Key issues for the development of a policy on engagement with nongovernmental organizations

Report by the Director-General

1. In decision WHA65(9) the Health Assembly requested, inter alia, that the Director-General present a draft policy paper on WHO’s engagement with nongovernmental organizations to the Executive Board at its 132nd session in January 2013. The Health Assembly also requested that a draft policy paper on WHO’s relationships with private commercial entities be presented to the Executive Board at its 133rd session in May 2013. In support of the development of these policies, the decision sets out several principles, including the need for due consultation with all relevant parties keeping in mind the principles and guidelines laid down for WHO’s interactions with Member States and other parties.

2. Consultations with nongovernmental organizations since the Sixty-fifth World Health Assembly, 1 in addition to historical analyses of the frameworks and practices guiding WHO’s engagement with such organizations, have revealed a number of key issues that require guidance from Member States before a draft policy paper on engagement with nongovernmental organizations can be finalized for presentation to the governing bodies. It has also become evident that the development of WHO’s policy on engagement with nongovernmental organizations should be harmonized with the development of a draft policy paper on WHO’s relationships with private commercial entities.

3. Through this document, the Secretariat seeks guidance from the Board in relation to the key issues emerging from the discussions and analyses undertaken to date on the following elements of engagement with nongovernmental organizations:

   (i) how best to seek the views of nongovernmental organizations in the development of health policies and strategies (consultation);

   (ii) how to improve the methods of working with nongovernmental organizations on WHO activities and priorities across the three levels of WHO (collaboration);

   (iii) how to improve the transparency and accountability of collaboration between WHO and nongovernmental organizations, including defining the nature of potential conflicts of interest affecting WHO’s integrity (transparency and accountability);

   (iv) how best to address engagement with different constituencies of nongovernmental organizations (differentiation of nongovernmental organizations);

(v) the desirability and feasibility of updating the practices and criteria, and of defining parameters for the participation of nongovernmental organizations in the meetings of WHO’s governing bodies (or in working groups, special conferences and other meetings emanating from the work of the governing bodies) (accreditation);

(vi) how best to proceed with the process of consultation for the development of WHO’s policy of engagement with nongovernmental organizations, including the best means of harmonizing this policy with the development of WHO’s policy on relationships with private commercial entities.

ENGAGEMENT WITH NONGOVERNMENTAL ORGANIZATIONS AND GUIDING PRINCIPLES

4. The overarching purpose of WHO’s engagement with nongovernmental organizations is to leverage mutually beneficial cooperation at global, regional and country levels with a view towards improved public health outcomes.¹ Nongovernmental organizations continue to play a critical role in supporting WHO’s work to fulfil its constitutional mandate. For example, nongovernmental organizations have been instrumental in advocating for issues of public health promoted by WHO and expanding the Organization’s outreach and audience in that regard. Nongovernmental organizations have played a vital role in bringing emerging health issues to the attention of WHO and in protecting and raising the profile of public health concerns in order to galvanize concerted responses. Nongovernmental organizations also continue to be important partners of WHO at the country level, involved not only in WHO’s humanitarian and emergency response work, but also in building national health systems capacity and advancing a range of significant public health initiatives.

5. Nongovernmental organizations are also increasingly recognized as important actors in social, political and economic development. Given that health outcomes are influenced by policies in other sectors as well as broader economic, environmental and social determinants, the role of nongovernmental organizations in health is increasingly important. The work of these organizations in addressing health determinants and promoting equity evinces the critical role they play in connecting health with policies in other relevant sectors.

6. The benefits of stronger engagement with a wider range of nongovernmental organizations in support of improved public health are evident. However, such engagement should not undermine the ultimate authority of governments in determining policy; nor should it compromise the integrity of WHO’s normative standards and guidelines. Transparency and full disclosure are paramount in WHO’s interactions with all external stakeholders. It is clear that the central pillars of engagement between nongovernmental organizations and WHO must not only ensure the integrity of WHO’s normative work but must also protect against the risk of vested interests influencing health policy development.²

¹ The Principles Governing Relations between the World Health Organization and Nongovernmental Organizations, were adopted in resolution WHA40.25. Paragraph 1.3 of the Principles states that “The objectives of WHO’s collaboration with NGOs are to promote the policies, strategies and programmes derived from the decisions of the Organization’s governing bodies; to collaborate with regard to various WHO programmes in jointly agreed activities to implement these strategies; and to play an appropriate role in ensuring the harmonizing of intersectoral interests among the various sectoral bodies concerned in a country, regional or global setting.” Available at http://www.who.int/civilsociety/relations/principles/en/index.html (accessed 5 December 2012).

² In line with the principles set out in decision WHA65(9).
CONSULTATION WITH NONGOVERNMENTAL ORGANIZATIONS

7. Constructive and principled consultation with nongovernmental organizations facilitates the advancement of health outcomes and strengthens the work of WHO. Such consultation on the development of health policies and strategies, for example, supports an effective, collective response to national and global health challenges. It also adds an important dimension to WHO’s role in global health governance. Given the influence of individual nongovernmental organizations at international and community level on decision-making in health, it is vital that WHO seeks their views and perspectives at the formative stages of activities. In this way, the positions, needs and interests of those who will be instrumental in the implementation of policies, strategies and normative instruments, are appropriately taken into account. WHO’s approach to consultation with nongovernmental organizations should involve inclusive consultation on relevant health issues with organizations whose aims and activities are in conformity with the spirit, purposes and principles of the Constitution of WHO, notwithstanding previous formal or informal engagement with WHO (i.e. de-linked from the accreditation of nongovernmental organizations or their status in terms of official relations).

8. There is currently no proactive, structured means through which WHO can seek the views of relevant nongovernmental organizations on the development of health policies and strategies. In order to strengthen their engagement and contribution in WHO’s work, it is important to identify concrete mechanisms that can enhance the consultative dimension. Three such mechanisms considered here are:

- web-based or electronic platforms
- public hearings
- a forum or formalized mechanism (i.e. a civil society mechanism).

9. Web-based consultations have increasingly been employed by the Secretariat to gather inputs from nongovernmental organizations on issues related to a host of issues concerning WHO reform, including the development of organizational priorities and issues directly related to WHO’s engagement with non-State actors. Although the Internet potentially offers an inclusive, cost-effective and accessible medium for communication, WHO’s web-based consultations have not yet moved beyond a limited engagement, providing a relatively narrow group of inputs. The use of electronic media for consultation with nongovernmental organizations does not yet include routine engagement on health issues. This needs to be expanded. Currently, consultation with civil society on WHO’s programmatic work occurs through informal channels and is generally limited to existing technical networks. Enlargement of this mechanism for regular and structured consultation on WHO’s programmatic work could provide opportunities for all nongovernmental organizations concerned with specific health issues to contribute at the outset of WHO’s planning and policy development.

10. The establishment of structured, inclusive and transparent public hearings, under the leadership of the Officers of the Executive Board and the Officers of the six regional committees, could also be explored as a means of strengthening and streamlining consultative processes with nongovernmental organizations. Hearings at the regional level on the development of global strategies, policies and legal instruments, or on specific items referred to the regional committees by the Health Assembly, would ensure that nongovernmental organizations are engaged at the critical stages. The outcomes of these hearings would then be used to inform continued development of the instruments and other tools. Taking into account matters likely to be discussed during a particular cycle of WHO’s governing bodies, specific issues for consultation with nongovernmental organizations could be identified and

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1 See decision WHA65(9).
outlined in an annual plan for endorsement by the Board at its May session. In terms of the consultations themselves, elements of the consultations for the negotiations on the Pandemic Influenza Preparedness Framework, together with the deliberations of the Consultative Expert Working Group on Research and Development: Financing and Coordination, could be used as models for such hearings.

11. A formal mechanism, whereby nongovernmental organizations could deliberate and provide input on issues under consideration by WHO, is another means that has been suggested to improve consultation. A mechanism of this type would involve, for example, the establishment of a satellite forum or body to which nongovernmental organizations would be invited by WHO’s governing bodies in order to examine issues of particular importance and relevance with a view to informing, and providing additional input into, the debates of Member States. The International Food Security and Nutrition Civil Society Mechanism provides an example of this type of improved consultation. In 2010, nongovernmental organizations were invited to establish autonomously a global mechanism for food security and nutrition to function as a facilitating body for consultation with nongovernmental organizations and participation in the processes of FAO’s Committee on World Food Security. The establishment of a similar mechanism could be explored for WHO.

COLLABORATION WITH NONGOVERNMENTAL ORGANIZATIONS

12. Well-established forms of collaboration have traditionally included the provision of support by nongovernmental organizations to WHO’s work in the development, implementation and monitoring of norms and standards, and joint action or partnerships to direct attention towards matters critical to health. However, changes in the role of nongovernmental organizations in health – driven, in part, by epidemiological and demographic shifts in the context in which countries and communities deal with health challenges – necessitate an evolution in the way collaboration is undertaken. For example, an increasing number of nongovernmental, faith-based organizations are delivering care and complementing the efforts of national health systems. In addition, research undertaken by nongovernmental organizations continues to shape the direction and use of knowledge acquisition. Given the expanding role of nongovernmental organizations in health activities, particularly at country level, the Organization needs to examine ways of ensuring that a collaborative framework facilitates a strengthened engagement between WHO and such organizations in relation to all of WHO’s core functions.

13. Nongovernmental organizations have also identified a number of specific areas where collaboration with WHO could potentially be strengthened, including the following: action for large epidemics and civil strife, and other humanitarian action; transmission of advocacy efforts and information to country level; and dissemination of expertise and promotion of knowledge and best practices through expanded networks. It has also been suggested that WHO be more proactive in seeking collaboration with nongovernmental organizations and encourage initiatives to bring such organizations together with Member States to collaborate on WHO’s strategic priorities. In this regard, it is acknowledged that lessons learnt from WHO engagement with nongovernmental organizations in work against noncommunicable diseases be used to inform prospective collaboration on issues such as universal health coverage, social determinants of health and access to medical products. Further analysis and consultation are required to explore how action by nongovernmental organizations in the context of WHO’s technical work can be adequately reflected in, and accommodated by, a future collaborative arrangement with such organizations.

14. WHO’s collaboration with nongovernmental organizations must also continue across all levels of WHO, recognizing that the nature of collaboration may differ among the three levels. For example, WHO’s work at regional and country levels is often supported by nongovernmental organizations that leverage advances in the use of information technology and social media in order to generate broad-reaching and targeted campaigns to protect and promote health. In addition, WHO’s country
offices increasingly seek to involve national nongovernmental organizations in the development of country cooperation strategies. Given that regional and country offices often work with regional or country-based nongovernmental organizations on an informal basis, any general framework for collaboration should aim at guiding collaboration and facilitating strengthened engagement in areas of mutual benefit such as those described in paragraphs 12 and 13 above. At the same time, a framework should be sufficiently flexible to take into consideration the country-specific context, including the dynamics between civil society and government.

**Transparency and accountability**

15. There is general agreement that WHO’s collaborative arrangements with all non-State actors must continue to be grounded in transparency. Different mechanisms can be employed to ensure that full and public disclosure of WHO’s interaction with nongovernmental organizations remains paramount. A Declaration of Interest has been seen as one important tool to achieve full disclosure. It has also been suggested that an electronic platform should be established, similar to the Transparency Register of the European Parliament and European Commission. Such a platform would provide information publicly on all nongovernmental organizations collaborating with WHO, including the nature of collaboration, governance structure, sources of funding, and declarations of interest.

16. The scope of conflicts that could affect WHO’s integrity needs to be better defined as part of the process to improve the transparency and accountability of WHO’s interaction with nongovernmental organizations. Differing views have been expressed on the nature of the potential conflicts in question; resolution of this issue may emerge through the disclosure of interests. In this regard, the definition of potential conflicts of interest, and the establishment of adequate safeguards and procedures to prevent and address such conflicts, are seen as important elements of any policy on engagement with nongovernmental organizations. Given the wide range of organizations and entities with which WHO interacts, and their diverse structures, mandates, and funding sources, it is imperative that this policy guide both eligibility and modalities for collaboration and the setting of parameters for potential termination.

**Differentiation of nongovernmental organizations**

17. The challenge of balancing strengthened collaboration with nongovernmental organizations against the risk posed by vested interests is complicated by the fact that WHO engages with a spectrum of non-State bodies, the specificities and complexities of which have proliferated in the past two decades. In particular, many nongovernmental organizations and entities that have relevance in the health sphere are now linked to an array of interests, commercial or otherwise. Currently, no specific differentiation is made amongst the non-State, not-for-profit organizations with which WHO engages. In addition, no further distinction is made among the numerous constituencies that make up the sector of nongovernmental organizations, and that include the following: professional associations; trade or industry associations; disease-specific nongovernmental organizations; development nongovernmental organizations; patient and consumer group nongovernmental organizations and faith-based organizations.

18. Differing views have been expressed on whether – and, if so, how – WHO should define the boundaries between the various constituencies of nongovernmental organizations and collaborate with the emerging subgroups. Some nongovernmental organizations are of the view that differentiation is unnecessary if full and public disclosure of information and interests is achieved. Any potential conflicts of interest would then be identified and tackled on a case-by-case basis in accordance with clear parameters and procedures (to be defined, as referred to in paragraph 16 above).
19. Other nongovernmental organizations feel it is critical to differentiate between the constituencies of such organizations, particularly with regard to those with commercial interests or links. Even among these nongovernmental organizations, however, different views have been expressed on how to treat the differentiated subgroups. Some would support housing commercially-linked nongovernmental organizations under WHO’s policy on relationships with private commercial entities (currently in development). Others consider that commercial interests should be viewed in the context of WHO’s specific functions. The latter approach would facilitate, for example, WHO collaboration with commercially-linked nongovernmental organizations for product development but not for normative activities or health policy development. This would again need to be examined on a case-by-case basis. Regardless of the approach taken, any move to differentiate nongovernmental organizations – on the basis of, for example, governance mechanisms, interests represented, operations or funding sources – would also need to take into account concomitant administrative implications and the potentially subjective nature of such an approach.

ACCREDITATION

20. The accreditation of nongovernmental organizations for WHO’s governing bodies (i.e. their authorization to participate therein) enables such organizations to make their voice heard directly in WHO’s governance meetings and to engage directly with Member States. Accreditation to WHO’s governing bodies is, under the current policy adopted by the Health Assembly in 1987, referred to as the establishment of “official relations” with WHO. The admission of nongovernmental organizations into official relations by the Executive Board requires a prior joint programme of work and a three-year workplan with a technical department in WHO (“working relations”). In other words, the admission of nongovernmental organizations to participate in governing bodies meetings is predicated upon a successful period of engagement with the Secretariat at the technical level. The fact that eligibility for official relations depends on the completion of a period of working relations has certain consequences. For example, discussions in the governing bodies may be conducted in the absence of the contribution of a nongovernmental organization with specific relevant expertise, but which does not yet qualify for official relations.

21. It has been proposed that accreditation to participate in WHO’s governing bodies be de-linked from a period of working relations, and be seen as a self-standing relationship based on the contribution that the nongovernmental organization in question could give to WHO’s governing bodies. This would enable a broader constituency of nongovernmental organizations to have the opportunity to express relevant views on technical matters under deliberation by the governing bodies. Some concern has been expressed that a tangible effect of expanded accreditation would be a dramatic increase in the number of nongovernmental organizations participating and intervening in meetings of the governing bodies, causing the times allotted for the different agenda items to be disrupted. However, experience from previous consultative processes has shown that like-minded nongovernmental organizations often organize themselves to deliver a single statement representing a consolidated, common position. Such coordination could be required or encouraged as a way to mitigate any potential unfavourable effect on the discipline of governing bodies’ meetings.

22. Revised accreditation procedures may also enable flexible solutions to be explored. For example, the accreditation of nongovernmental organizations could potentially be limited to individual meetings of governing bodies or to a specific governing body or working group, rather than the current situation, in which official relations permit unlimited participation for the duration of the validity of that status. This would enhance transparency and improve the management of governing bodies’

1 Resolution WHA40.25.
meetings by ensuring that discussions at the proceedings were enriched by the participation of relevant nongovernmental organizations. It has also been stated that revised accreditation procedures should apply not only to participation of nongovernmental organizations in meetings of WHO’s governing bodies, but also to their participation in working groups, special conferences and other forums emanating from the work of the governing bodies.

**PROCESS TOWARDS A NEW POLICY**

23. As noted above, given the salient linkages between the two policies, the development of WHO’s policy on engagement with nongovernmental organizations should parallel the development of the draft policy paper that has been requested on WHO’s relationships with private commercial entities. Differing views have been expressed on how the process of consultation, and specifically the participation of stakeholders, should be organized in the development of these policies.

24. In relation to the development of the policy for engagement with nongovernmental organizations, requests have been made for such organizations to be given an opportunity to engage directly with Member States as part of the consultative process. A consultation, involving both nongovernmental organizations and Member States, could then be convened after the 132nd session of the Executive Board.

25. With a view to harmonizing the development of this policy with that of the policy on private commercial entities, a consultation on the development of the latter policy could also be convened, with both Member States and nongovernmental organizations, after the 132nd session of the Executive Board.

**ACTION BY THE EXECUTIVE BOARD**

26. The Board is requested to provide views on the issues identified in this paper concerning the formulation of a draft policy for WHO’s engagement with nongovernmental organizations. Specifically, the Board is invited to provide direction on:

- potential mechanisms for consultation with nongovernmental organizations
- methods to strengthen and widen collaboration between WHO and nongovernmental organizations related to WHO’s core functions, strategic priorities, and across the three levels of the Organization
- mechanisms to improve transparency and accountability, and define the scope of potential conflicts of interest affecting WHO’s integrity
- approaches both to differentiation of nongovernmental organizations and to WHO’s interaction with the different constituencies of such organizations
- revisions to accreditation procedures for nongovernmental organizations
- the process of consultation for the development of WHO’s policy on engagement with nongovernmental organizations, including harmonization with WHO’s policy on relationships with private commercial entities.