Modalities of engagement for relevant stakeholders

These modalities of engagement for relevant stakeholders in the work of the Intergovernmental Negotiating Body to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response (INB) are established per decision SSA2(5) (2021), which recognizes the importance of broad engagement, in line with the relevant rules and decisions of the World Health Assembly, in the INB’s work in order to ensure a successful outcome. They are intended to be a “living document” which may be updated by the INB, as it may decide. These modalities, and any updates to them, will be made publicly available in an accessible web-based format and communicated to Member States.

In that regard, at its second meeting, the INB approved the list of entities proposed by Member States for inclusion in Annex E of these modalities, noting the importance of ensuring transparency, inclusivity, geographical representation and diversity among the proposed entities, and requested the Secretariat to cross-check the approved entities in Annex E to avoid repeating the entities already approved under Annexes A to D and revise these modalities accordingly, on the understanding that these modalities continue to be a living document with further possibilities for updates as deemed appropriate by the INB. The present version of the modalities reflects that outcome.

1 The approach set forth in this document is without prejudice to the engagement by Member States with relevant stakeholders, and at the regional level through the regional committees. Coherence of the approach set forth in this document with United Nations processes will be pursued wherever possible.
A/INB/2/4

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Invited to attend open sessions of meetings of the INB, and to speak at those open sessions at the co-chairs’ discretion</th>
<th>Invited to attend meetings of INB subgroups, and to speak at those meetings at the subgroup chair’s discretion</th>
<th>Invited to provide inputs to the INB (via an electronic portal, an open “hearing”, and/or a segment of a session)</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Nations and other intergovernmental organizations in effective relations with WHO (Annex A)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Observers (Annex B)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Non-State actors in official relations with WHO (Annex C)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Other stakeholders, as decided by the INB</td>
<td>Yes, for those entities listed in Annex D.</td>
<td>Yes, for those entities listed in Annex D.</td>
<td>Yes, for those entities listed in either Annex D or Annex E.</td>
</tr>
</tbody>
</table>

Annex A: United Nations and other intergovernmental organizations in effective relations with WHO

1. United Nations
2. African Development Bank and African Development Fund
3. Commission of the African Union
4. Food and Agriculture Organization of the United Nations
5. Islamic Development Bank
6. International Fund for Agricultural Development
7. International Labour Organization
8. League of Arab States
9. International Organisation of la Francophonie
10. World Organisation for Animal Health
11. International Atomic Energy Agency
12. Pan American Health Organization
13. International Committee of Military Medicine

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1 The speaking time of a stakeholder may be limited by the chair of the meeting, unless otherwise decided by the INB. Written inputs from stakeholders are to be encouraged.

2 With the exception of drafting groups, unless otherwise agreed by the INB, per paragraph 20 of the INB’s method of work (document A/INB/1/3 Rev.1).

3 Previous intergovernmental working groups have engaged with one or more categories of stakeholders using various modalities, including: (1) inviting stakeholders to observe working group meetings; (2) setting aside time within one or more working group meeting(s) for stakeholders to intervene; (3) holding separate meetings or “hearings”, where stakeholders are invited to provide inputs (in some instances, such meetings were followed by closed sessions of the working group to discuss the inputs provided); and (4) extending the opportunity to participate in electronic consultations to stakeholders.
14. South Centre
15. United Nations Educational, Scientific and Cultural Organization
16. United Nations Industrial Development Organization
17. Universal Postal Union
18. World Intellectual Property Organization
19. World Meteorological Organization

Annex B: Observers
1. Holy See
2. Palestine
3. Gavi, the Vaccine Alliance
4. Order of Malta
5. International Committee of the Red Cross
6. International Federation of Red Cross and Red Crescent Societies
7. Inter-Parliamentary Union
8. Global Fund to Fight AIDS, Tuberculosis and Malaria

Annex C: Non-State actors in official relations with WHO
The list of entities in official relations with WHO is available on the WHO website at: https://www.who.int/about/collaboration/non-state-actors/non-state-actors-in-official-relations-with-who

Annex D: Other stakeholders, as decided by the INB, invited to (1) attend open sessions of meetings of the INB, (2) speak at open sessions of meetings of the INB, at the co-chairs’ discretion, and (3) provide inputs to the INB (via an electronic portal, an open “hearing”, and/or a segment of a session)
1. Access to COVID-19 Tools (ACT) Accelerator
2. Africa CDC
3. Africa Union’s COVID-19 Africa Vaccine Acquisition Task Team (AVATT)
4. Asian Development Bank
5. Caribbean Public Health Agency
6. Coalition for Epidemic Preparedness Innovations (CEPI)
7. Commission of the African Union
8. Commonwealth Secretariat
9. Council of Europe
10. COVID-19 Technology Access Pool (C-TAP)
11. Economic Cooperation Organization
12. European Bank for Reconstruction and Development
13. Health Ministers’ Council for Gulf Cooperation Council States
14. Inter-American Development Bank
15. International Air Transport Association
16. International Association of National Public Health Institutes (IANPHI)
17. International Civil Aviation Organization
18. International Maritime Organization
19. International Monetary Fund
20. International Organization for Migration
21. International Shipping Federation
22. Joint United Nations Programme on HIV/AIDS
23. Medicines Patent Pool
24. Médecins Sans Frontières International
27. Organization of American States
28. Organisation for Economic Co-operation and Development
29. Organisation of Islamic Cooperation
30. Pacific Islands Forum
31. Regional economic organizations
32. Unitaid
33. United Nations Children’s Fund
34. United Nations Development Programme
35. United Nations Entity for Gender Equality and the Empowerment of Women
36. United Nations Environment Programme, including the Convention on Biological Diversity
37. United Nations Office for the Coordination of Humanitarian Affairs
38. United Nations Population Fund
39. United Nations Relief and Works Agency for Palestine Refugees in the Near East
40. United Nations Research Institute for Social Development
41. United Nations Office for Disaster Risk Reduction
42. World Bank Group
43. World Food Programme
44. World Trade Organization

The list may be updated by the INB, if so decided.

**Annex E:** Other stakeholders, as decided by the INB, invited to provide inputs to the INB (via an electronic portal, an open “hearing”, and/or a segment of a session)

1. ACT-A CSO Platform
2. Addis Ababa University
3. AdvaMed
4. Africa Health Business
5. African Medical Research Council
6. Armauer Hansen Research Institute
7. Association of Official Laboratories of Brazil
8. Biotechnology Innovation Organization
9. Botswana Council of Non-Governmental Organisation
10. Botswana Institute for Development Policy Analysis
11. Brazilian Health Regulatory Agency
12. Caribbean Community
13. Centre for Education in Collective Health, Faculty of Medicine, Federal University of Minas Gerais
14. Centre for Global Health Research, Seoul National University
15. Centre for Global Law and Strategy, Law and Technology Institute, Renmin University of China
16. Centre for Global Child Health, Hospital for Sick Children (SickKids)
17. Centre for International Studies
18. Central Research Institute of Epidemiology of Rospotrebnadzor
19. China CDC
20. CONACYT (National Council of Science and Technology)
21. Conceição Hospital Group
22. Conservation International
23. Consortium of Universities for Global Health
24. East Africa Community
25. East Central and Southern Africa Health Community
26. Ethiopian Airlines
27. Ethiopian Public Health Association
28. Ethiopian Public Health Institute
29. Federal Research Institute for Health Organization and Informatics of the Ministry of Health of the Russian Federation
30. Oswaldo Cruz Foundation
31. Frontline AIDS
32. Geneva Global Health Hub
33. GHIT Fund
34. Global Alliance of Foundations
35. Global Health Technologies Coalition
36. Global Strategy Lab
37. GNP+
38. Graduate Institute of International and Development Studies, Geneva
39. Health Sector High Level Consultative Council (Business Botswana)
40. HPV Global action
41. IICS (Health Sciences Research Institute)
42. Institute of Public Health, University of Porto
43. International Chamber of Commerce
44. International Network for Antimicrobial Resistance Social Science
45. Japan CSO Network on Global Health
46. Institute of Tropical Medicine
47. Butantan Institute
48. Evandro Chagas Institute
49. Intergovernmental Authority on Development
50. Medicines Law and Policy
51. Metabiota
52. Microbe of Rospotrebnadzor
53. Namibia University of Science and Technology
54. National Association of Manufacturers/Engaging America’s Global Leadership Coalition
55. National Center for Disease Control (India)
56. National Institute of Communicable Disease (South Africa)
57. National Institute of Virology (India)
58. National Medical Research Centre for Phthisiopulmonology and Infectious Diseases of the Ministry of Health of the Russian Federation
59. National School of Public Health, New University Lisbon
60. One Health High Level Expert Panel
61. Open Philanthropy
62. Open Society Foundations
63. Pandemic Action Network
64. Panel for a Global Public Health Convention
65. Pax Sapien
66. PIP Framework Advisory Group
67. Plan International Canada
68. Portuguese Non-Governmental Development Organizations’ Platform
69. Professor Ilona Kickbusch, PhD
70. Professor Yemane Berhane – National Scientific Adviser to the Ministry of Health (Ethiopia)
71. Public Citizen
72. Resolve To Save Lives
73. Right to Health Action
74. Skoll Foundation
75. Smorodintsev Research Institute of Influenza of the Ministry of Health of the Russian Federation
76. Solidarity for Vaccine Equity Study Team
77. STOPAIDS Coalition
78. South African Health Products Regulatory Authority
79. Southern African Development Community
80. Tata Institute of Fundamental Research
81. The Council for Scientific and Industrial Research
82. The Smolensk State Medical University of the Ministry of Health of the Russian Federation
83. Third World Network
84. UHC 2030
85. UHC 2030 Civil Society Engagement Mechanism
86. UNITE Global Parliamentarians Network to End Infectious Diseases
87. University of Botswana
88. University of Namibia
89. University of the West Indies Mona Campus
90. Vector of Rospotrebnadzor
91. VINEx
92. Wildlife Conservation Society
93. WHO Collaborating Centre for Evidence-based Medicine
94. WHO Collaborating Centre for Health Law and Bioethics
95. WHO Collaborating Centre for Health Promotion in Hospitals and Health Care
96. WHO Collaborating Centre for Laboratory Strengthening and Diagnostic Technology Evaluation
97. WHO Collaborating Centre for National and Global Health Law
98. WHO Collaborating Centre for Nursing Research and Education
99. WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies
100. WHO Collaborating Centre for Training and Research in Mental Health
101. WHO Technical Advisory Group on Behavioural Insights and Sciences for Health
102. Wild Life Institute of India