Reports of committees of the Executive Board

Standing Committee on Nongovernmental Organizations

1. In accordance with the Principles governing relations between the World Health Organization and nongovernmental organizations, the Standing Committee on Nongovernmental Organizations met on 22 January 2013. The Board is invited to consider the proposed draft resolution and decision set out in paragraphs 27 and 28 below.

I. APPLICATIONS FOR ADMISSION INTO OFFICIAL RELATIONS WITH WHO (Restricted documents EB132/NGO/1–7)

2. The Committee considered applications for admission into official relations from The Global Alliance for Rabies Control, Inc., WaterAid, the Worldwide Network for Blood and Marrow Transplantation, the European Society for Medical Oncology, The Worldwide Palliative Care Alliance, the International Association for Hospice and Palliative Care Inc. and The Global Alliance for Improved Nutrition. The Committee evaluated the merits of each applicant in order to determine whether, in its view, the nongovernmental organizations met the criteria for admission into official relations as set out in paragraphs 3.1 to 3.6 of the above-mentioned Principles.

3. The Secretariat provided supplementary information for each application. In some cases additional clarification and reassurances were sought. With respect to the application from WaterAid, the Committee sought information about the nature of its commercial members. It was stated that, for the most part, the commercial members appeared to be public–private water utilities based in the United Kingdom of Great Britain and Northern Ireland. As to the international nature of this organization it was noted that when an organization’s membership was mainly in one country, its international nature – a criterion for admission into official relations – was determined by examining the number of countries in which it was active. In considering the application from the European Society for Medical Oncology, the Committee was assured that the collaborative survey focused exclusively on the medicines in the WHO Model List of Essential Medicines as adopted by the Member States and not on pharmaceuticals that may be the subject of industry promotion.

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2 Mrs S. Abgarian (Alternate to Professor Ara Saenovič Babloyan (Armenia)), Dr Francisco Vallejo (Alternate to Mrs C. Vanece Mafla (Ecuador)), Dr Liow Tiong Lai, Chairman (Malaysia), Dr Pe Thet Khin (Myanmar) and Dr Bernard Valentin (Seychelles).
3 Transmitted to Executive Board members under cover of a letter dated 20 November 2012 and numbered L/12.19.
4. Based on the information provided, the Committee concluded that the Global Alliance for Rabies Control, Inc., WaterAid, the Worldwide Network for Blood and Marrow Transplantation, the European Society for Medical Oncology, The Worldwide Palliative Care Alliance and the International Association for Hospice and Palliative Care Inc. met the criteria for admission into official relations and recommended that they be admitted into official relations with WHO.

5. With regard to the application from The Global Alliance for Improved Nutrition, the Committee noted the collaboration with WHO and that the Alliance appeared to be a substantial organization in terms of its income and expenditure and human resources. In response to a question concerning its income base, it was stated the Alliance’s main source of income was the Bill & Melinda Gates Foundation, with little revenue coming directly from commercial companies.

6. The Committee sought clarification regarding the extent and nature of the Alliance’s links with global food companies and whether those links served to influence the policies of WHO in the field of nutrition and, in particular, breast-milk substitutes and infant feeding. In that regard reference was made to a letter from the Alliance to a Member State that apparently concerned the development of a law on the marketing of infant foods. The Committee enquired whether the Secretariat was aware of links between the Alliance and commercial companies and, if so, what steps had been taken to avoid conflicts of interest; and whether the Secretariat was aware of the letter and, if so, what its view was on the matter.

7. The Secretariat understood that it was the policy of the Alliance to enter into partnerships with local companies for the development of low-cost complementary and fortified foods for populations with inadequate protein and vitamin levels; the Alliance did not seek to develop global products. With regard to the matter of conflict of interest and the undue influence of industry on the development of WHO’s nutrition policy, the Organization had implemented policies and practices with the specific aim of effectively evaluating and managing any conflict of interest. The Secretariat was aware of the letter, which in its view was in line with WHO guidance. In this connection, the Committee was informed that WHO and UNICEF had worked with the Member State in question on the proposed law on complementary feeding.

8. The Committee noted that the Alliance provided some funding to WHO. In the view of the Committee, great care should be taken in considering relations with organizations that fund WHO. Furthermore, the Committee noted that at its current session, the Executive Board would be discussing a report on key issues for the development of a policy on engagement with nongovernmental organizations.¹

9. Taking into consideration the information provided, and notwithstanding the merits of the Alliance’s relations with WHO, the Committee preferred to ask the Secretariat to obtain additional information on the nature and extent of the Alliance’s links with the global food industry, and the position of the Alliance with regard to its support for, and advocacy of, WHO’s nutrition policies, including infant feeding and the marketing of complementary foods. The Committee also recommended that consideration of the application for admission into official relations from The Global Alliance for Improved Nutrition be postponed until the 134th session of the Executive Board at which time the Board, through its Standing Committee on Nongovernmental Organizations, would reconsider the application in the light of the abovementioned information.

¹ Document EB132/5 Add.2.
II. REVIEW OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH WHO (Restricted document EB132/NGO/WP/1)

10. The Committee considered reports on relations with 68 nongovernmental organizations listed in the Annex to this document. The reports combined information submitted by the nongovernmental organizations and the Secretariat’s evaluations. Such an evaluation takes into consideration the fact that, in accordance with paragraph 4.5 of the Principles, “A plan for collaboration based on mutually agreed objectives and outlining activities … shall form the basis of official relations …”.

11. The Committee reviewed reports on collaboration during the period 2010–2012 between WHO and 53 nongovernmental organizations and recommended that the Executive Board commend the continuing contributions of those nongovernmental organizations to the achievement of WHO’s objectives, and maintain them in official relations with WHO. Their names are indicated in the Annex by an asterisk.

12. The Committee proceeded to review individual reports concerning relations with organizations with which relations had changed during the period under review.

13. The Council on Health Research for Development (COHRED) submitted a report on its collaboration with WHO, subsequently indicating that it also served as the report from the Global Forum for Health Research. In March 2011 the two organizations agreed to integrate operations, with the Council assuming responsibility for managing the activities of the Forum; each organization retained its own governing body. According to the information provided, the members appear to be the same and, in the case of the Forum, the number of members has been reduced considerably. In this connection the report also noted that the Council’s “Our Partners” web page and page 4 of the Council’s annual report 2011 state that “COHRED was enhanced in March 2011 through the integration of COHRED and the Global Forum for Health Research to form the COHRED Group.”

14. The Secretariat confirmed the collaboration reported by the Council for the two organizations during the period under review. However, with the exception of a periodic Forum meeting, most of the activities agreed with the Forum remained unimplemented.

15. According to the information provided, the integration of operations had led to uncertainty about the two organization’s respective activities and there was concern over how this would affect future collaboration. On this latter point, the Council indicated that the parties are unsure as to which function will be performed by which organization. The Council also indicated a preference to keep the two organizations separate in terms of their official relations with WHO.

16. Among the criteria for admission into official relations with WHO, paragraph 3.3 states, inter alia, that a nongovernmental organization “shall have … a directing or governing body, an administrative structure at various levels of action, … ”. In this case there are two governing bodies and uncertainty over respective functions. It was also noted that the main focal point for relations with WHO is the same for both organizations. In paragraph 3.2, the Principles also provide for several nongovernmental organizations with similar areas of interest to form a joint committee or other body authorized to act for the group as a whole.

17. In view of the unusual circumstances and with a view to clarifying the status of each organization’s relationship with WHO, the Committee decided to recommend that the report be noted, that the review of relations with the Council on Health Research for Development and the Global Forum for Health Research be deferred until the 134th session of the Executive Board, and that each organization’s governing body be requested to clarify its wishes with regard to an official relationship
and how each proposes to ensure that collaboration plans will be separate and implemented individually. The Committee further recommended, in a constructive spirit, that the organizations be requested to consider the option that relations be maintained with one organization to be known as the “COHRED Group”, to include the Global Forum for Health Research.

18. The report concerning relations with CMC – Churches’ Action for Health was considered. The Committee understood that while there had been some collaboration during 2010–2012, confirmed by the Secretariat, CMC had yet to provide the clarification that had been promised concerning its constitutional document or documents. The Committee recommended that the report be noted and the review of relations with the CMC – Churches’ Action for Health be deferred and that a request be made for a report to be submitted on the status of the relations, and on the organization’s constitutional arrangements, for consideration by the Board at its 134th session.

19. The Committee then considered reports from the International Catholic Committee of Nurses and Medico-Social Assistants, the International Federation of Hospital Engineering, The Commonwealth Pharmacists Association and the International Medical Parliamentarians Organization. For a variety of reasons, set out in restricted document EB132/NGO/WP/1, including constraints experienced by the WHO Secretariat, collaboration during 2010–2012 had apparently lapsed. In all cases it was expected that collaboration based on mutually agreed three-year plans for collaboration could be resumed. The Committee was pleased to learn of this and decided, in order to encourage the successful conclusion to discussions concerning plans for collaboration, to recommend the deferral of the review of relations with these nongovernmental organizations until the 134th session of the Executive Board, at which time reports should be presented, either on the agreed plans for collaboration or on the status of relations.

20. In the case of the International Conference of Deans of French-Language Faculties of Medicine, the Committee noted that, according to the information provided, there was no record of a response to requests for a report. In addition, an internal review of the relations had revealed that there was no record of a final agreement on a plan for collaboration for the period 2010–2012. Furthermore, following reorganization within the Secretariat, there had been a hiatus pending the appointment of a successor to the designated technical officer responsible for relations with the International Conference. The Committee also noted that in the view of the Secretariat the membership of the International Conference was well placed to help in the scaling-up of educational programmes to produce more health personnel. The Committee decided to recommend that the report be noted and that the review of relations with the International Conference be deferred in order to provide the organization with an opportunity to clarify its views concerning relations with WHO and, if appropriate, pursue agreement with WHO on a plan for collaboration. The Committee also requested that a report be submitted, either on the agreed plan or on the status of relations, for consideration by the Executive Board at its 134th session.

21. Reports concerning relations with the Global Health Council, Inc. and the International Epidemiological Association were considered. There was no record of a response from the Global Health Council to invitations to submit a report. In addition, according to an announcement on its website dated 20 April 2012, the Council was to close operations, with the services of a few staff members ending by 30 June 2012 and with the Council becoming “an organizational shell”. As for the report concerning relations with the International Epidemiological Association, according to the information provided, in the absence of a response from the organization to invitations to submit a report on collaboration, an internal review had revealed that the expected plan for collaboration for the period 2010–2012 had not materialized. Based on the information available, it appeared that contact and collaboration had ceased. Furthermore, the Committee understood that the Secretariat did not expect planned collaboration with WHO to resume in the immediate future. The Committee decided to
recommend that the reports be noted and that, bearing in mind in particular that collaboration was not expected for the immediate future, official relations be discontinued with the Global Health Council, Inc. and the International Epidemiological Association.

22. The Committee was provided with an update to the report concerning relations with the International Federation of Clinical Chemistry and Laboratory Medicine. Upon learning of the possibility that official relations could be discontinued the Federation had contacted the Secretariat. It had become apparent that implementation of the agreed plan had faltered mainly due to lack of communication. Exchanges had led to an agreement on the following collaborative activities for the period 2013–2015: development of a WHO-IFCC booklet on the laboratory diagnosis and monitoring of diabetes mellitus; development of a document on appropriate testing of liver and renal function for monitoring HIV antiretroviral therapy; and the involvement of WHO in the scientific programme at the Federation’s conferences. The Committee was of the view that the plan for collaboration showed evidence of the revitalized relations and decided to recommend that the International Federation of Clinical Chemistry and Laboratory Medicine be maintained in official relations with WHO.

23. The report concerning relations with OXFAM was considered. OXFAM had indicated its participation in WHO meetings during 2010–2012 but apparently there had been no collaborative activities. At the time of its previous review, it had been expected that a plan for collaboration would be agreed. However, the designated technical officer in WHO had retired and some time elapsed before the appointment of a successor. OXFAM had been contacted with a view to clarifying the status of relations and WHO had expressed its interest in the deferral of the review of relations with the organization. The Committee recommended that the report be noted and the review of relations with OXFAM be deferred until the 134th session of the Executive Board, pending receipt of a report, either on collaboration or on the status of relations.

24. The Committee then considered the response to the Board’s decision EB130(8), which inter alia had deferred, pending agreement on plans for collaboration, the review of relations with CropLife International, the International Federation of Biomedical Laboratory Science and La Leche League International.

25. With regard to CropLife International and the International Federation of Biomedical Laboratory Science, the Committee reviewed the reports and was satisfied with the agreed plans for collaboration. The Committee duly agreed to recommend to the Board that the nongovernmental organizations be maintained in official relations with WHO.

26. With regard to efforts to reach agreement on a plan for collaboration with La Leche League International, the Committee noted that according to the report the League had been invited to contact WHO with a view to exploring the possibility of an agreement on a plan for collaboration, originally proposed by WHO during 2011, and thereafter submit a report to the Executive Board. The League’s report, inter alia, indicated that it had been unsure of the chain of communication and it clarified the names of its focal points responsible for “facilitation of conversations between the two organizations”. In addition to this information the background to decision EB130(8) was recalled. In the absence of a report on activities with WHO during the period 2008–2010 the Board had decided to defer the review of relations with the League and had requested a report on the status of relations and efforts to agree a plan for collaboration. The League had been informed and a proposal for collaboration had been presented. The League’s report to the Board at its 130th session had confirmed the information provided by the Secretariat and had indicated the organization’s openness to proposals for collaboration. However, at that time, the League had not responded to WHO proposals. Based on the information available, it would appear that currently the League’s resources are not such that would permit it to engage with WHO in joint planning of activities. In view of this, the Committee agreed to recommend that the report be noted and that official relations be discontinued with La Leche League International.
III. PROPOSED DRAFT RESOLUTION AND DECISION

27. Draft resolution

The Executive Board,

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

1. DECIDES to admit into official relations with WHO the following nongovernmental organizations: The Global Alliance for Rabies Control, Inc., WaterAid, the Worldwide Network for Blood and Marrow Transplantation, the European Society for Medical Oncology, The Worldwide Palliative Care Alliance, and the International Association for Hospice and Palliative Care Inc.;

2. DECIDES to postpone consideration of the application for admission into official relations from The Global Alliance for Improved Nutrition to the Executive Board’s 134th session, and requested that the following information be provided to the Board through its Standing Committee on Nongovernmental Organizations: information concerning the nature and extent of the Alliance’s links with the global food industry, and the position of the Alliance with regard to its support and advocacy of WHO’s nutrition policies, including infant feeding and marketing of complementary foods;


28. Draft decision on the review of nongovernmental organizations in official relations with WHO

The Executive Board, having considered and noted the report of its Standing Committee on Nongovernmental Organizations¹ concerning the review of one third of the nongovernmental organizations in official relations with WHO, and follow-up to decision EB130(8), reached the decisions set out below.

Noting with appreciation their collaboration with WHO and commending the continuing dedication to the work of WHO, the Board decided to maintain in official relations with WHO the nongovernmental organizations whose names are followed by an asterisk in the Annex to the report.

Noting the report, the Board decided to defer the review of relations with the Council on Health Research for Development and the Global Forum for Health Research until its 134th session and requested that each organization’s governing body clarify their wishes with regard to an official relationship and how each proposes to ensure that collaboration plans will be separate and implemented individually. Also recalling the provision in the Principles governing relations between WHO and nongovernmental organizations, by which “[w]hen there are several international NGOs with similar areas of interest, they may form a joint committee or other body authorized to act for the group as a whole”, the Board requested that the organizations consider the option that relations be maintained with one organization to be known as the “COHRED Group”, to include the Global Forum for Health Research.

¹ Document EB132/34.
Noting the report, the Board decided to defer the review of relations with CMC – Churches’ Action for Health and requested that a report be submitted to the Board at its 134th session on the status of the relations, in particular, on the organization’s constitutional arrangements.

Noting the reports and that plans for collaboration have yet to be agreed, the Board decided to defer the review of relations with the International Catholic Committee of Nurses and Medico-Social Assistants, the International Federation of Hospital Engineering, The Commonwealth Pharmacists Association, and the International Medical Parliamentarians Organization, until the 134th session of the Executive Board, at which time reports, either on agreed plans for collaboration or on the status of relations, would be considered.

Noting the report and, in order to provide the International Conference of Deans of French-Language Faculties of Medicine an opportunity to clarify its views with regard to relations with WHO and, if appropriate, pursue agreement with WHO on a plan for collaboration, decided to defer the review of relations with the International Conference of Deans of French-Language Faculties of Medicine, and requested that a report, either on the agreed plan or on the status of relations, be submitted to the Executive Board at its 134th session.

Noting the report, decided to defer the review of relations with OXFAM until the 134th session of the Executive Board, at which time a report, either on collaboration or on the status of relations, would be considered.

Noting that plans for collaboration had been agreed, the Board decided to maintain CropLife International and the International Federation of Biomedical Laboratory Science in official relations with WHO, as well as the International Federation of Clinical Chemistry and Laboratory Medicine.
ANNEX

LIST OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH WHO REVIEWED BY THE EXECUTIVE BOARD AT ITS 132ND SESSION

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<thead>
<tr>
<th>Organization Name</th>
<th>Notes</th>
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<tr>
<td>ASSITEB-BIORIF*</td>
<td>Previous known as the International Association of Biologists Technicians (ASSITEB).</td>
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<td>African Medical and Research Foundation*</td>
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<td>Aga Khan Foundation*</td>
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<td>CMC – Churches’ Action for Health</td>
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<td>Consumers International*</td>
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<td>Council for International Organizations of Medical Sciences*</td>
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<td>Council on Health Research for Development</td>
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<td>CropLife International</td>
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<td>EuroSafe – European Association for Injury Prevention and Safety Promotion*</td>
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<td>Framework Convention Alliance on Tobacco Control*</td>
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<td>Global Forum for Health Research</td>
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<td>Global Health Council, Inc.</td>
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<td>International Alliance for Biological Standardization*</td>
<td>Previous known as the International Association for Biologicals.</td>
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<td>International Alliance of Patients’ Organizations*</td>
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<td>International Association of Cancer Registries*</td>
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<td>International Catholic Committee of Nurses and Medico-Social Assistants</td>
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<td>International College of Surgeons*</td>
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<td>International Conference of Deans of French-Language Faculties of Medicine</td>
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<td>International Council for Standardization in Haematology*</td>
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<td>International Council of Nurses*</td>
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<td>International Epidemiological Association</td>
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<td>International Federation for Medical and Biological Engineering*</td>
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<td>International Federation of Biomedical Laboratory Science</td>
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<td>International Federation of Clinical Chemistry and Laboratory Medicine</td>
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<td>International Federation of Fertility Societies*</td>
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<td>International Federation of Health Information Management Associations*</td>
<td>Previous known as the International Federation of Health Records Organizations.</td>
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<td>International Federation of Hospital Engineering</td>
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<td>International Federation of Medical Students’ Associations*</td>
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<td>International Federation of Pharmaceutical Manufacturers and Associations*</td>
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<td>International Federation of Surgical Colleges*</td>
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<td>International Hospital Federation*</td>
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<td>International Life Saving Federation*</td>
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<td>International Medical Informatics Association*</td>
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<td>International Medical Parliamentarians Organization</td>
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<td>International Organization for Standardization*</td>
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<td>International Pharmaceutical Federation*</td>
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1 ASSITEB International Association of Biomedical Technologists, BIORIF Bio-Training Association – International Training Network for Development of Human Resources in Laboratory Medicine. Previously known as the International Association of Biologists Technicians (ASSITEB).

2 Previously known as the International Association for Biologicals.

3 Previously known as the International Federation of Health Records Organizations.
International Pharmaceutical Students’ Federation*
International Society for Burn Injuries*
International Society for Telemedicine & eHealth*
International Society of Blood Transfusion*
International Society of Orthopaedic Surgery and Traumatology*
International Society of Radiology*
International Society on Thrombosis and Haemostasis, Inc.*
International Union of Architects*
International Union of Basic and Clinical Pharmacology*
International Union of Microbiological Societies*
La Leche League International
Medicus Mundi International – International Organisation for Cooperation in Health Care*
OXFAM
The Cochrane Collaboration*
The Commonwealth Pharmacists Association
The International League of Dermatological Societies*
The International Society for Quality in Health Care Incorporated*
The International Society of Radiographers and Radiological Technologists*
The Network: Towards Unity for Health*
The Transplantation Society*
The Save the Children Fund*
The World Medical Association, Inc.*
World Association of Societies of Pathology and Laboratory Medicine*
World Federation for Medical Education*
World Federation for Ultrasound in Medicine and Biology*
World Federation of Acupuncture-Moxibustion Societies*
World Federation of Chiropractic*
World Federation of Public Health Associations*
World Federation of Societies of Anaesthesiologists*
World Organization of Family Doctors*
World Self-Medication Industry*
World Vision International*

* Based on reports of collaboration for the period under review 2010–2012, the Standing Committee on Nongovernmental Organizations recommended the maintenance in official relations of those nongovernmental organizations whose names are followed by an asterisk. The other nongovernmental organizations are the subject of specific decisions or a resolution.