Collaboration with nongovernmental organizations

Report of the Standing Committee on Nongovernmental Organizations

The Standing Committee met on 20 January 1998 under the Chairmanship of Dr E.M.-R. Ferdinand and considered the applications of nongovernmental organizations (NGOs) for admission into official relations presented under item 17.1 of the Board’s agenda, and reviewed collaboration with 65 NGOs under item 17.2. The Standing Committee also considered the review of overall policy on collaboration with nongovernmental organizations under item 17.3. The Board is invited to take decisions on the recommendations set out in section IV below.

I. APPLICATIONS OF NONGOVERNMENTAL ORGANIZATIONS FOR ADMISSION INTO OFFICIAL RELATIONS (restricted documents EB101/NGO/1-6)

1. In its examination of the six applications (sent to the Members of the Board in circular letter L/97.12 of 6 November 1997) the Committee was guided by the Principles governing relations between the World Health Organization and nongovernmental organizations. During their consideration of the information set out in the applications from the Council on Health Research for Development (COHRED) (EB101/NGO/1), Italian Association of Friends of Raoul Follereau (AIFO) (EB101/NGO/2), Federation for International Cooperation of Health Services and Systems Research Centers (FICOSER) (EB101/NGO/3), The World Federation of Acupuncture-Moxibustion Societies (WFAS) (EB101/NGO/4), The International Society on Thrombosis and Haemostasis, Inc. (ISTH) (EB101/NGO/5) and the Islamic Organization for Medical Sciences (IOMS) (EB101/NGO/6), the Standing Committee requested clarification on a number of issues.

2. With regard to the applications from COHRED and FICOSER, the Committee was satisfied that, as requested by the Board in resolution EB97.R23, working relations had been strengthened and had resulted in constructive joint activities. It was noted that in that resolution the Board had postponed consideration of a previous application from AIFO “until it can be considered as part of an international organization”. The

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1 Members of the Standing Committee on Nongovernmental Organizations: Dr N. Blewett, Dr P. Dossou-Togbe, Dr G.M. van Etten, Dr E.M.-R. Ferdinand and Mr C. Solomis, represented by his alternate Dr C. Komodikis.

Committee was informed that such an international organization would not materialize, and that AIFO had none the less continued to collaborate extensively with WHO. Furthermore, the Committee noted that in accordance with Article 3.5 of the Principles, which states that a “national organization shall be eligible for admission” into official relations, both the Regional Director for Europe and the Italian authorities supported the application.

3. With regard to the applications from WFAS, ISTH and IOMS, the Committee requested further information about the history of WFAS and the financing of ISTH and IOMS to facilitate their consideration.

**Recommendation**

In the light of the information provided, the Committee was satisfied that the above-mentioned NGOs met the criteria for admission into official relations and decided to recommend to the Executive Board that they should be admitted into official relations with WHO.

II. REVIEW OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH WHO (restricted document EB101/NGO/WP/1)

4. In accordance with para. 4.6 of the Principles governing relations between the World Health Organization and nongovernmental organizations, the Standing Committee reviewed collaboration with one-third of the NGOs in official relations with WHO in order to determine the desirability of maintaining them in official relations. The four sections of the review provided information about collaboration and relations with the 65 NGOs listed in the annex to the present document.

5. It was noted that the information provided was based on reports of collaboration submitted by the NGOs and supplemented by contributions from the technical officers responsible for collaboration and, where applicable, the WHO regional offices.

**Consideration of reports of collaboration from nongovernmental organizations warranting maintenance in official relations**

6. The Committee took up section I of the review, and the individual reports on collaboration from 45 NGOs contained in the annex to the review. In addition it considered reports on collaboration received after completion of the document from the World Federation of Societies of Anaesthesiologists (WFSA), International Society of Surgery (ISS), International Conference of Deans of French Language Faculties of Medicine (CIDFMEF), International Federation of Medical Students’ Associations (IFMSA), World Association of the Major Metropolises (WAMM), International Physicians for the Prevention of Nuclear War (IPPNW), International Air Transport Association (IATA), and FDI World Dental Federation (FDI). These NGOs were listed with others in section III of the review.

7. The Committee was informed that collaboration with WFSA included field trials of an oxygen concentrator as well as the production of videos on anaesthesia and oxygen therapy. WFSA also provided technical advice and assistance on issues related to transfusion requirements and the development of distance-learning materials. Collaboration with ISS related to its technical support for preparation of a WHO publication on day surgery and support for training. Activities with IFMSA and CIDFMEF related to mutual efforts to reform medical education, mainly through regular joint consultations. In the case of IFMSA activities also included workshops on such issues as AIDS, and human rights and medicine. The main area for joint activities with WAMM is ongoing research on air quality and atmospheric pollution. IPPNW continued to advocate and to disseminate broadly a number of WHO documents relevant to areas of mutual interest, e.g. climate change and human health. Joint activities also included follow-up to resolution WHA46.40 on health and environmental effects of nuclear weapons, and the contribution of IPPNW to WHO’s recently created working group on health as a bridge for peace. Activities with IATA focused on the transport of people with infectious diseases, leading to adoption of a practice recommended by IATA and a decision to draw up guidelines for the scheduled airline industry. A
number of activities were carried out with FDI in connection with AIDS and dentistry, dental amalgam and the promotion of oral health. WHO also continued its participation in FDI’s annual congresses with national chief dental officers.

8. In summing up its consideration of this item, the Committee noted with satisfaction that the NGOs had worked extensively with WHO during the period 1995 to 1997 in a variety of activities relating to WHO’s work. Collaboration, in its various forms, had served to contribute to ongoing debate about the ethical dimensions of health care, enhanced epidemiological capabilities and health records management at the national level, and had furthered implementation of a number of WHO resolutions, for example, WHA48.8 on the reorientation of medical education and medical practice for health for all. Training and continuing education remained an important joint activity, for example, in laboratory medicine, surgery, and support to improvement of technical and managerial capacity for management of health systems infrastructure in developing countries. Another aspect of collaboration was NGO input to WHO’s normative activities, for example, to the risk assessment documents prepared by the International Programme on Chemical Safety, and to ongoing work in connection with good manufacturing practices for pharmaceutical products.

Recommendation

In consideration of the information provided and based on their discussions, the Committee decided to recommend to the Board that the NGOs marked by an asterisk in the annex to the present document should be maintained in official relations with WHO. The Committee also recommended that the Board commend the contributions of these NGOs to the work of WHO and the role they play in improving services, and in ensuring and maintaining high standards throughout the world.

Information concerning the status of relations with the International Society of Hematology (ISH) and the International Committee of the Red Cross (ICRC)

9. Considering section II of the review relating to the above-mentioned NGOs, the Committee noted with regret that substantive collaboration between ISH and WHO had not been possible during the period under review. It noted that ICRC was no longer included within the category of organizations in official relations with WHO, and that at its request it was invited to attend the Health Assembly as an observer.

Recommendation

The Committee, taking note that the International Committee of the Red Cross (ICRC), at its request, was invited to attend the Health Assembly as an observer, decided to recommend to the Board that it be recorded that ICRC was no longer in official relations, and that the International Society of Hematology be maintained in official relations for a period of one year in order to draw up a plan for collaboration.

Information concerning nongovernmental organizations whose reports on collaboration remain outstanding

10. Considering section III of the review, the Committee noted that reports of collaboration had not been received from the following NGOs: International Federation of Red Cross and Red Crescent Societies, International Medical Society of Paraplegia, International Academy of Legal Medicine, Network of Community-Oriented Educational Institutions for Health Sciences, World Organization of Family Doctors and the International College of Surgeons.

11. The Committee considered that although there might be special circumstances that would help explain why this small number of NGOs had not responded to requests for a report on collaboration, the preparation of reports on collaboration was an integral element of an NGO’s formal relationship with WHO.
Recommendation

In the light of the above, the Committee decided to recommend to the Board that the review of relations with the above-mentioned NGOs should be deferred for one year, and that the Director-General should be requested to inform NGOs of the importance of maintaining timely communications.

Follow-up to decision EB99(17)

12. The Committee considered section IV of the review reporting on the results of follow-up to decision EB99(17) by which the following four NGOs were maintained in official relations for a period of one year in order to permit each “to develop concrete plans for collaboration with WHO”: International Society for Human and Animal Mycology, World Veterans Federation, International Federation of Physical Medicine and Rehabilitation, and World Federation of Parasitologists.

International Federation of Physical Medicine and Rehabilitation, and World Federation of Parasitologists

13. The Committee noted that for a number of reasons discussion about the plans for collaboration still continued with the above-mentioned NGOs. The Committee was informed that it was not unusual for this to occur and that both parties were seeking constructive plans.

Recommendation

In consideration of the above, the Committee decided to recommend to the Board that, pending a report on the results of discussions with the above-mentioned NGOs, it should defer a decision about their status until the 103rd session of the Board.

International Society for Human and Animal Mycology

14. The Committee was informed that a plan for collaboration had been agreed upon since distribution of the review. The main elements of the activities, which focused on the needs of developing countries, consisted of preparation of information material, educational workshops, and mutual arrangements for specialist training relating to mycotic diseases. The Committee agreed that the plan for collaboration indicated the intention to revitalize relations.

Recommendation

In consideration of the above, the Committee decided to recommend to the Board that the International Society for Human and Animal Mycology should be maintained in official relations.

World Veterans Federation

15. The Committee was informed that since completion of the review, the Federation had contacted WHO with a view to revitalizing relations. The Committee was advised that WHO was developing activities relating to the psychosocial effects of war and, with regard to violence, was proposing increased involvement in such issues as land-mines. The Federation offered both experience and expertise in these areas which it was considered would be useful to WHO. For this reason WHO welcomed the Federation’s renewed contact, which was expected to be facilitated by the recent appointment of a Geneva-based Secretary-General. In taking due note of this information, the Committee remarked that the public health consequences of civil and military strife were problems of our times and merited attention. Collaboration in this area was therefore important.

Recommendation
In consideration of the above, the Committee decided to recommend to the Board that the World Veterans Federation should be maintained in official relations for a further year so that a work plan could be drawn up.

III. COLLABORATION WITH NONGOVERNMENTAL ORGANIZATIONS. REVIEW OF OVERALL POLICY ON COLLABORATION WITH NONGOVERNMENTAL ORGANIZATIONS: REPORT BY THE DIRECTOR-GENERAL (document EB101/33)

16. The Standing Committee noted that the report, submitted in response to decision EB99(18), provided further information about the advantages and disadvantages of revising current policy to permit the admission into official relations with WHO of NGOs from sectors other than health and related fields, and of national, regional and subregional NGOs. The latter measure would then bring WHO policy closer to that of the United Nations Economic and Social Council as set out in its resolution 1996/31 “Consultative relationship between the United Nations and non-governmental organizations”.

Collaboration with nongovernmental organizations outside the health and related fields

17. The Committee also took into consideration the view expressed by certain NGOs prior to the meeting, that the report did not fully reflect the emphasis being given to work with other sectors in the new global health policy for the twenty-first century, and their wish to see the introduction of a more inclusive policy for collaboration with NGOs, in particular regional and national NGOs. Representatives from several WHO regional offices also brought the Committee up to date on related developments in their regions.

18. In its discussions the Committee was mindful that although collaboration with sectors outside the health field featured in the proposed global policy for the twenty-first century, ways to integrate such cooperation into the work of WHO were still to be elaborated. It was of the view that within the context of further consultations proposed in the report, it would be appropriate to investigate the usefulness of developing a range of relationships with different categories of partners, rather than the single category as at present. It was noted that the Principles governing relations between the World Health Organization and nongovernmental organizations might require amendment at a later date.

Revised United Nations Economic and Social Council resolution on arrangements for consultation with nongovernmental organizations

19. The Committee noted the information in the report concerning the revised United Nations Economic and Social Council resolution 1996/31. Discussion focused on the unique regional structure of WHO.

20. In the light of their discussions, the Committee considered the proposed action by the Executive Board as set out in paragraph 10 of the document. There was general agreement to the proposed action.

Recommendation

The Committee decided to recommend that the Board should take note of the Review of overall policy on collaboration with nongovernmental organizations. It further decided to request the Director-General to initiate a consultation process, including a meeting with NGOs and any other interested parties on the matter of official relations between WHO and NGOs whose main area of competence lies outside the health and related fields, and to encourage increased informal contacts with such NGOs. A report of the outcome of the consultation process and, as appropriate, informal contacts, should be prepared for the consideration of the Board. It recommended that the Board should take note of the revised United Nations Economic and Social Council resolution 1996/31 on its arrangements for consultations with NGOs.
IV. PROPOSED DRAFT RESOLUTION AND DECISIONS

Draft resolution on application of nongovernmental organizations for admission into official relations with WHO

The Executive Board,

Having examined the report of its Standing Committee on Nongovernmental Organizations,¹

1. DECIDES to establish official relations with the following nongovernmental organizations:

   Council on Health Research for Development
   Italian Association of Friends of Raoul Follereau
   Federation for International Cooperation of Health Services and Systems Research Centers
   The World Federation of Acupuncture-Moxibustion Societies
   The International Society on Thrombosis and Haemostasis, Inc.
   Islamic Organization for Medical Sciences

2. NOTES that the International Committee of the Red Cross which, at its request, is invited to attend the World Health Assembly as an observer, is no longer in official relations with WHO.

Draft decision on review of nongovernmental organizations in official relations with WHO and collaboration with nongovernmental organizations

The Executive Board, having considered the report of its Standing Committee on Nongovernmental Organizations,¹ decided to maintain official relations with 53 of the 65 nongovernmental organizations reviewed at its 101st session. It welcomed with thanks the contribution of these nongovernmental organizations to the work of WHO in such diverse fields of mutual interest as the ethical dimensions of health care, enhanced epidemiological capabilities and health records management at the national level, and to implementation of a number of WHO resolutions, for example, WHA48.8 on the reorientation of medical education and medical practice for health for all. Training and continuing education remained an important joint activity, for example, in laboratory medicine, surgery, and support to building up technical and managerial capacity for management of health systems infrastructure in developing countries. Another aspect of collaboration was the organization’s contribution to WHO’s normative activities, for example, elaboration of risk assessment documents prepared by the International Programme on Chemical Safety, and the ongoing work in connection with good manufacturing practices for pharmaceutical products.

Regarding relations with the International Society of Hematology, the Board decided to maintain the Society in official relations with WHO for a period of one year in order to draw up a plan for collaboration.

In the absence of reports on collaboration, the Board decided to defer for one year review of relations with the International Federation of Red Cross and Red Crescent Societies, International Medical Society of Paraplegia, International Academy of Legal Medicine, Network of Community-Oriented Educational Institutions for Health Sciences, World Organization of Family Doctors and the International College of Surgeons. It requested the Director-General to inform nongovernmental organizations of the importance of maintaining timely communications.

With regard to the follow-up to decision EB99(17) concerning relations with four other nongovernmental organizations, the Board noted with regret that it had not been possible to agree on plans for collaboration with the International Federation of Physical Medicine and Rehabilitation, the World Federation of Parasitologists, and

¹ Document EB101/32.
the World Veterans Federation. It decided to defer consideration of the maintenance of these organizations in official relations with WHO for one year. It requested that a report on the results of efforts to draw up plans for collaboration should be submitted to the Board at its 103rd session.

The Board found that there was every reason to expect that relations with the International Society for Human and Animal Mycology would be revitalized through implementation of the agreed plan for collaboration, and therefore decided to maintain the Society in official relations with WHO.

Draft decision on review of overall policy on collaboration with nongovernmental organizations

The Board thanked the Director-General for his report. It requested the Director-General to initiate a consultation process, including a meeting with nongovernmental organizations and any other interested parties on the matter of official relations between WHO and nongovernmental organizations whose main area of competence lies outside the health and related fields, and to encourage increased informal contacts with such organizations. It further requested that a report of the outcome of the consultation process and, as appropriate, informal contacts, should be prepared for the consideration of the Board.

The Board took note of the revised United Nations Economic and Social Council resolution 1996/31 on “Consultative relationship between the United Nations and non-governmental organizations”.

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1 Document EB101/33.
ANNEX

LIST OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH WHO REVIEWED BY THE EXECUTIVE BOARD AT ITS 101st SESSION

*African Medical and Research Foundation International
*Aga Khan Foundation
*CMC - Churches’ Action for Health
*Commonwealth Medical Association
*Commonwealth Pharmaceutical Association
*Council for International Organizations of Medical Sciences
*FDI World Dental Federation
*Inter-Parliamentary Union
   International Academy of Legal Medicine
*International Air Transport Association
*International Association for Accident and Traffic Medicine
*International Association of Biologists Technicians
*International Association of Medical Laboratory Technologists
*International Catholic Committee of Nurses and Medico-Social Assistants
   International College of Surgeons
   International Committee of the Red Cross
*International Conference of Deans of French Language Faculties of Medicine
*International Council for Standardization in Haematology
*International Council of Nurses
*International Council of Scientific Unions
*International Epidemiological Association
*International Federation for Medical and Biological Engineering
*International Federation of Clinical Chemistry
*International Federation of Health Records Organizations
*International Federation of Hospital Engineering
*International Federation of Medical Students Associations
*International Federation of Pharmaceutical Manufacturers Associations
   International Federation of Physical Medicine and Rehabilitation
   International Federation of Red Cross and Red Crescent Societies
*International Federation of Surgical Colleges
*International Hospital Federation
*International League of Dermatological Societies
*International Life Sciences Institute
*International Medical Informatics Association
*International Medical Parliamentarians Organization
   International Medical Society of Paraplegia
*International Organization for Standardization
*International Organisation of Consumers Unions (Consumers International)
*International Pharmaceutical Federation
*International Physicians for the Prevention of Nuclear War

* Maintained in official relations.
*International Society for Burn Injuries
*International Society for Human and Animal Mycology
*International Society of Blood Transfusion
  International Society of Hematology
*International Society of Surgery
*International Sociological Association
*International Union of Architects
*International Union of Pharmacology
*International Union of Pure and Applied Chemistry
*Medicus Mundi Internationalis (International Organization for Cooperation in Health Care)
*National Council for International Health
  Network of Community-Oriented Educational Institutions for Health Sciences
*OXFAM
*Save the Children Fund
*World Association of the Major Metropolises
*World Federation for Medical Education
*World Federation for Ultrasound in Medicine and Biology
  World Federation of Parasitologists
*World Federation of Proprietary Medicine Manufacturers
*World Federation of Public Health Associations
*World Federation of Societies of Anaesthesiologists
*World Medical Association
  World Organization of Family Doctors
  World Veterans Federation
*World Vision International

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* Maintained in official relations.