

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 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 Executive Board during its January session, considers recommendations from its Programme, Budget and Administration Committee in respect of applications submitted by non-State actors for admission into official relations with WHO and decides on whether an organization is to be admitted. The Board is also mandated, through its Programme, Budget and Administration Committee, to review collaboration with each non-State actor. In this regard, the Board considers recommendations from the Committee on: the desirability of maintaining official relations with non-State actors; proposals for the deferral of reviews; and proposals for the discontinuation of official relations.
5. In order to support the Executive Board in fulfilling its mandate on official relations, the Secretariat assessed 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 154th session.

¹ The provisions are set out in paragraphs 50–66 of the Framework of Engagement with Non-State Actors.

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

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 reviewed, together with the relevant supporting 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 (2024–2026)¹ were reviewed.

6. In its efforts to encourage applications from nongovernmental organizations working on global health issues into official relations, the Secretariat has applied modalities to facilitate such applications in line with paragraph 53 of the Framework.

APPLICATIONS FOR ADMISSION INTO OFFICIAL RELATIONS WITH WHO

7. 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

8. 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. The Secretariat received eight requests for official relations. As a result of the review, two entities fulfilled the established eligibility criteria. The remaining entities did not meet the provisions governing official relations as set out in the Framework.

9. Therefore, the Secretariat is presenting for the consideration of the Board applications from the following two entities: Rare Diseases International and The Center for Reproductive Rights, Inc.

10. The two entities concerned have completed their entries in the WHO Register of non-State actors. Summary information on both entities, 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 Rare Diseases International and The Center for Reproductive Rights, Inc. for admission into official relations with WHO.

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

11. 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.

¹ Collaboration plans are available in the WHO Register of non-State actors (<https://publicspace.who.int/sites/GEM/default.aspx#>, accessed 2 November 2023), including the collaboration plan for the non-State actor for which the review was deferred by one year, in accordance with decision EB152(19) (2023). The collaboration plan of the entity concerned covers the period 2024–2025.

² Framework of Engagement with Non-State Actors, paragraph 54.

³ Framework of Engagement with Non-State Actors, paragraph 64.

12. 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.¹

13. The review of collaboration with non-State actors during the period 2021–2023 covered 80 entities. One additional entity whose review was deferred following the decision of the Board at its 152nd session was also considered.² The Secretariat has examined both their past and proposed plans for collaboration, as well as the updated entries in the WHO Register of non-State actors.³

14. The Secretariat proposes that the Board renew official relations with 75 of the 81 non-State actors reviewed. A list is provided in Annex 2 to this report.

B. Action proposed to the Board: Commend the 75 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.

15. 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 five entities should be considered for deferral of the decision on its review to the 156th session of the Board in January 2025.

16. **Alliance for Health Promotion.** Organizational and staffing changes within the entity have affected the ability of the Secretariat to conduct the triennial review. A deferral of the review would allow for the development of a substantial joint plan for collaboration

17. **International Society for Environmental Epidemiology, Inc.** Changes in staffing and technical areas of work have affected the ability of the entity and the Secretariat to develop a comprehensive joint plan for collaboration.

18. **International Solid Waste Association.** Due to additional demands and new priorities faced by WHO, additional time is required to develop a meaningful joint plan for collaboration.

19. **March of Dimes, Inc.** The assessment of technical engagement with the entity revealed a gap in the collaboration with WHO, and a lack of resources for sustaining some activities. The entity needed more time to explore the development of a joint comprehensive plan.

20. **World Federation of Hydrotherapy and Climatotherapy.** Unexpected changes to key staff members of the entity have affected the development of a new joint plan for collaboration.

¹ Framework of Engagement with Non-State Actors, paragraph 66.

² Decision EB152(19) (2023) deferred the decision on the review of one non-State actor until the 154th session of the Board. The collaboration plan of this entity concerned covers the period 2024–2025.

³ Collaboration plans are available in the WHO Register of non-State actors (<https://publicspace.who.int/sites/GEM/default.aspx#>, accessed 2 November 2023).

C. Action proposed to the Board: Consider the deferral¹ of the decision on the review of the Alliance for Health Promotion, the International Society for Environmental Epidemiology, Inc., the International Solid Waste Association, March of Dimes, Inc. and the World Federation of Hydrotherapy and Climatotherapy to the 156th session of the Board.

21. Based on the review undertaken, the Secretariat proposes that official relations with one entity should be discontinued.

22. **International Network for Cancer Treatment and Research.** The Secretariat has been informed that the entity will terminate its operations, which may lead to its dissolution. Therefore, it has been agreed with the entity that the renewal of official relations will not be pursued.

D. Action proposed to the Board: Consider discontinuing official relations with the International Network for Cancer Treatment and Research.

UPDATES ON NON-STATE ACTORS IN OFFICIAL RELATIONS

23. **Framework Convention Alliance for Tobacco Control**, which has recently relocated its headquarters to Ottawa, has notified the Secretariat that it has changed its name to the Global Alliance for Tobacco Control. The entity has submitted the corresponding evidence and documentation. The Secretariat will proceed to change the name in its records.

ACTION BY THE EXECUTIVE BOARD

24. 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,²

(1) Decided:

(a) to admit into official relations with WHO the following non-State actors: Rare Diseases International and The Center for Reproductive Rights, Inc.;

(b) to discontinue official relations with the International Network for Cancer Treatment and Research;

(2) Noted with appreciation the collaboration with WHO of the non-State actors listed in Annex 2 to document EB154/37, commended their continuing contribution to the work of WHO, and decided to renew them in official relations with WHO;

¹ 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 156th session of the Board in January 2025.

² Document EB154/37.

(3) Further noted that the plans for collaboration with the Alliance for Health Promotion, the International Society for Environmental Epidemiology, Inc., the International Solid Waste Association, March of Dimes, Inc. and the World Federation of Hydrotherapy and Climatotherapy have yet to be agreed, and decided to defer the review of relations with these entities until the 156th session of the Board in January 2025, 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

Rare Diseases International

1. Rare Diseases International is a nongovernmental organization legally registered in France in 2018. The entity advocates for persons living with a rare disease and the recognition of rare diseases as a global policy priority. The mission of Rare Diseases International is to provide a strong common voice for people living with a rare disease and their families around the world.

2. The entity is a member-based organization with over 88 member organizations in over 150 countries, governed by a Council of Directors with experience in rare diseases. Its sources of funding are composed of grants and donations from nongovernmental organizations, private sector entities, philanthropic foundations, and membership fees.

Activities carried out with WHO during the period 2021–2023

3. Rare Diseases International has provided technical input and support to WHO's work on rare diseases; it also advocates for equitable access to health services for persons living with a rare disease. In addition, the entity provided comprehensive research to support WHO's activities in improving health services for persons living with a rare disease.

4. The entity engaged with WHO on health systems strengthening by increasing awareness on rare diseases and their visibility, identifying needs of the global rare disease community, and mapping available technical resources in rare diseases. The entity also gathered and provided technical input for WHO's consideration to advance its work on the WHO International Classification of Diseases, Essential Medicines List, and Essential Diagnostics List, as well as for improving recognition and codification of rare disease in health systems and access to medicines for rare diseases.

Planned collaborative activities with WHO for the period 2024–2026

5. The three-year plan for collaboration supports WHO's work towards fulfilling the goals and objectives set in the first strategic priority, One billion more people benefiting from universal health coverage, specifically for people living with a rare disease. Planned collaborative activities include the provision of technical input, capacity-building, and dissemination of WHO recommendations and public health messages, in addition to advocacy for strengthening knowledge globally on rare diseases.

6. The entity will also support WHO in its work: to strengthen evidence, knowledge and technical content in order to increase access to essential medicines and diagnostics for people living with rare diseases; to facilitate implementation of outcomes contained in the General Programme of Work for improving access to quality essential health services; and to improve essential medicines, vaccines, diagnostics and devices for primary health care.

The Center for Reproductive Rights, Inc.

7. The Center for Reproductive Rights, Inc. is a nongovernmental organization established in 1992 and based in the United States of America with a presence in the African Region, the Region of the Americas and the European Region. The entity seeks to advance reproductive rights as fundamental human rights at global level, by promoting public awareness of laws and policies affecting human health and reproduction, and following up on the treatment of reproductive rights in different parts of the world.

8. The entity is governed by a board of directors comprised primarily of members with a background in nongovernmental organizations, academic institutions and private sector entities. Its sources of funding include contributions from individuals, governments, intergovernmental organizations, philanthropic foundations, and private sector entities.

Activities carried out with WHO during the period 2021–2023

9. The Center for Reproductive Rights, Inc. has been advancing WHO's work on reproductive health and rights by advocating for legal progress at national and international levels on related topics, in alignment with WHO's recommendations, standards and public health messages.

10. The entity has also supported the dissemination and implementation of WHO technical guidance on sexual and reproductive health, and used these resources in advocacy materials addressed to different audiences at global, regional and national levels. It has also provided technical input for WHO's consideration on different subjects, including on the latter's research agenda, and on access to sexual and reproductive health in humanitarian and emergency settings.

Planned collaborative activities with WHO for the period 2024–2026

11. The three-year plan for collaboration builds on previous collaboration and will continue to support WHO's work on promoting and disseminating WHO guidance, statements, tools and strategies on sexual and reproductive health and human rights, as and when appropriate, at global, regional and national levels.

12. The entity will continue to support WHO's technical work on advancing sexual and reproductive health and rights in humanitarian and emergency settings, and provide technical input for WHO's consideration to inform efforts to strengthen research capacity on the social and other determinants of sexual and reproductive health.

ANNEX 2

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

1. Association Africaine des Centrales d'Achats de Médicaments Essentiels
2. Caritas Internationalis
3. CBM Christoffel Blindenmission Christian Blind Mission e.V.
4. Childhood Cancer International
5. CropLife International
6. European Society for Medical Oncology
7. FDI Fédération Dentaire Internationale
8. Fondation Botnar
9. Global Diagnostic Imaging Healthcare IT and Radiation Therapy Trade Association
10. Global Medical Technology Alliance
11. Health Technology Assessment international
12. Helen Keller International
13. Humatem
14. International Agency for the Prevention of Blindness
15. International AIDS Society
16. International Air Transport Association
17. International Association for Dental Research, Inc.
18. International Association for Hospice and Palliative Care, Inc.
19. International Association for the Study of Pain
20. International Association of Communication Sciences and Disorders
21. International Clearinghouse for Birth Defects Surveillance and Research
22. International Commission on Non-ionizing Radiation Protection
23. International Commission on Radiological Protection
24. International Council of Ophthalmology
25. International Diabetes Federation
26. International Epidemiological Association
27. International Federation of Oto-Rhino-Laryngological Societies
28. International Medical Corps
29. International Network on Children's Health, Environment and Safety
30. International Organization for Medical Physics
31. International Rescue Committee, Inc.
32. International Society of Audiology
33. International Society of Doctors for the Environment
34. International Society of Nephrology
35. International Society of Physical and Rehabilitation Medicine
36. International Union against Sexually Transmitted Infections

37. International Union Against Tuberculosis and Lung Disease
38. International Union of Immunological Societies
39. International Union of Toxicology
40. KNCV Tuberculosis Foundation
41. Médecins du Monde
42. MMV Medicines for Malaria Venture
43. Movendi International
44. Organisation pour la Prévention de la Cécité
45. Osteopathic International Alliance
46. PATH
47. Public Services International
48. RAD-AID International, Inc.
49. Rotary International
50. Stichting Global Network of People Living with HIV/AIDS
51. Thalassaemia International Federation
52. The Bloomberg Family Foundation, Inc.
53. The Global Alliance for Rabies Control, Inc.
54. The International Association of Lions Clubs
55. The International Federation of Anti-Leprosy Associations, ILEP
56. The International Leprosy Association
57. The International Society of Paediatric Oncology
58. The Royal Commonwealth Society for the Blind
59. The Worldwide Hospice Palliative Care Alliance
60. Tropical Health and Education Trust
61. Union for International Cancer Control
62. United States Pharmacopeial Convention
63. Vital Strategies, Inc.
64. WaterAid international
65. Wellcome Trust
66. World Blind Union
67. World Council of Optometry
68. World Federation of Chinese Medicine Societies
69. World Federation of Hemophilia
70. World Heart Federation
71. World Hepatitis Alliance
72. World Hypertension League
73. World Plumbing Council
74. World Stroke Organization
75. World Veterinary Association

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