World Health Organization

EXECUTIVE BOARD
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Review of nongovernmental organizations in official relations with WHO

1. In accordance with paragraph 4.6 of the Principles Governing Relations between WHO and Nongovernmental Organizations,[1] the Board, through its Standing Committee on Nongovernmental Organizations,[2] each year reviews collaboration between WHO and one third of the nongovernmental organizations in official relations with WHO and determines the desirability of maintaining them in such relations. The basis for official relations is a plan for collaboration that includes mutually agreed objectives and outlines activities for a three-year period.

2. The information in this document derives from reports submitted by the nongovernmental organizations, WHO's evaluations of the collaboration, collaboration plans as agreed between WHO and the nongovernmental organizations for the next three-year period, and due diligence on the entities and risk assessment on the engagements. The Standing Committee is invited to consider the information, including proposed actions.

3. The review of collaboration between nongovernmental organizations and WHO was conducted in accordance with the policies set out in the Principles Governing Relations between WHO and Nongovernmental Organizations and the current practices for implementing those policies. It should be noted that, pursuant to resolution WHA68.9 (2015), the Director-General has convened an open-ended intergovernmental meeting to finalize the draft framework of engagement with non-State actors for submission, through the Executive Board at its 138th session, to the Sixty-ninth World Health Assembly for its consideration and adoption. The review of the existing collaboration and proposals for the admission of new nongovernmental organizations into official relations with WHO was based solely on the current policies. The following changes were introduced last year:

- Documentation submitted to the Standing Committee is no longer restricted;[3] and
- Information concerning most of those nongovernmental organizations that have their status reviewed, and concerning those that are proposed to be newly admitted into official relations, is made available in the prototype of the register of non-State actors.[4]

[1] Basic documents, available at http://apps.who.int/gb/bd/PDF/bd48/basic-documents-48th-edition-en.pdf#page=103.

[2] Members of the Standing Committee on Nongovernmental Organizations, as amended by decision EB137(2), (2015) Dr Gazmend Bejtja (Albania), Mr Sylvain Segard (Canada), Dr Bernard Haufiku (Namibia), Dr Assad Hafeez (Pakistan) and Dr Janette Loreto Garin (Philippines).

[3] http://apps.who.int/gb/NGO/e/E_NGO_138.html.

[4] http://apps.who.int/register-nonstate-actors/home.aspx.

REVIEW OF COLLABORATION WITH NONGOVERNMENTAL ORGANIZATIONS DURING 2013–2015

4. The review of collaboration with nongovernmental organizations during 2013–2015 covered 64 organizations. The collaboration with 57 of them was found to have proved satisfactory and to have a jointly agreed continuation plan for the next three years. The Secretariat therefore proposes that official relations continue with those 57 nongovernmental organizations.

5. Annex 1 lists those 57 nongovernmental organizations and the categories and main programme areas of the Twelfth General Programme of Work, 2014–2019, that the agreed collaboration for the 2016–2018 period will support, should relations continue. Details of past joint activities and of plans for future collaboration may be provided on request.

> **A. Action proposed: Note the reports and commend the 57 nongovernmental organizations listed in the Annex for their continuing contribution to the achievement of WHO objectives and maintain them in official relations with WHO.**

NONGOVERNMENTAL ORGANIZATIONS WITH WHICH RELATIONS CHANGED DURING 2013–2015

6. **Aga Khan Foundation.** The Foundation was asked to submit a report on the collaboration with WHO. The Secretariat, having received no such report, conducted an internal review, which revealed that it had been concluded in 2013 that the Foundation was working with WHO in several programmatic areas and geographical regions, but the collaboration was largely based on individual contacts without agreement at the institutional level. It had been recommended that an improved engagement mechanism be designed to strengthen goal setting at the institutional level, while the individual efforts continued. However, during the review period, the WHO designated technical officer responsible for relations changed, leading to a gap in communication between the two organizations. Additional work appears necessary to develop relations further at the institutional level. The Secretariat therefore proposes deferring the review of relations to allow for time to explore the development of a joint collaboration plan at the institutional level covering the several programme areas in which work is already under way.

7. **International Organization for Standardization.** There is no record of a response from the Organization to invitations to submit a report. The focal point in the International Organization for Standardization has changed and the contact between the two organizations has lapsed. Given the importance of collaboration on international standards related to WHO's work, the Secretariat proposes that greater time be granted to re-establish contact with the International Organization for Standardization and further effort made to forge a new collaboration plan.

8. **Commonwealth Pharmacists Association.** In response to a request to submit a report on its past collaboration with WHO, the Association informed the Secretariat that a change of staff in the Association meant it was not in a position to do so. An internal WHO review revealed a break in contact between the two organizations and minimal collaboration. Nevertheless, the Secretariat sees potential for useful and constructive collaboration.

> **B. Action proposed: Note the report and, in order to provide the Aga Khan Foundation, the International Organization for Standardization and the Commonwealth Pharmacists Association an opportunity to clarify their views with regard to relations with**

WHO and, if appropriate, pursue agreement with WHO on a plan for collaboration, defer the review of relations with these three nongovernmental organizations and request that reports be submitted on the agreed plans or, as the case may be, status of relations to the Executive Board at its 140th session.

9. **International Federation of Biomedical Laboratory Science.** The International Federation of Biomedical Laboratory Science is an association of national societies in 35 countries, representing more than 165,000 medical laboratory scientists and technologists**.** The Federation submitted a report on its planned collaboration with WHO as agreed at the beginning of the collaboration period, including joint events during the Federation's biennial world conferences on the subject of laboratory biosecurity and biorisk management aimed at improving basic principles and best practices, as well as national workshops in collaboration with WHO. An internal review by the Secretariat revealed that the agreed collaborative activities had not taken place and would not have come within the scope of the work of the technical unit responsible for the relations. Likewise, the activities proposed by the Federation for future collaboration would not be within the scope of the work of the technical unit. Efforts made to identify another unit in WHO that would benefit from the collaboration with the Federation found none.

10. **International Federation of Clinical Chemistry and Laboratory Medicine.** The International Federation of Clinical Chemistry and Laboratory Medicine is a worldwide organization for clinical chemistry and laboratory medicine comprising corporations, national societies and other organizations. The previous review of relations with the Federation, in 2012, proposed their discontinuation due to a lack of collaboration. In response, the Federation explained that the lack of collaboration was due to a lack of communication. Subsequent exchanges led to a plan for collaborative activities for 2013–2015 comprising the development of a joint booklet on the laboratory diagnosis and monitoring of diabetes mellitus and of a document on appropriate liver and renal function testing for monitoring HIV antiretroviral therapy, as well as WHO involvement in the scientific programme at the Federation's conferences. Based on the plan, it was decided to continue the official relations.

The Federation submitted, as requested, a report on the collaboration during 2013–2015, explaining the development of the joint booklet on diabetes mellitus had stalled due to organizational changes within WHO and that WHO involvement in Federation conferences had not been realized due to private sector involvement in those events. Internal review confirmed the same. The technical unit responsible for the relations reported that Federation activities were not within the scope of the unit and that it would therefore not pursue a collaboration plan with the Federation. Moreover, while another technical unit was collaborating with the Federation to develop a compendium of laboratory methods used in the diagnosis and management of diabetes, there is no scope to pursue a joint plan for collaboration after the completion of the compendium.

11. **World Association of Societies of Pathology and Laboratory Medicine.** The World Association of Societies of Pathology and Laboratory Medicine is a global network of physician-led societies of pathology and laboratory medicine. The agreed collaboration plan included: a survey in low- and middle-income countries on the formulation and implementation of national laboratory policies and strategic plans, mapping out and comparing the various approaches ranging from public to private and public–private partnerships, including associated expenses, used among Member States to provide essential laboratory services and regional laboratory training workshops and advocacy meetings, seminars and conferences on various laboratory specialities.

The Association submitted a report showing little progress during the 2013–2015 collaboration. An internal review concluded that WHO's input for the planned collaboration had not been taken into

account and that WHO had received no concrete deliverables from the collaboration. The technical unit at WHO had found it challenging to find common activities with the Association and saw no benefit in continuing this official relationship.

C. Action proposed: Note the reports and discontinue official relations with the International Federation of Biomedical Laboratory Science, the International Federation of Clinical Chemistry and Laboratory Medicine, and the World Association of Societies of Pathology and Laboratory Medicine as such relations are no longer necessary.

12. **International League of Dermatological Societies.** The League submitted a report on its collaboration with WHO, consisting of activities with several departments. While the internal review of the collaboration was positive, none of the technical units involved had either the interest or the scope to continue collaboration with the League. No resumption of collaboration is foreseen for the immediate future.

D. Action proposed: To note the report and discontinue relations with the International League of Dermatological Societies as such relations are no longer necessary.

ANNEX 1

NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH WHO WITH A PLAN FOR COLLABORATION FOR THE 2016–2018 PERIOD, ACCORDING TO THEIR CONTRIBUTIONS TO THE CATEGORIES OF WORK AND PROGRAMME AREAS OF THE TWELFTH GENERAL PROGRAMME OF WORK, 2014–2019

1. Communicable diseases

- **Programme area: HIV/AIDS**

  International Council of Nurses
  International Federation of Medical Students' Associations
  International Hospital Federation
  International Pharmaceutical Students' Federation
  International Union of Microbiological Societies
  The Save the Children Fund
  World Organization of Family Doctors

- **Programme area: Tuberculosis**

  International Pharmaceutical Federation
  International Pharmaceutical Students' Federation
  International Union of Microbiological Societies
  World Medical Association

- **Programme area: Malaria**

  AMREF Health Africa
  International Union of Microbiological Societies
  The Save the Children Fund
  World Council of Churches

- **Programme area: Neglected tropical diseases**

  World Vision International

- **Programme area: Vaccine-preventable diseases**

  International Pharmaceutical Students' Federation
  International Federation of Pharmaceutical Manufacturers and Associations
  International Union of Microbiological Societies
  The Save the Children Fund

2. Noncommunicable diseases

- **Programme area: Noncommunicable diseases**

  Consumers International
  Council for International Organizations of Medical Sciences
  Framework Convention Alliance on Tobacco Control
  International Alliance of Patients' Organisations
  International Association of Cancer Registries
  International Federation of Medical Students' Associations
  World Federation of Public Health Associations
  International Hospital Federation
  International Pharmaceutical Students' Federation
  International Society on Thrombosis and Haemostasis
  World Self-Medication Industry
  Worldwide Network for Blood and Marrow Transplantation

- **Programme area: Mental health and substance abuse**

  World Medical Association
  World Organization of Family Doctors
  World Vision International

- **Programme area: Violence and injuries**

  European Association for Injury Prevention and Safety
  International Life Saving Federation
  International Society for Burn Injuries

- **Programme area: Disabilities and rehabilitation**

  International Society of Physical and Rehabilitation Medicine
  World Federation of Chiropractic

- **Programme area: Nutrition**

  Cochrane Collaboration
  Consumers International
  International Council for Standardization in Haematology
  The Save the Children Fund
  World Organization of Family Doctors
  World Vision International

3. Health through the life-course

- **Programme area: Reproductive, maternal, newborn, child and adolescent health**

  Cochrane Collaboration
  Global Health Council
  International Federation of Fertility Societies
  International Federation of Medical Students' Associations
  The Save the Children Fund
  World Council of Churches
  World Vision International

- **Programme area: Ageing and health**

  World Federation of Chiropractic

- **Programme area: Gender, equity and human rights mainstreaming**

  The Transplantation Society

- **Programme area: Social determinants of health**

  International Federation of Medical Students' Associations
  The Network: Towards Unity For Health
  World Federation of Public Health Associations
  World Medical Association

- **Programme area: Health and the environment**

  International Federation of Hospital Engineering
  International Federation of Medical Students' Associations
  International Society of Radiology
  International Society of Radiographers and Radiological Technologists
  International Union of Architects
  International Water Association

4. Health systems

- **Programme area: National health policies, strategies and plans**

  AMREF Health Africa
  ASSITEB –BIORIF
  Cochrane Collaboration
  Council on Health Research for Development
  Council for International Organizations of Medical Sciences
  International Council of Nurses
  International Federation of Medical Students' Associations

International Federation of Surgical Colleges
International Hospital Federation
International Pharmaceutical Federation
International Society of Blood Transfusion
OXFAM
The Network : Towards Unity For Health
World Federation for Ultrasound in Medicine and Biology
World Federation of Acupuncture-Moxibustion Societies
World Federation of Public Health Associations

- **Programme area: Integrated people-centred health services**

International Alliance of Patients' Organizations
International College of Surgeons
International Federation of Biomedical Laboratory Science
Medicus Mundi International
World Federation of Acupuncture-Moxibustion Societies

- **Programme area: Access to medicines and health technologies and strengthening regulatory capacity**

ASSITEB-BIORIF
Council for International Organizations of Medical Sciences
International Alliance for Biological Standardization
International Federation of Hospital Engineering
International Federation for Medical and Biological Engineering
International Federation of Pharmaceutical Manufacturers and Associations
International Pharmaceutical Student's Federation
International Society of Blood Transfusion
International Union of Architects
International Union of Basic and Clinical Pharmacology
OXFAM
World Federation for Ultrasound in Medicine and Biology
World Federation of Acupuncture-Moxibustion Societies
World Federation of Chiropractic
World Self-Medication Industry
World Vision International

- **Programme area: Health systems, information and evidence**

Council on Health Research for Development
International Federation of Fertility Societies
International Federation of Health Information Management Associations
International Medical Informatics Association
International Pharmaceutical Federation
International Society for Telemedicine & eHealth

5. Preparedness, surveillance and response

- **Programme area: Alert and response capacities**

  International Hospital Federation

- **Programme area: Epidemic and pandemic-prone diseases**

  Consumers International
  International Union of Microbiological Societies
  World Council of Churches

- **Programme area: Emergency risk and crisis management**

  International Hospital Federation
  International Union of Architects
  The Save the Children Fund
  World Vision International

- **Programme area: Food safety**

  Consumers International
  International Union of Microbiological Societies

- **Programme area: Poliomyelitis eradication**

- **Programme area: Outbreak and crisis response**

  The Save the Children Fund

6. Corporate services and enabling functions

- **Programme area: Leadership and governance**

  Global Health Council
  Medicus Mundi International
  World Federation for Medical Education

ANNEX 2

WHO CATEGORIES OF WORK AND CORRESPONDING PROGRAMME AREAS

1. Communicable diseases

Programme areas: HIV/AIDS; tuberculosis; malaria; neglected tropical diseases; and vaccine-preventable diseases.

2. Noncommunicable diseases

Programme areas: noncommunicable diseases; mental health and substance abuse; violence and injuries; disabilities and rehabilitation; and nutrition.

3. Health through the life-course

Programme areas: reproductive, maternal, newborn, child and adolescent health; ageing and health; gender, equity and human rights mainstreaming; social determinants of health; and health and the environment.

4. Health systems

Programme areas: national health policies, strategies and plans; integrated people-centred health services; access to medicines and health technologies and strengthening regulatory capacity; and health systems, information and evidence.

5. Preparedness, surveillance and response

Programme areas: alert and response capacities; epidemic- and pandemic-prone diseases; emergency risk and crisis management; food safety; poliomyelitis eradication; and outbreak and crisis response.

6. Corporate services and enabling functions

Programme areas: leadership and governance; transparency, accountability and risk management; strategic planning, resource coordination and reporting; management and administration; and strategic communications.

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