Draft terms of reference for the United Nations Interagency Task Force on the Prevention and Control of Noncommunicable Diseases, including a division of tasks and responsibilities for United Nations funds, programmes and agencies and other international organizations

The United Nations Interagency Task Force on the Prevention and Control of Noncommunicable Diseases (Task Force) and all its Members affirm the right to health as a human right, as enshrined in the Universal Declaration of Human Rights and the WHO Constitution.

Actions of the Task Force and its Members are to support, in accordance with their respective mandates, the realization of the commitments made in the Political Declaration of the High-level Meeting of the United Nations General Assembly on the Prevention and Control of Noncommunicable Diseases (UN Political Declaration on NCDs), and further elaborated in the WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020 (WHO Global NCD Action Plan 2013–2020).

INTRODUCTION

1. Preambular paragraph 13 of the UN Political Declaration on NCDs\(^1\) recognized the leading role of the World Health Organization (WHO) as the primary specialized agency for health, including its roles and functions with regard to health policy in accordance with its mandate, and reaffirmed its leadership and coordination role in promoting and monitoring global action against noncommunicable diseases (NCDs) in relation to the work of other relevant United Nations agencies, development banks and other regional and international organizations in addressing noncommunicable diseases in a coordinated manner.

2. Operative paragraph 51 of the UN Political Declaration on NCDs called upon the WHO, as the lead United Nations specialized agency for health, and all other relevant United Nations system agencies, funds and programmes, the international financial institutions, development banks and other key international organizations to work together in a coordinated manner to support national efforts to prevent and control noncommunicable diseases and mitigate their impacts.

\(^1\) Available at http://www.who.int/nmh/events/un_ncd_summit2011/political_declaration_en.pdf.
3. Operative paragraph 1.1 of resolution WHA66.10 endorsed the WHO Global NCD Action Plan 2013–2020. The plan aims to operationalize the commitments from Heads of State and Government included in the UN Political Declaration on NCDs. The WHO Global NCD Action Plan 2013–2020 comprises a set of actions which, when performed collectively by (i) Member States, (ii) international partners and the private sector, and (iii) the WHO Secretariat, will support governments in their national efforts to contribute to the attainment of nine voluntary global targets for noncommunicable diseases by 2025. The building and coordinating of results-oriented engagement or collaborative efforts, as appropriate, including with non-health and non-State actors, at the national, regional and global levels for the prevention and control of noncommunicable diseases are essential components of the WHO Global NCD Action Plan 2013–2020.

4. Operative paragraph 3.5 of resolution WHA66.10, requested the WHO Director-General to work together with other United Nations funds, programmes and agencies to conclude the work, before the end of October 2013, on a division of tasks and responsibilities for United Nations funds, programmes and agencies and other international organizations.

5. Operative paragraph 1 of the ECOSOC resolution adopted on 22 July 2013 on the United Nations Task Force on the Prevention and Control of Noncommunicable Diseases requested the United Nations Secretary-General to establish the Task Force by expanding the mandate of the existing United Nations Ad Hoc Interagency Task Force on Tobacco Control. The Task Force will be convened and led by WHO, report to ECOSOC through the United Nations Secretary-General and incorporate the work of the United Nations Ad Hoc Interagency Task Force on Tobacco Control, including the work to support the accelerated implementation by parties to the World Health Organization Framework Convention on Tobacco Control (WHO FCTC).

6. Operative Paragraph 2 of the ECOSOC resolution adopted on 22 July 2013, decided that the Task Force will coordinate the activities of the relevant United Nations funds, programmes and specialized agencies and other intergovernmental organizations to support the realization of the commitments made by Heads of State and Government in the UN Political Declaration on NCDs, in particular through the implementation of the WHO Global NCD Action Plan 2013–2020.

7. Operative Paragraph 3 of the ECOSOC resolution adopted on 22 July 2013 urged all members of the existing United Nations Ad Hoc Interagency Task Force on Tobacco Control and other United Nations funds, programmes and agencies and other intergovernmental organizations to support the realization of the commitments made by Heads of State and Government in the UN Political Declaration on NCDs, in particular through the implementation of the WHO Global NCD Action Plan 2013–2020.

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1 Available at http://apps.who.int/gb/e/wha66.html.

2 Non-State actors include academia and relevant nongovernmental organizations, as well as selected private sector entities, as appropriate, excluding the tobacco industry, and including those that are demonstrably committed to promoting public health and are willing to participate in public reporting and accountability frameworks.

3 Final draft version (as adopted) available at http://www.who.int/nmh/events/2013/E.2013.L.23_tobacco.pdf; The final version will be published as E/RES/2013/12.


Nations funds, programmes and specialized agencies, and intergovernmental organizations, to contribute, within their respective mandates, as appropriate, to the activities of the Task Force.

8. Operative Paragraph 4 of the ECOSOC resolution adopted on 22 July 2013 requested the United Nations Secretary-General, in close collaboration with the WHO Director-General, and in full consultation with Member States through WHO, to develop the terms of reference for the Task Force, incorporating, but not limited to, the work of the United Nations Ad Hoc Interagency Task Force on Tobacco Control and the current work of the WHO Secretariat to develop a division of tasks and responsibilities, as exemplified by appendix 4 to the WHO Global NCD Action Plan 2013–2020, and also requests the United Nations Secretary-General to include the terms of reference in his report on the implementation of the present resolution for the consideration of ECOSOC at its substantive session of 2014.

9. This Discussion Paper outlines a terms of reference for the Task Force, including a division of tasks and responsibilities for Members of the Task Force.

TERMS OF REFERENCE

10. It is proposed that the terms of reference outline the purpose of the Task Force, as well as its objectives, participants, responsibilities of participants, periodicity of general meetings, working groups, secretariat, administrative arrangements and accountability, and includes a collaborative division of tasks and responsibilities for Members of the Task Force.

Purpose of the Task Force

11. The purpose of the Task Force described in operative paragraph 2 of the ECOSOC resolution adopted on 22 July 2013 is to:

“coordinate the activities of the relevant United Nations funds, programmes and specialized agencies and other intergovernmental organizations to support the realization of the commitments made by Heads of State and Government in the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Noncommunicable Diseases, in particular through the implementation of the World Health Organization Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020.”

Objectives of the Task Force

12. The objectives of the Task Force are as follows, taking into account the overall principles and approaches outlined in the UN Political Declaration on NCDs, the WHO Global NCD Action Plan 2013–2020, and in support of a global coordination mechanism for the prevention and control of noncommunicable diseases:

- To enhance and coordinate systematic support to Member States, upon request, at the national level, in efforts to support responses to prevent and control NCDs and mitigate their impacts, for example to support preparation and implementation of national plans through joint programming in an initial set of 12 countries.
• To facilitate systematic and timely information exchange among entities of the United Nations system and intergovernmental organizations about existing and planned strategies, programmes and activities to prevent and control NCDs and mitigate their impacts, at global, regional and national levels, including through the establishment of a virtual practice community for Members of the Task Force, with updates regularly circulated to subscribers, and the preparation and regular updating of an inventory of United Nations system activities on the prevention and control of NCDs.

• To facilitate information on available resources to support national efforts to prevent and control NCDs and mitigate their impacts, and to undertake resource mobilization for the implementation of activities, including for joint programmes in accordance with guidelines of the United Nations Development Group.

• To strengthen advocacy in order to raise the priority accorded to the prevention and control of NCDs on the international development agenda, including the post-2015 development agenda, and sustain the interest of Heads of State and Government in realizing their commitments through statements, reports and participation in panels by high-level United Nations officials.

• To incorporate the work of the United Nations Ad Hoc Interagency Task Force on Tobacco Control, while ensuring that tobacco control continues to be duly addressed and prioritized in the new task force mandate.

Members of the Task Force

13. The Members of the Task Force will be United Nations system agencies, funds and programmes, the international financial institutions, development banks and other key intergovernmental organizations and treaty secretariats.

Responsibilities of the Members of the Task Force

14. Within their respective mandates, as appropriate, the responsibilities of the Members of the Task Force are to:

• Support, in a harmonized manner, the implementation and monitoring of relevant policy options and proposed actions for international partners included in the WHO Global NCD Action Plan 2013–2020, as well as the objectives of the Task Force.

• Coordinate the development of guidance to mobilize non-health sectors for the prevention and control of NCDs and mitigate their impacts.

Periodicity of meetings of the Task Force

15. It is envisaged that WHO would convene the Task Force twice annually, which would include a one-day annual session devoted to tobacco control and the implementation of the WHO FCTC. While the meetings will be led by WHO, it is proposed that each meeting would be co-chaired by WHO together with another member of the Task Force through rotation. Efforts should be made to have different Members host the meetings. Meetings in middle- and low-income countries would be encouraged in order to increase the visibility of the work of the Task Force. Additional regional and ad hoc meetings could also be convened by WHO, as deemed necessary.
16. In accordance with the objective of the Task Force, a biennial work plan will be developed, which will be monitored and reviewed during the meetings of the Task Force.

**Secretariat for the Task Force**

17. In accordance with operative paragraph 1 of the ECOSOC resolution adopted on 22 July 2013, the Task Force will be convened and led by WHO. Accordingly, WHO shall provide the Secretariat of the Task Force. The Secretariat of the Task Force will be an integral part of WHO’s Cluster for Noncommunicable Diseases and Mental Health.

18. The main responsibilities of the Secretariat for the Task Force will be to:

- Convene and lead meetings of the Task Force.
- Encourage and facilitate strategic collaborative arrangements and alliances among the Members of the Task Force to enhance support to national level efforts to realize the commitments made by Heads of State and Government in the UN Political Declaration on NCDs, in particular through the implementation of the WHO Global NCD Action Plan 2013–2020.
- Create and manage a virtual practice community for Members of the Task Force.
- Create and update an online inventory of commitments and activities of the Members of the Task Force on the prevention and control of NCDs.
- Act as a point of enquiries and information regarding activities being undertaken by Members of the Task Force.
- Prepare summary reports of the meetings of the Task Force and publish these at www.who.int/ncd, as well as progress reports in achieving the objectives of the Task Force, which will serve as an input into a global coordination mechanism for the prevention and control of NCDs.
- Coordinate the preparation of the report to ECOSOC through the United Nations Secretary-General and incorporate the work of the former United Nations Ad Hoc Interagency Task Force on Tobacco Control, including the work to support the accelerated implementation by parties to the WHO FCTC.

**Administrative arrangements for the Secretariat for the Task Force**

19. WHO Programme Budgets will include budgetary provisions for the activities of the Secretariat for the Task Force, for which WHO will seek voluntary contributions.

20. Members of the Task Force should, in principle, be responsible for meeting their own expenses in relation to activities under the Task Force (including, but not limited to, travel and subsistence for attending meetings and interagency collaborations).
Accountability

21. In accordance with operative paragraph 1 of the ECOSOC resolution adopted on 22 July 2013, the Task Force will report to ECOSOC through the United Nations Secretary-General and incorporate the work of the United Nations Ad Hoc Interagency Task Force on Tobacco Control, including the work to support the accelerated implementation by parties to the WHO FCTC.

Conflicts of interest

22. Public health policies for the prevention and control of NCDs must be protected from undue influence by any form of vested interest.¹

23. In carrying out responsibilities under the WHO Global NCD Action Plan 2013–2020, Members of the Task Force are guided by their relevant conflict of interest policies.

24. Should a conflict of interest arise from a situation involving Members of the Task Force or external parties, the Secretariat for the Task Force will be required to act as a repository with a view to compiling incidents of conflicts of interest and provide a platform to discuss such issues.

Links with a global coordination mechanism for the prevention and control of NCDs

25. Operative paragraph 3.2 of resolution WHA66.10, requested the WHO Director-General to develop draft terms of reference for a global coordination mechanism for the prevention and control of NCDs.

26. The Task Force, in accordance with its mandate provided by the ECOSOC, and within the respective mandates of its Members, will contribute, as appropriate, to the agreed upon functions and responsibilities of a global coordination mechanism and participate accordingly.

DIVISION OF TASKS AND RESPONSIBILITIES

27. The division of tasks and responsibilities outline how the Members of the Task Force will work jointly and collectively to coordinate the activities of the relevant United Nations organizations and other intergovernmental organizations to support the realization of the commitments made by Heads of State and Government in the UN Political Declaration on NCDs, in particular through the implementation of the WHO Global NCD Action Plan 2013–2020.

28. These tasks and responsibilities build on, and include, existing work being undertaken on the prevention and control of NCDs by Members of the Task Force. The work areas identified by Members of the Task Force are dynamic in nature and may reflect changes that may be necessitated by emerging health risks, shifts in disease burdens and new requirements identified by Member States.

29. The following division of tasks and responsibilities is organized around the six objectives of the WHO Global NCD Action Plan 2013–2020, and currently includes 27 work areas within the six

¹ In accordance with the overarching principles and approaches included in paragraph 18 of the WHO Global NCD Action Plan 2013–2020.
objectives. Each objective has convening and partner institutions, acting in accordance with their respective mandates, as appropriate.

30. The responsibilities of *convening institutions* are as follows:

- To determine a scope of work, develop a work plan and report progress against it, as it pertains to the objectives of the WHO Global NCD Action Plan 2013–2020.
- To facilitate the identification of country-level needs and lead on setting the agenda across the UN system.
- To ensure that work is in line with the WHO Global NCD Action Plan 2013–2020 and to encourage harmonization of activities across the UN system.
- To safeguard public health interests from undue influence by any form of real, perceived or potential conflicts of interest.
- To lead advocacy and communication on the prevention and control of NCDs across the UN system, in line with WHO Global NCD Action Plan 2013–2020.
- To provide timely inputs to the Secretariat for the Task Force to enable it to draft reports to ECOSOC through the United Nations Secretary-General, including the work to support the accelerated implementation by parties to the WHO FCTC.
- To report, as appropriate, on progress made in integrating relevant activities into the discussions of their respective governing bodies.

31. The responsibilities of *partner institutions* are as follows:

- To support the determination of a scope of work, development of a work plan and report progress against it, as it pertains to the objectives of the WHO Global NCD Action Plan 2013–2020.
- To collaborate on activities that are in line with the WHO Global NCD Action Plan 2013–2020 and to support harmonization of activities across the United Nations system.
- To work with convening institutions to safeguard public health from undue influence by any form of real, perceived or potential conflicts of interest.
- To work with convening institutions to support advocacy and communication on NCDs across the United Nations system, in line with WHO Global NCD Action Plan 2013–2020.
- To support convening institutions to provide timely inputs to the Secretariat for the Task Force to enable it to draft reports to ECOSOC through the United Nations Secretary-General, including the work to support the accelerated implementation by parties to the WHO FCTC.
- To report, as appropriate, on activities of the Task Force to their respective governing bodies and/or relevant bodies.
32. A division of tasks and responsibilities is outlined in the table below. This table was developed by United Nations organizations, taking into account discussions between December 2011 and July 2013, and builds on Appendix 4 of the WHO Global NCD Action Plan 2013–2020. The table was finalized during the First Meeting of the Task Force (Geneva, 2–3 October 2013).

**Division of Tasks and Responsibilities for the UN Interagency Task Force for the Prevention and Control of NCDs**

*(Status as of 3 October 2013)*

<table>
<thead>
<tr>
<th>Objective</th>
<th>Convening institutions</th>
<th>Suggested areas of work</th>
<th>Linkages with actions for international partners</th>
<th>Partner institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To raise the priority accorded to the prevention and control of NCDs in global, regional and national agendas and internationally agreed development goals, through strengthened international cooperation and advocacy</td>
<td>WHO</td>
<td>1.1 Advocacy for attention to/integration of NCDs in the international development agenda/goals</td>
<td>23 (a, b, c, f)</td>
<td>IAEA, UNAIDS, UNDP, UN-Habitat, UNICEF, UNSCN</td>
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<tr>
<td></td>
<td></td>
<td>1.2 Multi-stakeholder partnership management and resource mobilization</td>
<td>23 (d, e)</td>
<td>IAEA, UNAIDS, UNDP, UN-Habitat, WFP</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.3 Mainstreaming of the prevention and control of NCDs in international development cooperation initiatives</td>
<td>23 (c)</td>
<td>FAO, IAEA, UNAIDS, UNDP, UNEP, UNICEF, UNSCN, World Bank</td>
</tr>
</tbody>
</table>

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2. Examples of collaborative divisions of tasks and responsibilities. Concerns a provisional list only. A division of labour is being developed by the United Nations Funds, programmes and agencies.
3. The six objectives in this table are the six objectives included in the WHO Global NCD Action Plan 2013–2020.
4. These six objectives are linked to the 9 voluntary global targets, as referenced in Appendix 3 of the WHO Global NCD Action Plan 2013–2020.
<table>
<thead>
<tr>
<th>Objective\textsuperscript{3, 4}</th>
<th>Convening institutions</th>
<th>Suggested areas of work</th>
<th>Linkages with actions for international partners\textsuperscript{5}</th>
<th>Partner institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. To strengthen national capacity, leadership, governance, multisectoral action and partnerships to accelerate country response for the prevention and control of NCDs</td>
<td>UNAIDS\textsuperscript{1} UNDP WHO</td>
<td>2.1 Multisectoral action planning and coordination</td>
<td>32 (a, g)</td>
<td>UNAIDS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.2 Mainstreaming of the prevention and control of NCDs in national development plans/poverty reduction strategies</td>
<td>32 (d, g)</td>
<td>FAO IAEA IARC UNAIDS UN-Habitat UNFPA UNHCR UNICEF UNSCN WFP World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.3 Integrate NCDs and HIV responses where appropriate</td>
<td>32g and 50b</td>
<td>ILO UNFPA UNHCR World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.4 Innovative financing for national NCD responses</td>
<td>50a and 32g</td>
<td>World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.5 Supporting enabling legal and regulatory environments that promote favourable health outcomes for NCDs (including universal access to essential medicines and basic technologies)</td>
<td>32 (f and g)</td>
<td>IDLO UNFPA WIPO WTO\textsuperscript{2} World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2.6 Addressing gender and human rights dimensions of NCD prevention and control in national NCD responses</td>
<td>32 (e and g)</td>
<td>IDLO UNFPA</td>
</tr>
</tbody>
</table>

\textsuperscript{1} For 2.3 only.

\textsuperscript{2} In carrying out this task, WTO will provide technical and factual information regarding relevant WTO Agreements in order to support, upon request, relevant ministries and government departments to address the interface between trade policies and health issues in the area of NCDs.
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<tr>
<td>3. To reduce modifiable risk factors for NCDs and underlying social determinants through creation of health-promoting environments</td>
<td>CSF(^1) FAO ILO(^2) UNFPA(^3) UNICEF WHO</td>
<td>3.1 Implementation of the WHO Framework Convention on Tobacco Control, taking into account the matrix summarizing the areas of collaboration included in paragraph 61 of ECOSOC document E/2012/70</td>
<td>45</td>
<td>CSF UNCTAD UNDP World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.2 National capacity development to implement the Global strategy to reduce the harmful use of alcohol</td>
<td>45</td>
<td>UNDP UNICEF World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.3 Implementation of the WHO Global Strategy on Diet, Physical Activity and Health</td>
<td>45</td>
<td>IAEA UNDP UNEP World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.4 National capacity development to reduce the risk of NCDs among children/adolescents</td>
<td>45</td>
<td>FAO IAEA UNICEF UNICEF(^4) WFP</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.5 National capacity development to reduce the risk of NCDs among women and girls</td>
<td>32 (a, e, f, g)</td>
<td>IAEA UNDP UNICEF UNFPA(^5) UNHCR WFP</td>
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<tr>
<td></td>
<td></td>
<td>3.6 NCD prevention and care integrated into maternal health</td>
<td>32 (a, e, f, g)</td>
<td>IAEA UNAIDS UNFPA(^5) UNICEF UNHCR WFP</td>
</tr>
</tbody>
</table>

\(^1\) CSF = Convention Secretariat of the WHO FCTC - As pertains to area of work 3.1
\(^2\) As pertains to area of work 3.9
\(^3\) As pertains to area of work 3.5 and 3.6
\(^4\) UNICEF will facilitate this area of work.
\(^5\) UNFPA will facilitate this area of work.
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<tbody>
<tr>
<td>3.7</td>
<td></td>
<td>Health promotion in environment and energy policies</td>
<td>32 (a, e, g)</td>
<td>UNDP, UNEP, World Bank</td>
</tr>
<tr>
<td>3.8</td>
<td></td>
<td>Health promotion in the education sector</td>
<td>32 (a, e, g)</td>
<td>ILO, UNEP, UNICEF, World Bank</td>
</tr>
<tr>
<td>3.9</td>
<td></td>
<td>Health promotion in the labour sector, including occupational safety and health</td>
<td>32 (a, e, g)</td>
<td>ILO, UNEP</td>
</tr>
<tr>
<td>3.10</td>
<td></td>
<td>Health/nutrition promotion in the agricultural sector and in food systems</td>
<td>32 (a, e)</td>
<td>ILO, UNEP, UNSCN</td>
</tr>
<tr>
<td>4.</td>
<td>WHO, IAEA</td>
<td>Health system strengthening to address NCDs</td>
<td>50 (b, d)</td>
<td>ITU, UNAIDS, UNDP, UNFPA, UNHCR, UNICEF, World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Resource mobilization for financing of universal health coverage that incorporates NCD prevention and care</td>
<td>50a</td>
<td>UNAIDS, UNDP, UNFPA, UNICEF, World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Promote the development and electronic communication technologies and the use of mobile devices</td>
<td>50c</td>
<td>IAEA, UNICEF</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Support increased access to radiation medicine</td>
<td>50c</td>
<td>IAEA</td>
</tr>
</tbody>
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1 UNICEF will facilitate this area of work.
2 For 4.4 only.
<table>
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</thead>
<tbody>
<tr>
<td>5. To promote and support national capacity for high-quality research and development for the prevention and control of NCDs</td>
<td>WHO</td>
<td>5.1 Promote an international research agenda that ensures the next generation of medicines and technologies for NCDs</td>
<td>55</td>
<td>IAEA, IARC, UNDP</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5.2 Support national efforts to increase access to existing essential medicines and basic technologies to treat NCDs</td>
<td>55</td>
<td>IAEA, ITU, UNAIDS, UNCTAD, UNDP, UNHCR, UNFPA, WIPO, WTO</td>
</tr>
<tr>
<td>6. To monitor the trends and determinants of NCDs and evaluate progress in their prevention and control</td>
<td>WHO</td>
<td>6.1 National NCD monitoring and surveillance systems</td>
<td>61</td>
<td>IARC, UN-Habitat, UNICEF, World Bank</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6.2 Regular reporting against global voluntary targets</td>
<td>61</td>
<td>UN-Habitat</td>
</tr>
</tbody>
</table>

1 In carrying out this task, WTO will provide technical and factual information regarding relevant WTO Agreements in order to support, upon request, relevant ministries and government departments to address the interface between trade policies and health issues in the area of NCDs.
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