
Agreements with intergovernmental organizations

Agreement between the World Health Organization and the Organisation for Economic Co-operation and Development

Report by the Director-General

1. Discussions have taken place between the Secretariats of the World Health Organization (WHO) and the Organisation for Economic Co-operation and Development (OECD) on formalizing and enhancing cooperation between the two organizations.
2. OECD is an intergovernmental organization based in Paris which works on establishing evidence-based international standards and finding solutions to a range of social, economic and environmental challenges. It provides a unique forum and knowledge hub for data and analysis, exchange of experiences, best practice sharing, advice on public policies, and the development of standards. There are currently 38 OECD Member countries, with the European Union participating in the work of OECD, including through attendance at meetings of the OECD Council, pursuant to Supplementary Protocol No. 1 to the Convention on the OECD.
3. The objectives of OECD are: to achieve the highest sustainable economic growth and employment; raise standards of living; maintain financial stability; contribute to sound economic expansion in both Members and non-Members; and contribute to the expansion of world trade on a multilateral, non-discriminatory basis in accordance with international obligations. In line with its broad mandate and focus on economic issues, OECD's work covers almost all areas of government.
4. To achieve the aim of the Organisation, the OECD Council has set up a wide range of substantive committees covering almost all areas of government. Among these committees, the Health Committee is the most relevant to the work of WHO. The overarching objective of the Health Committee is to foster improvements in the performance of Members and Partners health and long-term care systems in the following key areas: (i) financial sustainability, access and efficiency of their health and long-term care systems; (ii) better public health policies and health prevention and promotion initiatives; and (iii) the provision of high-quality, people-centred health and long-term care to all.
5. In 2016, the OECD Council granted observer status to WHO in the Health Committee and all its subsidiary bodies. It grants WHO a standing right to attend all meetings (except those on confidential items) and to access all its documents (except those classified as confidential).
6. In addition, WHO has observer status in the Chemicals and Biotechnology Committee and is in the process of obtaining observer status for the Development Assistance Committee. This Committee plays an important role as it defines, among other things, which foreign aid expenses can be counted towards the official development assistance (ODA) of a country. A significant part of the contributions

to WHO's budget are considered to be ODA. Furthermore, WHO is invited on an ad hoc basis to participate in other OECD committees and their subsidiary bodies when discussing items of relevance to the WHO mandate.

7. In January 2004, the WHO was invited to the Ministerial Council Meeting, which was held back-to-back with a meeting of the Health Committee at the ministerial level. Future invitations could be considered depending on the theme of the Ministerial Council Meeting.

8. The possibility exists for WHO to be invited to further meetings of OECD bodies on an ad hoc basis, depending on the subject matter.

9. The discussions between the two organizations have resulted in the drawing up of a draft agreement that would formalize, better define and strengthen cooperation between WHO and OECD on matters pertaining to the achievement of internationally agreed development goals, notably: the United Nations Sustainable Development Goals (SDGs) and the SDG target on universal health coverage, health systems performance, fiscal sustainability, alignment of financing flows, and health workforce issues; emerging issues impacting health systems; global public health; social, economic and environmental determinants of health; and any other relevant matters.

10. The text of the draft agreement is contained in the Annex to this report. The proposed draft agreement is submitted to the World Health Assembly under the terms of Article 70 of the Constitution of the World Health Organization. In accordance with Article 7 of the draft agreement, the agreement would enter into force on the date of the signature by the Director-General of the World Health Organization and the Secretary-General of the Organisation for Economic Co-operation and Development, subject to its approval by the World Health Assembly.

ACTION BY THE HEALTH ASSEMBLY

11. The Health Assembly is invited to consider for adoption the following draft resolution:

The Seventy-seventh World Health Assembly,

Having considered the report on the proposed agreement between the World Health Organization and the Organisation for Economic Co-operation and Development;¹

Considering also Article 70 of the Constitution of the World Health Organization,

APPROVES the proposed agreement between the Organisation for Economic Co-operation and Development and the World Health Organization.

¹ Document A77/30.

ANNEX

ORIGINAL VERSION: ENGLISH

AGREEMENT BETWEEN THE WORLD HEALTH ORGANIZATION AND THE ORGANISATION FOR ECONOMIC CO-OPERATION AND DEVELOPMENT

The World Health Organization (hereafter “WHO”); and

The Organisation for Economic Co-operation and Development (hereafter “OECD”);

Hereafter individually and collectively termed “the Party” and “the Parties”;

Considering that the objective of WHO is the attainment by all peoples of the highest possible level of health, and to this end WHO is the directing and coordinating authority on international health work;

Considering that OECD is an international organization that works to build better policies for better lives through its wide range of OECD substantive committees covering all areas of government, including in particular the Health Committee, which has the overarching objective of fostering improvements in the performance of OECD Members and Partners health and long-term care systems;

Recalling the 2005 Framework for Co-operation between WHO and OECD, concluded on 8 November 2005, which replaced the 1999 Framework for Co-operation, and which established modalities for the joint planning and coordination of their work in global public health;

Recalling the decision of the OECD Council [C(2016)53] to invite the WHO to participate as an observer in the Health Committee and its subsidiary bodies, in accordance with Article 12(c) of the Convention on the OECD and Rule 9(a) of the Rules of Procedure of the OECD;

Desiring to coordinate their efforts within their respective mandates and in accordance with the Constitution of WHO and the Convention on the OECD;

Wishing to strengthen their cooperation on the basis of regular consultations,

Have agreed as follows:

Article 1**Object and areas of cooperation**

1. The object of this Agreement is to facilitate and reinforce cooperation and collaboration between WHO and OECD on all questions in the area of health that relate to the activities and commitments of the Parties.

2. Within the scope of their respective mandates, programmes of work and budget, the Parties agree to a general strengthening of their cooperation, specifically as regards issues that underpin progress towards the internationally agreed development goals, notably: the United Nations Sustainable Development Goals (SDGs) and, in particular, the SDG target on universal health coverage, including

health systems performance, fiscal sustainability, alignment of financing flows, and health workforce issues; emerging issues impacting health systems; global public health; social, economic and environmental determinants of health; joint support to multilateral fora on health-related issues; and any other area of common interest.

Article 2

Reciprocal representation

1. On the basis of reciprocity, OECD is invited to represent itself at sessions of the World Health Assembly and the Executive Board in accordance with the rules and decision adopted by these bodies and, as appropriate, any other meetings held under the auspices of WHO in the deliberations of which OECD could participate, without the right to vote, on agenda items of concern to it.
2. In line with the relevant rules and decisions of the OECD Council, WHO is an observer in the Health Committee and its subsidiary bodies [C(2016)53], as well as in the Chemicals and Biotechnology Committee [C(2020)60], which allows its participation in relevant OECD meetings. In line with OECD rules, WHO may also be invited to participate in (either fully or in parts of) the meetings of other OECD bodies.

Article 3

Disclosure and sharing of information

1. Each Party may disclose to the public this Agreement and information with respect to activities carried out under this Agreement in accordance with the Party's relevant policies.
2. The Parties agree to exchange, by whatever means, information concerning their activities which they deem appropriate, subject to their existing rules and policies relating to the disclosure of classified information and any other related obligations. Each Party will protect classified information of the other Party, per the Party's relevant rules and policies.

Article 4

Responsibility

Each Party will be responsible for its activities and for its staff members, including for their acts and omissions. In particular, a Party will not be liable for any damage or injury caused by the other Party or that other Party's staff.

Article 5

Name, emblem, marks and logos

Neither Party may use the emblem, marks or logos of the other Party without the prior written consent of the other Party, nor use the name of the other Party in a way that implies endorsement or authorship without the prior written consent of the other Party.

Article 6

Privileges and immunities

No provision of this Agreement shall be interpreted or considered as a renunciation, limitation, waiver or modification of the privileges and immunities enjoyed by either Party.

Article 7

Entry into force, amendment and denunciation

1. This Agreement is valid from the date of its signature by the Director-General of WHO and the Secretary-General of OECD, subject to approval by the World Health Assembly.
2. This Agreement may be amended at any time by mutual written consent of the Parties.
3. Either Party may denounce this Agreement at any time by serving written notice on the other Party of its intent to do so six (6) months in advance. The denunciation of the Agreement shall not prejudice any activities being conducted under the terms of the Agreement at the time of said denunciation.

Article 8

Settlement of differences

Any difference, dispute or litigation arising from the interpretation or application of this Agreement shall be settled amicably through negotiation between the Parties. If attempted negotiation yields no result, either Party may request that the difference be submitted for arbitration in accordance with the currently applicable Arbitration Rules of the United Nations Commission on International Trade Law.

IN WITNESS WHEREOF, this Agreement is done and signed at Geneva on [.....], in two copies, in the English language.

For the Organisation for Economic
Co-operation and Development

For the World Health Organization

Secretary-General
Mathias Cormann

Director-General
Dr Tedros Adhanom Ghebreyesus

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