million, current finishes in March 2021; 2a Viiv healthcare, research grant to UZ but with CeSHHAR sub, \$50,000, current till July 2022.	0	0	0	0	Financial, not significant. Full participation.
Angelica Espinosa Miranda (Ministry of Health, Brazil)	0	0	0	0	0	0	Full participation.
Patricia J Garcia (Cayetano Heredia University, Peru)	0	0	0	0	0	0	Full participation.
Kimberly Green (PATH, Viet Nam)	1a and 2a. Employment and research, PATH, USAID funded key population health programs, 2014 – present.	0	0	0	0	0	Full participation.
Adeeba Kamarulzaman (University of Malaya, Malaysia)	0	Grant, Open Society, USD 100,000 (2019 -2020)	0	0	0	0	Financial, not significant. Full participation.
Mehdi Karkouri (Faculty of Medicine Center Hospital University Ibn Rochd, Morocco)	0	0	0	0	0	0	Full participation.
Kenneth Mayer (The Fenway Institute, USA)	0	2a. Research on pre-exposure prophylaxis product preference.	0	0	0	0	Full participation.
Fahe Kerubo (Y+ Global, Kenya)	0	0	0	0	0	0	Full participation.

Name	1. Employment and consulting	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products	Conflicts and management plan
Pablo Mabanza (FHI360, Democratic Republic of the Congo)	0	0	0	0	0	0	Full participation.
Lisa Maher (Kirby Institute, Australia)	1a. Faculty of Medicine, UNSW Sydney, belongs to self, \$250,000 per annum, current.	2a. Australian National Health and Medical Research Council (NHMRC); NIH/NIDA; Canadian Institutes of Health Research; Commonwealth Department of Health; NSW Ministry of Health; Paul Ramsey Foundation, belongs to employer/research unit (\$28,051,232; 2017 - 2020) These are all peer- reviewed scientific grants (more details available on request) – the funds go to the institution not the individual and while the grant awards are all over \$5,000 total funding is often split between institutions. I have never received funding, travel support or speaker fees from private companies, including pharmaceutical companies. ²	0	0	0	0	Financial, not significant. Full participation.

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² The WHO secretariat requested further details by email correspondence to better inform their decision.

Name	1. Employment and consulting	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products	Conflicts and management plan
Ruth Morgan Thomas (Global Network of Sex Work Projects (NSWP), United Kingdom)	Global Coordinator of NSWP, and my role is to advocate for the health and human rights of female, male and transgender sex workers - NSWP is a global network of organizations with 410 members in 95 countries. Annual salary GBP 58,000, current.	0	0	5b. My role as NSWP Global Coordinator is to advocate for sex workers health and human rights, and that involves taking positions on the health needs of my community.	0	0	Full participation.
Mary Mugambi (Ministry of Health, Kenya)	0	0	0	0	0	0	Full participation.
Nittaya Panupak (Institute of HIV Research and Innovation (IHRI), Thailand)	1a. Thai Government Pharmaceutical Organization, belongs to myself, USD35 per year for a Scientific Advisory Board meeting, ongoing; ViiV Healthcare, belongs to research organization, THB30,550, ceased May 2021; MSD, belongs to research organization, USD600, ceased February 2021.	2a. USAID, belongs to research organization, USD2,413,747.46 in FY2019, ongoing; US NIH, belongs to research organization USD 451,670, ongoing. Non-monetary support: Thai Government Pharmaceutical Organization, belongs to research organization, LPV/r 480 bottles, TDF/FTC 1500 bottles, ceased 2018.	0	0	0	0	Financial, not significant. Full participation.
Asa Radix (Callen- Lorde Community Health Center, USA)	0	0	0	0	0	0	Full participation.
Sushena Reza Paul (Ashodaya, India)	0	0	0	0	0	0	Full participation.

Name	1. Employment and consulting	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products	Conflicts and management plan
Jürgen Rockstroh (University of Bonn, Germany)	1a and 2a. Consulting or speaking at educational events: Gilead, myself,12.000, 2020; Merck, myself, 13000, 2020; ViiV Healthcare, myself, 9000, 2020; speaking at educational event: Janssen, myself, 1250, 2020.3	0	0	0	0	0	Financial significant. Partial participation. Excluded from evidence to decision making and formulating recommendations related to viral hepatitis.
Andrew Scheibe (TB HIV Care and University of Pretoria, South Africa)	0	2a. Bristol Myers Squib foundation, paid as consultant, part of salary, for viral hepatitis prevalence research (± US 30 000) over 2 years. No current interest, project ended in 2019, with some ongoing engagement in their technical advisory programme until Oct '20; speakers fees/ honoraria around viral hepatitis. Gilead and Aspen. Cover speaker costs and travel costs for two events (SA HIV Clinicians Society Conference 2018 and a virtual hepatitis conference), ± U\$ 1 500, excluding local travel (conferences in South Africa). None current. One conference in 2019 (Apen) and one in 2018 (Gilead).	0	5b. I work as a consultant and technical advisors to civil society organisations, and often provide statements to press and publications around key population health andwellness issues, since ± 2016. The extend of interests of companies is limited to some of their support for research and conferences that they have supported, but they havenot engaged in the messages/ statements provided.	6d. I have presented on viral hepatitis and key populations at a sponsored session (by Gilead) on viral hepatitis at the SA HIV Clinicians Society Conference in Johannesburg (local) in 2018, I received an honorarium for speaking. In 2019 I presented around viral hepatitis and key populations at a virtual webinar hosted by Ethicare (linked to Aspen), and was paid an honorarium/ speakers fee for this.	0	Financial, not significant. Full participation.

³ The WHO secretariat requested further details by email correspondence to better inform their decision.

Name	1. Employment and consulting	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products	Conflicts and management plan
Jessica Seleme (Ministry of Health, Mozambique)	0	0	0	0	0	0	Full participation.
Andrew Spieldenner (MPact Global Action for Gay Men's Health and Rights, United States of America)	0	0	0	0	0	0	Full participation.
Ketevan Stvilia (Ministry of Health, Georgia)	0	0	0	0	0	0	Full participation.
Ernst Wisse (Médecins du Monde (MDM), France)	0	0	0	0	0	0	Full participation.

External review group

Conflicts management: The steering group assessed comments for validity on a case-by-case basis, in the context of the reviewer's conflicts of interest.

Name	1. Employment, consulting & technical advisory boards	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products
Michael Akanji (Heartland Alliance, Nigeria)	0	0	0	0	0	0
Trista Bingham (CDC, USA)	0	0	0	0	0	0
Machteld Busz (Mainline, The Netherlands)	0	0	0	0	0	0
Sinead Delany- Moretlwe (University of the Witwatersrand, South Africa)	0	0	0	0	0	0
Kostyantyn Dumchev (Ukrainian Institute on Public Health Policy, Ukraine)	0	0	0	0	0	0
Gaston Djomand (Centers for Disease Control and Prevention, USA)	0	0	0	0	0	0
Oriel Fernandes (Clinton Health Access Initiative, Rwanda)	0	0	0	0	0	0
Doreen Gaura (Just Detention International-South Africa)	Employee at an NGO, Just Detention International-SA.	0	0	0	0	0

Name	1. Employment, consulting & technical advisory boards	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products
Omran Gharib (Youth Rise, Lebanon)	0	0	0	0	0	0
Jason Grebely (Kirby Institute, UNSW and International Network on Hepatitis in Substance Users (INHSU), Australia)	0	2a. AbbVie, Me, 30,0000, current; Cepheid, Me, 3,000,000, current; Gilead Sciences, Me, 1,500,000, current; Hologic, Me, 250,000, current. 2b. AbbVie, Me, 5,000, 2020; Cepheid, Me, 3,000, 2020; Gilead Sciences, Me, 3000, 2021.	0	0	0	0
Sandra Ka Hon Chu (HIV Legal Network, USA)	I am currently employed by the HIV Legal Network, a non-profit human rights organization that advocates to uphold the human rights of people living with and affected by HIV, including people in prison. In this role, we have advocated for stronger health and harm reduction measures for people in prison, and undertaken research with prisoners to inform understandings of their access to health and harm reduction services in prison settings.	0	0	0	0	0

Name	1. Employment, consulting & technical advisory boards	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products
Jeff Klausner (University of South Carolina, USA)	1b. Advisory services: Roche Molecular - Me - < \$5000 - ongoing; Visby Medical - Me - < \$5000 - ongoing; Abbott - Me - < \$5000 - ongoing; Cepheid - Me - < \$5000 - ongoing; Dahaher - Me - < \$5000 - ongoing; SpeedX - Me - < \$5000 - ongoing	2b. Loaned research equipment - Cepheid - Me – Ongoing; Donated research supplies - Abbott - Me - Ongoing	0	0	0	0
Gail Knudson (World Professional Association for Transgender Health (WPATH), USA)	0	0	0	I served on the Executive Committee of the World Professional Association for Transgender Health (WPATH) from 2009-2020. Since 2014, I have served as the Co-Lead of the Global Education Initiative (GEI) for WPATH. I have received travel costs and, on a few occasions, small honoraria (<=1,000 USD) for educational courses delivered by WPATH GEI. The aim of GEI is to improve access to competent healthcare for trans and gender diverse individuals globally.	0	0
Vanessa Monley (Youth Lead, Thailand)	0	0	0	0	0	0
Lucy O'Connell (MSF, South Africa)	0	0	0	0	0	0
Tinashe Rufurwadzo (Y+ Global, The Netherlands)	0	0	0	0	0	0
Tracy Swan (International Treatment Preparedness Coalition, Spain)	0	0	0	0	0	0

Name	1. Employment, consulting & technical advisory boards	2. Research support	3. Investments & 4. Business interests	5. Public statements and positions	6. Additional information	7. Tobacco products
Ancella Voets (Frontline AIDS, United Kingdom)	0	0	0	0	0	0
Brian White (Elizabeth Glaser Pediatric AIDS Foundation, USA)	Pact / LINKAGES Project, Me, less than \$100,000/ yr from 2016 to 2019 Elizabeth Glaser Pediatric AIDS Foundation, Me, less than \$125,000/yr from 2020 to present, Current interest Nigeria KP Assessment consultancy for UNAIDS/GF paid thru Society for Family Health, less than \$20,000 2019-2020, 2020.	0	0	0	0	0



