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Organisation mondiale de la Santé

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Review of nongovernmental organizations in official relations with WHO

This document is presented in accordance with paragraph 4.6 of the Principles Governing Relations between WHO and Nongovernmental Organizations.¹ It reviews collaboration during the period 1993–1995 between WHO and 44 nongovernmental organizations in official relations with WHO and, in accordance with decision EB95(13) it also contains reports on efforts to revitalize contacts and to develop work plans with an additional two organizations. In total 46 organizations will be reviewed.

The Board, through its Standing Committee on Nongovernmental Organizations, is invited to decide on the maintenance or otherwise of official relations with the 46 organizations referred to in this document.

1. The WHO classified list of programmes is used to facilitate selection of the organizations to be reviewed. As the reporting period covers 1993 to 1995, the list contained in the Eighth General Programme of Work has been applied. Organizations to be reviewed fall under programme 10 (Protection and promotion of mental health), programme 11 (Promotion of environmental health) and programme 12 (Diagnostic, therapeutic and rehabilitative technology), aside from those organizations concerned with radiological technology which will be reviewed by the Executive Board at its ninety-ninth session. A complete list of nongovernmental organizations in official relations is contained in Annex 2.
2. The information in this document is based on reports and comments from the organizations referred to in this document, and the officers responsible for collaboration at headquarters and the regional offices.
3. Details of the activities carried out during the past three years with 41 of the organizations to be reviewed are set out in Annex 1. Details of the activities planned for the future will be provided on request. The following paragraphs indicate the nature of collaboration with these organizations and the WHO activities which were supported. A recommendation for the consideration of the Board through the Standing Committee is set out in paragraph 7.

Programme 10 (Protection and promotion of mental health)

4. The activities and exchanges between WHO and organizations numbered 1 to 14 in Annex 1 contributed, *inter alia*, to several WHO initiatives: for example, support to people disabled by mental illness,

¹ WHO Basic Documents, 40th edition, pp. 74-79.

and that aimed at increasing public and professional awareness of the importance of neurological disorders. The promotion of mental health through dissemination of information and advocacy on behalf of people with mental illness was also an important component of the activities. Exchange of information relating to substance abuse supported WHO's efforts in this field. Other activities were more closely associated with WHO's role in research, for example, in the investigation of parasuicide and the search for biological markers for alcohol use and dependence.

Programme 11 (Promotion of environmental health)

5. The activities and exchanges between WHO and organizations numbered 15 to 26, 29 and 37 in Annex 1 contributed mainly to WHO's promotion of environmental health as related to definition of standards and identification of improved methods for the management of human and medical waste, water supplies, chemicals and food safety. Development of human resources through training at national and regional levels was also an important component of joint activities, in particular with those organizations concerned with chemical and food safety.

Programme 12 (Diagnostic, therapeutic and rehabilitative technology)

6. Activities and exchanges between WHO and organizations numbered 27 to 35 in Annex 1 contributed to WHO activities to improve quality of care through better clinical performance, and the design, selection and use of reliable equipment for laboratories and hospitals at district and peripheral levels in developing countries. They also included support for training programmes in maintenance. Other forms of collaboration focused on education and training in blood safety and development of WHO's international external quality assessment scheme in clinical chemistry relating to coagulation, haematology, bacteriology, immunology, parasitology and blood group serology. Certain organizations in this group also contributed to work relating to laboratory quality assurance and standardization. Another important field for collaboration both at country and international levels were activities relating to diagnosis and management of hereditary bleeding disorders.

7. Collaboration with organizations numbered 36 to 41 in Annex 1 contributed to such activities of WHO as facilitating the supply of safe and effective essential drugs and vaccines at the lowest possible cost, establishing specifications for pharmaceutical preparations, including herbal medicines, and revising and preparing such material as the WHO Model List of Essential Drugs, and *WHO model prescribing information*. Another important element was the support and contribution of the professional organizations to WHO's efforts to enhance the role of the pharmacist, for example, in assuring quality of medicines and in rational use of drugs.

Recommendation

Having examined the information provided, the Standing Committee may wish to draw to the attention of the Board the role being played by the above-mentioned organizations (numbered 1 to 41 in Annex 1) in the work of WHO, including in the regions and at national level, and commend them for their valuable support. In the light of this and in the expectation that such collaboration will continue, the Standing Committee may wish to recommend to the Board that official relations with these organizations should be maintained.

8. The following paragraphs report on the status of relations with five organizations, including the International Federation on Ageing and the International Union of Family Organizations which, by decision EB95(13) were maintained in official relations in order to elaborate plans for collaboration, and propose a number of recommendations.

INTERNATIONAL ASSOCIATION FOR CHILD AND ADOLESCENT PSYCHIATRY AND ALLIED PROFESSIONS

9. Proposed joint activities did not take place during the period under review and contact with the Association ceased. For the immediate future, it is not envisaged that WHO programme priorities will coincide in a manner conducive to collaborative activities.

Recommendation

In the light of the above, the Standing Committee may wish to recommend to the Board that official relations should be discontinued with the International Association for Child and Adolescent Psychiatry and Allied Professions.

JOINT COMMISSION ON INTERNATIONAL ASPECTS OF MENTAL RETARDATION

10. There were no joint activities during the period under review. However, exchange of information continued with the separate members of the Commission, namely, the International League of Societies for Persons with Mental Handicap and the International Association for the Scientific Study of Mental Deficiency. Taking this into consideration, and in view of the new structure of the Division of Mental Health and Prevention of Substance Abuse, collaboration would be more effectively facilitated with the two individual members of the Commission separately.

Recommendation

In the light of the above, the Standing Committee may wish to recommend to the Board that official relations should be maintained with the Commission for a period of one year so that separate work plans can be drawn up with the International League of Societies for Persons with Mental Handicap and the International Association for the Scientific Study of Mental Deficiency. After working out plans of collaboration, official relations would be discontinued with the Joint Commission on International Aspects of Mental Retardation, and the League and the Association would be admitted separately into official relations.

INTERNATIONAL COUNCIL FOR LABORATORY ANIMAL SCIENCE

11. As a result of a change in leadership and secretariat the Council was unable to provide information on its activities with WHO in the time provided. However, it appreciates its relations with WHO and wishes to maintain them. The WHO programme concerned with collaboration reported that during the period under review, previous years' activities were completed with issuance of a joint document entitled "Guidelines for breeding and care of laboratory animals". Contacts since then have diminished, though there remains an interest in collaboration.

Recommendation

In the light of the above, the Standing Committee may wish to recommend to the Board that the Council be maintained in official relations for a further year to permit definition of a work plan.

INTERNATIONAL FEDERATION ON AGEING

12. It was not possible to draw up a plan for collaboration for two reasons. Exchanges between the two parties did not take place until late in the year, as the post of Chief, Aging and health, was only taken up in May 1995, by which time the Federation was fully occupied with preparations for its annual meeting and biennial conference (October 1995); and constraints on financial and human resources require a strict prioritization of activities. The Federation proposed a meeting in February 1996 to discuss future relations, as its members view collaboration with WHO as an increasingly important aspect of its mandate. WHO considers the Federation an important partner, especially in view of its contributions leading up to and during the International Year of the Elderly, 1999.

Recommendation

In the light of the above information the Standing Committee may wish to recommend to the Board that the Federation should be maintained in official relations for a further year to explore possibilities for collaboration and to draw up a work plan.

INTERNATIONAL UNION OF FAMILY ORGANIZATIONS

13. During the year contact was reestablished with the Union and a work plan was prepared that will address the priority areas of health of young people, nutrition, maternal and child health, and the formulation of policies and programmes for family health through the activities of and collaboration with the Union's Commissions on Health and Nutrition, and Youth. The Union will promote WHO's policies and programmes in these areas through dissemination of policy and technical documents, and promotion of the position of WHO in its global and regional newsletters; it will also participate in WHO meetings. In its workshops and colloquium it will use WHO materials on meeting the nutritional needs of mothers, infants, children, young people and the elderly in the context of the family. It will make available to WHO a roster of experts and institutions involved in research and programmes emphasizing a holistic approach to family health and family capacity-building.

Recommendation

In the light of the above, the Standing Committee may wish to recommend to the Board that the Union should be maintained in official relations.

ANNEX 1

**SUMMARIES OF JOINT COLLABORATION DURING THE PERIOD 1993-1995
BETWEEN WHO AND NONGOVERNMENTAL ORGANIZATIONS SELECTED FOR
REVIEW BY THE EXECUTIVE BOARD AT ITS NINETY-SEVENTH SESSION,
GENEVA, 15-24 JANUARY 1996**

Programme 10 (Protection and promotion of mental health)**1. COMMONWEALTH ASSOCIATION FOR MENTAL HANDICAP AND DEVELOPMENTAL DISABILITIES**

During the period under review WHO participated in the preparations for and cosponsored the Association's international conference on understanding treatment and prevention of brain damage due to neurotrauma (Bangalore, India, 1994). The Association also participated in the Second World Conference on Injury Control, cosponsored by WHO (Atlanta, USA, 1993). WHO provided technical support for the Association's community-based safe-motherhood projects, and for those projects related to the stimulation of retarded children and children considered vulnerable to developmental delay.

2. INTERNATIONAL SOCIETY FOR THE STUDY OF BEHAVIOURAL DEVELOPMENT

The Society and WHO continued to exchange information and most recently collaborated on a workshop for the South Asian region on the development of culturally relevant intervention strategies to promote psychosocial development of children and youth in poverty (Chandigarh, India, 1995).

3. WORLD FEDERATION FOR MENTAL HEALTH

The Federation collaborated extensively in a number of WHO activities. For example, it took part in the work of the Regional Office for Europe's task force on mental health promotion and education; it served as the Chair of the WHO Working Group on Human Rights, in which capacity it participated and made interventions on mental health and illness in United Nations meetings on human rights; it participated in the WHO Task Force for the Development of a Project on Global Action for the Improvement of Mental Health Care; and took part in the annual meetings of the African Mental Health Action Group. It also contributed to WHO consultations on mental health legislation in Moscow, 1993, and in Tajikistan, 1994. Discussions took place with the Regional Office for the Americas on implementation of the Caracas Declaration, and the Federation participated in a workshop of the interamerican network on community health psychology in 1995. WHO cosponsored the Federation's World Mental Health Day observances in October of each year and its world congress, the most recent in Japan, 1993.

4. WORLD ASSOCIATION FOR PSYCHOSOCIAL REHABILITATION

In connection with a variety of ongoing activities with WHO the Association contributed to technical meetings and to preparation of several documents relating to the WHO initiative of support to people disabled by mental illness. It assisted in the development of, and is currently field testing, a number of draft "instruments" intended to serve as measuring tools to assess mental health policy and mental health services as part of WHO's activity to develop quality assurance measures in mental health. The Association is a regular participant in meetings of the global coordinating group for WHO's programme on the protection and

promotion of mental health. As a member of a related WHO task force, it also participated in the formulation of recommendations to WHO on a global strategy for the improvement of mental health care. At regional level the Association participates in the coordinating committee of the mental health programme in the Regional Office for the Western Pacific, and with the Regional Office for the Americas organized a number of intensive workshops on psychosocial rehabilitation for mental health professionals. It is also currently training primary health care workers in Guatemala.

5. INTERNATIONAL LEAGUE AGAINST EPILEPSY

During the period under review the League contributed to preparation of guidelines on the prevention of epilepsy and treatment of epilepsy in developing countries; it is also contributing to a multimedia work on epilepsy. It was a major partner in recent WHO efforts to encourage incorporation of neuroscience into public health policy. The League recently established its Commission on Developing Countries in Geneva in order to facilitate collaboration with WHO.

6. INTERNATIONAL BUREAU FOR EPILEPSY

The Bureau exchanges information with WHO, and participates in meetings relating to prevention and treatment of neurological disorders.

7. INTERNATIONAL FEDERATION OF MULTIPLE SCLEROSIS SOCIETIES

The Federation exchanges information with WHO, and WHO refers to it certain requests for information.

8. WORLD PSYCHIATRIC ASSOCIATION

In connection with activities related to application of the *International Statistical Classification of Diseases and Related Health Problems. Tenth revision (ICD-10)*, the Association prepared a report and participated in field trials of associated training materials in different languages. In conjunction with its regional and world congresses joint training seminars on a number of issues of mutual interest were also convened. It undertook a survey of legislation referring to mental health in different countries and of programmes to reduce the social stigma associated with mental illness, and shared results with WHO. It contributed to the preparation of training kits which will be distributed to WHO collaborating centres and other institutions, as part of continuing efforts to improve recognition and treatment of mental disorders by general practitioners and other health professionals.

9. INTERNATIONAL ASSOCIATION FOR SUICIDE PREVENTION

A collaborative investigation on parasuicide with the Regional Office for Europe continued and WHO cosponsored the Association's seventeenth and eighteenth international congresses (Montreal, Canada, 1993, and Venice, Italy, 1995). The Association also contributed to the preparation of WHO guidelines for the primary prevention of suicide.

10. WORLD FEDERATION OF NEUROLOGY

Collaboration consisted, *inter alia*, of provision of advice on neurological definitions for the appropriate sections of ICD-10, and preparation of the draft of the second edition of the Application of the International Classification of Diseases to neurology. It also advised on drugs for the treatment of neurological disorders in developing countries and is currently assisting WHO in the production of monographs on the epidemiology of headache. The Federation played an important role in WHO's meeting in May 1993 at which the foundations for WHO's initiative on neurological disorders were laid. It also collaborates with the fellowship programme.

11. WORLD FEDERATION OF NEUROSURGICAL SOCIETIES

Collaboration mainly concerns exchange of information and participation in each other's technical meetings. For example, the Federation participated in a WHO meeting on stroke and cerebrovascular disorders: neurological implications, and in an informal consultation on injury to the central nervous system. Another important area of exchange is the Federation's programme on neurosurgery and public health.

12. COLLEGIUM INTERNATIONALE NEURO-PSYCHOPHARMACOLOGICUM

The Collegium provided expertise and technical input for strengthening WHO's activities related to neuroscience, and participated in the work of WHO's advisory committee for the Decade of the Brain. A series of cooperative educational workshops was held in the Czech Republic, Egypt, Iran, Korea, Namibia, and Viet Nam for clinicians on diagnosis of mental disorders and use of psycho-pharmacological agents.

13. INTERNATIONAL COUNCIL ON ALCOHOL AND ADDICTIONS

Collaboration between the Council and WHO takes the form of regular exchanges of information and participation in each other's technical meetings. WHO participated in the annual meetings organized by the Council on the treatment and prevention of alcoholism and drug dependence, and in its international conferences. The Council is involved in discussions concerning an alcohol action plan for Europe, and to that end it has worked with the Regional Office for Europe in preparations for a conference on alcohol, society and health (Paris, 1995). It has also contributed to WHO activities concerned with tobacco through the provision of experts at relevant meetings. The Council was a prime mover of an initiative to identify ways in which international organizations may contribute to the reconstruction and development of South Africa.

14. INTERNATIONAL SOCIETY FOR BIOMEDICAL RESEARCH ON ALCOHOLISM

In addition to the Society and WHO participating regularly in each other's technical meetings, since 1988 the Society has collaborated with WHO on a multicentre project to identify biological markers for alcohol use and dependence. A joint international fellowship programme involving WHO, the Society and the American National Institute of Alcohol and Alcoholism was set up in 1995 to facilitate participation in the Society's meetings of young scientists from developing countries. Since 1990 the Society has participated in an international survey on alcoholism.

Programme 11 (Promotion of environmental health)

15. THE WORLD CONSERVATION UNION (IUCN)

Within the context of the work of the WHO/FAO/UNEP/UNCHS Panel of Experts on Environmental Management for Vector Control (PEEM), the Union contributed to a report on the Zambesi River basin. WHO will explore with the Union the possibility of incorporating a human health component in the Union's projects relating to the sustainable use of wetlands in southern Africa.

16. INTERNATIONAL ASTRONAUTICAL FEDERATION

During the period under review there were regular formal and informal contacts on technical issues. WHO would like to see a further strengthening of technical cooperation, if possible in connection with country case studies on the use of satellite imagery for health promotion.

17. INTERNATIONAL ASSOCIATION ON WATER QUALITY¹

WHO and the Association collaborate through participation in each other's technical meetings. For example, the Association participated in the WHO-related conferences on pollution control and water quality management (Cyprus, 1994), environmental protection technologies for coastal areas (Bulgaria, 1995), and on wastewater reclamation and reuse (Greece, 1995). It also contributed to and assisted the work of WHO's working group on water pollution control.

18. INTERNATIONAL SOLID WASTE ASSOCIATION

Collaboration during the period under review focused on activities with the Association's working group on health care waste. This group contributed to preparation of a WHO handbook on medical waste management. The Association also disseminates information about WHO's activities and policies.

19. INTER-AMERICAN ASSOCIATION OF SANITARY AND ENVIRONMENTAL ENGINEERING

During the period under review nearly 20 meetings and a number of joint seminars and consultations took place, including the twenty-third and twenty-fourth international congresses of the Association (Cuba, 1992 and Argentina, 1994). A number of national seminars were organized on, for example, human exposure to toxic substances, or anaerobic treatment of residual water. The Association, with the Regional Office for the Americas, also continued to promote sanitary and environmental engineering in the Americas, through cooperation with national universities, production of technical documents, and dissemination of information. Discussions took place in Cuba in 1995 on the local production of disinfectants and on up-to-date treatment of residual water.

¹ Previously known as International Association on Water Pollution Research and Control.

20. INTERNATIONAL FEDERATION FOR HOUSING AND PLANNING

The Federation is a regular participant in meetings relating to WHO's Healthy Cities initiative, and it participated in the Second European Conference on Environment and Health (Helsinki, 1994).

21. INTERNATIONAL UNION OF LOCAL AUTHORITIES

WHO and the Union collaborate through regular participation in each other's technical meetings related to the Healthy Cities initiative, and systematic exchange of information.

22. INTERNATIONAL SOCIETY OF BIOMETEOROLOGY

The Society contributed to activities on the health impact of climate change and to a forthcoming WHO report on the subject.

23. INTERNATIONAL WATER SUPPLY ASSOCIATION

WHO and the Association collaborate mainly through participation in each other's technical meetings. The Association's biennial world congress is an important forum for dissemination of WHO's policies: in 1995 the congress focused on WHO's new recommendations for water quality standards. The Association also works closely with the working group on operation and maintenance and contributed to two recent WHO publications entitled *Operation and maintenance of urban water supply and sanitation systems: a guide for managers* and *Financial management of water supply and sanitation: a handbook*.

24. INDUSTRY COUNCIL FOR DEVELOPMENT

Extensive activities at global and national levels took place during the period under review. The Council provided lecturers and financial support for food safety courses at the University of Indonesia, 1993-1995. Joint training seminars were held on hazard analysis critical control point (HACCP) for government decision-makers and chief inspectors from China and Philippines (1993); similar courses took place in Indonesia and Thailand (1994). The Council contributed to a seminar on application of WHO guidelines for drinking-water quality (Thailand, 1994) and in a government symposium on coordination of food safety activities (Indonesia, 1994). It collaborated in FAO/WHO consultations to draw up training guidelines on application of HACCP, and provided support for the first symposium on food safety in Africa and Europe (Abidjan, 1994). A joint international directory of audiovisual material - food safety was issued in 1995. The Council provided a lecturer on HACCP for a WHO regional training course (Amman, 1995) and it participated in a WHO consultation on the HACCP concept and its application (1995).

25. INTERNATIONAL UNION OF TOXICOLOGY

During the period under review, the Union regularly contributed to meetings on risk assessment of the International Programme on Chemical Safety, to the "guidance values" approach, to development of principles and methods for assessing direct immunotoxicity associated with exposure to chemicals, and to development of methods for chemical safety. It also contributed to meetings on health criteria documents for the following chemicals: methylbromide, linear alkyl benzene sulfonate and related compounds, diesel fuel and exhaust emissions, morpholine and thallium. The Union's most recent triennial summer school in risk assessment of chemicals was held jointly in Dakar with WHO and the Regional Office for Africa.

26. WORLD FEDERATION OF ASSOCIATIONS OF POISONS CENTRES AND CLINICAL TOXICOLOGY CENTRES

The Federation and WHO collaborated on the following activities: update and dissemination of "Yellow Tox", an international directory of poison information centres; annual meetings related to INTOX (a project to cooperate, in particular with developing countries, in setting up poison information centres); development of a trilingual computerized poisons information package containing evaluated information on diagnosis and treatment of poisoning for some 83 toxic substances; and related to this, cosponsorship of a seminar on INTOX (1993). The Federation also contributed to the review of poison information monographs.

Programme 12 (Diagnostic, therapeutic and rehabilitative technology)

27. WORLD FEDERATION OF SOCIETIES OF ANAESTHESIOLOGISTS

At global level the Federation provided clinical advice and supervised the production of a teaching video on management of acute respiratory infections, and contributed to revisions of WHO publications *WHO model prescribing information: drugs used in anaesthesia*, *Anaesthesia at the district hospital* and related video and slide/tape teaching materials. In 1992 it commenced field trials of oxygen concentrators in upper Egypt. This project, which includes, *inter alia*, a teaching element to be supported by the Federation, is expected to close in 1999 with a five-year review of the application of this technology. Within the context of its support to WHO's training efforts, the Federation also supported a workshop on anaesthesia in the Western Pacific Region.

28. INTERNATIONAL FEDERATION FOR MEDICAL AND BIOLOGICAL ENGINEERING

The Federation continued to provide, at the request of WHO, technical assistance in carrying out country surveys, and support in advising on strengthening health care technical services and development of training programmes. A number of national and regional joint workshops in Africa, the Americas, South-East Asia, and Europe took place during the period under review, and WHO participated in the Federation's international conference on medical engineering and computing in sub-Saharan Africa (Cape Town, South Africa, 1994). The Federation's international and regional conferences and professional journal are important means for dissemination of WHO policies in this field. The Regional Office for the Eastern Mediterranean reported active ongoing collaboration with the Federation.

29. INTERNATIONAL UNION OF PURE AND APPLIED CHEMISTRY

The Union and WHO continued to collaborate extensively in a number of areas of mutual interest. A joint working party, with the International Federation of Clinical Chemistry (see below) continued to make recommendations on quantities and units for WHO biological reference standards and reagents when they are used for clinical diagnostic purposes. Another joint activity is the collation of publications or standards, particularly those of the International Organization for Standardization,¹ on quality as related to analytical chemical processes, and provision of interpretive guidelines to facilitate their implementation and use in clinical laboratories. A workshop on quality control/quality assurance programmes for implementation in clinical laboratories was organized (Kenya, 1993). The Union played an important role in the WHO conference to promote the international use of reference materials and reference measurement systems in

¹ A nongovernmental organization in official relations.

clinical laboratories (Geneva, 1994). It also participated in WHO meetings on, for example, the preparation of guidelines on biological monitoring of chemical exposure in the workplace, in FAO/WHO Codex Alimentarius meetings on methods of analysis and sampling, and pesticide residues, and in a number of meetings of the International Programme on Chemical Safety.

30. INTERNATIONAL FEDERATION OF CLINICAL CHEMISTRY

The Federation continued to participate in technical activities, and supported in particular meetings of WHO relating to quality assurance and fellowships for laboratory training. Another important activity is laboratory standardization, including development of international reference materials, the most recent relating to lipoproteins ApoA and ApoB. A joint working party, with the International Union of Pure and Applied Chemistry (see above) continued to make recommendations on the use of quantities and units for WHO biological reference standards and reagents for clinical diagnostic purposes. The Federation's regional officers ensure collaboration with WHO regional offices. WHO regularly participates in the Federation's meetings, which are a particularly important forum for the dissemination of WHO policies.

31. INTERNATIONAL COUNCIL FOR STANDARDIZATION IN HAEMATOLOGY

The Council contributed to the work of the WHO Expert Committee on Biological Standardization at which WHO's international reference preparations are established. The Council also assisted in revision of a WHO document on quality content in haematology, preparation of a manual on laboratory safety, and it is currently working on a haemoglobin colour scale. Along with the International Society of Hematology it contributed to and supported the publication and translation into Spanish of WHO material on fundamental diagnostic haematology relating to anaemia, and on bleeding and clotting disorders. The Regional Office for the Eastern Mediterranean also reported active collaboration with the Council.

32. INTERNATIONAL SOCIETY OF HEMATOLOGY

During the period under review the Society, along with the International Council for Standardization in Haematology, contributed to and supported the publication and translation into Spanish of WHO material on fundamental diagnostic haematology relating to anaemia, on bleeding and clotting disorders, and on quality assurance in haematology. The Society also contributed to the preparation of guidelines for quality assessment for blood transfusion services. A number of WHO conferences on quality assurance related to health technology were also supported by the Society. The Regional Office for the Eastern Mediterranean reported active collaboration with the Society.

33. INTERNATIONAL ASSOCIATION OF MEDICAL LABORATORY TECHNOLOGISTS

The Association contributed to the WHO publication *Health laboratory facilities in emergency and disaster situations*, and to a health and safety education manual for health care personnel. It maintained its participation in WHO's activities relating to quality assurance, and made available to WHO information about experienced technologists, expert in such fields as reagent production and quality assurance, able to assist WHO in efforts to improve, for example, the performance of laboratories participating in WHO's international external quality assessment scheme. WHO Representatives in South-East Asia and the Western Pacific participated in the Association's biennial congress (Hong Kong, 1994). The Regional Office for the Eastern Mediterranean reported active collaboration with the Association.

34. INTERNATIONAL SOCIETY OF BLOOD TRANSFUSION

The Society assisted in developing WHO's distance-learning materials for safe blood and blood products, and collaborated with WHO in training activities at global level and in the South-East Asia, Eastern Mediterranean and Western Pacific regions using these materials. They were involved in the preparatory meetings for the AIDS Summit (Paris, 1994), and chaired the preparatory meeting on blood safety. The Regional Office for the Eastern Mediterranean reported active collaboration with the Society.

35. WORLD FEDERATION OF HEMOPHILIA

A number of joint meetings were convened during the period under review, the most recent, in March 1994, to establish recommendations regarding haemophilia therapy in the light of improvements in its management. A report on a joint meeting on carrier detection and prenatal diagnosis was published in the *Bulletin of the World Health Organization* in 1993. The Federation is translating WHO educational materials into Portuguese, and in June 1995 it provided a draft paper on guidelines for the development of a national programme for haemophilia, an activity which will be further pursued, along with continuing joint meetings on all aspects of haemophilia. The Federation also participated in the preparations for and in the AIDS Summit (Paris, 1994).

36. INTERNATIONAL LEAGUE OF DERMATOLOGICAL SOCIETIES

The League has been assisting WHO in the writing and review of a monograph for use in connection with WHO's model prescribing information for drugs used in skin diseases, and is holding consultations on revisions of the Model list of essential drugs. It also sent an observer to the WHO Expert Committee on the Use of Essential Drugs (1995). With WHO and the Regional Office for the Americas, it organized and sponsored a round-table discussion on the role of dermatologists in the elimination of leprosy (New Delhi, 1994). A workshop is planned in order to establish guidelines for leprosy screening by primary health care personnel. The Regional Office for the Eastern Mediterranean reported active collaboration with the League.

37. INTERNATIONAL UNION OF PHARMACOLOGY

The Union collaborates with WHO in pharmaceuticals and chemical safety. During the period under review it continued to make its technical expertise available for WHO's normative activities on pharmaceuticals. In particular, it assisted in drawing up WHO's draft guidelines on marketing authorization requirements for interchangeable multisource pharmaceutical products. It also sent an observer to the WHO Expert Committee on the Use of Essential Drugs (1995). WHO contributed to the Union's Newsletter, in this way disseminating information about WHO actions in the development of new drugs, etc. The Union also participated in a number of meetings and conferences related to the work of the International Programme on Chemical Safety, at which it provided scientific information about the action of chemicals on biological systems and on toxicological evaluation.

38. INTERNATIONAL FEDERATION OF PHARMACEUTICAL MANUFACTURERS ASSOCIATIONS

The Federation continued its collaboration with a number of WHO programmes. For example, it participated in WHO meetings on the use of essential drugs, national drug policies, bulk procurement of oral poliomyelitis vaccine, specifications for pharmaceutical preparations, and on the monitoring and management

of antimicrobial agents. It also contributed to preparation of WHO draft guidelines on marketing authorization requirements for interchangeable multisource pharmaceutical products, and submitted comments for WHO publications on model prescribing information. It participated in consultative meetings on AIDS drugs and vaccine supply, and in another on international regulatory harmonization for HIV/AIDS. It also assisted in the distribution of a WHO document entitled "Potential for WHO-industry collaboration on drug and vaccine development for HIV/AIDS". The Federation was also active in the work of the Children's Vaccine Initiative (CVI). Its Executive Vice-President serves as the Chairman of the CVI Task Force on Relations with Vaccine Development Collaborators and it regularly participated in meetings of the vaccine consultative group and the task force on situation analysis. It also contributed to a large number of WHO meetings and consultations related to the work of the Global Programme for Vaccines and Immunization. For example, it provided information on the pricing strategies of vaccine producers, participated in meetings on biotechnology, and cooperated in an activity to foster partnerships for certain combination vaccines. Information from industry was made available for an evaluation of dependence-producing substances by the WHO Expert Committee on Drug Dependence, and the Federation participated in informal consultations on hookworm infection in women. The Federation also provided technical and financial support for symposia on combination products for the treatment of tuberculosis and for quality assurance workshops in Zimbabwe and Belarus; the Zimbabwe workshop was organized in collaboration with the Regional Office for Africa. The Regional Office for the Eastern Mediterranean also reported active collaboration with the Federation.

39. WORLD FEDERATION OF PROPRIETARY MEDICINE MANUFACTURERS

The Federation contributed its expertise, information, advice, and occasionally financial support, to the following WHO activities: preparation of guidelines for inspection of drug distribution channels, collection and submission of published and unpublished clinical studies for a WHO report on cough/cold medicines for young children, preparation of guidelines for assessment of herbal medicines, joint symposium on use of medicinal plants, preparation of guidelines for the assessment of quality control for herbal medicines, and review of a draft of WHO's model prescribing information on migraine. It was an observer at meetings of the WHO expert committees on the use of essential drugs, specifications for pharmaceutical preparations, and national drug policies, and participated in meetings on ethical criteria for medicinal drug promotion, and in the WHO/CIOMS overview committee on harmonization of drug safety terminology. The Federation contributed to a document produced in the Western Pacific on assessment of the efficacy of herbal medicines and to activities of the Regional Office for Europe on an appropriate legal framework for pharmaceuticals in the countries of central and eastern Europe, including support for a publication on developing self-medication in central and eastern Europe. WHO participated in the Federation's recent workshop on this issue, and regularly participates in the Federation's world and regional congresses. A project on development of a nonprescription-medicine course syllabus for pharmacy students was launched recently. The Regional Office for the Eastern Mediterranean also reported active collaboration with the Federation.

40. INTERNATIONAL PHARMACEUTICAL FEDERATION

The Federation maintained its close contacts at headquarters and in the regions, and continued to extend support to WHO's activities through regular dissemination of WHO policies and publications through the "International Pharmacy Journal" and participation in such meetings as the WHO expert committees on specifications for pharmaceutical preparations, essential drugs and national drug policies, and the Second WHO Meeting on the Role of the Pharmacist (Tokyo, 1993). The Federation was also influential in supporting the participation of pharmacists from less affluent countries in meetings and providing opportunities for training and research. WHO participated in the Federation's annual international congresses, the most recent in Sweden, 1995. The Regional Office for the Eastern Mediterranean also reported active collaboration with the Federation.

41. COMMONWEALTH PHARMACEUTICAL ASSOCIATION

In addition to the systematic dissemination of WHO policies and recommendations at its conferences, the most recent in April 1995, and through its newsletter, the Association served as rapporteur for the Second WHO Meeting on the Role of the Pharmacist (Tokyo, 1993), and in a recent meeting of the WHO Expert Committee on Specifications for Pharmaceutical Preparations. Other joint activities took place at the country level, and the Association is currently assisting in development of a distance-learning package for drug management. It also sent an observer to the WHO Expert Committee on the Use of Essential Drugs. It is assisting in the preparation and dissemination of a questionnaire on curricula content for schools of pharmacy, and plans to submit a questionnaire to its member associations about implementation of recommendations contained in resolution WHA47.12, Role of the pharmacist in support of the WHO revised drug strategy. The Regional Office for the Eastern Mediterranean reported collaboration with the Association.

ANNEX 2

**LIST OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL
RELATIONS WITH WHO AS AT NOVEMBER 1995**

arranged in accordance with the classified list of programmes of
the Eighth General Programme of Work (1990–1995)

(Organizations prefixed by an * are to be reviewed by the
Executive Board at its ninety-seventh session, January 1996)

DIRECTION, COORDINATION AND MANAGEMENT**2. WHO's general programme development and management**

2.4 External coordination for health and social development

International Organization of Consumers Unions
International Physicians for the Prevention of Nuclear War
Inter-Parliamentary Union
OXFAM
International Medical Parliamentarians Organization
International Federation of Red Cross and Red Crescent Societies

2.6 Informatics management

International Medical Informatics Association

HEALTH SYSTEM INFRASTRUCTURE**3. Health system development**

3.1 Health situation and trend assessment

International Air Transport Association
International Epidemiological Association
International Federation of Health Records Organizations
International Organization for Standardization

3.4 Health legislation

International Academy of Legal Medicine

4. Organization of health systems based on primary health care

International Sociological Association
Commonwealth Medical Association
International Federation of Hospital Engineering
International Union of Architects

International Hospital Federation
 African Medical and Research Foundation International
 Aga Khan Foundation
 Christian Medical Commission - Churches' Action for Health
 Medicus Mundi Internationalis (International Organization for Cooperation in Health Care)
 World Vision International
 World Federation of Public Health Associations
 World Association of the Major Metropolises

5. Development of human resources for health

International College of Surgeons
 International Federation of Surgical Colleges
 International Society of Surgery
 International Council of Nurses
 International Catholic Committee of Nurses and Medico-Social Assistants
 International Federation of Medical Students Associations
 Network of Community-Oriented Educational Institutions for Health Sciences
 World Federation for Medical Education
 World Organization of Family Doctors¹
 International Conference of Deans of the French-Language Faculties of Medicine
 World Medical Association

6. Public information and education for health

National Council for International Health
 World Federation of United Nations Associations
 International Union for Health Promotion and Education
 International Council on Social Welfare

HEALTH SCIENCE AND TECHNOLOGY - HEALTH PROMOTION AND CARE

7. Research promotion and development, including research on health-promoting behaviour

International Life Sciences Institute
 Council for International Organizations of Medical Sciences
 International Council of Scientific Unions

8. General health protection and promotion

8.1 Nutrition

International Union of Nutritional Sciences
 International Lactation Consultant Association
 La Leche League International
 International Council for Control of Iodine Deficiency Disorders

¹ Also known as World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians.

8.2 Oral health

International Dental Federation

8.3 Accident prevention

International Association for Accident and Traffic Medicine
International Medical Society of Paraplegia
International Society for Burn Injuries

9. Protection and promotion of the health of specific population groups

9.1 Maternal and child health, including family planning

International Council of Women
International Federation for Family Life Promotion
Medical Women's International Association
Mother and Child International
International Federation of Business and Professional Women
Save the Children Fund (United Kingdom)
International Pediatric Association
International Confederation of Midwives
International Special Dietary Foods Industries
*International Union of Family Organizations
Sorooptimist International
International Alliance of Women
Inter-African Committee on Traditional Practices affecting the Health of Women and Children

9.2 Adolescent health

World Assembly of Youth
World Association of Girl Guides and Girl Scouts
World Organization of the Scout Movement
International Association for Adolescent Health

9.3 Human reproduction research

International Federation of Fertility Societies
International Federation of Gynecology and Obstetrics
International Planned Parenthood Federation
The Population Council
International Women's Health Coalition

9.4 Workers' health

International Association of Agricultural Medicine and Rural Health
International Ergonomics Association
International Federation of Chemical, Energy and General Workers' Unions
International Commission on Occupational Health
International Occupational Hygiene Association

9.5 Health of the elderly

- *International Federation on Ageing

10. Protection and promotion of mental health

- *Commonwealth Association for Mental Handicap and Developmental Disabilities
- *International Association for Child and Adolescent Psychiatry and Allied Professions
- *International Society for the Study of Development
- *Joint Commission on International Aspects of Mental Retardation
- *World Federation for Mental Health
- *World Federation of Neurology
- *World Federation of Neurosurgical Societies
- *Collegium Internationale Neuro-Psychopharmacologicum
- *International Association for Suicide Prevention
- *World Association for Psychosocial Rehabilitation
- *World Psychiatric Association
- *International Federation of Multiple Sclerosis Societies
- *International League against Epilepsy
- *International Bureau for Epilepsy
- *International Council on Alcohol and Addictions
- *International Society for Biomedical Research on Alcoholism

11. Promotion of environmental health

- *International Union for Conservation of Nature and Natural Resources
- *International Astronautical Federation
- *Inter-American Association of Sanitary and Environmental Engineering
- *International Water Supply Association
- *International Federation for Housing and Planning
- *International Solid Waste Association
- *International Union of Local Authorities
- *International Association on Water Quality
- *International Union of Pure and Applied Chemistry
- *World Federation of Associations of Poisons Centres and Clinical Toxicology Centres
- *International Union of Toxicology
- *Industry Council for Development
- *International Society of Biometeorology

12. Diagnostic, therapeutic and rehabilitative technology

- *World Federation of Societies of Anaesthesiologists
- *International Association of Medical Laboratory Technologists
- *International Council for Standardization in Haematology
- *International Society of Blood Transfusion
- *International Society of Hematology
- *World Federation of Hemophilia
- *International Federation for Medical and Biological Engineering
- International Association of Biologists Technicians¹

¹ Admitted into official relations in 1995.

- *International Federation of Clinical Chemistry
- *International Council for Laboratory Animal Science
- *International Federation of Pharmaceutical Manufacturers Associations
- *International Union of Pharmacology
- *International League of Dermatological Societies
- *Commonwealth Pharmaceutical Association
- *International Pharmaceutical Federation
- *World Federation of Proprietary Medicine Manufacturers

12.1 Clinical, laboratory and radiological technology for health systems based on primary health care

- International Electrotechnical Commission
- International Commission on Radiation Units and Measurements
- International Society of Radiographers and Radiological Technologists
- International Society of Radiology
- World Federation of Nuclear Medicine and Biology
- International Radiation Protection Association
- International Commission on Non-ionizing Radiation Protection
- International Commission on Radiological Protection
- International Society of Orthopaedic Surgery and Traumatology
- World Association of Societies of Pathology (Anatomic and Clinical)
- International Union of Immunological Societies
- International Union of Microbiological Societies

12.5 Rehabilitation

- International Federation of Physical Medicine and Rehabilitation
- Rehabilitation International
- World Confederation for Physical Therapy
- World Federation of the Deaf
- World Federation of Occupational Therapists
- World Veterans Federation
- International Society for Prosthetics and Orthotics

HEALTH SCIENCE AND TECHNOLOGY - DISEASE PREVENTION AND CONTROL

13. Disease prevention and control

- Rotary International
- International Group of National Associations of Manufacturers of Agrochemical Products
- World Federation of Parasitologists
- Association of the Institutes and Schools of Tropical Medicine in Europe
- International Society of Chemotherapy
- International Union against Tuberculosis and Lung Disease
- International Leprosy Union
- International Leprosy Association
- International Association of Hydatid Disease
- International Society for Human and Animal Mycology
- World Veterinary Association
- International Union against the Venereal Diseases and the Treponematoses
- International Association of Lions Clubs

Christoffel-Blindenmission
Helen Keller International, Incorporated
International Agency for the Prevention of Blindness
International Eye Foundation
International Federation of Ophthalmological Societies
International Organization against Trachoma
World Blind Union
The Royal Commonwealth Society for the Blind (Sight Savers)
International Association of Logopedics and Phoniatics
International Federation of Oto-Rhino-Laryngological Societies
International Academy of Pathology
International Association for the Study of Pain
International Council of Societies of Pathology
International Union against Cancer
International Society of Nurses in Cancer Care
International Society for Preventive Oncology
International Consultation on Urological Diseases
International Association of Cancer Registries
International Federation of Sports Medicine
International Society and Federation of Cardiology
World Hypertension League
International Federation of Hydrotherapy and Climatotherapy
International Cystic Fibrosis (Mucoviscidosis) Association
International Clearinghouse for Birth Defects Monitoring Systems
International Diabetes Federation
International League of Associations for Rheumatology

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