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 seventh meeting, the INB approved the additional list of entities proposed by Member States for inclusion in Annex E of these modalities 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: it updates the version contained in document A/INB/6/6.2

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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.

2 Earlier versions can be found in documents A/INB/5/4, A/INB/4/5, A/INB/3/5, A/INB/2/4; an initial, proposed list was contained in document A/INB/1/7 Rev.1.
Stakeholder | Invited to attend open sessions of meetings of the INB, and to speak\(^1\) at those open sessions at the co-chairs’ discretion | Invited to attend meetings of INB subgroups,\(^2\) and to speak\(^2\) at those meetings at the subgroup chair’s discretion | Invited to provide inputs to the INB (via an electronic portal, an open “hearing”, and/or a segment of a session)\(^3\)  
--- | --- | --- | ---  
United Nations and other intergovernmental organizations in effective relations with WHO (Annex A) | Yes | Yes | Yes  
Observers (Annex B) | Yes | Yes | Yes  
Non-State actors in official relations with WHO (Annex C) | Yes | Yes | Yes  
Other stakeholders, as decided by the INB | Yes, for those entities listed in Annex D. | Yes, for those entities listed in Annex D. | Yes, for those entities listed in either Annex D or Annex E.  

**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  

\(1\) 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
20. International Development Law 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/publications/m/item/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. Action for Animal Health
3. Addis Ababa University
4. AdvaMed
5. Africa Health Business
6. African Medical Research Council
7. Armauer Hansen Research Institute
8. Association of Official Laboratories of Brazil
9. Biotechnology Innovation Organization
10. Born Free Foundation
11. Botswana Council of Non-Governmental Organisation
12. Botswana Institute for Development Policy Analysis
13. Brazilian Health Regulatory Agency
14. Butantan Institute
15. Caribbean Community
16. Centre for Education in Collective Health, Faculty of Medicine, Federal University of Minas Gerais
17. Centre for Global Health Research, Seoul National University
18. Centre for Global Law and Strategy, Law and Technology Institute, Renmin University of China
19. Centre for Global Child Health, Hospital for Sick Children (SickKids)
20. Centre for International Studies
21. Central Research Institute of Epidemiology of Rospotrebnadzor
22. China CDC
23. CONACYT (National Council of Science and Technology)
24. Conceição Hospital Group
25. Conservation International
26. Consortium of Universities for Global Health
27. Dahdaleh Institute for Global Health Research, York University (Canada)
28. Disability Rights Fund
29. East Africa Community
30. East Central and Southern Africa Health Community
31. Ethiopian Airlines
32. Ethiopian Public Health Association
33. Ethiopian Public Health Institute
34. Evandro Chagas Institute
35. Federal Research Institute for Health Organization and Informatics of the Ministry of Health of the Russian Federation
36. FOUR PAWS (VIER PFOTEN International)
37. Frontline AIDS
38. Geneva Global Health Hub
39. GHIT Fund
40. Global Alliance of Foundations
41. Global Cities Hub
42. Global Health Technologies Coalition
43. Global Strategy Lab
44. GNP+
45. Graduate Institute of International and Development Studies, Geneva
46. Health Sector High Level Consultative Council (Business Botswana)
47. Helen Clark, former Co-Chair of the Independent Panel for Pandemic Preparedness and Response
48. HPV Global action
49. IICS (Health Sciences Research Institute)
50. INNOVARTE
51. Institute of Public Health, University of Porto
52. Institute of Tropical Medicine
53. Intergovernmental Authority on Development
54. International Centre for Antimicrobial Resistance Solutions (ICARS)
55. International Chamber of Commerce
56. International Coalition for Animal Protection
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<td>57</td>
<td>International Disability Alliance</td>
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<td>International Network for Antimicrobial Resistance Social Science</td>
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<td>59</td>
<td>Japan CSO Network on Global Health</td>
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<td>Johns Hopkins Center for Health Security</td>
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<td>Microbe of Rospotrebnadzor</td>
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<td>Namibia University of Science and Technology</td>
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<td>65</td>
<td>National Association of Manufacturers/Engaging America’s Global Leadership Coalition</td>
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<td>National Center for Disease Control (India)</td>
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<td>67</td>
<td>National Institute of Communicable Disease (South Africa)</td>
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<td>National Medical Research Centre for Phtisiopulmonology and Infectious Diseases of the Ministry of Health of the Russian Federation</td>
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<td>National School of Public Health, New University Lisbon</td>
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<td>Portuguese Non-Governmental Development Organizations’ Platform</td>
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<td>81</td>
<td>Professor Ilona Kickbusch, PhD</td>
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<td>82</td>
<td>Professor Yemane Berhane – National Scientific Adviser to the Ministry of Health (Ethiopia)</td>
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<td>Public Citizen</td>
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<td>Smorodintsev Research Institute of Influenza of the Ministry of Health of the Russian Federation</td>
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<td>Solidarity for Vaccine Equity Study Team</td>
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<td>South African Health Products Regulatory Authority</td>
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<td>UHC 2030 Civil Society Engagement Mechanism</td>
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<td>UNITE Parliamentarians Network for Global Health</td>
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100. University of Botswana
101. University of Namibia
102. University of the West Indies Mona Campus
103. Vector of Rospotrebnadzor
104. VINEx
105. Wildlife Conservation Society
106. WHO Collaborating Centre for Evidence-based Medicine
107. WHO Collaborating Centre for Health Law and Bioethics
108. WHO Collaborating Centre for Health Promotion in Hospitals and Health Care
109. WHO Collaborating Centre for Laboratory Strengthening and Diagnostic Technology Evaluation
110. WHO Collaborating Centre for National and Global Health Law
111. WHO Collaborating Centre for Nursing Research and Education
112. WHO Collaborating Centre for Pharmaceutical Pricing and Reimbursement Policies
113. WHO Collaborating Centre for Training and Research in Mental Health
114. WHO Technical Advisory Group on Behavioural Insights and Sciences for Health
115. Wild Life Institute of India
116. World Wide Fund for Nature
117. Zoological Society of London