
Engagement with non-State actors

Report by the Director-General

INTRODUCTION

1. In May 2016, the Sixty-ninth World Health Assembly adopted resolution WHA69.10 on the Framework of Engagement with Non-State Actors, in which the Director-General was requested, *inter alia*, to fully operationalize implementation of the Framework within a two-year time frame and to report annually thereon to the Executive Board. This document contains the third annual report.¹ Information on proposals for admitting non-State actors into official relations, and on reviews of the status of existing official relations, is set out in document EB144/37.

ENGAGEMENT WITH NON-STATE ACTORS

2. WHO continues to engage actively with a broad range of non-State actors. Transforming partnerships, communication and financing is one of the operational shifts of the Thirteenth General Programme of Work, 2019–2023, adopted by the Seventy-first World Health Assembly.² The “triple billion” goal of the General Programme of Work cannot be achieved without stronger and more systematic engagement with non-State actors. This is reflected throughout the General Programme of Work and is currently being implemented through the transformation agenda.

3. The Framework of Engagement with Non-State Actors provides a firm basis for enhancing engagement; it also serves as an instrument for identifying risks and balancing them against the expected benefits, while protecting and preserving WHO’s integrity, reputation and public health mandate.³ In order to fulfil its mandate in the era of the Sustainable Development Goals, WHO is taking a more proactive approach to engagement, while fully implementing the Framework. It has therefore continued to increase staff awareness of the importance and benefits of enhanced engagement with non-State actors in order to advance global health and the work of the Organization, while managing the associated risks through the processes established within the Framework. The Secretariat continuously engages in due diligence and risk assessments for specific engagements, and takes care to ensure that implementation of the Framework does not disrupt ongoing engagements.

¹ See document EB140/41 (first annual report) and document EB142/28 (second annual report).

² See resolution WHA71.1 (2018).

³ See document WHA69/2016/REC/1, Annex 5, paragraph 4.

4. In line with this approach, a few recent examples are given here of the thousands of engagements regularly entered into. WHO has signed a new memorandum of understanding with the University of Washington Institute for Health Metrics and Evaluation, to improve collaboration on health data. The Organization's work on tuberculosis, universal health coverage and the financing campaign is supported by three civil society mechanisms. A civil society task team, convened by the United Nations Foundation and RESULTS, prepared and presented a report to WHO proposing options for strengthening WHO's engagement with civil society. A five-year collaboration launched with St. Jude Children's Research Hospital aims to transform cancer care worldwide and to cure at least 60% of children with six of the most common types of cancer by 2030. Several joint efforts have been initiated with private sector entities in the IT sector, including a "fitness App" featuring WHO messaging relating to physical activity content. The Director-General and senior management have held meetings with leaders of nongovernmental organizations and Chief Executive Officers in the pharmaceutical and IT industries. A memorandum of understanding signed with the World Medical Association will strengthen collaboration on universal health coverage and emergency preparedness. The Regional Office for Europe and seven non-State actors are working together to tackle tuberculosis and its multidrug-resistant form through comprehensive health system strengthening initiatives in 11 countries in the WHO European Region. WHO and its health partners, including 31 non-State actors, are supporting the efforts of the Ministry of Health of Turkey to provide medical services to Syrian refugees present in Turkey.

5. The more systematic assessment of engagements under the Framework has, however, brought to the surface several implementation challenges that need to be tackled. For example, with respect to the requirement that non-State actors confirm that they have no engagement with the tobacco industry and that their activities do not further that industry's interests, it has proven difficult to come up with a consistent definition of how broadly "furthering the interests" should be interpreted. Similarly, WHO wants to promote its objectives by cosponsoring major global health events. Often, however, such events are also cosponsored by private sector entities with a potential commercial interest in the event's outcomes. As a result, the Secretariat is reviewing its cosponsorship practices in order to increase engagement in a manner that is in line with the Framework. The extent to which non-State actors can contribute to the Organization's normative work has also been hard to define, bearing in mind the importance of obtaining certain data and information, while at the same time balancing the risk that such actors will have an undue and unacceptable influence on the work of WHO. The financial and human resources required to develop and maintain an Organization-wide systematic due diligence and risk assessment system, both for the standard and the simplified procedures, remain an issue that will have to be further assessed in the evaluation planned for 2019.

6. As WHO develops its external relations strategy as one of the aspects of the transformation agenda, it is also developing a strategy for engagement with non-State actors, which will consist of overarching considerations and specific blueprints for engagement with groups of non-State actors, such as civil society or particular private sector industries.

IMPLEMENTATION OF THE FRAMEWORK

7. In line with resolution WHA69.10, a number of tools needed to implement the Framework were completed by the deadline of May 2018. The Register of non-State actors now contains profiles of all non-State actors in official relations, WHO's engagements, and the collaboration plans and annual reports of non-State actors in official relations. Based on the experience of, and feedback from, a

field-tested version of the *Guide for Staff on engagement with non-State actors*,¹ the scope of the simplified procedure of due diligence and risk assessment has been expanded and illustrated in a flow-chart incorporated into the Guide. That experience and feedback were also used to finalize the Handbook for non-State actors² and standard operating procedures governing engagements with non-State actors in emergency settings. The FENSA Proposal Review Committee, which is headed by the Deputy Director-General for Corporate Operations and includes regional representatives, has been established³ and is convened as needed.

8. Work to achieve full consistency between the process of applying for and confirming official relations on the one hand and the relevant policy requirements on the other, and to prompt all non-State actors in official relations to comply with requirements, including those published in the Register of non-State actors, required a major effort and generated a heavy workload.

9. A project management system and a project steering committee have been established to support implementation of the Framework. As was also noted by the Independent Expert Oversight Advisory Committee in the report of its twenty-eighth meeting,⁴ the change-management, communication and training needs are more complex than originally anticipated, and senior management has therefore delayed the Organization-wide roll-out of the Global Engagement Management tool, designed to support the Framework's workflows. Work is being done to include this project in the context of overall organizational changes and alignment with the transformation agenda.

10. The Framework's focal points in clusters, regions and hosted entities have been identified and are now actively involved in the implementation of the simplified procedure. Systematic training materials are being developed for focal points and staff on the basis of a detailed needs assessment and are scheduled for roll-out starting in November 2018.

11. In July 2018, three people were seconded by non-State actors, one by an academic institution⁵ and two by philanthropic foundations.⁶ Two of the secondments were to headquarters and one to a country office.

12. All regions are actively collaborating on implementation of the Framework through the network of focal points. They have held briefings and workshops for key staff at both the regional and the country levels; they have updated their websites to incorporate information about the Framework; and they have published pertinent information and guidance on the regional Intranet page to ensure staff are properly informed. In September 2018, the sixty-eighth session of the WHO Regional Committee for Europe for

¹ Guide for staff on engagement with non-State actors. Framework of Engagement with Non-State Actors – FENSA. Geneva: World Health Organization; 2018 (http://www.who.int/about/collaborations/non-state-actors/FENSA_guide-for-staff.pdf?ua=1, accessed on 10 October 2018).

² Handbook for non-State actors on engagement with the World Health Organization. Geneva: World Health Organization; 2018 (<http://www.who.int/about/collaborations/non-state-actors/Handbook-for-non-State-actors-on-engagement-with-WHO.pdf?ua=1>, accessed on 10 October 2018).

³ See paragraph 35 of the Framework.

⁴ Document EBPBAC28/2.

⁵ The University of Kanazawa, Japan, made one secondee available to the WHO Department of HIV/AIDS, in order to provide technical support to the Global Hepatitis Programme.

⁶ The Bill & Melinda Gates Foundation made one secondee available to support projects to strengthen the transparency and accountability of the Polio programme; and the United Nations Foundation seconded a senior strategist to strengthen the donor outreach and advocacy activities of the Global Polio Eradication Initiative.

the first time applied its procedure of accreditation for regional non-State actors not in official relations with WHO, which it had adopted in 2017. It adopted a resolution accrediting 19 regional non-State actors for a period of three years.

13. WHO-hosted partnerships and entities, such as Unitaid and the secretariat of the Framework Convention on Tobacco Control, are also applying the Framework in their operating models and daily activities. In this regard, Framework-related risks relevant to proposals that Unitaid receives for funding are incorporated into formal risk assessment procedures and considered, as appropriate, by the Unitaid Executive Board.

14. During its sixtieth session in May 2018, the Governing Council of the International Agency for Research on Cancer (IARC) reviewed and noted the IARC-specific guide on engagement with non-State actors¹ prepared by the Working Group it had established the previous year. Reports to the Governing Council on IARC engagement under the Framework will be made as part of the Director's Report. Relevant information about each non-State actor and its activities is reviewed by IARC following screening. Complex cases and those potentially posing a higher risk are referred to WHO headquarters for standard assessment.

15. WHO actively shares its experience on engagement with non-State actors with other members of the United Nations system, as part of United Nations reform, and with organizations such as the Global Fund to Fight AIDS, Tuberculosis and Malaria. The Joint Inspection Unit has published a report on private sector partnership arrangements in the context of the 2030 Agenda for Sustainable Development,² to which WHO contributed. WHO is also participating actively in, and sharing success stories, lessons learned and challenges pertaining to the Framework's implementation with, the multistakeholder and private sector task teams of the United Nations Partnerships for the SDGs.

16. In accordance with paragraph 3(6) of resolution WHA69.10, an initial evaluation of the Framework's implementation and its impact on the work of WHO is scheduled for 2019, with a view to submitting the results, together with any proposals for revisions, to the Executive Board in January 2020, through the Board's Programme Budget and Administration Committee.

ACTION BY THE EXECUTIVE BOARD

17. The Board is invited to note the report.

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¹ IARC Governing Council resolution GC/60/R17.

² The United Nations system – Private sector partnership arrangements in the context of the 2030 Agenda for Sustainable Development (document JIU/REP/2017/8).