

Engagement with non-State actors

Non-State actors in official relations with WHO

Report by the Director-General

1. “Official relations” is a privilege that the Executive Board may grant to nongovernmental organizations, international business associations and philanthropic foundations that have had and continue to have a sustained and systematic engagement in the interest of the Organization. The aims and activities of all these entities shall be in conformity with the spirit, purposes and principles of WHO’s Constitution, and they shall contribute significantly to the advancement of public health.¹
2. In accordance with the provisions of the Framework of Engagement with Non-State Actors,² entities in official relations with WHO are international in membership and/or scope, have a constitution or similar basic document, an established headquarters, a governing body, an administrative structure and a regularly updated entry in the WHO Register of non-State actors, through which such entities provide all the necessary information on their nature and activities.
3. Official relations are based on a plan for collaboration between WHO and the non-State actor, which contains agreed objectives and outlines activities for the coming three-year period, and which is structured in accordance with the General Programme of Work and Programme budget and is consistent with the Framework of Engagement with Non-State Actors. These plans shall be free from concerns which are primarily of a commercial or profit-making nature.
4. In accordance with the provisions of the Framework, the Programme, Budget and Administration Committee of the Executive Board, during the January session of the Board, is mandated to consider applications from and review collaboration with non-State actors in official relations and shall make recommendations to the Board on: proposals for admitting non-State actors into official relations; the desirability of maintaining the official relations with non-State actors; proposals for the deferral of reviews; and proposals for the suspension or discontinuation of official relations.
5. In order to support the Executive Board in fulfilling its mandate on official relations, the Secretariat examined applications from non-State actors for admission into official relations, and those non-State actors set to undergo their triennial review for consideration by the Board at its 148th session. In line with the Framework, due diligence and risk assessment were performed on each non-State actor, and entries in the WHO Register of non-State actors were verified, together with the relevant supporting

¹ The provisions are set out in paragraphs 50–66 of the Framework of Engagement with Non-State Actors (document WHA69/2016/REC/1, Annex 5, Overarching Framework of Engagement with Non-State Actors).

² Adopted by the Health Assembly in resolution WHA69.10 (2016).

documentation provided. As part of this exercise, past collaboration with WHO was assessed and the jointly agreed plans for collaboration for the coming three years (2021–2023)¹ were examined.

APPLICATIONS FOR ADMISSION INTO OFFICIAL RELATIONS WITH WHO

6. In accordance with the provisions of the Framework of Engagement with Non-State Actors, the Executive Board shall be responsible for deciding on the admission of organizations into official relations with WHO.²

7. The Secretariat reviewed applications for admission into official relations from non-State actors to ensure that the established criteria and other requirements set out in the Framework, including due diligence, were fulfilled. As a result of the review, the Secretariat considered that the applications from the following two entities fulfilled the established eligibility criteria, and they are therefore presented for the consideration of the Board: Fondation Botnar and Vital Strategies, Inc.

8. These entities have completed their entries in the WHO Register of non-State actors. A summary of each applying entity, describing their engagement with WHO over the past three years and the collaboration planned for the next three years is contained in Annex 1 to this report.¹

A. Action proposed to the Board: Consider Fondation Botnar and Vital Strategies, Inc. for admission into official relations with WHO.

TRIENNIAL REVIEW OF THE COLLABORATION WITH NON-STATE ACTORS IN OFFICIAL RELATIONS WITH WHO

9. In accordance with the provisions of the Framework of Engagement with Non-State Actors,³ the Executive Board, through its Programme, Budget and Administration Committee, shall review collaboration with each non-State actor in official relations every three years and shall decide on the desirability of maintaining official relations or defer the decision on the review to the following year. The Board's review shall be spread over a three-year period, with one third of the entities in official relations being reviewed each year.

10. The Board may discontinue official relations if it considers that such relations are no longer appropriate or necessary in the light of changing programmes or other circumstances. Similarly, the Board may suspend or discontinue official relations if an organization no longer meets the criteria that applied at the time of the establishment of such relations, fails to update its information and report on the collaboration in the WHO Register of non-State actors or fails to fulfil its part in the agreed programme of collaboration.⁴

¹ Collaboration plans are available in the WHO Register of non-State actors (<https://publicspace.who.int/sites/GEM/default.aspx#>), including the collaboration plan for the non-State actor for which the review was deferred by one year, in accordance with decision EB146(2) (2020). The collaboration plan of the entity concerned covers the period 2021–2022.

² See document WHA69/2016/REC/1, Annex 5, paragraph 54.

³ See document WHA69/2016/REC/1, Annex 5, paragraph 64.

⁴ See document WHA69/2016/REC/1, Annex 5, paragraph 66.

11. The review of collaboration with non-State actors during the period 2018–2020 covered 79 entities. An additional entity whose review was deferred following the decision of the Board at its 146th session was also reviewed.¹ The Secretariat has performed due diligence on these entities, and has examined both their past and proposed plans for collaboration, as well as the updated entries in the WHO Register of non-State actors. The proposed plans for collaboration are available in the Register.²

12. The Secretariat proposes that the Board renew official relations for 77 of the 80 non-State actors reviewed. The Secretariat's assessment of the past collaboration with these non-State actors confirmed that agreed collaborations have been implemented, and that plans for collaboration for the coming period have been jointly developed and agreed.

13. A list of the 77 non-State actors proposed for renewal of official relations is provided in Annex 2 to this report.

B. Action proposed to the Board: Commend the 77 non-State actors listed in Annex 2 for their continuing contribution to the achievement of WHO's objectives and renew their official relations with WHO.

14. On the basis of the review undertaken, and in order not to compromise the existing collaboration with non-State actors, the Secretariat proposes to the Board that two entities should be considered for deferral of the decision on its review to the 150th session of the Board in January 2022.

15. **Helen Keller International.** Resource constraints within Helen Keller International have led to a decreased level of collaboration with WHO and additional time is needed to develop a meaningful and comprehensive joint plan for collaboration.

16. **United States Pharmacopeial Convention.** Organizational and staffing changes at United States Pharmacopeial Convention have affected the ability of the Secretariat to conduct the triennial review of this entity. A deferral of the review would allow for the development of a more targeted joint plan for collaboration.

C. Action proposed to the Board: Consider the deferral³ of the decision on the review of Helen Keller International and United States Pharmacopeial Convention to the 150th session of the Board.

17. On the basis of the review undertaken, the Secretariat proposes that one entity should be considered for discontinuation of its official relations status.

18. **Project Orbis International, Inc.** Common activities and interactions have significantly reduced over the years between WHO and the entity, and thus it has been challenging to develop a comprehensive joint plan for collaboration. Future opportunities for engagement may be explored in the light of the strategic reorganization by the entity of the work it carries out.

¹ Decision EB146(2) (2020) deferred the decision on the review of one non-State actor until the 148th session of the Board. The collaboration plan of the entity concerned covers the period 2021–2022.

² Collaboration plans are available in the WHO Register of non-State actors (<https://publicspace.who.int/sites/GEM/default.aspx#>).

³ If granted, the deferral of the decision does not affect the triennial review cycle. The triennial review of these non-State actors will take place at the 150th session of the Board, in January 2022.

D. Action proposed to the Board: Consider discontinuing official relations with Project Orbis International, Inc.

ACTION BY THE EXECUTIVE BOARD

19. The Board is invited to consider the following draft decision:

The Executive Board, having examined and noted the report on Engagement with non-State actors: non-State actors in official relations with WHO,

(1) decided:

(a) to admit into official relations with WHO the following non-State actors: Fondation Botnar and Vital Strategies, Inc.;

(b) to discontinue official relations with Project Orbis International, Inc.;

(2) noted with appreciation the collaboration with WHO of the 77 non-State actors listed in Annex 2 to document EB148/40, commended their continuing contribution to the work of WHO, and decided to renew them in official relations with WHO;

(3) further noted that plans for collaboration with Helen Keller International and United States Pharmacopeial Convention have yet to be agreed, and decided to defer the review of relations with those entities until the 150th session of the Board in January 2022, at which time reports should be presented to the Board on the agreed plan for collaboration and on the status of relations.

ANNEX 1

PROPOSED APPLICATIONS OF NON-STATE ACTORS FOR ADMISSION INTO OFFICIAL RELATIONS WITH WHO

Fondation Botnar

1. Fondation Botnar is a philanthropic foundation with its headquarters in Basel, Switzerland. With the overarching aim of improving the health and well-being of children and young people worldwide, the Foundation is active and funds implementation projects and research initiatives across WHO regions, especially in emerging urban environments. Its work is also guided by the principle that new technologies, such as digital and artificial intelligence, can be leveraged to transform health and well-being with a view to achieving universal health coverage.

2. Established in 2003 to continue the philanthropic legacy of the Botnar family, Fondation Botnar is registered as a foundation under the Swiss Civil Code. The governance of Fondation Botnar is overseen by the Board, which comprises individuals from disciplines including public health, finance, law, and from academia, as well as a representative of the founding family. To ensure specific aspects of good governance, committees such as audit and risk have been established. The entity is entirely funded by income generated from the endowment investment.

Activities carried out with WHO during the period 2018–2020

3. Previous collaboration between WHO and Fondation Botnar has focused on increasing capacities in data and digital health as well as on activities to improve child and adolescent health and well-being. Support by Fondation Botnar has also contributed to WHO's work to facilitate the development of digital health and data analytics capacity as well as a WHO digital health strategy.

4. The support also helped fill the evidence gap on the effectiveness of adolescent health check-ups as part of WHO's work in this area and for the implementation of the WHO platform in countries for monitoring global standards for quality health care services for adolescents. Technical input for the development of a global status report has also been provided to further WHO's work under the global plan of action to address interpersonal violence. The support enabled the Secretariat to take forward the development of a project that aims to reduce the treatment gap in scalable evidence-based psychological interventions for adolescents through a technology-supported, user-centred approach.

Planned collaborative activities with WHO for the period 2021–2023

5. The three-year plan for collaboration further develops and builds on aspects of the previous collaboration, in alignment with the Thirteenth General Programme of Work as well as priorities defined in the draft global strategy on digital health. Planned activities in support of WHO focus on the establishment of technical processes and mechanisms to facilitate the development of increased capacities in digital health and innovation and data analytics that support national achievement of health priorities.

6. Fondation Botnar will also support WHO in leveraging digital health and artificial intelligence technologies for the health and well-being of young people and adolescents, and urban health. The entity will support WHO in its work to improve health, social and economic outcomes for children, as well as to empower adolescents to lead change using health data. This will be done through activities planned

in line with the global accelerated action for the health of adolescents and WHO's Urban Health Initiative.

Vital Strategies, Inc.

7. Vital Strategies, Inc. is an international nongovernmental organization headquartered in New York, United States of America. The organization works with governments and other stakeholders in over 70 countries across WHO's regions by providing technical support in the design and implementation of evidence-based strategies to tackle pressing public health challenges, with a focus on road safety, tobacco control, tuberculosis, data for health, maternal and child health, air pollution and obesity prevention.

8. The entity is governed by a Board of Trustees, comprising members who serve in their individual capacity, with backgrounds mainly in the private sector and academic institutions. It receives funding primarily from philanthropic foundations, followed by government entities, intergovernmental organizations and private sector entities.

Activities carried out with WHO during the period 2018–2020

9. Vital Strategies has supported WHO's work on the implementation of technical packages and recommended policies on tobacco control, road safety, environmental health, cardiovascular disease, and epidemic preparedness at national level, through advocacy, awareness raising and education, to further disseminate and encourage scale-up and uptake of WHO's standards, findings and public health messages in these areas.

10. Through collection and provision of data, Vital Strategies has provided technical inputs to inform WHO's work towards the development of evidence-based guidance on interventions for the prevention and treatment of noncommunicable diseases. The support provided has enabled WHO's work with Member States to advance towards achievement of global targets related to noncommunicable diseases and injury prevention.

Planned collaborative activities with WHO for the period 2021–2023

11. Building on aspects of previous interactions, the plan for collaboration supports WHO's priorities for the implementation of its technical packages and activities on tobacco control and road safety. The agreed activities will also further WHO's work on enhancing capacity and competencies at national level to establish and scale up evidence-based and responsive tobacco control and road safety measures.

12. Vital Strategies will support WHO's capacity-building activities on epidemics preparedness, by identifying the most critical gaps within health systems in order to prioritize opportunities for enhanced preparedness and response. This collaboration will also further WHO's efforts to promote and disseminate its existing technical packages on cardiovascular health for the prevention and treatment of specific noncommunicable diseases.

ANNEX 2

**NON-STATE ACTORS IN OFFICIAL RELATIONS UNDERGOING
A TRIENNIAL REVIEW OF THEIR COLLABORATION WITH WHO**

1. Alliance for Health Promotion
2. Association Africaine des Centrales d'Achats de Médicaments Essentiels
3. Caritas Internationalis
4. CBM Christoffel Blindenmission Christian Blind Mission e.V.
5. Childhood Cancer International
6. CropLife International aisbl
7. European Society for Medical Oncology
8. FDI World Dental Federation
9. Global Diagnostic Imaging Healthcare IT and Radiation Therapy Trade Association
10. Global Medical Technology Alliance
11. Health Technology Assessment international
12. Humatem
13. International Agency for the Prevention of Blindness
14. International AIDS Society
15. International Air Transport Association
16. International Association for Dental Research
17. International Association for Hospice and Palliative Care, Inc.
18. International Association for the Study of Pain
19. International Association of Logopedics and Phoniatrics
20. International Clearinghouse for Birth Defects Surveillance and Research
21. International Commission on Non-ionizing Radiation Protection
22. International Commission on Radiological Protection
23. International Council of Ophthalmology
24. International Diabetes Federation
25. International Epidemiological Association
26. International Federation of Oto-Rhino-Laryngological Societies
27. International Leprosy Association
28. International Medical Corps
29. International Network for Cancer Treatment and Research
30. International Network on Children's Health, Environment and Safety
31. International Organization for Medical Physics
32. International Rescue Committee
33. International Society for Environmental Epidemiology, Inc.

34. International Society of Audiology
35. International Society of Doctors for the Environment
36. International Society of Nephrology
37. International Society of Physical and Rehabilitation Medicine
38. International Solid Waste Association
39. International Union against Sexually Transmitted Infections
40. International Union Against Tuberculosis and Lung Disease
41. International Union of Immunological Societies
42. International Union of Toxicology
43. KNCV Tuberculosis Foundation
44. March of Dimes, Inc.
45. Médecins du Monde
46. MMV Medicines for Malaria Venture
47. Movendi International
48. Organisation pour la Prévention de la Cécité
49. Osteopathic International Alliance
50. PATH
51. Public Services International
52. RAD-AID International, Inc.
53. Rotary International
54. Stichting Global Network of People Living with HIV/AIDS
55. Thalassaemia International Federation
56. The Bloomberg Family Foundation, Inc.
57. The Global Alliance for Rabies Control, Inc.
58. The International Association of Lions Clubs
59. The International Federation of Anti-Leprosy Associations
60. The International Society of Paediatric Oncology
61. The Royal Commonwealth Society for the Blind – Sightsavers
62. The Wellcome Trust
63. The Worldwide Hospice Palliative Care Alliance
64. Tropical Health and Education Trust
65. Union for International Cancer Control
66. WaterAid International
67. World Blind Union
68. World Council of Optometry
69. World Federation of Chinese Medicine Societies
70. World Federation of Hemophilia
71. World Federation of Hydrotherapy and Climatotherapy

- 72. World Heart Federation
- 73. World Hepatitis Alliance
- 74. World Hypertension League
- 75. World Plumbing Council
- 76. World Stroke Organization
- 77. World Veterinary Association

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