

PROGRESS IN THE FENSA DOCUMENT AND TRACK CHANGES

1. The texts hereby compared are:
 - a. The paragraphs agreed *ad referendum* and highlighted in green in the latest instalment of the FENSA document, which resulted from the informal informal consultations conducted in September 2015¹ and which will be used as working document during the October consultations.
 - b. The original text, i.e. the analogous paragraphs in the draft version distributed in December 2014 (document EB136/5), which was discussed by the EB136 in January 2015 and which was further discussed from March onwards.
2. The two first columns present the text exactly as it is in the reference documents (EB136/5 and latest instalment of FENSA). The third column presents the text currently agreed *ad referendum* in track changes from the original December version. The changes are shown in bold and in red; additions are in squared brackets “**[]**” and deletions are in ~~strikethrough~~.
3. In neither document, footnotes follow a sequence. To avoid confusion, in the chart below, consecutive numbers are assigned to the footnotes.
4. Although the intent is to consider only the text agreed *ad ref*, there are a few paragraphs where text in rose, yellow, brown or grey has also been included. This exception is due to the fact that most of the text in those paragraphs is agreed *ad ref*, and omitting the portions not yet agreed would hinder the context. The text not yet agreed, was not used for comparison.
5. The paragraphs that DO NOT have text in bold and in red in the third column are those that were not altered since the intergovernmental process started.

PRELIMINARY FINDINGS:

- A great deal of the text has remained unchanged from the December version (EB136/5):
 - Overarching Framework: 18 paragraphs have remained unchanged; roughly **one fourth** of the number of paragraphs.
 - NGO Policy and Operational Procedures: 6 paragraphs out of 17 have remained unchanged; roughly **one third** of the number of paragraphs.
 - Private Sector Policy and Operational Procedures: 16 paragraphs out of 38 have remained unchanged; roughly **40%** of the number of paragraphs.
 - Philanthropic Foundations Policy and Operational Procedures: 11 out of 19 paragraphs unchanged; i.e. **more than half (58%)** of the number of paragraphs.
 - Academic Institutions Policy and Operational Procedures: 10 out of 20 paragraphs unchanged; **half** the number of paragraphs in the policy.
- Out of the paragraphs that have been changed, the vast majority are either explanatory or clarifying additions, minor language adjustments or deletions of repetitive text. Another fraction of the changes are statements on principles of action, not necessarily deriving in procedural consequences.
- Some changes that have been agreed do have procedural and financial implications.

¹ The informal informal consultations that were conducted in September did not intend to agree any text ad ref. Partial agreements were highlighted in blue and not in green. Therefore, the text used for comparison was, in fact, the text that was agreed during the July consultations.

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<p>INTRODUCTION</p> <p>1. The overarching framework for engagement with non-State actors and the WHO policy and operational procedures on management of engagement with non-State actors apply to all engagements with non-State actors at all levels of the Organization,[1] whereas the four specific policies and operational procedures on engagement are limited in application to, respectively, nongovernmental organizations, private sector entities, philanthropic foundations and academic institutions.</p> <p>FOOTNOTE 1: Headquarters, regional offices and country offices, as well as hosted partnerships.</p>	<p>INTRODUCTION</p> <p>1. The overarching framework for of engagement with non-State actors and the WHO policy and operational procedures on management of engagement with non-State actors apply to all engagements with non-State actors at all levels of the Organization,[1] whereas the four specific policies and operational procedures on engagement are limited in application to, respectively, nongovernmental organizations, private sector entities, philanthropic foundations and academic institutions.</p> <p>FOOTNOTE 1: Headquarters, regional offices and country offices, entities established under WHO, as well as hosted partnerships. For hosted partnerships the framework of engagement with non-State actors will apply, subject to the policy on WHO’s engagement with global health partnerships and hosting arrangements (resolution WHA63.10). Hosted, as well as external partnerships are explained in paragraph 48.</p>	<p>INTRODUCTION</p> <p>1. The overarching framework for of engagement with non-State actors and the WHO policy and operational procedures on management of engagement with non-State actors apply to all engagements with non-State actors at all levels of the Organization,[1] whereas the four specific policies and operational procedures on engagement are limited in application to, respectively, nongovernmental organizations, private sector entities, philanthropic foundations and academic institutions.</p> <p>FOOTNOTE 1: Headquarters, regional offices and country offices, [entities established under WHO], as well as hosted partnerships. [For hosted partnerships the framework of engagement with non-State actors will apply, subject to the policy on WHO’s engagement with global health partnerships and hosting arrangements (resolution WHA63.10). Hosted, as well as external partnerships are explained in paragraph 48.]</p>
<p>ENGAGEMENT: RATIONALE, PRINCIPLES, BENEFITS AND RISKS</p> <p>Rationale</p>	<p>ENGAGEMENT: RATIONALE, PRINCIPLES, BENEFITS AND RISKS</p> <p>Rationale</p>	<p>ENGAGEMENT: RATIONALE, PRINCIPLES, BENEFITS AND RISKS</p> <p>Rationale</p>

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<p>2. The health landscape has become more complex in many respects; among other things, there has been an increase in the number of players in global health governance. Non-State actors play a major role in all aspects of global health and WHO can only fulfil its leadership role in global health and its mandate if the Organization proactively engages with Member States, other international organizations and non-State actors. In support of this aim, WHO engages with non-State actors in the advancement and protection of public health in order to foster the use of non-State actors' resources (including knowledge, expertise, commodities, personnel and finances) in favour of public health and to encourage non-State actors to improve their own activities to protect and promote public health.</p>	<p>2. WHO is the directing and coordinating authority in global health in line with its constitutional mandate. The global health landscape has become more complex in many respects; among other things, there has been an increase in the number of players including non-State actors. WHO engages with non-State actors in view of their significant role in global health for the advancement and promotion of public health and to encourage non-State actors to use their own activities to protect and promote public health.</p>	<p>2. [WHO is the directing and coordinating authority in global health in line with its constitutional mandate]. The health landscape has become more complex in many respects; among other things, there has been an increase in the number of players [including non-State actors] in global health governance. Non-State actors play a major role in all aspects of global health and WHO can only fulfil its leadership role in global health and its mandate if the Organization proactively engages with Member States, other international organizations and non-State actors. In support of this aim, WHO engages with non-State actors in [view of their significant role in global health for] the advancement and protection of public health in order to foster the use of non-State actors' resources (including knowledge, expertise, commodities, personnel and finances) in favour of public health and to encourage non-State actors to improve [use] their own activities to protect and promote public health.</p>
<p>3. The functions of the WHO, as set out in Article 2 of its Constitution, include: to act as the directing and coordinating authority on</p>	<p>3. The functions of WHO, as set out in Article 2 of its Constitution, include: to act as the directing and coordinating authority on international health</p>	<p>3. The functions of WHO, as set out in Article 2 of its Constitution, include: to act as the directing and coordinating authority on international health</p>

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<p>international health work; to establish and maintain effective collaboration with diverse organizations; and to promote cooperation among scientific and professional groups which contribute to the advancement of health. The Constitution further mandates the Health Assembly or the Executive Board, and the Director-General, to enter into specific engagements with other organizations. [2] WHO shall, in relation to non-State actors, act in conformity with its Constitution and any relevant resolutions of the Health Assembly as well as those of the United Nations General Assembly or the Economic and Social Council of the United Nations, if applicable.</p> <p>FOOTNOTE 2: WHO Constitution, Articles 18, 33, 41 and 71.</p>	<p>work; to establish and maintain effective collaboration with diverse organizations; and to promote cooperation among scientific and professional groups which contribute to the advancement of health. The Constitution further mandates the Health Assembly or the Executive Board, and the Director-General, to enter into specific engagements with other organizations. [2] WHO shall, in relation to non-State actors, act in conformity with its Constitution and resolutions and decisions of the Health Assembly, and bearing in mind those of the United Nations General Assembly or the Economic and Social Council of the United Nations, if applicable.</p> <p>FOOTNOTE 2: WHO Constitution, Articles 18, 33, 41 and 71.</p>	<p>work; to establish and maintain effective collaboration with diverse organizations; and to promote cooperation among scientific and professional groups which contribute to the advancement of health. The Constitution further mandates the Health Assembly or the Executive Board, and the Director-General, to enter into specific engagements with other organizations. [2] WHO shall, in relation to non-State actors, act in conformity with its Constitution and any relevant resolutions [and decisions] of the Health Assembly, as well as [and bearing in mind] those of the United Nations General Assembly or the Economic and Social Council of the United Nations, if applicable.</p> <p>FOOTNOTE 2: WHO Constitution, Articles 18, 33, 41 and 71.</p>
<p>4. The objectives of WHO's engagement with non-State actors are to promote global health as articulated in WHO's General Programme of Work and to support implementation of the Organization's policies and recommendations as decided by the governing bodies, as well as the application of WHO's technical norms and standards.</p>	<p>4. (DELETED)</p>	<p>4. (DELETED)</p>

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<p>5. Such a proactive and constructive engagement with non-State actors at global, regional and country levels, in mutual respect and trust, also calls for a number of measures of caution. In order to be able to strengthen its engagement with non-State actors for the benefit of global health and in the interest of all actors, WHO needs simultaneously to strengthen its management of the associated potential risks. This requires a robust framework for engagement that encourages and increases involvement but serves also as an instrument to identify the risks, balancing them against the expected benefits, while protecting and preserving WHO's integrity and reputation. In this way WHO will manage its engagements with non-State actors actively and transparently.</p>	<p>5. WHO's engagement with non-State actors supports implementation of the Organization's policies and recommendations as decided by the governing bodies, as well as the application of WHO's technical norms and standards. Such an effective engagement with non-State actors at global, regional and country levels, [in mutual respect,] also calls for due diligence and transparency measures applicable to non-State actors under this framework [, while exercising [particular] / [appropriate] caution when engaging with particular [industries] [and] / [entities].](DEL) In order to be able to strengthen its engagement with non-State actors for the benefit and interest of global public health, WHO needs simultaneously to strengthen its management of the associated potential risks. This requires a robust framework that enables engagement and serves also as an instrument to identify the risks, balancing them against the expected benefits, while protecting and preserving WHO's integrity, reputation and public health mandate.</p>	<p>5. [WHO's engagement with non-State actors supports implementation of the Organization's policies and recommendations as decided by the governing bodies, as well as the application of WHO's technical norms and standards.] Such [an effective] a—proactive—and—constructive engagement with non-State actors at global, regional and country levels, in mutual respect and trust, also calls [for due diligence and transparency measures applicable to non-State actors under this framework] [, while exercising [particular] / [appropriate] caution when engaging with particular [industries] [and] / [entities].](DEL) In order to be able to strengthen its engagement with non-State actors for the benefit [and interest] of global health and in the interest of all actors, WHO needs simultaneously to strengthen its management of the associated potential risks. This requires a robust framework for engagement that encourages and increases involvement but [that enables engagement and] serves also as an instrument to identify the risks, balancing them against the expected benefits, while protecting and preserving WHO's integrity and [,] reputation [and public health mandate]. In this way WHO will</p>

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		<p>manage its engagements with non-State actors actively and transparently.</p>
<p>Principles</p> <p>6. WHO's engagement with non-State actors is guided by the following overarching principles. Any engagement should:</p> <p>(a) demonstrate a clear benefit to public health;</p> <p>(b) respect the intergovernmental nature of WHO, where the decision-making by WHO's governing bodies is the exclusive prerogative of Member States;</p> <p>(c) support and enhance the scientific and evidence-based approach that underpins WHO's work;</p> <p>(d) protect WHO's processes in setting norms and standards from any undue influence;</p> <p>(e) avoid compromising WHO's integrity, independence, credibility and reputation;</p> <p>(f) be actively managed so as to mitigate any form of risk to WHO (including conflicts of interest);</p> <p>(g) be conducted on the basis of transparency, openness, inclusiveness, accountability, integrity and mutual respect.</p>	<p>Principles</p> <p>6. WHO's engagement with non-State actors is guided by the following overarching principles. Any engagement must:</p> <p>(a) demonstrate a clear benefit to public health;</p> <p>(a bis) conform with WHO's Constitution, mandate and general programme of work</p> <p>(b) respect the intergovernmental nature of WHO and the decision-making authority of Member States as set out in the WHO's Constitution;</p> <p>(c) support and enhance, without compromising, the scientific and evidence-based approach that underpins WHO's work;</p> <p>(d) Protect WHO from any undue influence, in particular on the processes in setting and applying policies, norms and standards;^[3]</p> <p>(e) not compromise WHO's integrity, independence, credibility and reputation;</p> <p>(f) be effectively managed, including by, where possible avoiding conflict of interest^[4] and other forms of risks to WHO;</p> <p>(g) be conducted on the basis of transparency,</p>	<p>Principles</p> <p>6. WHO's engagement with non-State actors is guided by the following overarching principles. Any engagement should [must]:</p> <p>(a) demonstrate a clear benefit to public health;</p> <p>[(a bis) conform with WHO's Constitution, mandate and general programme of work]</p> <p>(b) respect the intergovernmental nature of WHO where the decision-making by WHO's governing bodies is the exclusive prerogative of Member States; and the decision-making authority of Member States as set out in the WHO's Constitution;</p> <p>(c) support and enhance, [without compromising], the scientific and evidence-based approach that underpins WHO's work;</p> <p>(d) Protect WHO's processes in setting norms and standards from any undue influence, [in particular on the processes in setting and applying policies, norms and standards;^[3]]</p> <p>(e) avoid compromising [not compromise] WHO's integrity, independence, credibility and reputation;</p>

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	<p>openness, inclusiveness, accountability, integrity and mutual respect;</p> <p>FOOTNOTE 3: Policies, norms and standard setting includes information gathering, preparation for, elaboration of and the decision on the normative text.</p> <p>FOOTNOTE 4: As set out in paragraphs 23 to 26</p>	<p>(f) be actively [effectively] managed, so as to mitigate any form of risk to WHO (including conflicts of interest); [including by, where possible avoiding conflict of interest[4] and other forms of risks to WHO;]</p> <p>(g) be conducted on the basis of transparency, openness, inclusiveness, accountability, integrity and mutual respect;</p> <p>[FOOTNOTE 3: Policies, norms and standard setting includes information gathering, preparation for, elaboration of and the decision on the normative text.]</p> <p>[FOOTNOTE 4: As set out in paragraphs 23 to 26]</p>
<p>Benefits of engagement</p> <p>7. WHO’s engagement with non-State actors can bring important benefits to global public health and to the Organization itself. For this reason, WHO engages extensively with non-State actors. Engagements range from major, longer-term collaborations to smaller, briefer interactions. Some engagements focus on the benefits that non-State actors can bring to the work of WHO, whereas others focus either on (i) the influence that WHO can have on non-State actors to enhance their impact on global public health or to</p>	<p>Benefits of engagement</p> <p>7. WHO’s engagement with non-State actors can bring important benefits to global public health and to the Organization itself in fulfilment of its constitutional principles and objectives, including its directing and coordinating role in global health. Engagements range from major, longer-term collaborations to smaller, briefer interactions. Benefits arising from such engagement can also include:</p> <p>a) (DELETED)</p> <p>b) the contribution of non-State actors to the work</p>	<p>Benefits of engagement</p> <p>7. WHO’s engagement with non-State actors can bring important benefits to global public health and to the Organization itself [in fulfilment of its constitutional principles and objectives, including its directing and coordinating role in global health (moved from below)]. Engagements range from major, longer-term collaborations to smaller, briefer interactions. Some engagements focus on the benefits that non-State actors can bring to the work of WHO, whereas others focus either on [Benefits arising from such engagement</p>

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<p>influence the social, economic and environmental determinants of health or on (ii) enabling WHO to fulfil its directing and coordinating role in global health.</p>	<p>of WHO c) the influence that WHO can have on non-State actors to enhance their impact on global public health or to influence the social, economic and environmental determinants of health d) the influence that WHO can have on non-State actors' compliance with WHO's policies, norms and standards e) the additional resources non-State actors can contribute to WHO's work f) the wider dissemination of and adherence by non-State actors to WHO's policies, norms and standards</p>	<p>can also include:] a) (DELETED) [b) the contribution of non-State actors to the work of WHO] c) the influence that WHO can have on non-State actors to enhance their impact on global public health or to influence the social, economic and environmental determinants of health [d) the influence that WHO can have on non-State actors' compliance with WHO's policies, norms and standards e) the additional resources non-State actors can contribute to WHO's work f) the wider dissemination of and adherence by non-State actors to WHO's policies, norms and standards]</p>
<p>Risks of engagement</p> <p>8. WHO's engagement with non-State actors can involve risks which need to be avoided or mitigated in accordance with WHO's risk management framework. Major risks relate to the occurrence of the following:</p> <p>(a) conflicts of interest; (b) undue or improper influence exercised by a non-State actor on WHO's work, especially in, but</p>	<p>Risks of engagement</p> <p>8 WHO's engagement with non-State actors can involve risks which need to be effectively managed and, where appropriate, avoided. Risks relate inter alia to the occurrence in particular of the following:</p> <p>(a) conflicts of interest; (b) undue or improper influence exercised by a non-State actor on WHO's</p>	<p>Risks of engagement</p> <p>8 WHO's engagement with non-State actors can involve risks which need to be avoided or mitigated in accordance with WHO's risk management framework [effectively managed and, where appropriate, avoided]. Major Risks relate inter alia to the occurrence in particular of the following:</p> <p>(a) conflicts of interest;</p>

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<p>not limited to, normative and standard-setting activities;</p> <p>(c) a negative impact on WHO’s reputation and credibility;</p> <p>(d) the collaboration being primarily used to serve the interests of the non-State actor concerned with limited benefits for WHO and public health;</p> <p>(e) the collaboration conferring an endorsement of the non-State actor’s name, brand, product or activity;</p> <p>(f) the whitewashing of a non-State actor’s image through an association with WHO;</p> <p>(g) a competitive advantage for a non-State actor.</p>	<p>work, especially in, but not limited to, policies, norms and standard setting [5];</p> <p>(c) a negative impact on WHO’s integrity, independence, reputation and credibility; and public health mandate;</p> <p>(d) the engagement being primarily used to serve the interests of the non-State actor concerned with limited or no benefits for WHO and public health;</p> <p>(e) the engagement conferring an endorsement of the non-State actor’s name, brand, product, views or activity;[6]</p> <p>(f) the whitewashing of a non-State actor’s image through an engagement with WHO;</p> <p>(g) a competitive advantage for a non-State actor.</p> <p>FOOTNOTE 5: Policies, norms and standard setting includes information gathering, preparation for, elaboration of and the decision on the normative text.</p> <p>FOOTNOTE 6: Endorsement does not include established processes such as prequalifications or the WHO Pesticide Evaluation Scheme (WHOPES).</p>	<p>(b) undue or improper influence exercised by a non-State actor on WHO’s work, especially in, but not limited to, policies, norms and standard setting [5];</p> <p>(c) a negative impact on WHO’s integrity, independence, reputation and credibility; and public health mandate;</p> <p>(d) the engagement being primarily used to serve the interests of the non-State actor concerned with limited or no benefits for WHO and public health;</p> <p>(e) the engagement conferring an endorsement of the non-State actor’s name, brand, product, views or activity;[6]</p> <p>(f) the whitewashing of a non-State actor’s image through an engagement with WHO;</p> <p>(g) a competitive advantage for a non-State actor.</p> <p>FOOTNOTE 5: Policies, norms and standard setting includes information gathering, preparation for, elaboration of and the decision on the normative text.</p> <p>FOOTNOTE 6: Endorsement does not include established processes such as prequalifications or</p>

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		the WHO Pesticide Evaluation Scheme (WHOPES).
<p>NON-STATE ACTORS</p> <p>10. Nongovernmental organizations are non-profit entities that operate independently of governments. They are usually membership-based, with non-profit entities or individuals as members exercising voting rights in relation to the policies of the nongovernmental organization, or are otherwise constituted with non-profit, public-interest goals. They shall be free from concerns which are primarily of a private, commercial or profit-making nature. They shall have the authority to speak for their members through their authorized representatives. They include grassroots community organizations, civil society groups and networks, faith-based organizations, professional groups, disease-specific groups, and patient groups.</p>	<p>NON-STATE ACTORS</p> <p>10 Nongovernmental organizations are non-profit entities that operate independently of governments. They are usually membership-based, with non-profit entities or individuals as members exercising voting rights in relation to the policies of the nongovernmental organization, or are otherwise constituted with non-profit, public-interest goals. They are free from concerns which are primarily of a private, commercial or profit-making nature. They could include, for example, grassroots community organizations, civil society groups and networks, faith-based organizations, professional groups, disease-specific groups, and patient groups.</p>	<p>NON-STATE ACTORS</p> <p>10 Nongovernmental organizations are non-profit entities that operate independently of governments. They are usually membership-based, with non-profit entities or individuals as members exercising voting rights in relation to the policies of the nongovernmental organization, or are otherwise constituted with non-profit, public-interest goals. They shall be [are] free from concerns which are primarily of a private, commercial or profit-making nature. They shall have the authority to speak for their members through their authorized representatives. They [could] include, for example, grassroots community organizations, civil society groups and networks, faith-based organizations, professional groups, disease-specific groups, and patient groups.</p>
<p>11. Private sector entities are commercial enterprises, that is to say businesses that are intended to make a profit for their owners. The term also refers to entities that represent, or are governed or controlled by, private sector entities.</p>	<p>11. Private sector entities are commercial enterprises, that is to say businesses that are intended to make a profit for their owners. The term also refers to entities that represent, or are governed or controlled by, private sector entities.</p>	<p>11. Private sector entities are commercial enterprises, that is to say businesses that are intended to make a profit for their owners. The term also refers to entities that represent, or are governed or controlled by, private sector entities.</p>

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<p>This group includes (but is not limited to) business associations representing commercial enterprises, entities not “at arms’ length”[3] from their commercial sponsors, and partially or fully State-owned commercial enterprises acting like private sector entities.</p> <p><i>International business associations</i> are private sector entities that do not intend to make a profit for themselves but represent the interests of their members, which are commercial enterprises and/or national or other business associations. For the purposes of this framework, they shall have the authority to speak for their members through their authorized representatives. Their members shall exercise voting rights in relation to the policies of the international business association.</p> <p>FOOTNOTE 3: An entity is “at arm’s length” from another entity if it does not take instructions and is not clearly influenced in its decisions by the other entity.</p>	<p>This group includes (but is not limited to) business associations representing commercial enterprises, entities not “at arm’s length”[7] from their commercial sponsors, and partially or fully State-owned commercial enterprises acting like private sector entities.</p> <p><i>International business associations</i> are private sector entities that do not intend to make a profit for themselves but represent the interests of their members, which are commercial enterprises and/or national or other business associations. For the purposes of this framework, they shall have the authority to speak for their members through their authorized representatives. Their members shall exercise voting rights in relation to the policies of the international business association.</p> <p>FOOTNOTE 7: An entity is “at arm’s length” from another entity if it is independent from the other entity, does not take instructions and is clearly not influenced or clearly not reasonably perceived to be influenced in its decisions and work by the other entity.</p>	<p>This group includes (but is not limited to) business associations representing commercial enterprises, entities not “at arm’s length”[7] from their commercial sponsors, and partially or fully State-owned commercial enterprises acting like private sector entities.</p> <p><i>International business associations</i> are private sector entities that do not intend to make a profit for themselves but represent the interests of their members, which are commercial enterprises and/or national or other business associations. For the purposes of this framework, they shall have the authority to speak for their members through their authorized representatives. Their members shall exercise voting rights in relation to the policies of the international business association.</p> <p>FOOTNOTE 7: An entity is “at arm’s length” from another entity if it [is independent from the other entity], does not take instructions and is clearly not influenced [or clearly not reasonably perceived to be influenced] in its decisions [and work] by the other entity.</p>
<p>12. Philanthropic foundations are non-profit entities whose assets are provided by donors and</p>	<p>12. Philanthropic foundations are non-profit entities whose assets are provided by donors and</p>	<p>-NO CHANGES-</p> <p>12. Philanthropic foundations are non-profit</p>

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<p>whose income is spent on socially useful purposes. They shall be clearly independent from any private sector entity in their governance and decision-making.</p>	<p>whose income is spent on socially useful purposes. They shall be clearly independent from any private sector entity in their governance and decision-making.</p>	<p>entities whose assets are provided by donors and whose income is spent on socially useful purposes. They shall be clearly independent from any private sector entity in their governance and decision-making.</p>
<p>13. Academic institutions are entities engaged in the pursuit and dissemination of knowledge through research, education and training.</p>	<p>13 Academic institutions are entities engaged in the pursuit and dissemination of knowledge through research, education and training. [8] FOOTNOTE 8: This can include think tanks which are policy-oriented institutions, as long as they primarily perform research; while international associations of academic institutions are considered as non-governmental organizations, subject to paragraph 14.</p>	<p>13 Academic institutions are entities engaged in the pursuit and dissemination of knowledge through research, education and training. [8] [FOOTNOTE 8: This can include think tanks which are policy-oriented institutions, as long as they primarily perform research; while international associations of academic institutions are considered as non-governmental organizations, subject to paragraph 14.]</p>
<p>14. For each of the four groups of entities above, the overarching framework and the respective specific policy on engagement apply. WHO will determine through its due diligence if a non-State actor is subject to the influence of private sector entities such that the non-State actor has to be considered itself a private sector entity. If the decision-making processes of a non-State actor remain independent of the private sector influence, WHO can decide to consider the entity as a nongovernmental organization, a</p>	<p>14 For each of the four groups of entities above, the overarching framework and the respective specific policy on engagement apply. WHO will determine through its due diligence if a non-State actor is subject to the influence of private sector entities to the extent that the non-State actor has to be considered itself a private sector entity. Such influence can be exerted through financing, participation in decision making or otherwise. Provided that the decision-making processes and bodies of a non-State actor remain independent of</p>	<p>14 For each of the four groups of entities above, the overarching framework and the respective specific policy on engagement apply. WHO will determine through its due diligence if a non-State actor is subject to the influence of private sector entities such that [to the extent that] the non-State actor has to be considered itself a private sector entity. [Such influence can be exerted through financing, participation in decision making or otherwise]. If [Provided that] the decision-making processes and bodies of a non-</p>

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<p>philanthropic foundation or an academic institution, but may apply relevant provisions of the private sector policy, such as not accepting funding for normative work.</p>	<p>undue influence from the private sector, WHO can decide to consider the entity as a nongovernmental organization, a philanthropic foundation or an academic institution, but may apply relevant provisions of the WHO’s policy and operational procedures on engagement with private sector entities, such as not accepting financial and in-kind contributions for use in the normative work.</p>	<p>State actor remain independent of [undue influence from] the private sector influence, WHO can decide to consider the entity as a nongovernmental organization, a philanthropic foundation or an academic institution, but may apply relevant provisions of the [WHO’s] private sector policy [and operational procedures on engagement with private sector entities], such as not accepting funding for [financial and in-kind contributions for use in the] normative work.</p>
<p>TYPES OF INTERACTION</p> <p>15. The following are categories of interaction in which WHO engages with non-State actors. Each type of interaction can take different forms, be subject to different levels of risk and can involve different levels and types of engagement by the Organization.</p>	<p>TYPES OF INTERACTION</p> <p>VERSION AS OF 10 JULY</p> <p>15. The following are categories of interaction in which WHO engages with non-State actors. Each type of interaction can take different forms, be subject to different levels of risk and can involve different levels and types of engagement by the Organization.</p> <p>VERSION AS PROPOSED BY THE CHAIR ON 9 OCTOBER</p> <p>15. The following are categories of interaction in which WHO engages with non-State actors. Each type of interaction can take different forms, be subject to different levels of risk and can involve different levels and types of engagement by the</p>	<p>TYPES OF INTERACTION</p> <p>VERSION AS OF 10 JULY</p> <p>15. The following are categories of interaction in which WHO engages with non-State actors. Each type of interaction can take different forms, be subject to different levels of risk and can involve different levels and types of engagement by the Organization.</p> <p>VERSION AS PROPOSED BY THE CHAIR ON 9 OCTOBER</p> <p>15. The following are categories of interaction in which WHO engages with non-State actors. Each type of interaction can take different forms, be subject to different levels of risk and can involve different levels and types of engagement by the</p>

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	<p>Organization. Procurement of goods and services is not considered as an engagement under this Framework. [REDACTED]</p> <p>15bis In the case of emergency response, the procedures of this Framework do not apply. [REDACTED]</p>	<p>Organization. Procurement of goods and services is not considered as an engagement under this Framework. [REDACTED]</p> <p>15bis In the case of emergency response, the procedures of this Framework do not apply. [REDACTED]</p>
<p>Participation</p> <p>16. Non-State actors may attend various types of meetings organized by WHO. The nature of their participation depends on the type of meeting concerned.</p>	<p>Participation</p> <p>16. Non-State actors may attend various types of meetings organized by WHO. The nature of their participation depends on the type of meeting concerned. The format, modalities, and the participation of non-State actors in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. [REDACTED]</p>	<p>Participation</p> <p>16. Non-State actors may attend various types of meetings organized by WHO. The nature of their participation depends on the type of meeting concerned. [The format, modalities, and the participation of non-State actors in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat.]</p>
<p>(a) Meetings of the governing bodies. This type involves sessions of the World Health Assembly, the Executive Board and the six regional committees. Non-State actors' participation is determined by the governing bodies' respective rules of procedure, policies and practices as well as the section of this framework that deals with official relations.</p> <p>(b) Consultations. This type includes any physical or virtual meeting, other than governing body sessions, organized for the purpose of</p>	<p>(a) Meetings of the governing bodies. This type involves sessions of the World Health Assembly, the Executive Board and the six regional committees. Non-State actors' participation is determined by the governing bodies' respective rules of procedure, policies and practices as well as the section of this framework that deals with official relations. [REDACTED]</p> <p>(b) Consultations. This type includes any physical or virtual meeting, other than governing body sessions, organized for the purpose of</p>	<p>(a) Meetings of the governing bodies. This type involves sessions of the World Health Assembly, the Executive Board and the six regional committees. Non-State actors' participation is determined by the governing bodies' respective rules of procedure, policies and practices as well as the section of this framework that deals with official relations. [REDACTED]</p> <p>(b) Consultations. This type includes any physical or virtual meeting, other than governing body sessions, organized for the purpose of</p>

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<p>exchanging information and views. There are no limits imposed on non-State actors' participation at such meetings.</p> <p>(c) Hearings. These are meetings in which the participants can present their evidence, views and positions and be questioned about them but do not enter into a debate. Hearings can be electronic or in person. All interested entities should be invited on the same basis. The participants and positions presented during hearings shall be documented.</p> <p>(d) Other meetings. These are meetings that are not part of the process of setting policies or norms; examples include information meetings, briefings, scientific conferences, and platforms for coordination of actors. There are no limits imposed on non-State actors' participation at such meetings.</p>	<p>exchanging information and views. Inputs received from non-State actors shall be made publicly available, wherever possible. [REDACTED]</p> <p>(c) Hearings. These are meetings in which the participants can present their evidence, views and positions and be questioned about them but do not enter into a debate. Hearings can be electronic or in person. All interested entities should be invited on the same basis. The participants and positions presented during hearings shall be documented and shall be made publicly available, wherever possible. [REDACTED]</p> <p>(d) Other meetings. These are meetings that are not part of the process of setting policies or norms; examples include information meetings, briefings, scientific conferences, and platforms for coordination of actors. [REDACTED]</p>	<p>exchanging information and views. There are no limits imposed on non-State actors' participation at such meetings. [Inputs received from non-State actors shall be made publicly available, wherever possible.] [REDACTED]</p> <p>(c) Hearings. These are meetings in which the participants can present their evidence, views and positions and be questioned about them but do not enter into a debate. Hearings can be electronic or in person. All interested entities should be invited on the same basis. The participants and positions presented during hearings shall be documented [and shall be made publicly available, wherever possible.] [REDACTED]</p> <p>(d) Other meetings. These are meetings that are not part of the process of setting policies or norms; examples include information meetings, briefings, scientific conferences, and platforms for coordination of actors. There are no limits imposed on non-State actors' participation at such meetings. [REDACTED]</p>
<p>17. WHO's involvement in meetings organized by a non-State actor can – subject to the provisions of this framework and the Organization's applicable rules, policies and procedures – consist</p>	<p>17. WHO's involvement in meetings organized wholly or partly by a non-State actor can – subject to the provisions of this framework, its four specific policies and operational procedures, and</p>	<p>17. WHO's involvement in meetings organized [wholly or partly] by a non-State actor can – subject to the provisions of this framework, [its four specific policies and operational procedures,</p>

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<p>of any one of the following possibilities:</p> <ul style="list-style-type: none"> • WHO jointly organizes the meeting with the non-State actor • WHO cosponsors a meeting organized by the non-State actor • WHO staff make a presentation or act as panellists at a meeting organized by the non-State actor • WHO staff attend a meeting organized by a non-State actor. 	<p>other applicable WHO rules, policies and procedures – consist of any one of the following possibilities:</p> <ul style="list-style-type: none"> • WHO jointly organizes the meeting with the non-State actor • WHO cosponsors a meeting [9] organized by the non-State actor • WHO staff make a presentation or act as panellists at a meeting organized by the non-State actor • WHO staff attend a meeting organized by a non-State actor. <p>FOOTNOTE 9: Cosponsorship of a meeting means: (1) another entity has the primary responsibility for organizing the meeting; and (2) WHO supports and contributes to the meeting and its proceedings; and (3) WHO reserves the right to clear the agenda of the meeting, the list of participants and the outcome documents of the meeting.</p>	<p>and other] applicable WHO rules, policies and procedures – consist of any one of the following possibilities:</p> <ul style="list-style-type: none"> • WHO jointly organizes the meeting with the non-State actor • WHO cosponsors a meeting [9] organized by the non-State actor • WHO staff make a presentation or act as panellists at a meeting organized by the non-State actor • WHO staff attend a meeting organized by a non-State actor. <p>[FOOTNOTE 9: Cosponsorship of a meeting means: (1) another entity has the primary responsibility for organizing the meeting; and (2) WHO supports and contributes to the meeting and its proceedings; and (3) WHO reserves the right to clear the agenda of the meeting, the list of participants and the outcome documents of the meeting.]</p>
<p>Evidence</p> <p>19. Evidence includes the gathering, analysis and generation of information, and the management of knowledge and research.</p>	<p>Evidence</p> <p>19. For the purposes of this framework, evidence refers to inputs based on up-to-date information, knowledge on technical issues, and consideration of scientific facts, independently</p>	<p>Evidence</p> <p>19. [For the purposes of this framework, evidence refers to inputs based on up-to-date information, knowledge on technical issues, and consideration of scientific facts, independently</p>

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	<p>analysed by WHO. Evidence generation by WHO includes information gathering, analysis, generation of information and the management of knowledge and research. Non-State actors may provide their up-to-date information and knowledge on technical issues, and share their experience with WHO, as appropriate, subject to the provisions of this framework, its four specific policies and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.</p>	<p>analysed by WHO.] Evidence [generation by WHO] includes [information] gathering, analysis, generation of information and the management of knowledge and research. [Non-State actors may provide their up-to-date information and knowledge on technical issues, and share their experience with WHO, as appropriate, subject to the provisions of this framework, its four specific policies and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.]</p>
<p>Advocacy</p> <p>20. Advocacy is action to increase awareness of health issues, including issues that receive insufficient attention; to change behaviours in the interest of public health; and to foster collaboration and greater coherence between non-State actors where joint action is required.</p>	<p>Advocacy</p> <p>20. Advocacy is action to increase awareness of health issues, including issues that receive insufficient attention; to change behaviours in the interest of public health; and to foster collaboration and greater coherence between non-State actors where joint action is required.</p>	<p>-NO CHANGES-</p> <p>Advocacy</p> <p>20. Advocacy is action to increase awareness of health issues, including issues that receive insufficient attention; to change behaviours in the interest of public health; and to foster collaboration and greater coherence between non-State actors where joint action is required.</p>
<p>Technical collaboration</p> <p>21. For the purpose of this framework, technical collaboration refers to other collaboration with</p>	<p>Technical collaboration</p> <p>21. For the purpose of this framework, technical collaboration refers to other collaboration with</p>	<p>Technical collaboration</p> <p>21. For the purpose of this framework, technical collaboration refers to other collaboration with</p>

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<p>non-State actors, as appropriate, in activities that fall within the General Programme of Work, including:</p> <ul style="list-style-type: none"> • product development • capacity-building • support to policy-making at the national level • operational collaboration in emergencies • contributing to the implementation of WHO's policies. 	<p>non-State actors, as appropriate, in activities that fall within the General Programme of Work, including:</p> <ul style="list-style-type: none"> • product development • capacity-building • operational collaboration in emergencies • contributing to the implementation of WHO's policies. 	<p>non-State actors, as appropriate, in activities that fall within the General Programme of Work, including:</p> <ul style="list-style-type: none"> • product development • capacity-building • support to policy-making at the national level • operational collaboration in emergencies • contributing to the implementation of WHO's policies
<p>MANAGEMENT OF CONFLICT OF INTEREST AND OTHER RISKS OF ENGAGEMENT</p> <p>22. Managing conflict of interest and other risks of engagement requires a series of steps, as set out below. [4]</p> <ul style="list-style-type: none"> • WHO needs to know the non-State actors that it engages with. Therefore each non-State actor is required to provide information about itself and its activities, following which WHO conducts the necessary due diligence. • WHO conducts a risk assessment in order to identify the specific risks of engagement associated with each engagement with a non-State actor. • Risks of engagement need to be managed and communicated coherently throughout the 	<p>MANAGEMENT OF CONFLICT OF INTEREST AND OTHER RISKS OF ENGAGEMENT</p> <p>22. Managing, including by, where appropriate, avoiding, conflict of interest and other risks of engagement requires a series of steps, as set out below: [10]</p> <ul style="list-style-type: none"> •WHO needs to know the non-State actors that it engages with. Therefore each non-State actor is required to provide all relevant [11] information about itself and its activities, following which WHO conducts the necessary due diligence. •WHO conducts a risk assessment in order to identify the specific risks of engagement associated with each engagement with a non-State actor. •Risks of engagement need to be managed and 	<p>MANAGEMENT OF CONFLICT OF INTEREST AND OTHER RISKS OF ENGAGEMENT</p> <p>22. Managing [, including by, where appropriate, avoiding,] conflict of interest and other risks of engagement requires a series of steps, as set out below: [10]</p> <ul style="list-style-type: none"> •WHO needs to know the non-State actors that it engages with. Therefore each non-State actor is required to provide [all relevant [11]] information about itself and its activities, following which WHO conducts the necessary due diligence. •WHO conducts a risk assessment in order to identify the specific risks of engagement associated with each engagement with a non-State actor. •Risks of engagement need to be managed and

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<p>Organization. To that end, WHO manages engagement through a single, Organization-wide electronic tool.[5]</p> <ul style="list-style-type: none"> • Member States need to exercise oversight over WHO’s engagement with non-State actors. With this in mind, the Director-General reports on engagement involving non-State actors to the Executive Board through the Programme, Budget and Administration Committee and makes all engagements publicly known through the register of non-State actors. <p>FOOTNOTE 4: The framework is designed to regulate institutional engagements; its implementation is closely coordinated with the implementation of other organizational policies regulating conflict of interest in respect of individuals (see paragraph 48).</p> <p>FOOTNOTE 5: WHO uses an electronic tool for managing engagement. The publicly visible part of the tool is the register of non-State actors; the tool also provides an electronic workflow for the internal management of engagement. A similar electronic tool is used for the management of individual conflicts of interest in order to harmonize the implementation of the framework</p>	<p>communicated coherently in each of the three levels of the Organization and throughout the Organization. To that end, WHO manages engagement through a single, Organization-wide electronic tool. [12]</p> <ul style="list-style-type: none"> •Member States exercise oversight over WHO’s engagement with non-State actors in accordance with the provisions in paragraphs 65 and 66 <p>FOOTNOTE 10: The framework is designed to regulate institutional engagements; its implementation is closely coordinated with the implementation of other organizational policies regulating conflict of interest in respect of individuals (see paragraph 48).</p> <p>FOOTNOTE 11: As defined in paragraph 38bis.</p> <p>FOOTNOTE 12: WHO uses an electronic tool for managing engagement. As described in footnote 1 of paragraph 38, the publicly visible part of the tool is the register of non-State actors; the tool also provides an electronic workflow for the internal management of engagement. A similar electronic tool is used for the management of individual conflicts of interest, in order to harmonize the implementation of the framework with the implementation of the policy on</p>	<p>communicated coherently [in each of the three levels of the Organization and] throughout the Organization. To that end, WHO manages engagement through a single, Organization-wide electronic tool. [12]</p> <p>Member States need to exercise oversight over WHO’s engagement with non-State actors [in accordance with the provisions in paragraphs 65 and 66] With this in mind, the Director-General reports on engagement involving non-State actors to the Executive Board through the Programme, Budget and Administration Committee and makes all engagements publicly known through the register of non-State actors.</p> <p>FOOTNOTE 10: The framework is designed to regulate institutional engagements; its implementation is closely coordinated with the implementation of other organizational policies regulating conflict of interest in respect of individuals (see paragraph 48). [FOOTNOTE 11: As defined in paragraph 38bis.]</p> <p>FOOTNOTE 12: WHO uses an electronic tool for managing engagement. [As described in footnote 1 of paragraph 38,] the publicly visible part of the tool is the register of non-State actors; the tool</p>

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<p>with the implementation of the policy on management of individual conflicts of interest for experts.</p>	<p>management of individual conflicts of interest for experts.</p>	<p>also provides an electronic workflow for the internal management of engagement. A similar electronic tool is used for the management of individual conflicts of interest, in order to harmonize the implementation of the framework with the implementation of the policy on management of individual conflicts of interest for experts.</p>
<p>23. A conflict of interest arises in circumstances where a secondary interest (a vested interest in the outcome of WHO’s work in a given area) unduly influences, or may reasonably be perceived to unduly influence, the independence and objectivity of professional judgment or actions regarding a primary interest (WHO’s work). The existence of conflict of interest does not as such mean that improper action has occurred, but rather that the risk of such improper action occurring exists.</p>	<p>23. A conflict of interest arises in circumstances where there is potential for a secondary interest (a vested interest in the outcome of WHO’s work in a given area) to unduly influence, or where it may be reasonably perceived to unduly influence, either the independence or objectivity of professional judgement or actions regarding a primary interest (WHO’s work) The existence of conflict of interest in all its forms does not as such mean that improper action has occurred, but rather the risk of such improper action occurring. Conflicts of interest are not only financial, but can take other forms as well.</p> <p>23bis. Individual conflicts of interests within WHO are those involving experts, regardless of their status, and staff members; these are addressed in accordance with the policies listed under</p>	<p>23. A conflict of interest arises in circumstances where [there is potential for a] secondary interest (a vested interest in the outcome of WHO’s work in a given area) [to] unduly influences, or [where] it may be reasonably perceived to unduly influence, [either] the independence and [or] objectivity of professional judgement or actions regarding a primary interest (WHO’s work) The existence of conflict of interest [in all its forms] does not as such mean that improper action has occurred, but rather the risk of such improper action occurring exists. [Conflicts of interest are not only financial, but can take other forms as well.]</p> <p>[23bis. Individual conflicts of interests within WHO are those involving experts, regardless of their status, and staff members; these are addressed in</p>

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	paragraph 48 of the present framework.	accordance with the policies listed under paragraph 48 of the present framework.]
<p>24. All institutions have multiple interests, which means that in engaging with non-State actors WHO is often faced with a combination of converging and conflicting interests. An institutional conflict of interest is a situation where WHO's primary interest may be influenced by the conflicting interest of a non-State actor in a way that affects, or may reasonably be perceived to affect, the independence and objectivity of WHO's work.</p>	<p>24. All institutions have multiple interests, which means that in engaging with non-State actors WHO is often faced with a combination of converging and conflicting interests. An institutional conflict of interest is a situation where WHO's primary interest as reflected in its Constitution may be unduly influenced by the conflicting interest of a non-State actor in a way that affects, or may reasonably be perceived to affect, the independence and objectivity of WHO's work.</p>	<p>24. All institutions have multiple interests, which means that in engaging with non-State actors WHO is often faced with a combination of converging and conflicting interests. An institutional conflict of interest is a situation where WHO's primary interest [as reflected in its Constitution] may be unduly influenced by the conflicting interest of a non-State actor in a way that affects, or may reasonably be perceived to affect, the independence and objectivity of WHO's work.</p>
<p>25. In actively managing institutional conflict of interest and the other risks of engagement mentioned in paragraph 8 above, WHO aims to avoid allowing the conflicting interests of a non-State actor to exert undue influence over the Organization's decision-making process or to prevail over its interests.</p>	<p>25. In actively managing institutional conflict of interest and the other risks of engagement mentioned in paragraph 8 above, WHO aims to avoid allowing the conflicting interests of a non-State actor to exert, or be reasonably perceived to exert, undue influence over the Organization's decision-making process or to prevail over its interests;</p>	<p>25. In actively managing institutional conflict of interest and the other risks of engagement mentioned in paragraph 8 above, WHO aims to avoid allowing the conflicting interests of a non-State actor to exert [, or be reasonably perceived to exert,] undue influence over the Organization's decision-making process or to prevail over its interests;</p>
<p>26. For WHO the most important institutional conflicts of interest arise in situations where the economic interests of private sector entities are in conflict with WHO's interests, especially the</p>	<p>26. For WHO, the potential risk of institutional conflicts of interest could be the highest in situations where the interest of non-State actors, in particular economic, commercial or financial,</p>	<p>26. For WHO, the most important institutional conflicts of interest arise [the potential risk of institutional conflicts of interest could be the highest in] situations where the economic</p>

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<p>Organization’s independence and impartiality in setting norms and standards.</p>	<p>are in conflict with WHO’s public health policies, constitutional mandate and interests, in particular the Organization’s independence and impartiality in setting policies, norms and standards.</p>	<p>interests of non-State actors [, in particular economic, commercial or financial,] are in conflict with WHO’s [public health policies, constitutional mandate and] interests, especially [in particular] the Organization’s independence and impartiality in setting [policies,] norms and standards.</p>
<p>Due diligence and risk assessment</p> <p>27. When the possibility of entering into an engagement is being considered, the relevant technical unit in the Secretariat conducts an initial examination in order to establish whether such an engagement would be in the interest of the Organization and in line with the priorities defined in the General Programme of Work and Programme budget. If this seems to be the case, the technical unit asks the non-State actor to provide its basic information. Using the Organization-wide electronic tool, the unit then complements this information with a description of the proposed engagement and its own assessment of the benefits and risks involved. This information is then transmitted to a specialized central unit which is responsible for analysing the information provided.</p>	<p>Due diligence and risk assessment</p> <p>27. When the possibility of entering into an engagement is being considered, the relevant technical unit in the Secretariat conducts an initial examination in order to establish whether such an engagement would be in the interest of the Organization and in line with the principles of WHO’s engagement with non-State actors in paragraph 6 and the priorities defined in the General Programme of Work and Programme budget. If this seems to be the case, the technical unit asks the non-State actor to provide its basic information. Using the Organization-wide electronic tool, the unit then complements this information with a description of the proposed engagement and its own assessment of the benefits and risks involved. This information is then transmitted to a specialized central unit which is responsible for analysing the information</p>	<p>Due diligence and risk assessment</p> <p>27. When the possibility of entering into an engagement is being considered, the relevant technical unit in the Secretariat conducts an initial examination in order to establish whether such an engagement would be in the interest of the Organization and in line with the [principles of WHO’s engagement with non-State actors in paragraph 6 and the] priorities defined in the General Programme of Work and Programme budget. If this seems to be the case, the technical unit asks the non-State actor to provide its basic information. Using the Organization-wide electronic tool, the unit then complements this information with a description of the proposed engagement and its own assessment of the benefits and risks involved. This information is then transmitted to a specialized central unit which is responsible for analysing the information</p>

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	provided.	provided.
<p>28. Before engaging with any non-State actor, WHO, in order to preserve its integrity, conducts due diligence. This refers to the steps taken by WHO to find and verify information on a non-State actor and to reach a basic understanding of its profile. While due diligence refers to the nature of the non-State actor concerned, risk assessment refers to the assessment of a specific proposed engagement with that non-State actor.</p>	<p>28. Before engaging with any non-State actor, WHO, in order to preserve its integrity, conducts due diligence and risk assessment. Due diligence refers to the steps taken by WHO to find and verify relevant information on a non-State actor and to reach a clear understanding of its profile. While due diligence refers to the nature of the non-State actor concerned, risk assessment refers to the assessment of a specific proposed engagement with that non-State actor.</p>	<p>28. Before engaging with any non-State actor, WHO, in order to preserve its integrity, conducts due diligence [and risk assessment]. This [Due diligence] refers to the steps taken by WHO to find and verify [relevant] information on a non-State actor and to reach a basic [clear] understanding of its profile. While due diligence refers to the nature of the non-State actor concerned, risk assessment refers to the assessment of a specific proposed engagement with that non-State actor.</p>
<p>29. Due diligence combines a review of the information provided by the non-State actor, a search for information about the entity concerned from other sources, and an analysis of all the information obtained. This includes a screening of different public and commercial sources of information, including: media; companies' analyst reports, directories and profiles; and public and governmental sources (governmental registers, charity commissions, registers of trade and industry).</p>	<p>29. Due diligence combines a review of the information provided by the non-State actor, a search for information about the entity concerned from other sources, and an analysis of all the information obtained. This includes a screening of different public, legal and commercial sources of information, including: media; the entity's website companies' analyst reports, directories and profiles; and public , legal and governmental sources.</p>	<p>29. Due diligence combines a review of the information provided by the non-State actor, a search for information about the entity concerned from other sources, and an analysis of all the information obtained. This includes a screening of different public, legal and commercial sources of information, including: media; [the entity's website], companies' analyst reports, directories and profiles; and public , [legal] and governmental sources (governmental—registers,—charity commissions, registers of trade and industry).</p>
<p>30. The principal functions of due diligence are to:</p> <ul style="list-style-type: none"> • clarify the interest of the entity in engaging with 	<p>30. The core functions of due diligence are to:</p> <ul style="list-style-type: none"> • clarify the nature and purpose of the entity 	<p>30. The principal [core] functions of due diligence are to:</p>

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<p>WHO and what they expect in return;</p> <ul style="list-style-type: none"> determine the entity’s status, area of activities, governance, sources of funding, constitution, statutes, and by-laws and affiliation; define the main elements of the history and activities of the entity in terms of the following: human and labour issues; environmental, ethical and business issues; reputation and image; and financial stability; identify “red lines” such as: activities that are incompatible with WHO’s work and mandate (e.g. links to the tobacco and arms industries) or that require the Organization to exercise particular caution when engaging with the entity (e.g. links to other industries affecting human health or affected by WHO’s norms and standards).[6] <p>FOOTNOTE 6: As described in paragraph 44.</p>	<p>proposed to engage with WHO;</p> <ul style="list-style-type: none"> clarify the interest and objectives of the entity in engaging with WHO and what it expects in return; determine the entity’s legal status, area of activities, membership, governance, sources of funding, constitution, statutes, and by-laws and affiliation; define the main elements of the history and activities of the entity in terms of the following: health, human and labour issues; environmental, ethical and business issues; reputation and image; and financial stability; <p>ORIGINAL CHAIR/S PROPOSAL Identify if the nature or activities of a NSA are incompatible with WHO/s work and mandate (e.g. links to be tobacco and arms industries) or if they require the Organization to exercise particular caution when engaging with the entity (e.g. links to other industries affecting human health or affected by WHO/s norms and standards (FOOTNOTE As described in paragraph 44)</p> <p><u>OR</u></p> <p>[Identify if the nature or activities of a non-State actor and the type of relationship foreseen with</p>	<p>[clarify the nature and purpose of the entity proposed to engage with WHO;]</p> <ul style="list-style-type: none"> clarify the interest and objectives of the entity in engaging with WHO and what it expects in return;] determine the entity’s [legal] status, area of activities, [membership], governance, sources of funding, constitution, statutes, and by-laws and affiliation; define the main elements of the history and activities of the entity in terms of the following: [health], human and labour issues; environmental, ethical and business issues; reputation and image; and financial stability; <p>ORIGINAL CHAIR/S PROPOSAL Identify if the nature or activities of a NSA are incompatible with WHO/s work and mandate (e.g. links to be tobacco and arms industries) or if they require the Organization to exercise particular caution when engaging with the entity (e.g. links to other industries affecting human health or affected by WHO/s norms and standards (FOOTNOTE As described in paragraph 44)</p> <p><u>OR</u></p> <p>[Identify if the nature or activities of a non-State</p>

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	<p>WHO are incompatible with WHO's work and mandate or if they require the Organization to exercise particular caution when engaging with the entity after applying the provisions of paragraphs 44 and 44bis]</p> <p><u>OR</u></p> <p>[Identify if the nature or activities of a non-State actor are incompatible with WHO/s work and mandate or if they require the Organization to exercise particular caution when engaging ...]</p>	<p>actor and the type of relationship foreseen with WHO are incompatible with WHO's work and mandate or if they require the Organization to exercise particular caution when engaging with the entity after applying the provisions of paragraphs 44 and 44bis]</p> <p><u>OR</u></p> <p>[Identify if the nature or activities of a non-State actor are incompatible with WHO/s work and mandate or if they require the Organization to exercise particular caution when engaging ...]</p>
<p>31. Due diligence also allows the Secretariat for the purpose of its engagement to categorize each non-State actor in relation to one of the four groups of non-State actors on the basis of its nature, objectives, governance, funding, independence and membership. This categorization is indicated in the register of non-State actors.</p>	<p>31. Due diligence also allows the Secretariat for the purpose of its engagement to categorize each non-State actor in relation to one of the four groups of non-State actors on the basis of its nature, objectives, governance, funding, independence and membership. This categorization is indicated in the register of non-State actors.</p>	<p>-NO CHANGES-</p> <p>31. Due diligence also allows the Secretariat for the purpose of its engagement to categorize each non-State actor in relation to one of the four groups of non-State actors on the basis of its nature, objectives, governance, funding, independence and membership. This categorization is indicated in the register of non-State actors.</p>
<p>32. Risks are the expression of the likelihood and potential impact of an event that would affect the Organization's ability to achieve its objectives. A risk assessment on a proposed engagement is conducted in parallel to due diligence. This</p>	<p>32 Risks are the expression of the likelihood and potential impact of an event that would affect the Organization's ability to achieve its objectives. A risk assessment on a proposed engagement is conducted in addition to due diligence. This</p>	<p>32 Risks are the expression of the likelihood and potential impact of an event that would affect the Organization's ability to achieve its objectives. A risk assessment on a proposed engagement is conducted in parallel-[addition] to due diligence.</p>

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<p>involves the assessment of risks associated with an engagement with a non-State actor, in particular the risks described in paragraph 8.</p>	<p>involves the assessment of risks associated with an engagement with a non-State actor, in particular the risks described in paragraph 8.</p>	<p>This involves the assessment of risks associated with an engagement with a non-State actor, in particular the risks described in paragraph 8.</p>
<p>Risk management</p> <p>33. Risk management concerns the process leading to a management decision on the part of the Secretariat. The Secretariat decides on entry into engagement, continuation of engagement, engagement with measures to mitigate risks, non-engagement or disengagement from an existing or planned engagement with non-State actors on the basis of an explicit management decision. The management decision is usually taken by the management of the unit engaging with a non-State actor.</p>	<p>Risk management</p> <p>33. Risk management concerns the process leading to a management decision whereby the Secretariat decides explicitly and justifiably on entry into engagement,[13] continuation of engagement, engagement with measures to mitigate risks, non-engagement or disengagement from an existing or planned engagement with non-State actors. It is a management decision usually taken by the unit engaging with the non-State actor.</p> <p>FOOTNOTE 13: Other than decisions related to official relations as set out in paragraphs 49 to 55.</p>	<p>Risk management</p> <p>33. Risk management concerns the process leading to a management decision on the part of the Secretariat. The Secretariat [whereby the Secretariat] decides [explicitly and justifiably] on entry into engagement,[13] continuation of engagement, engagement with measures to mitigate risks, non-engagement or disengagement from an existing or planned engagement with non-State actors on the basis of an explicit management decision. The [It is a] management decision usually taken by the management of the unit engaging with the non-State actor.</p> <p>[FOOTNOTE 13: Other than decisions related to official relations as set out in paragraphs 49 to 55.]</p>
<p>34. The unit responsible for performing due diligence and risk assessment formulates recommendations on the engagement-related options listed in paragraph 33 above. If the proposing unit agrees with the recommendations it implements them. If there are disagreements</p>	<p>34. The specialized unit responsible for performing due diligence and risk assessment, as described in paragraph 27, formulates recommendations on the engagement-related options listed in paragraph 33 above, along with reasons for such recommendations. If the</p>	<p>34. The [specialized] unit responsible for performing due diligence and risk assessment [, as described in paragraph 27,] formulates recommendations on the engagement-related options listed in paragraph 33 above [, along with reasons for such recommendations]. If the</p>

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<p>they can be referred to the engagement coordination group.</p>	<p>proposing unit agrees with the recommendations, it implements them. If there are disagreements, they can be referred to the Engagement Coordination Group. [...]</p>	<p>proposing unit agrees with the recommendations, it implements them. If there are disagreements, they can be referred to the Engagement Coordination Group. [...]</p>
<p>36. In line with WHO's risk management framework, WHO takes a risk-management approach to engagement, only entering into an engagement with a non-State actor when the benefits in terms of direct or indirect contributions to the fulfilment of the Organization's mandate and the public health gains involved clearly justify any residual risk of engagement as well as the time and expense involved in establishing and maintaining the engagement.</p>	<p>36. In line with WHO's risk management framework,[14] WHO takes a risk-management approach to engagement, only entering into an engagement with a non-State actor when the benefits in terms of direct or indirect contributions to public health and the fulfilment of the Organization's mandate as mentioned in paragraph 7 outweigh any residual risks of engagement as mentioned in paragraph 8, as well as the time and expense involved in establishing and maintaining the engagement. FOOTNOTE 14: See document EB133/10.</p>	<p>36. In line with WHO's risk management framework,[14] WHO takes a risk-management approach to engagement, only entering into an engagement with a non-State actor when the benefits in terms of direct or indirect contributions to [public health and] the fulfilment of the Organization's mandate [as mentioned in paragraph 7] and the public health gains involved clearly justify outweigh any residual risks of engagement [as mentioned in paragraph 8], as well as the time and expense involved in establishing and maintaining the engagement. [FOOTNOTE 14: See document EB133/10.]</p>
<p>Transparency 38. The WHO register of non-State actors is an Internet-based, publicly available electronic tool used by the Secretariat[7] to document and coordinate engagement with non-State actors. It contains the main standard information provided by non-State actors and high-level descriptions of</p>	<p>Transparency 38. The WHO register of non-State actors is an Internet-based, publicly available electronic tool used by the Secretariat [15] to document and coordinate engagement with non-State actors. It contains the main standard information provided by non-State actors[16] and high-level</p>	<p>Transparency 38. The WHO register of non-State actors is an Internet-based, publicly available electronic tool used by the Secretariat [15] to document and coordinate engagement with non-State actors. It contains the main standard information provided by non-State actors[16] and high-level</p>

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<p>the engagement that WHO has with these actors.[8] Non-State actors engaging with WHO are required to provide information on their organization. This information includes: name, legal status, objective, governance structure, composition of main decision-making bodies, assets, annual income and funding sources, main relevant affiliations, webpage and one or more focal points for WHO contacts.</p> <p>FOOTNOTE 7: The register covers all three levels of the Organization – global, regional and country – and includes hosted partnerships and joint programmes.</p> <p>FOOTNOTE 8: Information on financial contributions received from non-State actors is documented in this register and in the Programme budget web portal.</p>	<p>descriptions of the engagement that WHO has with these actors (FOOTNOTE PROPOSED BY CHAIR);</p> <p>FOOTNOTE 15: The register of non-State actors is the first level of a tool used by the Secretariat containing four levels of information: a publicly available level, a level made available to Member States, a working level for the Secretariat, and a level of confidential and sensitive information accessible to a limited number of individuals within the Secretariat.</p> <p>FOOTNOTE 16: Information on financial contributions received from non-State actors is documented in this register and in the Programme Budget web portal.</p> <p>[FOOTNOTE PROPOSED BY CHAIR: The register covers all three levels of the Organization – global, regional and country – and includes hosted partnerships and joint programmes]</p> <p>[...]</p>	<p>descriptions of the engagement that WHO has with these actors (FOOTNOTE PROPOSED BY CHAIR);</p> <p>[FOOTNOTE 15: The register of non-State actors is the first level of a tool used by the Secretariat containing four levels of information: a publicly available level, a level made available to Member States, a working level for the Secretariat, and a level of confidential and sensitive information accessible to a limited number of individuals within the Secretariat.]</p> <p>FOOTNOTE 16: Information on financial contributions received from non-State actors is documented in this register and in the Programme Budget web portal.</p> <p>[FOOTNOTE PROPOSED BY CHAIR: The register covers all three levels of the Organization – global, regional and country – and includes hosted partnerships and joint programmes]</p> <p>[...]</p>
<p>39. When the Secretariat decides on an engagement with a non-State actor, a summary of the information submitted by that entity and held in the WHO register of non-State actors is made public.</p>	<p>39. When the Secretariat decides on an engagement with a non-State actor, a summary of the information submitted by that entity and held in the WHO register of non-State actors is made public. The accuracy of the information provided</p>	<p>-NO CHANGES-</p> <p>39. When the Secretariat decides on an engagement with a non-State actor, a summary of the information submitted by that entity and held in the WHO register of non-State actors is made</p>

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<p>The accuracy of the information provided by the non-State actor and published in the register is the responsibility of the non-State actor concerned and does not constitute any form of endorsement by WHO.</p>	<p>by the non-State actor and published in the register is the responsibility of the non-State actor concerned and does not constitute any form of endorsement by WHO.</p>	<p>public. The accuracy of the information provided by the non-State actor and published in the register is the responsibility of the non-State actor concerned and does not constitute any form of endorsement by WHO.</p>
<p>40. Non-State actors described in the register must update the information provided on themselves annually or upon the request of WHO. Information in the WHO register of non-State actors will be dated. Information on entities that are no longer engaged with WHO or that have not updated their information will be marked as “archived”. Archived information from the WHO register of non-State actors can be considered in relation to future applications for engagement, where relevant.</p>	<p>40. Non-State actors described in the register must update the information provided on themselves annually or upon the request of WHO. Information in the WHO register of non-State actors will be dated. Information on entities that are no longer engaged with WHO or that have not updated their information will be marked as “archived”. Archived information from the WHO register of non-State actors can be considered in relation to future applications for engagement, where relevant.</p>	<p>NO CHANGES-</p> <p>40. Non-State actors described in the register must update the information provided on themselves annually or upon the request of WHO. Information in the WHO register of non-State actors will be dated. Information on entities that are no longer engaged with WHO or that have not updated their information will be marked as “archived”. Archived information from the WHO register of non-State actors can be considered in relation to future applications for engagement, where relevant.</p>
<p>41. WHO maintains a handbook to guide non-State actors in their interaction with WHO. A guide for staff is also maintained on the implementation of the framework for engagement with non-State actors; this shall be applied in conjunction with the framework.</p>	<p>41. WHO maintains a handbook to guide non-State actors in their interaction with WHO in line with this framework. A guide for staff is also maintained on the implementation of the framework for engagement with non-State actors. <i>[Text that follows has been parked]</i></p>	<p>41. WHO maintains a handbook to guide non-State actors in their interaction with WHO [in line with this framework]. A guide for staff is also maintained on the implementation of the framework for engagement with non-State actors. <i>[Text that follows has been parked]</i></p>
<p>42. With regard to the development of WHO’s policies, norms and standards, the Organization’s</p>	<p>42. (DELETED)</p>	<p>42. (DELETED)</p>

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<p>work can be divided in three main types of activity, namely:</p> <p>Type 1: Information gathering</p> <p>Type 2: Preparation for, elaboration of and decision on the normative text</p> <p>Type 3: Implementation.</p>		
<p>43. References elsewhere in this framework to the norms and standard setting process and normative work concern the second type of activity.</p>	<p>43. (DELETED)</p>	<p>43. (DELETED)</p>
<p>Association with WHO's name and emblem</p> <p>45. WHO's name and emblem are recognized by the public as symbols of integrity and quality assurance. WHO's name, acronym and emblem shall not, therefore, be used for, or in conjunction with, commercial, promotional marketing and advertisement purposes. Any use of the name or emblem needs an explicit written authorization by the Director-General of WHO.[9]</p> <p>FOOTNOTE 9: See http://www.who.int/about/licensing/emblem/en/.</p>	<p>Association with WHO's name and emblem</p> <p>45. WHO's name and emblem are recognized by the public as symbols of integrity and quality assurance. WHO's name, acronym and emblem shall not, therefore, be used for, or in conjunction with, commercial, promotional marketing and advertisement purposes. Any use of the name or emblem needs an explicit written authorization by the Director-General of WHO. [17]</p> <p>FOOTNOTE 17: See http://www.who.int/about/licensing/emblem/en/.</p>	<p>-NO CHANGES-</p> <p>Association with WHO's name and emblem</p> <p>45. WHO's name and emblem are recognized by the public as symbols of integrity and quality assurance. WHO's name, acronym and emblem shall not, therefore, be used for, or in conjunction with, commercial, promotional marketing and advertisement purposes. Any use of the name or emblem needs an explicit written authorization by the Director-General of WHO. [17]</p> <p>FOOTNOTE 17: See http://www.who.int/about/licensing/emblem/en/.</p>
<p>RELATION OF THE FRAMEWORK TO WHO'S OTHER POLICIES</p> <p>47. This framework replaces the Principles</p>	<p>RELATION OF THE FRAMEWORK TO WHO'S OTHER POLICIES</p> <p>47. This framework replaces the Principles</p>	<p>-NO CHANGES-</p> <p>RELATION OF THE FRAMEWORK TO WHO'S OTHER POLICIES</p>

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<p>Governing Relations between the World Health Organization and Nongovernmental Organizations [10] and the Guidelines on interaction with commercial enterprises to achieve health outcomes (noted by the Executive Board).[11]</p> <p>FOOTNOTE 10: Basic documents, 47th ed. Geneva: World Health Organization; 2009: 81–86.</p> <p>FOOTNOTE 11: See document EB107/2001/REC/2, summary record of the twelfth meeting.</p>	<p>Governing Relations between the World Health Organization and Nongovernmental Organizations [18] and the Guidelines on interaction with commercial enterprises to achieve health outcomes (noted by the Executive Board). [19]</p> <p>FOOTNOTE 18: Basic documents, 47th ed. Geneva: World Health Organization; 2009: 81–86.</p> <p>FOOTNOTE 19: See document EB107/2001/REC/2, summary record of the twelfth meeting.</p>	<p>47. This framework replaces the Principles Governing Relations between the World Health Organization and Nongovernmental Organizations [18] and the Guidelines on interaction with commercial enterprises to achieve health outcomes (noted by the Executive Board). [19]</p> <p>FOOTNOTE 18: Basic documents, 47th ed. Geneva: World Health Organization; 2009: 81–86.</p> <p>FOOTNOTE 19: See document EB107/2001/REC/2, summary record of the twelfth meeting.</p>
<p>48. The implementation of the framework for engagement with non-State actors is coordinated with the following related policies, which remain valid:</p>	<p>48. The implementation of the policies listed below as they relate to WHO’s engagement with non-State actors will be coordinated and aligned with the framework of engagement with non-State actors. In the event that a conflict is identified, it will be brought to the attention of the Executive Board through the PBAC.</p>	<p>48. The implementation of the framework for [policies listed below as they relate to WHO’s] engagement with non-State actors is [will be] coordinated with the following related policies, which remain valid [and aligned with the framework of engagement with non-State actors. In the event that a conflict is identified, it will be brought to the attention of the Executive Board through the PBAC.]</p>
<p>(a) WHO’s involvement in external partnerships is regulated by the policy on WHO’s engagement with global health partnerships and hosting arrangements.[12] For the management of risks of WHO’s engagement in these partnerships the</p>	<p>(a) Policy on WHO’s engagement with global health partnerships and hosting arrangements[20].</p> <p>(i) Hosted partnerships derive their legal personality from WHO and are subject to the</p>	<p>(a) [Policy on WHO’s engagement with global health partnerships and hosting arrangements[20].]</p> <p>[(i) Hosted partnerships derive their legal personality from WHO and are subject to the</p>

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<p>present framework for engagement with non-State actors applies.</p> <p>FOOTNOTE 12: Endorsed by the Health Assembly in resolution WHA63.10 on partnerships.</p>	<p>Organization’s rules and regulations. Therefore the Framework of engagement with non-State actors applies to their engagement with non-State actors. They have a formal governance structure, separate from that of the WHO governing bodies, in which decisions are taken on direction, work plans and budgets; and their programmatic accountability frameworks are also independent from those of the Organization. In the same way the framework applies to other hosted entities which are subject to the Organizations Rules and Regulations.</p> <p>(ii) WHO’s involvement in external partnerships is regulated by the policy on WHO’s engagement with global health partnerships and hosting arrangements. The framework of engagement with non-State actors also applies to WHO’s engagement in these partnerships.</p> <p>FOOTNOTE 20: Endorsed by the Health Assembly in resolution WHA63.10 on partnerships and its Annex 1.</p>	<p>Organization’s rules and regulations. Therefore the Framework of engagement with non-State actors applies to their engagement with non-State actors. They have a formal governance structure, separate from that of the WHO governing bodies, in which decisions are taken on direction, work plans and budgets; and their programmatic accountability frameworks are also independent from those of the Organization. In the same way the framework applies to other hosted entities which are subject to the Organizations Rules and Regulations.]</p> <p>(ii) WHO’s involvement in external partnerships is regulated by the policy on WHO’s engagement with global health partnerships and hosting arrangements. For the management of risks of WHO’s engagement in these partnerships the present framework for engagement with non-State actors applies. [The framework of engagement with non-State actors also applies to WHO’s engagement in these partnerships.]</p> <p>FOOTNOTE 20: Endorsed by the Health Assembly in resolution WHA63.10 on partnerships and its Annex 1.</p>
(b) The management of WHO’s relations with	(b) Regulations for Expert Advisory Panels and	(b) [Regulations for Expert Advisory Panels

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<p>individual experts is regulated by the Regulations for Expert Advisory Panels and Committees [13] and the Guidelines for Declaration of Interests (WHO Experts).</p> <p>FOOTNOTE 13: See Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp 104–112 (http://apps.who.int/gb/bd/PDF/bd47/EN/basic-documents-47-en.pdf, accessed 1 December 2014).</p>	<p>Committees and the Guidelines for Declaration of Interests (WHO Experts).The management of WHO’s relations with individual experts is regulated by the Regulations for Expert Advisory Panels and Committees [21] and the Guidelines for Declaration of Interests (WHO Experts).</p> <p>FOOTNOTE 21: See Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp 104–112 (http://apps.who.int/gb/bd/PDF/bd47/EN/basic-documents-47-en.pdf, accessed 1 December 2014).</p>	<p>and Committees and the Guidelines for Declaration of Interests (WHO Experts).] The management of WHO’s relations with individual experts is regulated by the Regulations for Expert Advisory Panels and Committees [21] and the Guidelines for Declaration of Interests (WHO Experts).</p> <p>FOOTNOTE 21: See Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp 104–112 (http://apps.who.int/gb/bd/PDF/bd47/EN/basic-documents-47-en.pdf, accessed 1 December 2014).</p>
<p>(c) The Organization’s Staff Regulations and Staff Rules and in particular the provisions of declaration of interest therein: according to Article 1.1 of the Staff Regulations of the World Health Organization, all staff members “pledge themselves to discharge their functions and to regulate their conduct with the interests of the World Health Organization only in view.”</p>	<p>(c) Staff Regulations and Staff Rules. All staff are subject to the Organization’s Staff Regulations and Staff Rules, noting in particular the provisions of declaration of interest therein: according to Article 1.1 of the Staff Regulations of the World Health Organization, all staff members “pledge themselves to discharge their functions and to regulate their conduct with the interests of the World Health Organization only in view.”</p>	<p>(c) The Organization’s Staff Regulations and Staff Rules [. All staff are subject to the Organization’s Staff Regulations and Staff Rules, noting] in particular the provisions of declaration of interest therein: according to Article 1.1 of the Staff Regulations of the World Health Organization, all staff members “pledge themselves to discharge their functions and to regulate their conduct with the interests of the World Health Organization only in view.”</p>
<p>(d) Scientific collaborations are regulated by the Regulations for Study and Scientific Groups, Collaborating Institutions and other Mechanisms</p>	<p>(d) Regulations for Study and Scientific Groups, Collaborating Institutions and other Mechanisms of Collaboration. Scientific collaborations are</p>	<p>(d) [Regulations for Study and Scientific Groups, Collaborating Institutions and other Mechanisms of Collaboration.] Scientific collaborations are</p>

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<p>of Collaboration. [14]</p> <p>FOOTNOTE 14: Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp.113–120.</p>	<p>regulated by the Regulations for Study and Scientific Groups, Collaborating Institutions and other Mechanisms of Collaboration. [22]</p> <p>FOOTNOTE 22: Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp.113–120.</p>	<p>regulated by the Regulations for Study and Scientific Groups, Collaborating Institutions and other Mechanisms of Collaboration. [22]</p> <p>FOOTNOTE 22: Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp.113–120.</p>
<p>(e) The procurement of goods and services is regulated by the Financial Rules and Financial Regulations; [15] it not covered by the framework for engagement with non-State actors, although pro-bono contributions from non-State actors are covered.</p> <p>(f) Like any other financing of WHO, financing from non-State actors should be considered as part of the financing dialogue and is regulated by the Financial Rules and Financial Regulations; the decision on accepting such a financial contribution is regulated by this framework.</p> <p>FOOTNOTE 15: Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp.87–97.</p>	<p>(e) Financial Rules and Financial Regulations.</p> <p>(i) The procurement of goods and services is regulated by the Financial Rules and Financial Regulations;[23] it is not covered by the framework for engagement with non-State actors, although pro-bono contributions from non-State actors are covered.</p> <p>(ii) Like any other financing of WHO, financing from non-State actors is regulated by the Financial Rules and Financial Regulations and the decision on accepting such financial contributions is also regulated by this framework.</p> <p>FOOTNOTE 23: Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp.87–97. (reference will be changed to 48th edition throughout)</p>	<p>(e) [Financial Rules and Financial Regulations.]</p> <p>(i) The procurement of goods and services is regulated by the Financial Rules and Financial Regulations;[23] it is not covered by the framework for engagement with non-State actors, although pro-bono contributions from non-State actors are covered.</p> <p>(ii) Like any other financing of WHO, financing from non-State actors should be considered as part of the financing dialogue and is regulated by the Financial Rules and Financial Regulations [and] the decision on accepting such a financial contribution[s] is also regulated by this framework.</p> <p>FOOTNOTE 23: Basic documents, 47th ed. Geneva: World Health Organization; 2009, pp.87–97. (reference will be changed to 48th edition throughout)</p>

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<p>OFFICIAL RELATIONS</p> <p>49. “Official relations” is a privilege that the Executive Board may grant to nongovernmental organizations, international business associations and philanthropic foundations that have had and continue to have a sustained and systematic engagement[16] in the interest of the Organization. The aims and activities of all these entities shall be in conformity with the spirit, purposes and principles of WHO’s Constitution, and they shall contribute significantly to the advancement of public health. Organizations in official relations can attend governing body meetings of WHO but are otherwise subject to the same rules as other non-State actors when engaging with WHO.</p> <p>FOOTNOTE 16: At least two years of systematic engagement as documented in the WHO register of non-State actors, assessed by both parties to be mutually beneficial. Participation in each other’s meetings alone is not considered to be a systematic engagement.</p>	<p>OFFICIAL RELATIONS</p> <p>49. “Official relations” is a privilege that the Executive Board may grant to nongovernmental organizations, international business associations and philanthropic foundations that have had and continue to have a sustained and systematic engagement [24] in the interest of the Organization. The aims and activities of all these entities shall be in conformity with the spirit, purposes and principles of WHO’s Constitution, and they shall contribute significantly to the advancement of public health. Organizations in official relations can attend governing body meetings of WHO but are otherwise subject to the same rules as other non-State actors when engaging with WHO.</p> <p>FOOTNOTE 24: At least two years of systematic engagement as documented in the WHO register of non-State actors, assessed by both parties to be mutually beneficial. Participation in each other’s meetings alone is not considered to be a systematic engagement.</p>	<p>-NO CHANGES-</p> <p>OFFICIAL RELATIONS</p> <p>49. “Official relations” is a privilege that the Executive Board may grant to nongovernmental organizations, international business associations and philanthropic foundations that have had and continue to have a sustained and systematic engagement [24] in the interest of the Organization. The aims and activities of all these entities shall be in conformity with the spirit, purposes and principles of WHO’s Constitution, and they shall contribute significantly to the advancement of public health. Organizations in official relations can attend governing body meetings of WHO but are otherwise subject to the same rules as other non-State actors when engaging with WHO.</p> <p>FOOTNOTE 24: At least two years of systematic engagement as documented in the WHO register of non-State actors, assessed by both parties to be mutually beneficial. Participation in each other’s meetings alone is not considered to be a systematic engagement.</p>
<p>50. All entities in official relations shall have a constitution or similar basic document, an</p>	<p>50. Entities in official relations are international in membership and /or scope. All entities in official</p>	<p>50. [Entities in official relations are international in membership and /or scope (taken from para.</p>

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<p>established headquarters, a directing or governing body, an administrative structure, and a regularly updated entry in the WHO register of non-State actors.</p>	<p>relations shall have a constitution or similar basic document, an established headquarters, a governing body, an administrative structure, and a regularly updated entry in the WHO register of non-State actors.</p>	<p>55]. All entities in official relations shall have a constitution or similar basic document, an established headquarters, a directing or governing body, an administrative structure, and a regularly updated entry in the WHO register of non-State actors.</p>
<p>51. A plan for collaboration based on mutually agreed objectives and outlining activities for the coming three-year period structured in accordance with the General Programme of Work and Programme budget shall form the basis of official relations between WHO and organizations in official relations. This plan shall also be published in the WHO register of non-State actors. These organizations shall provide annually a short report on the progress made in implementing the plan of collaboration and other related activities which will also be published in the WHO register.</p>	<p>51. Official relations shall be based on a plan for collaboration between WHO and the entity with agreed objectives and outlining activities for the coming three-year period structured in accordance with the General Programme of Work and Programme budget and consistent with this framework. This plan shall also be published in the WHO register of non-State actors. These organizations shall provide annually a short report on the progress made in implementing the plan of collaboration and other related activities which will also be published in the WHO register. These plans shall be free from concerns which are primarily of a commercial or profit-making nature.</p>	<p>51. [Official relations shall be based on] a plan for collaboration based on [between WHO and the entity with] agreed objectives and outlining activities for the coming three-year period structured in accordance with the General Programme of Work and Programme budget [and consistent with this framework] shall form the basis of official relations between WHO and organizations in official relations. This plan shall also be published in the WHO register of non-State actors. These organizations shall provide annually a short report on the progress made in implementing the plan of collaboration and other related activities which will also be published in the WHO register. [These plans shall be free from concerns which are primarily of a commercial or profit-making nature.]</p>
<p>52. The Executive Board shall be responsible for deciding on the admission of organizations into</p>	<p>52. The Executive Board shall be responsible for deciding on the admission of organizations into</p>	<p>-NO CHANGES- 52. The Executive Board shall be responsible</p>

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<p>official relations with WHO and shall review this status every three years. The Director-General may propose international nongovernmental organizations, philanthropic foundations and international business associations for admission. The Director-General can also propose an earlier review based on the experience in the collaboration with the organization concerned.</p>	<p>official relations with WHO and shall review this status every three years. The Director-General may propose international nongovernmental organizations, philanthropic foundations and international business associations for admission. The Director-General can also propose an earlier review based on the experience in the collaboration with the organization concerned.</p>	<p>for deciding on the admission of organizations into official relations with WHO and shall review this status every three years. The Director-General may propose international nongovernmental organizations, philanthropic foundations and international business associations for admission. The Director-General can also propose an earlier review based on the experience in the collaboration with the organization concerned.</p>
<p>53. Non-State actors in official relations are invited to participate in sessions of WHO's governing bodies. Their privileges shall include:</p> <p>(a) the right to appoint a representative to participate, without right of vote, in meetings of WHO's governing bodies or in meetings of the committees and conferences convened under its authority;</p> <p>(b) the right to make a statement if the Chairman of the meeting (i) invites them to do so or (ii) accedes to their request when an item in which the related entity is particularly interested is being discussed;</p> <p>(c) the right to submit the statement referred to in subparagraph (b) above in advance of the debate for the Secretariat to post on a dedicated website.</p>	<p>53. Entities in official relations are invited to participate in sessions of WHO's governing bodies. This privilege shall include:</p> <p>(a) the possibility to appoint a representative to participate, without right of vote, in meetings of WHO's governing bodies or in meetings of the committees and conferences convened under its authority;</p> <p>(b) the possibility to make a statement if the Chairman of the meeting (i) invites them to do so or (ii) accedes to their request when an item in which the related entity is particularly interested is being discussed;</p> <p>(c) the possibility to submit the statement referred to in subparagraph (b) above in advance of the debate for the Secretariat to post on a</p>	<p>53. Non-State actors [Entities] in official relations are invited to participate in sessions of WHO's governing bodies. This privilege shall include:</p> <p>(a) the right [possibility] to appoint a representative to participate, without right of vote, in meetings of WHO's governing bodies or in meetings of the committees and conferences convened under its authority;</p> <p>(b) the right [possibility] to make a statement if the Chairman of the meeting (i) invites them to do so or (ii) accedes to their request when an item in which the related entity is particularly interested is being discussed;</p> <p>(c) the right [possibility] to submit the statement referred to in subparagraph (b) above in advance of the debate for the Secretariat to</p>

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<p>These privileges do however not imply any automatic right for other forms of collaboration.</p>	<p>dedicated website.</p>	<p>post on a dedicated website. These privileges do however not imply any automatic right for other forms of collaboration.</p>
<p>54. Non-State actors participating in WHO meetings shall designate a head of their delegation and declare the affiliations of their delegates. This declaration shall include the function of each delegate within the non-State actor itself and, where appropriate, the function of that delegate within any affiliated organization.</p>	<p>54. Non-State actors participating in WHO governing bodies' meetings shall designate a head of their delegation and declare the affiliations of their delegates. This declaration shall include the function of each delegate within the non-State actor itself and, where applicable, the function of that delegate within any affiliated organization.</p>	<p>54. Non-State actors participating in WHO [governing bodies'] meetings shall designate a head of their delegation and declare the affiliations of their delegates. This declaration shall include the function of each delegate within the non-State actor itself and, where applicable, the function of that delegate within any affiliated organization.</p>
<p>55. Non-State actors in official relations are international in membership and/or scope. The organization or its affiliates can also attend meetings of the regional committees. Regional committees may decide on a procedure granting accreditation to their meetings to other non-State actors not in official relations as long as the procedure is managed in accordance with this framework.</p>	<p>55. Regional committees may also decide on a procedure granting accreditation to their meetings to other non-State actors not in official relations with WHO as long as the procedure is managed in accordance with this framework.</p>	<p>55. Non-State actors in official relations are international in membership and/or scope. The organization or its affiliates can also attend meetings of the regional committees. Regional committees may [also] decide on a procedure granting accreditation to their meetings to other non-State actors not in official relations [with WHO] as long as the procedure is managed in accordance with this framework.</p>
<p>Procedure for admitting and reviewing organizations in official relations</p> <p>56. The application for admission into official</p>	<p>Procedure for admitting and reviewing organizations in official relations</p> <p>56. The application for admission into official</p>	<p>-NO CHANGES-</p> <p>Procedure for admitting and reviewing organizations in official relations</p>

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<p>relations shall be based on the up-to-date entries in the WHO register of non-State actors, providing all the necessary information as requested on the non-State actor’s nature and activities. The application shall include a summary of past collaboration as documented in the register of non-State actors and a three-year plan for collaboration with WHO that has been developed and agreed on jointly by the non-State actor and WHO.</p>	<p>relations shall be based on the up-to-date entries in the WHO register of non-State actors, providing all the necessary information as requested on the non-State actor’s nature and activities. The application shall include a summary of past engagement as documented in the register of non-State actors and a three-year plan for collaboration with WHO that has been developed and agreed on jointly by the non-State actor and WHO.</p>	<p>56. The application for admission into official relations shall be based on the up-to-date entries in the WHO register of non-State actors, providing all the necessary information as requested on the non-State actor’s nature and activities. The application shall include a summary of past engagement as documented in the register of non-State actors and a three-year plan for collaboration with WHO that has been developed and agreed on jointly by the non-State actor and WHO.</p>
<p>57. A signed letter certifying the accuracy of the application submitted online shall reach WHO headquarters no later than the end of the month of July for submission to the Executive Board at its session the following January. Applications for official relations shall be reviewed to ensure that the established criteria and other requirements are fulfilled as set out in this framework. Applications should be transmitted to the Executive Board members by the Secretariat six weeks before the opening of the January session of the Executive Board at which they will be considered.</p>	<p>57. A signed letter certifying the accuracy of the application for official relations submitted online shall reach WHO headquarters no later than the end of the month of July for submission to the Executive Board at its session the following January. Applications for official relations shall be reviewed to ensure that the established criteria and other requirements are fulfilled as set out in this framework. Applications should be transmitted to the Executive Board members by the Secretariat six weeks before the opening of the January session of the Executive Board at which they will be considered.</p>	<p>57. A signed letter certifying the accuracy of the application [for official relations] submitted online shall reach WHO headquarters no later than the end of the month of July for submission to the Executive Board at its session the following January. Applications for official relations shall be reviewed to ensure that the established criteria and other requirements are fulfilled as set out in this framework. Applications should be transmitted to the Executive Board members by the Secretariat six weeks before the opening of the January session of the Executive Board at which they will be considered.</p>

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<p>58. The non-State actors in official relations and the Secretariat are expected to name focal points for collaboration who are responsible for informing each other and their organizations of any developments in the implementation of the plan for collaboration and who are the first points of contact for any changes or problems.</p>	<p>58. The entities in official relations and the Secretariat should name focal points for collaboration who are responsible for informing each other and their organizations of any developments in the implementation of the plan for collaboration and who are the first points of contact for any changes or problems.</p>	<p>-NO CHANGES-</p> <p>58. The entities in official relations and the Secretariat should name focal points for collaboration who are responsible for informing each other and their organizations of any developments in the implementation of the plan for collaboration and who are the first points of contact for any changes or problems.</p>
<p>59. During the Board’s January session, the Programme, Budget and Administration Committee shall consider applications submitted and shall make recommendations to the Board. A representative of an applicant organization may be invited by the Committee to speak before it in connection with that organization’s application. Should the applicant organization be considered not to meet the established criteria, and bearing in mind the desirability of ensuring a valuable continuing partnership based on defined objectives and evidenced by a record of successful past collaboration and a framework for future collaborative activities, the Committee may recommend postponement of consideration or rejection of an application.</p>	<p>59. During the Board’s January session, the Programme, Budget and Administration Committee shall consider applications submitted and shall make recommendations to the Board. A representative of an applicant organization may be invited by the Committee to speak before it in connection with that organization’s application. Should the applicant organization be considered not to meet the established criteria, and bearing in mind the desirability of ensuring a valuable continuing partnership based on defined objectives and evidenced by a record of successful past engagement and a framework for future collaborative activities, the Committee may recommend postponement of consideration or rejection of an application.</p>	<p>-NO CHANGES-</p> <p>59. During the Board’s January session, the Programme, Budget and Administration Committee shall consider applications submitted and shall make recommendations to the Board. A representative of an applicant organization may be invited by the Committee to speak before it in connection with that organization’s application. Should the applicant organization be considered not to meet the established criteria, and bearing in mind the desirability of ensuring a valuable continuing partnership based on defined objectives and evidenced by a record of successful past engagement and a framework for future collaborative activities, the Committee may recommend postponement of consideration or rejection of an application.</p>

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<p>60. The Board, after considering the recommendations of the Committee, shall decide whether an organization is to be admitted into official relations with WHO. A reapplication from a non-State actor shall not normally be considered until two years have elapsed since the Board's decision on the previous application.</p>	<p>60. The Board, after considering the recommendations of the Committee, shall decide whether an organization is to be admitted into official relations with WHO. A reapplication from a non-State actor shall not normally be considered until two years have elapsed since the Board's decision on the previous application.</p>	<p>-NO CHANGES-</p> <p>60. The Board, after considering the recommendations of the Committee, shall decide whether an organization is to be admitted into official relations with WHO. A reapplication from a non-State actor shall not normally be considered until two years have elapsed since the Board's decision on the previous application.</p>
<p>61. The Director-General shall inform each organization of the Board's decision on its application. The Director-General shall maintain a list of the organizations admitted into official relations, reflect these privileges in the WHO register of non-State actors, and document decisions taken within the Secretariat and by the Executive Board on applications from non-State actors.</p>	<p>61. The Director-General shall inform each organization of the Board's decision on its application. The Director-General shall document decisions taken within the Secretariat and by the Executive Board on applications from non-State actors, reflect this status in the WHO register of non-State actors, and maintain a list of the organizations admitted into official relations.</p>	<p>61. The Director-General shall inform each organization of the Board's decision on its application. The Director-General shall document decisions taken within the Secretariat and by the Executive Board on applications from non-State actors, reflect this status in the WHO register of non-State actors, and maintain a list of the organizations admitted into official relations.</p> <p><i>[In the second part of the paragraph, the elements were only reordered and "these privileges" was changed for "this status" with regard to official relations]</i></p>
<p>62. The Board, through its Programme, Budget and Administration Committee, shall review collaboration with each non-State actor every three years and shall determine the desirability of maintaining official relations or defer the decision</p>	<p>62. The Board, through its Programme, Budget and Administration Committee, shall review collaboration with each non-State actor in official relations every three years and shall decide on the desirability of maintaining official relations or</p>	<p>62. The Board, through its Programme, Budget and Administration Committee, shall review collaboration with each non-State actor [in official relations] every three years and shall determine [decide on] the desirability of maintaining official</p>

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<p>on the review to the following year. The Board's review shall be spread over a three-year period, one third of the non-State actors in official relations being reviewed each year.</p>	<p>defer the decision on the review to the following year. The Board's review shall be spread over a three-year period, one third of the entities in official relations being reviewed each year.</p>	<p>relations or defer the decision on the review to the following year. The Board's review shall be spread over a three-year period, one third of the non-State actors [entities] in official relations being reviewed each year.</p>
<p>63. The Director-General can propose earlier reviews of a non-State actor's official relations with WHO in case of difficulties, such as non-fulfilment of the entity's part in the plan of collaboration, lack of contact, failure by the non-State actor to fulfil its reporting requirements or changes in the nature or activities of the organization concerned, the non-State actor ceasing to fulfil the criteria for admission, or any potential new risks for the collaboration.</p>	<p>63. The Director-General can propose earlier reviews of a non-State actor's official relations with WHO by the Executive Board through its Programme, Budget and Administration Committee in case of issues such as non-fulfilment of the entity's part in the plan of collaboration, lack of contact, failure by the non-State actor to fulfil its reporting requirements or changes in the nature or activities of the organization concerned, the non-State actor ceasing to fulfil the criteria for admission, or any potential new risks for the collaboration.</p>	<p>63. The Director-General can propose earlier reviews of a non-State actor's official relations with WHO [by the Executive Board through its Programme, Budget and Administration Committee] in case of difficulties [issues] such as non-fulfilment of the entity's part in the plan of collaboration, lack of contact, failure by the non-State actor to fulfil its reporting requirements or changes in the nature or activities of the organization concerned, the non-State actor ceasing to fulfil the criteria for admission, or any potential new risks for the collaboration.</p>
<p>64. The Board may discontinue official relations if it considers that such relations are no longer appropriate or necessary in the light of changing programmes or other circumstances. Similarly, the Board may suspend or discontinue official relations if an organization no longer meets the criteria that applied at the time of the establishment of such relations, fails to update its</p>	<p>64. The Board may discontinue official relations if it considers that such relations are no longer appropriate or necessary in the light of changing programmes or other circumstances. Similarly, the Board may suspend or discontinue official relations if an organization no longer meets the criteria that applied at the time of the establishment of such relations, fails to update its</p>	<p>-NO CHANGES-</p> <p>64. The Board may discontinue official relations if it considers that such relations are no longer appropriate or necessary in the light of changing programmes or other circumstances. Similarly, the Board may suspend or discontinue official relations if an organization no longer meets the criteria that applied at the time of the</p>

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<p>information and report on the collaboration in the WHO register on non-State actors or fails to fulfil its part in the agreed programme of collaboration.</p>	<p>information and report on the collaboration in the WHO register on non-State actors or fails to fulfil its part in the agreed programme of collaboration.</p>	<p>establishment of such relations, fails to update its information and report on the collaboration in the WHO register on non-State actors or fails to fulfil its part in the agreed programme of collaboration.</p>
<p>OVERSIGHT OF ENGAGEMENT</p> <p>65. The Executive Board, through its Programme, Budget and Administration Committee, oversees the implementation of WHO's policy on engagement with non-State actors, proposes revisions to the framework and can grant the privileges of official relations to international nongovernmental organizations, philanthropic foundations and international business associations.</p>	<p>OVERSIGHT OF ENGAGEMENT</p> <p>65. The Executive Board, through its Programme, Budget and Administration Committee, oversees the implementation of WHO's framework of engagement with non-State actors, proposes revisions to the framework and can grant the privileges of official relations to international nongovernmental organizations, philanthropic foundations and international business associations.</p>	<p>OVERSIGHT OF ENGAGEMENT</p> <p>65. The Executive Board, through its Programme, Budget and Administration Committee, oversees the implementation of WHO's policy on [framework of] engagement with non-State actors, proposes revisions to the framework and can grant the privileges of official relations to international nongovernmental organizations, philanthropic foundations and international business associations.</p>
<p>66. The Programme Budget and Administration Committee shall review, provide guidance and, as appropriate, make recommendations to the Executive Board on:</p> <p>(a) oversight of WHO's implementation of the framework for engagement with non-State actors including:</p> <p>(i) consideration of the annual report on engagement with non-State actors submitted by the Director-General</p> <p>(ii) any other matter on engagement referred to</p>	<p>66. The Programme Budget and Administration Committee shall review, provide guidance and, as appropriate, make recommendations to the Executive Board on:</p> <p>(a) oversight of WHO's implementation of the framework for engagement with non-State actors including:</p> <p>(i) consideration of the annual report on engagement with non-State actors submitted by the Director-General</p> <p>(ii) any other matter on engagement referred</p>	<p>66. The Programme Budget and Administration Committee shall review, provide guidance and, as appropriate, make recommendations to the Executive Board on:</p> <p>(a) oversight of WHO's implementation of the framework for engagement with non-State actors including:</p> <p>(i) consideration of the annual report on engagement with non-State actors submitted by the Director-General</p> <p>(ii) any other matter on engagement referred</p>

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<p>the Committee by the Board</p> <p>(b) non-State actors in official relations with WHO, including:</p> <p>(i) proposals for admitting non-State actors into official relations</p> <p>(ii) review of renewals of non-State actors in official relations</p> <p>(c) any proposal, when needed, for revision of the framework of engagement with non-State actors.</p>	<p>to the Committee by the Board</p> <p>(b) entities in official relations with WHO, including:</p> <p>(i) proposals for admitting non-State actors into official relations</p> <p>(ii) review of renewals of entities in official relations</p> <p>(c) any proposal, when needed, for revisions of the framework of engagement with non-State actors.</p>	<p>to the Committee by the Board</p> <p>(b) non-State actors [entities] in official relations with WHO, including:</p> <p>(i) proposals for admitting non-State actors into official relations</p> <p>(ii) review of renewals of non-State actors [entities] in official relations</p> <p>(c) any proposal, when needed, for revisions of the framework of engagement with non-State actors.</p>

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<p>NON-COMPLIANCE WITH THIS FRAMEWORK</p> <p>68. Non-compliance by a non-State actor with the provisions of this framework can have consequences for the entity concerned after due process including a reminder, a warning, a cease-and-desist letter, a rejection of renewal of engagement and termination of engagement. The review of the status of official relations by the Executive Board can be anticipated and non-compliance can be the reason for non-renewal of official relations. Except in the case of important and intentional cases of non-compliance the non-State actor concerned should not be automatically excluded from other engagements with WHO.</p>	<p>NON-COMPLIANCE WITH THIS FRAMEWORK</p> <p>68. Non-compliance by a non-State actor with the provisions of this framework can have consequences for the entity concerned after due process including a reminder, a warning, a cease-and-desist letter, a rejection of renewal of engagement and termination of engagement. The review of the status of official relations by the Executive Board can be anticipated and non-compliance can be the reason for non-renewal of official relations. Except in the case of important and intentional cases of non-compliance the non-State actor concerned should not be automatically excluded from other engagements with WHO.</p>	<p>-NO CHANGES-</p> <p>NON-COMPLIANCE WITH THIS FRAMEWORK</p> <p>68. Non-compliance by a non-State actor with the provisions of this framework can have consequences for the entity concerned after due process including a reminder, a warning, a cease-and-desist letter, a rejection of renewal of engagement and termination of engagement. The review of the status of official relations by the Executive Board can be anticipated and non-compliance can be the reason for non-renewal of official relations. Except in the case of important and intentional cases of non-compliance the non-State actor concerned should not be automatically excluded from other engagements with WHO.</p>
<p>69. Any financial contribution received by WHO that is subsequently discovered to be non-compliant with the terms of this framework shall be returned to the contributor.</p>	<p>69. Any financial contribution received by WHO that is subsequently discovered to be non-compliant with the terms of this framework shall be returned to the contributor.</p>	<p>-NO CHANGES-</p> <p>69. Any financial contribution received by WHO that is subsequently discovered to be non-compliant with the terms of this framework shall be returned to the contributor.</p>
<p>MONITORING AND EVALUATION OF THE FRAMEWORK</p> <p>70. The implementation of the framework will be constantly monitored internally through the engagement coordination group and by the</p>	<p>MONITORING AND EVALUATION OF THE FRAMEWORK</p> <p>70. The implementation of the framework will be constantly monitored internally through the engagement coordination group and by the</p>	<p>-NO CHANGES-</p> <p>MONITORING AND EVALUATION OF THE FRAMEWORK</p> <p>70. The implementation of the framework will be constantly monitored internally through the</p>

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<p>Executive Board through the Programme, Budget and Administration Committee in the annual report on engagement with non-State actors and the assessment of information available in the register of non-State actors.</p>	<p>Executive Board through its Programme, Budget and Administration Committee in the annual report on engagement with non-State actors and the assessment of information available in the register of non-State actors.</p>	<p>engagement coordination group and by the Executive Board through its Programme, Budget and Administration Committee in the annual report on engagement with non-State actors and the assessment of information available in the register of non-State actors.</p>
<p>71. Furthermore, the implementation of the framework should be periodically evaluated. The results of such evaluation, together with any proposals for revisions of the framework, shall also be submitted to the Executive Board through the Programme, Budget and Administration Committee.</p>	<p>71. Furthermore, the implementation of the framework should be periodically evaluated. The results of such evaluation, together with any proposals for revisions of the framework, shall also be submitted to the Executive Board through its Programme, Budget and Administration Committee.</p>	<p>-NO CHANGES-</p> <p>71. Furthermore, the implementation of the framework should be periodically evaluated. The results of such evaluation, together with any proposals for revisions of the framework, shall also be submitted to the Executive Board through its Programme, Budget and Administration Committee.</p>

DRAFT WHO POLICY AND OPERATIONAL PROCEDURES ON ENGAGEMENT WITH NONGOVERNMENTAL ORGANIZATIONS

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<p>1. Nongovernmental organizations make important contributions to global health because they often have deep roots in local communities, have special flexibilities to respond to health needs, represent affected populations and other key groups, and promote innovative solutions. Therefore WHO engages with this group of key actors in global health in order to leverage their support in the fulfilment of WHO's mandate.</p>	<p>1. DELETED</p>	<p>1. DELETED</p>
<p>2. This policy regulates specifically WHO's engagement with nongovernmental organizations by type of interaction. [1] The generic provisions of the framework also apply to all engagements with nongovernmental organizations.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>	<p>2. This policy regulates specifically WHO's engagement with nongovernmental organizations by type of interaction.[1] The generic provisions of the framework also apply to all engagements with nongovernmental organizations.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>	<p align="center">-NO CHANGES-</p> <p>2. This policy regulates specifically WHO's engagement with nongovernmental organizations by type of interaction.[1] The generic provisions of the framework also apply to all engagements with nongovernmental organizations.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>
<p>PARTICIPATION</p> <p>Participation by nongovernmental organizations in WHO meetings[2]</p> <p>3. WHO can hold consultations with nongovernmental organizations in the preparation of policies. Consultations can be electronic or in</p>	<p>PARTICIPATION</p> <p>Participation by nongovernmental organizations in WHO meetings [2]</p> <p>3. WHO can invite nongovernmental organizations to participate in consultations, hearings or other meetings in accordance with</p>	<p>PARTICIPATION</p> <p>Participation by nongovernmental organizations in WHO meetings [2]</p> <p>3. WHO can hold consultations with [invite] nongovernmental organizations [to participate in consultations, hearings or other meetings in</p>

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<p>person, and may take the form of hearings at which nongovernmental organizations can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or in other cases by the Secretariat.</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>	<p>paragraph 16 of the overarching framework. Consultations and hearings can be electronic or in person.</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>	<p>accordance with paragraph 16 of the overarching framework] in the preparation of policies. Consultations [and hearings] can be electronic or in person , and may take the form of hearings at which nongovernmental organizations can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or in other cases by the Secretariat. [This language is the one provided on para. 16]</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>
<p>4. WHO can invite nongovernmental organizations to participate in other WHO meetings. Such participation is on the basis of discussion of an item in which the nongovernmental organization has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice.</p>	<p>4. Participation in other meetings is on the basis of discussion of an item in which the nongovernmental organization has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice.</p> <p>4bis. The nature of participation of nongovernmental organizations depends on the type of meeting concerned. The format, modalities, and the participation of</p>	<p>4. WHO can invite nongovernmental organizations to participate in other WHO meetings. Such Participation [in other meetings] is on the basis of discussion of an item in which the nongovernmental organization has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice. [4bis. The nature of participation of nongovernmental organizations depends on the</p>

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	<p>nongovernmental organizations in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from nongovernmental organizations shall be made publicly available, wherever possible. Nongovernmental organizations do not take part in any decision making process of the Organization.</p>	<p>type of meeting concerned. The format, modalities, and the participation of nongovernmental organizations in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from nongovernmental organizations shall be made publicly available, wherever possible. Nongovernmental organizations do not take part in any decision making process of the Organization.]</p>
<p>Involvement of the Secretariat in meetings organized by nongovernmental organizations</p> <p>5. WHO can organize joint meetings, or cosponsor meetings organized by nongovernmental organizations, as long as the integrity and independence of the Organization are preserved, and as long as this participation furthers WHO's objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by nongovernmental organizations in accordance with the internal rules of the Organization. WHO's participation in meetings organized by nongovernmental organizations does not</p>	<p>Involvement of the Secretariat in meetings organized by nongovernmental organizations</p> <p>5. WHO can organize joint meetings, or cosponsor meetings organized by nongovernmental organizations, as long as the integrity, independence <u>and reputation</u> (TO ALIGN WITH OTHER POLICIES) of the Organization are preserved, and as long as this participation furthers WHO's objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by nongovernmental organizations in accordance with the internal rules of the Organization. The nongovernmental organization shall not</p>	<p>Involvement of the Secretariat in meetings organized by nongovernmental organizations</p> <p>5. WHO can organize joint meetings, or cosponsor meetings organized by nongovernmental organizations, as long as the integrity, independence <u>and reputation</u> (TO ALIGN WITH OTHER POLICIES) of the Organization are preserved, and as long as this participation furthers WHO's objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by nongovernmental organizations in accordance with the internal rules of the Organization. [The nongovernmental organization shall not</p>

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<p>constitute official WHO support for, or endorsement of, that nongovernmental organization, and shall not be used for promotional purposes.</p>	<p>misrepresent WHO's participation as official WHO support for, or endorsement of, the meeting, and shall agree not to use WHO's participation for promotional purposes.</p>	<p>misrepresent] WHO's participation in meetings organized by nongovernmental organizations does not constitute [as] official WHO support for, or endorsement of, that nongovernmental organization the meeting, and shall not be used [agree not to use WHO's participation] for promotional purposes.</p>
<p><i>Operational procedures</i></p> <p>6. The participation of WHO in meetings organized by nongovernmental organizations as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of the framework for engagement with non-State actors.</p>	<p><u><i>Specific policies and operational procedures</i></u></p> <p>6. The participation of WHO in meetings organized by nongovernmental organizations as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of this Framework the framework for engagement with non-State actors.</p>	<p><u><i>Specific policies and operational procedures</i></u></p> <p>6. The participation of WHO in meetings organized by nongovernmental organizations as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of this Framework the framework for engagement with non-State actors.</p>
<p>RESOURCES</p> <p>8. WHO can provide resources to a nongovernmental organization for implementation of particular work in accordance with the Programme budget, the Financial Regulations and Financial Rules and other applicable rules and policies. The resources concerned can be either for a project of the institution which WHO considers merits support and is consistent with WHO's programme of work, or for a project organized or coordinated by WHO. The former</p>	<p>RESOURCES</p> <p>8. WHO can provide resources to a nongovernmental organization for implementation of particular work in accordance with the Programme budget, the Financial Regulations and Financial Rules and other applicable rules and policies. The resources concerned can be either for a project of the institution which WHO considers merits support and is consistent with WHO's programme of work, or for a project organized or coordinated by WHO. The former</p>	<p>-NO CHANGES-</p> <p>RESOURCES</p> <p>8. WHO can provide resources to a nongovernmental organization for implementation of particular work in accordance with the Programme budget, the Financial Regulations and Financial Rules and other applicable rules and policies. The resources concerned can be either for a project of the institution which WHO considers merits support and is consistent with WHO's programme of work, or for a project</p>

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constitutes a grant, the latter a service.	constitutes a grant, the latter a service.	organized or coordinated by WHO. The former constitutes a grant, the latter a service.
<p><i>Specific policies and operational procedures</i></p> <p>9. Any acceptance of resources from a nongovernmental organization is handled in accordance with the provisions of this framework and relevant other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO's policies governing procurement.</p>	<p><i>Specific policies and operational procedures</i></p> <p>9. Any acceptance of resources from a nongovernmental organization is handled in accordance with the provisions of this framework and relevant other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO's policies governing procurement.</p>	<p>-NO CHANGES-</p> <p><i>Specific policies and operational procedures</i></p> <p>9. Any acceptance of resources from a nongovernmental organization is handled in accordance with the provisions of this framework and relevant other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO's policies governing procurement.</p>
<p>11. Acknowledgements shall usually be worded along the following lines: "The World Health Organization gratefully acknowledges the financial contribution of [NGO] towards [description of the outcome or activity]".</p>	<p>11. Acknowledgements shall usually be worded along the following lines: "The World Health Organization gratefully acknowledges the financial contribution of [Nongovernmental organization] towards [description of the outcome or activity]".</p>	<p>-NO CHANGES-</p> <p>11. Acknowledgements shall usually be worded along the following lines: "The World Health Organization gratefully acknowledges the financial contribution of [Nongovernmental organization] towards [description of the outcome or activity]".</p>
<p>12. Contributions received from nongovernmental organizations are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>	<p>12. Contributions received from nongovernmental organizations are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>	<p>-NO CHANGES-</p> <p>12. Contributions received from nongovernmental organizations are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>

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<p>EVIDENCE</p> <p>14. Nongovernmental organizations can provide up-to-date information and knowledge on technical issues, and share their experience and engage with WHO in the following: generation of evidence, knowledge management, scientific reviews, information gathering and research.</p>	<p>EVIDENCE</p> <p>14 Nongovernmental organizations may provide their up-to-date information and knowledge on technical issues, and share their experience with WHO, as appropriate, subject to the provisions of the overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.</p>	<p>EVIDENCE</p> <p>14 Nongovernmental organizations can [may] provide [their] up-to-date information and knowledge on technical issues, and share their experience and engage with WHO in the following: generation of evidence, knowledge management, scientific reviews, information gathering and research. [as appropriate, subject to the provisions of the overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.]</p>
<p>ADVOCACY</p> <p>15. WHO collaborates with nongovernmental organizations on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint action is required.</p>	<p>ADVOCACY</p> <p>VERSION AS OF 10 JULY</p> <p>15. WHO collaborates with nongovernmental organizations on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint action is required.</p>	<p>-NO CHANGES-</p> <p>ADVOCACY</p> <p>VERSION AS OF 10 JULY</p> <p>15. WHO collaborates with nongovernmental organizations on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint action is required.</p>

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<p>16. WHO favours independent monitoring functions and therefore engages with nongovernmental organizations working in this field. Nongovernmental organizations are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach.</p>	<p>16. Nongovernmental organizations are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks [...]</p>	<p>16. WHO favours independent monitoring functions and therefore engages with nongovernmental organizations working in this field.<i>[The issue of watchdog NGOs is under discussion on para. 16.bis]</i> Nongovernmental organizations are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach. [...]</p>

DRAFT WHO POLICY AND OPERATIONAL PROCEDURES ON ENGAGEMENT WITH PRIVATE SECTOR ENTITIES

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<p>1. Private sector entities are key players in global health as providers, both within and beyond the health sector, of goods and services that can have important effects on health. Therefore WHO engages with this group of key actors in global health to improve their positive contribution, limit their negative effects on health and leverage their support in the fulfilment of WHO’s mandate.</p>	<p>1. DELETED</p>	<p>1. DELETED</p>
<p>PARTICIPATION</p> <p>Participation by private sector entities in WHO meetings [2]</p> <p>4. WHO can hold consultations with private sector entities in the preparation of policies. Consultations can be electronic or in person, and may take the form of hearings at which private sector entities can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or in other cases by the Secretariat.</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>	<p>PARTICIPATION</p> <p>Participation by private sector entities in WHO meetings [2]</p> <p>4. WHO can invite private sector entities to participate in consultations, hearings or other meetings in accordance with paragraph 16 of the overarching framework. Consultations and hearings can be electronic or in person.</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>	<p>PARTICIPATION</p> <p>Participation by private sector entities in WHO meetings [2]</p> <p>4. WHO can hold consultations with [invite] private sector entities [to participate in consultations, hearings or other meetings in accordance with paragraph 16 of the overarching framework] in the preparation of policies. Consultations [and hearings] can be electronic or in person , and may take the form of hearings at which private sector entities can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or in other cases by the Secretariat. [This language is the one</p>

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		<p><i>provided on para. 16]</i></p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>
<p>5. WHO can invite private sector entities to participate in other WHO meetings. Such participation is on the basis of discussion of an item in which the private sector entity has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is also for the exchange of information and views, but not for the formulation of advice.</p>	<p>5. Participation in other meetings is on the basis of discussion of an item in which the private sector entity has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice.</p> <p>5bis The nature of participation of private sector entities depends on the type of meeting concerned. The format, modalities, and the participation of private sector entities in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from private sector entities shall be made publicly available, wherever possible. Private sector entities do not take part in any decision making process of the Organization.</p>	<p>5. WHO can invite private sector entities to participate in other WHO meetings. Such Participation [in other meetings] is on the basis of discussion of an item in which the private sector entity has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice.</p> <p>[5bis The nature of participation of private sector entities depends on the type of meeting concerned. The format, modalities, and the participation of private sector entities in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from private sector entities shall be made publicly available, wherever possible. Private sector entities do not take part in any decision making process of the Organization.]</p>

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<p>Involvement of the Secretariat in meetings organized by private sector entities</p> <p>6. WHO staff members may participate in meetings organized by a private sector entity as long as the integrity, independence and reputation of the Organization are preserved and as long as this participation furthers WHO’s objectives as expressed in the General Programme of Work. The private sector entity shall not misrepresent WHO’s participation as official WHO support for, or endorsement of, the meeting, and shall agree not to use WHO’s participation for commercial and/or promotional purposes.</p>	<p>Involvement of the Secretariat in meetings organized by private sector entities</p> <p>6. WHO staff members may participate in meetings organized by a private sector entity as long as the integrity, independence and reputation of the Organization are preserved and as long as this participation furthers WHO’s objectives as expressed in the General Programme of Work. The private sector entity shall not misrepresent WHO’s participation as official WHO support for, or endorsement of, the meeting, and shall agree not to use WHO’s participation for commercial and/or promotional purposes.</p>	<p>NO CHANGES-</p> <p>Involvement of the Secretariat in meetings organized by private sector entities</p> <p>6. WHO staff members may participate in meetings organized by a private sector entity as long as the integrity, independence and reputation of the Organization are preserved and as long as this participation furthers WHO’s objectives as expressed in the General Programme of Work. The private sector entity shall not misrepresent WHO’s participation as official WHO support for, or endorsement of, the meeting, and shall agree not to use WHO’s participation for commercial and/or promotional purposes.</p>
<p><i>Specific policies and operational procedures</i></p> <p>7. The participation of WHO staff members in meetings of private sector entities as panellists, speakers or in any other capacity shall be managed according to the provisions of the framework for engagement with non-State actors.</p>	<p><i>Specific policies and operational procedures</i></p> <p>7. The participation of WHO staff members in meetings of private sector entities as panellists, speakers or in any other capacity shall be managed according to the provisions of the overarching framework and this specific policy.</p>	<p><i>Specific policies and operational procedures</i></p> <p>7. The participation of WHO staff members in meetings of private sector entities as panellists, speakers or in any other capacity shall be managed according to the provisions of the [overarching] framework for engagement with non-State actors [and this specific policy].</p>
<p>8. WHO does not cosponsor meetings organized by specific private sector entities. It may, however, cosponsor a meeting for which the scientific initiators have hired a commercial conference</p>	<p>8. WHO does not cosponsor meetings organized wholly or partly by private sector entities. It may, however, cosponsor a meeting for which the scientific initiators have hired a</p>	<p>8. WHO does not cosponsor meetings organized [wholly or partly] by specific private sector entities. It may, however, cosponsor a meeting for which the scientific initiators have</p>

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organizer to deal with the logistical aspects, provided that the commercial organizer makes no contribution to the scientific content of the meeting.	commercial conference organizer to deal with the logistical aspects, provided that the commercial organizer makes no contribution to the scientific content of the meeting.	hired a commercial conference organizer to deal with the logistical aspects, provided that the commercial organizer makes no contribution to the scientific content of the meeting.
9. WHO does not cosponsor meetings with one or more health-related private sector entities. Other instances of cosponsorship with private sector entities should be reviewed on a case-by-case basis and are subject to the provisions of the framework and this policy.	9. WHO does not cosponsor meetings organized by other actors where one or more health-related private sector entities are also cosponsors. Other instances of cosponsorship of meetings organized by other actors where non health-related private sector entities are also cosponsors should be reviewed on a case-by-case basis and are subject to the provisions of this framework.	9. WHO does not cosponsor meetings with [organized by other actors where] one or more health-related private sector entities [are also cosponsors] . Other instances of cosponsorship with [of meetings organized by other actors where non health-related] private sector entities [are also cosponsors] should be reviewed on a case-by-case basis and are subject to the provisions of the [this] framework and this policy.
10. There shall be no commercial exhibitions on WHO premises and at WHO's meetings.	10. There shall be no commercial exhibitions on WHO premises and at WHO's meetings.	-NO CHANGES- 10. There shall be no commercial exhibitions on WHO premises and at WHO's meetings.
11. WHO does not cosponsor commercial exhibitions, whether as part of meetings organized by private sector entities or as part of meetings organized by other actors.	11. WHO does not cosponsor commercial exhibitions, whether as part of meetings organized by private sector entities or as part of meetings organized by other actors.	-NO CHANGES- 11. WHO does not cosponsor commercial exhibitions, whether as part of meetings organized by private sector entities or as part of meetings organized by other actors.
RESOURCES 12. The level of risk associated with the acceptance of resources from private sector entities depends on the field of activity of the	RESOURCES VERSION AS OF 10 JULY 12. The level of risk associated with the acceptance of resources from private sector	-NO CHANGES- RESOURCES VERSION AS OF 10 JULY 12. The level of risk associated with the

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<p>private sector entity, the WHO activity for which the resources are used and the modalities of the contributions.</p>	<p>entities depends on the field of activity of the private sector entity, the WHO activity for which the resources are used and the modalities of the contributions.</p>	<p>acceptance of resources from private sector entities depends on the field of activity of the private sector entity, the WHO activity for which the resources are used and the modalities of the contributions.</p>
<p>(a)</p> <p>(b) Funds may not be sought or accepted from private sector entities that have, themselves or through their affiliated companies, a direct commercial interest in the outcome of the project toward which they would be contributing, unless approved in conformity with the provisions for clinical trials or product development (see paragraph 38 below).</p>	<p>(a)</p> <p>(b) Funds may not be sought or accepted from private sector entities that have, themselves or through their affiliated companies, a direct commercial interest in the outcome of the project toward which they would be contributing, unless approved in conformity with the provisions for clinical trials or product development (see paragraph 38 below).</p>	<p>(a)</p> <p>-NO CHANGES-</p> <p>(b) Funds may not be sought or accepted from private sector entities that have, themselves or through their affiliated companies, a direct commercial interest in the outcome of the project toward which they would be contributing, unless approved in conformity with the provisions for clinical trials or product development (see paragraph 38 below).</p>
<p>(c) Caution should be exercised in accepting financing from private sector entities that have even an indirect interest in the outcome of the project (i.e. the activity is related to the entities' field of interest, without there being a conflict as referred to above). In such an event, other commercial enterprises having a similar indirect interest should be invited to contribute, and the reason clearly described if this does not prove possible. The larger the proportion of the</p>	<p>(c) Caution should be exercised in accepting financing from private sector entities that have even an indirect interest in the outcome of the project (i.e. the activity is related to the entities' field of interest, without there being a conflict as referred to above). In such an event, other commercial enterprises having a similar indirect interest should be invited to contribute, and the reason clearly described if this does not prove possible. The larger the proportion of the</p>	<p>-NO CHANGES-</p> <p>(c) Caution should be exercised in accepting financing from private sector entities that have even an indirect interest in the outcome of the project (i.e. the activity is related to the entities' field of interest, without there being a conflict as referred to above). In such an event, other commercial enterprises having a similar indirect interest should be invited to contribute, and the reason clearly described if this does not prove</p>

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<p>contribution from any one source, the greater the care that should be taken to avoid the possibility of a conflict of interest or appearance of an inappropriate association with one contributor.</p>	<p>contribution from any one source, the greater the care that should be taken to avoid the possibility of a conflict of interest or appearance of an inappropriate association with one contributor.</p>	<p>possible. The larger the proportion of the contribution from any one source, the greater the care that should be taken to avoid the possibility of a conflict of interest or appearance of an inappropriate association with one contributor.</p>
<p>13. Financial and in-kind contributions from private sector entities to WHO’s programmes are only acceptable in the following conditions:</p> <p>(a) the contribution is not used for normative work;</p> <p>(b) if a contribution is used for activities other than normative work in which the private sector entity could have a commercial interest, the public health benefit of the engagement needs clearly to outweigh its potential risks;</p> <p>(c) the proportion of funding of any activity coming from the private sector cannot be such that the programme’s continuation would become dependent on this support;</p> <p>(d) the acceptance of the contribution does not constitute an endorsement by WHO of the private sector entity, or its activities, products or services;</p> <p>(e) the contributor may not use the results of WHO’s work for commercial purposes or use the fact of its contribution in its promotional material;</p> <p>(f) the acceptance of the contribution does not</p>	<p>13. Financial and in-kind contributions from private sector entities to WHO’s programmes are only acceptable in the following conditions:</p> <p>(a) the contribution is not used for normative work;</p> <p>(b) if a contribution is used for activities other than normative work in which the private sector entity could have a commercial interest, the public health benefit of the engagement needs clearly to outweigh its potential risks;</p> <p>(c) the proportion of funding of any activity coming from the private sector cannot be such that the programme’s continuation would become dependent on this support;</p> <p>(d) the acceptance of the contribution does not constitute an endorsement by WHO of the private sector entity, or its activities, products or services;</p> <p>(e) the contributor may not use the results of WHO’s work for commercial purposes or use the fact of its contribution in its promotional material;</p>	<p>-NO CHANGES-</p> <p>13. Financial and in-kind contributions from private sector entities to WHO’s programmes are only acceptable in the following conditions:</p> <p>(a) the contribution is not used for normative work;</p> <p>(b) if a contribution is used for activities other than normative work in which the private sector entity could have a commercial interest, the public health benefit of the engagement needs clearly to outweigh its potential risks;</p> <p>(c) the proportion of funding of any activity coming from the private sector cannot be such that the programme’s continuation would become dependent on this support;</p> <p>(d) the acceptance of the contribution does not constitute an endorsement by WHO of the private sector entity, or its activities, products or services;</p> <p>(e) the contributor may not use the results of WHO’s work for commercial purposes or use the</p>

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<p>afford the contributor any privilege or advantage;</p> <p>(g) the acceptance of the contribution does not offer the contributor any possibility for advising, influencing, participating in, or being in command of the management or implementation of operational activities;</p> <p>(h) WHO keeps its discretionary right to decline a contribution, without any further explanation.</p>	<p>(f) the acceptance of the contribution does not afford the contributor any privilege or advantage;</p> <p>(g) the acceptance of the contribution does not offer the contributor any possibility for advising, influencing, participating in, or being in command of the management or implementation of operational activities;</p> <p>(h) WHO keeps its discretionary right to decline a contribution, without any further explanation.</p>	<p>fact of its contribution in its promotional material;</p> <p>(f) the acceptance of the contribution does not afford the contributor any privilege or advantage;</p> <p>(g) the acceptance of the contribution does not offer the contributor any possibility for advising, influencing, participating in, or being in command of the management or implementation of operational activities;</p> <p>(h) WHO keeps its discretionary right to decline a contribution, without any further explanation.</p>
<p><i>Specific policies and operational procedures</i></p> <p>16. For reasons of transparency, contributions from private sector entities must be publicly acknowledged by WHO in accordance with its policies and practices.</p>	<p><i>Specific policies and operational procedures</i></p> <p>16 For reasons of transparency, contributions from private sector entities must be publicly acknowledged by WHO in accordance with its policies and practices.</p>	<p>-NO CHANGES-</p> <p><i>Specific policies and operational procedures</i></p> <p>16 For reasons of transparency, contributions from private sector entities must be publicly acknowledged by WHO in accordance with its policies and practices.</p>
<p>17. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [private sector entity] towards [description of the outcome or activity]”.</p>	<p>17. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [Private sector entity] towards [description of the outcome or activity]”.</p>	<p>-NO CHANGES-</p> <p>17. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [Private sector entity] towards [description of the outcome or activity]”.</p>
<p>18. Contributions received from private sector entities, are listed in the financial report and</p>	<p>18. Contributions received from private sector entities, are listed in the financial report and</p>	<p>-NO CHANGES-</p> <p>18. Contributions received from private sector</p>

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<p>audited financial statements of WHO as well as the Programme budget web portal and the register of non-State actors.</p>	<p>audited financial statements of WHO as well as the Programme budget web portal and the register of non-State actors.</p> <p>[18bis]</p>	<p>entities, are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the register of non-State actors.</p> <p>[18bis]</p>
<p><i>Donations of medicines and other health technologies</i> [3]</p> <p>20. In determining the acceptability of large-scale donations of medicines and other health-related products, the following criteria should be met.</p> <p>FOOTNOTE 3: Such donations shall be in line with interagency guidelines: World Health Organization, Ecumenical Pharmaceutical Network, International Pharmaceutical Federation, International Federation of Red Cross and Red Crescent Societies, International Health Partners, The Partnership for Quality Medical Donations, et al. Guidelines for medicine donations – revised 2010. Geneva: World Health Organization; 2011.</p>	<p><i>Donations of medicines and other health technologies</i> [3]</p> <p>20. In determining the acceptability of large-scale donations of medicines and other health-related products, the following criteria should be met.</p> <p>FOOTNOTE 3: Such donations shall be in line with interagency guidelines: World Health Organization, Ecumenical Pharmaceutical Network, International Pharmaceutical Federation, International Federation of Red Cross and Red Crescent Societies, International Health Partners, The Partnership for Quality Medical Donations, et al. Guidelines for medicine donations – revised 2010. Geneva: World Health Organization; 2011.</p>	<p>-NO CHANGES-</p> <p><i>Donations of medicines and other health technologies</i> [3]</p> <p>20. In determining the acceptability of large-scale donations of medicines and other health-related products, the following criteria should be met.</p> <p>FOOTNOTE 3: Such donations shall be in line with interagency guidelines: World Health Organization, Ecumenical Pharmaceutical Network, International Pharmaceutical Federation, International Federation of Red Cross and Red Crescent Societies, International Health Partners, The Partnership for Quality Medical Donations, et al. Guidelines for medicine donations – revised 2010. Geneva: World Health Organization; 2011.</p>
<p>(a) Sound evidence exists of the safety and efficacy of the product in the indication for which it is being donated. The product is approved or otherwise authorized by the recipient country for</p>	<p>(a) Sound evidence exists of the safety and efficacy of the product in the indication for which it is being donated. The product is approved or otherwise authorized by the recipient country for</p>	<p>(a) Sound evidence exists of the safety and efficacy of the product in the indication for which it is being donated. The product is approved or otherwise authorized by the recipient country for</p>

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<p>use in that indication; it should also preferably appear in the WHO Model List of Essential Medicines for that indication.</p> <p>(b) Objective and justifiable criteria for the selection of recipient countries, communities or patients have been determined. In emergency situations, flexibilities may be required.</p> <p>(c) A supply system is in place and consideration is given to means of preventing waste, theft and misuse (including leakage back into the market).</p> <p>(d) A training and supervision programme is in place for all personnel involved in the efficient administration of supply, storage and distribution at every point from the donor to the end-user.</p> <p>(e) A donation of medicines and other health-related products is not of a promotional nature, either with regard to the company itself or insofar as it creates a demand for the products that is not sustainable once the donation has ended.</p> <p>(f) WHO does not accept products at the end of their shelf.</p> <p>(g) A phase-out plan for the donation has been agreed upon with recipient countries.</p> <p>(h) A system for monitoring adverse reactions to the product has been set up with the participation</p>	<p>use in that indication; it should also preferably appear in the WHO Model List of Essential Medicines for that indication.</p> <p>(b) Objective and justifiable criteria for the selection of recipient countries, communities or patients have been determined. In emergency situations, flexibilities may be required.</p> <p>(c) A supply system is in place and consideration is given to means of preventing waste, theft and misuse (including leakage back into the market).</p> <p>(d) A training and supervision programme is in place for all personnel involved in the efficient administration of supply, storage and distribution at every point from the donor to the end-user.</p> <p>(e) A donation of medicines and other health-related products is not of a promotional nature, either with regard to the company itself or insofar as it creates a demand for the products that is not sustainable once the donation has ended.</p> <p>(f) WHO does not accept products at the end of their shelf life.</p> <p>(g) A phase-out plan for the donation has been agreed upon with recipient countries.</p> <p>(h) A system for monitoring adverse reactions to</p>	<p>use in that indication; it should also preferably appear in the WHO Model List of Essential Medicines for that indication.</p> <p>(b) Objective and justifiable criteria for the selection of recipient countries, communities or patients have been determined. In emergency situations, flexibilities may be required.</p> <p>(c) A supply system is in place and consideration is given to means of preventing waste, theft and misuse (including leakage back into the market).</p> <p>(d) A training and supervision programme is in place for all personnel involved in the efficient administration of supply, storage and distribution at every point from the donor to the end-user.</p> <p>(e) A donation of medicines and other health-related products is not of a promotional nature, either with regard to the company itself or insofar as it creates a demand for the products that is not sustainable once the donation has ended.</p> <p>(f) WHO does not accept products at the end of their shelf [life].</p> <p>(g) A phase-out plan for the donation has been agreed upon with recipient countries.</p> <p>(h) A system for monitoring adverse reactions to</p>

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of the donating company.	the product has been set up with the participation of the donating company.	the product has been set up with the participation of the donating company.
21. In consultation with the department responsible for financial matters in WHO, the value of donations of medicines and other health-related products is determined and is formally recorded in the audited statements and the WHO register of non-State actors.	21. In consultation with the department responsible for financial matters in WHO, the value of donations of medicines and other health-related products is determined and is formally recorded in the audited statements and the WHO register of non-State actors.	-NO CHANGES- 21. In consultation with the department responsible for financial matters in WHO, the value of donations of medicines and other health-related products is determined and is formally recorded in the audited statements and the WHO register of non-State actors.
<p><i>Financial contributions for clinical trials</i></p> <p>22. Except as provided in paragraph 38 below on product development, financial contributions from a commercial enterprise for a clinical trial arranged by WHO on that company's proprietary product are considered on a case-by-case basis and always decided by the Engagement coordination group. In this connection, it should be ensured that:</p> <p>(a) the research or development activity is of public health importance;</p> <p>(b) the research is conducted at WHO's request and potential conflicts of interest are managed;</p> <p>(c) WHO only accepts such financial contributions, if the research would not take place without WHO's involvement or if WHO's involvement is</p>	<p><i>Financial contributions for clinical trials</i></p> <p>22. Except as provided in paragraph 38 below on product development, financial contributions from a commercial enterprise for a clinical trial arranged by WHO on that company's proprietary product are considered on a case-by-case basis and always decided by the Engagement coordination group. In this connection, it should be ensured that:</p> <p>(a) the research or development activity is of public health importance;</p> <p>(b) the research is conducted at WHO's request and potential conflicts of interest are managed;</p> <p>(c) WHO only accepts such financial contributions, if the research would not take place without WHO's involvement or if WHO's involvement is</p>	<p>-NO CHANGES-</p> <p><i>Financial contributions for clinical trials</i></p> <p>22. Except as provided in paragraph 38 below on product development, financial contributions from a commercial enterprise for a clinical trial arranged by WHO on that company's proprietary product are considered on a case-by-case basis and always decided by the Engagement coordination group. In this connection, it should be ensured that:</p> <p>(a) the research or development activity is of public health importance;</p> <p>(b) the research is conducted at WHO's request and potential conflicts of interest are managed;</p> <p>(c) WHO only accepts such financial contributions, if the research would not take place</p>

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<p>necessary in order to ensure that the research is undertaken in conformity with internationally accepted technical and ethical standards and guidelines.</p>	<p>involvement is necessary in order to ensure that the research is undertaken in conformity with internationally accepted technical and ethical standards and guidelines.</p>	<p>without WHO's involvement or if WHO's involvement is necessary in order to ensure that the research is undertaken in conformity with internationally accepted technical and ethical standards and guidelines.</p>
<p>23. If the above-mentioned requirements are met, a financial contribution may be accepted from a company having a direct commercial interest in the trial in question, provided that appropriate mechanisms are put in place to ensure that WHO controls the outcome of the trial, including the content of any resulting publication, and that the trial results are free from any inappropriate influence or perceived influence from the company concerned.</p>	<p>23 If the above-mentioned requirements are met, a financial contribution may be accepted from a company having a direct commercial interest in the trial in question, provided that appropriate mechanisms are put in place to ensure that WHO controls the conduct and the dissemination of the outcomes of the trials, including the content of any resulting publication, and that the trial results are free from any inappropriate influence or perceived influence from the company concerned.</p>	<p>23 If the above-mentioned requirements are met, a financial contribution may be accepted from a company having a direct commercial interest in the trial in question, provided that appropriate mechanisms are put in place to ensure that WHO controls [the conduct and the dissemination of] the outcome[s] of the trial[s], including the content of any resulting publication, and that the trial results are free from any inappropriate influence or perceived influence from the company concerned.</p>
<p><i>Contributions for WHO meetings</i></p> <p>24. For meetings convened by WHO, a contribution from a private sector entity may not be accepted if it is designated to support the participation of specific invitees (including such invitees' travel and accommodation), regardless of whether such contribution would be provided directly to the participants or channelled through WHO.</p>	<p><i>Contributions for WHO meetings</i></p> <p>24. For meetings convened by WHO, a contribution from a private sector entity may not be accepted if it is designated to support the participation of specific invitees (including such invitees' travel and accommodation), regardless of whether such contribution would be provided directly to the participants or channelled through WHO.</p>	<p>-NO CHANGES-</p> <p><i>Contributions for WHO meetings</i></p> <p>24. For meetings convened by WHO, a contribution from a private sector entity may not be accepted if it is designated to support the participation of specific invitees (including such invitees' travel and accommodation), regardless of whether such contribution would be provided directly to the participants or channelled through</p>

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		WHO.
25. Contributions may be accepted to support the overall costs of a meeting.	25. Contributions may be accepted to support the overall costs of a meeting.	-NO CHANGES- 25. Contributions may be accepted to support the overall costs of a meeting.
26. WHO receptions and similar functions shall not be paid for by private sector entities.	26. WHO receptions and similar functions shall not be paid for by private sector entities.	-NO CHANGES- 26. WHO receptions and similar functions shall not be paid for by private sector entities.
<p><i>Contributions for WHO staff participating in external meetings</i></p> <p>27. An external meeting is one convened by a party other than WHO. Support from private sector entities for travel of WHO staff members to attend external meetings or conferences may fall into two categories:</p> <p>(a) meetings held by the private sector entity paying for travel: financing for travel may be accepted in accordance with WHO's rules if the private sector entity or trade association is also supporting the travel and ancillary expenses of other participants in the meeting, and the risk of a conflict of interest has been assessed;</p> <p>(b) meetings held by a third party (i.e. a party other than the private sector entity or trade association proposing to pay for the travel): financing for travel may not be accepted from a</p>	<p><i>Contributions for WHO staff participating in external meetings</i></p> <p>27. An external meeting is one convened by a party other than WHO. Support from private sector entities for travel of WHO staff members to attend external meetings or conferences may fall into two categories:</p> <p>(a) meetings held by the private sector entity paying for travel: financing for travel may be accepted in accordance with WHO's rules if the private sector entity is also supporting the travel and ancillary expenses of other participants in the meeting, and the risk of a conflict of interest has been assessed and managed;</p> <p>(b) meetings held by a third party (i.e. a party other than the private sector entity or trade association proposing to pay for the travel): financing for travel may not be accepted from a</p>	<p><i>Contributions for WHO staff participating in external meetings</i></p> <p>27. An external meeting is one convened by a party other than WHO. Support from private sector entities for travel of WHO staff members to attend external meetings or conferences may fall into two categories:</p> <p>(a) meetings held by the private sector entity paying for travel: financing for travel may be accepted in accordance with WHO's rules if the private sector entity or trade association is also supporting the travel and ancillary expenses of other participants in the meeting, and the risk of a conflict of interest has been assessed and managed;</p> <p>(b) meetings held by a third party (i.e. a party other than the private sector entity proposing to pay for the travel): financing for travel may not be</p>

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private sector entity.	private sector entity.	accepted from a private sector entity.
<p><i>Cost recovery</i></p> <p>30. In cases where a WHO evaluation scheme is in place (i.e. to evaluate certain products, processes or services against official WHO guidelines), the Organization may charge private sector entities for such services on the basis of cost recovery. The purpose of WHO's evaluation schemes is always to provide advice to governments and/or international organizations for procurement. Evaluation does not constitute endorsement by WHO of the product(s), process or service in question.</p>	<p><i>Cost recovery</i></p> <p>30. In cases where a WHO evaluation scheme is in place (i.e. to evaluate certain products, processes or services against official WHO guidelines), the Organization may charge private sector entities for such services on the basis of cost recovery. The purpose of WHO's evaluation schemes is always to provide advice to governments and/or international organizations for procurement. Evaluation does not constitute endorsement by WHO of the product(s), process or service in question.</p>	<p>-NO CHANGES-</p> <p><i>Cost recovery</i></p> <p>30. In cases where a WHO evaluation scheme is in place (i.e. to evaluate certain products, processes or services against official WHO guidelines), the Organization may charge private sector entities for such services on the basis of cost recovery. The purpose of WHO's evaluation schemes is always to provide advice to governments and/or international organizations for procurement. Evaluation does not constitute endorsement by WHO of the product(s), process or service in question.</p>
<p>EVIDENCE</p> <p>31. WHO can only collaborate with private sector entities in the generation of evidence, in knowledge management, in information gathering and in research when potential conflicts of interest are managed in accordance with this framework and the collaboration is transparent.</p>	<p>EVIDENCE</p> <p>31. Private sector entities may provide their up-to-date information and knowledge on technical issues, and share their experience with WHO, as appropriate, subject to the provisions of the overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly</p>	<p>EVIDENCE</p> <p>31. WHO can only collaborate with private sector entities in the generation of evidence, in knowledge management, in information gathering and in research when potential conflicts of interest are managed in accordance with this framework and the collaboration is transparent. Private sector entities may provide their up-to-date information and knowledge on technical issues, and share their experience with WHO, as appropriate, subject to the provisions of the</p>

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	available.	overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.
<p>ADVOCACY</p> <p>34. Private sector entities can only collaborate with WHO in advocacy for the implementation of a WHO norm or standard if they commit themselves to implement these norms and standards in their entirety. No partial or selective implementation is acceptable.</p>	<p>ADVOCACY</p> <p>34. Private sector entities can only collaborate with WHO in advocacy for the implementation of a WHO <u>policy</u> norm or standard if they commit themselves to implement [these norms and standards]/<u>[this norm or standard]</u> in their entirety. No partial or selective implementation is acceptable. [SUBJECT TO AGREEMENT ON SPECIFIC PARAGRAPHS IN THE FOUR SPECIFIC POLICIES]</p>	<p>ADVOCACY</p> <p>34. Private sector entities can only collaborate with WHO in advocacy for the implementation of a WHO <u>policy</u> norm or standard if they commit themselves to implement [these norms and standards]/<u>[this norm or standard]</u> in their entirety. No partial or selective implementation is acceptable. [SUBJECT TO AGREEMENT ON SPECIFIC PARAGRAPHS IN THE FOUR SPECIFIC POLICIES]</p>
<p>TECHNICAL COLLABORATION</p> <p>[...]</p> <p><i>Specific policies and operational procedures</i></p> <p>37. If WHO has drawn up official specifications for a product, it may provide technical advice to manufacturers for development of their product in accordance with these specifications, provided that all private sector entities known to have an</p>	<p>TECHNICAL COLLABORATION</p> <p>[...]</p> <p><i>Specific policies and operational procedures</i></p> <p>37. If WHO has drawn up official specifications for a product, it may provide technical advice to manufacturers for development of their product in accordance with these specifications, provided that all private sector entities known to have an</p>	<p>TECHNICAL COLLABORATION</p> <p>[...]</p> <p>-NO CHANGES-</p> <p><i>Specific policies and operational procedures</i></p> <p>37. If WHO has drawn up official specifications for a product, it may provide technical advice to manufacturers for development of their product in accordance with these specifications, provided</p>

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interest in such a product are given the opportunity to collaborate with WHO in the same way.	interest in such a product are given the opportunity to collaborate with WHO in the same way.	that all private sector entities known to have an interest in such a product are given the opportunity to collaborate with WHO in the same way.

DRAFT WHO POLICY AND OPERATIONAL PROCEDURES ON ENGAGEMENT WITH PHILANTHROPIC FOUNDATIONS

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<p>1. Philanthropic foundations are making significant contributions to global health in general, and to WHO's work in particular, in many areas ranging from innovation to capacity-building and to service delivery. Therefore WHO engages with this group of key actors in global health to leverage their support in the fulfilment of WHO's mandate.</p>	<p>1. DELETED</p>	<p>1. DELETED</p>
<p>2. This policy regulates specifically WHO's engagement with philanthropic foundations by type of interaction.[1] The generic provisions of the framework also apply to all engagements with philanthropic foundations.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>	<p>2. This policy regulates specifically WHO's engagement with philanthropic foundations by type of interaction.[1] The generic provisions of the framework also apply to all engagements with philanthropic foundations.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>	<p>-NO CHANGES-</p> <p>2. This policy regulates specifically WHO's engagement with philanthropic foundations by type of interaction.[1] The generic provisions of the framework also apply to all engagements with philanthropic foundations.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>
<p>PARTICIPATION</p> <p>Participation by philanthropic foundations in WHO meetings [2]</p> <p>3. WHO can hold consultations with philanthropic foundations in the preparation of policies. Consultations can be electronic or in person, and may take the form of hearings at which</p>	<p>PARTICIPATION</p> <p>Participation by philanthropic foundations in WHO meetings [2]</p> <p>3. WHO can invite philanthropic foundations to participate in consultations, hearings or other meetings in accordance with paragraph 16 of the overarching framework. Consultations and</p>	<p>PARTICIPATION</p> <p>Participation by philanthropic foundations in WHO meetings [2]</p> <p>3. WHO can hold consultations with [invite] philanthropic foundations [to participate in consultations, hearings or other meetings in accordance with paragraph 16 of the overarching</p>

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<p>philanthropic foundations can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or in other cases by the Secretariat.</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>	<p>hearings can be electronic or in person.</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>	<p>framework] in the preparation of policies. Consultations [and hearings] can be electronic or in person , and may take the form of hearings at which philanthropic foundations can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or in other cases by the Secretariat. [This language is the one provided on para. 16]</p> <p>FOOTNOTE 2: Other than sessions of the governing bodies, which are regulated by the policy on management of engagement.</p>
<p>4. WHO can invite philanthropic foundations to participate in other WHO meetings. Such participation is on the basis of discussion of an item in which the philanthropic foundation has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is also for the exchange of information and views, but not for the formulation of any advice.</p>	<p>4. Participation in other meetings is on the basis of discussion of an item in which the philanthropic foundation has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice.</p> <p>4bis. The nature of participation of philanthropic foundations depends on the type of meeting concerned. The format, modalities, and the participation of philanthropic foundations in consultations, hearings, and other meetings is</p>	<p>4. WHO can invite philanthropic foundations to participate in other WHO meetings. Such Participation [in other meetings] is on the basis of discussion of an item in which the philanthropic foundation has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice.</p> <p>[4bis. The nature of participation of philanthropic foundations depends on the type of meeting concerned. The format, modalities, and the</p>

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	<p>decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from philanthropic foundations shall be made publicly available, wherever possible. Philanthropic foundations do not take part in any decision making process of the Organization.</p>	<p>participation of philanthropic foundations in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from philanthropic foundations shall be made publicly available, wherever possible. Philanthropic foundations do not take part in any decision making process of the Organization.]</p>
<p>Involvement of the Secretariat in meetings organized by philanthropic foundations</p> <p>5. WHO can organize joint meetings, or cosponsor meetings organized by philanthropic foundations, as long as the integrity, independence and reputation of the Organization are preserved, and as long as this participation furthers WHO's objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by philanthropic foundations in accordance with the Organization's internal rules. WHO's participation in meetings organized by philanthropic foundations does not constitute an official WHO support for, or endorsement of, that philanthropic foundation, and shall not be used for</p>	<p>Involvement of the Secretariat in meetings organized by philanthropic foundations</p> <p>5. WHO can organize joint meetings, or cosponsor meetings organized by philanthropic foundations, as long as the integrity, independence and reputation of the Organization are preserved, and as long as this participation furthers WHO's objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by philanthropic foundations in accordance with the Organization's internal rules. The philanthropic foundations shall not misrepresent WHO's participation as official WHO support for, or endorsement of, the meeting, and shall agree not to use WHO's participation for promotional</p>	<p>Involvement of the Secretariat in meetings organized by philanthropic foundations</p> <p>5. WHO can organize joint meetings, or cosponsor meetings organized by philanthropic foundations, as long as the integrity, independence and reputation of the Organization are preserved, and as long as this participation furthers WHO's objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by philanthropic foundations in accordance with the Organization's internal rules. [The philanthropic foundations shall not misrepresent] WHO's participation in meetings organized by philanthropic foundations does not constitute [as] official WHO support for, or endorsement of, that</p>

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promotional purposes.	purposes.	philanthropic foundation the meeting, and shall not be used [agree not to use WHO's participation] for promotional purposes.
<p><i>Operational procedures</i></p> <p>6. The participation of WHO in meetings organized by philanthropic foundations as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of the framework for engagement with non-State actors.</p>	<p><u><i>Specific policies and operational procedures</i></u></p> <p>6. The participation of WHO in meetings organized by philanthropic foundations as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of the framework for engagement with non-State actors.</p>	<p><u><i>Specific policies and operational procedures</i></u></p> <p>-NO CHANGES-</p> <p>6. The participation of WHO in meetings organized by philanthropic foundations as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of the framework for engagement with non-State actors.</p>
<p>RESOURCES</p> <p>[...]</p> <p>8. As for all contributors, philanthropic foundations shall align their contributions to the priorities set by the Health Assembly in the approved Programme budget.</p>	<p>RESOURCES</p> <p>[...]</p> <p>8. As for all contributors, philanthropic foundations shall align their contributions to the priorities set by the Health Assembly in the approved Programme budget.</p>	<p>-NO CHANGES-</p> <p>RESOURCES</p> <p>[...]</p> <p>8. As for all contributors, philanthropic foundations shall align their contributions to the priorities set by the Health Assembly in the approved Programme budget.</p>
<p>9. Philanthropic foundations are invited to participate in the financing dialogue, which is designed to improve the alignment, predictability, flexibility and transparency of WHO's funding and to reduce budgetary vulnerability.</p>	<p>9. Philanthropic foundations are invited to participate in the financing dialogue, which is designed to improve the alignment, predictability, flexibility and transparency of WHO's funding and to reduce budgetary vulnerability.</p>	<p>-NO CHANGES-</p> <p>9. Philanthropic foundations are invited to participate in the financing dialogue, which is designed to improve the alignment, predictability, flexibility and transparency of WHO's funding and to reduce budgetary vulnerability.</p>

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<p>10. WHO's programmes and offices should strive to ensure that they do not depend on one single source of funding.</p>	<p>10. WHO's programmes and offices should strive to ensure that they do not depend on one single source of funding.</p>	<p>-NO CHANGES-</p> <p>10. WHO's programmes and offices should strive to ensure that they do not depend on one single source of funding.</p>
<p>11. The acceptance of contributions (whether in cash or in kind) should be made subject to the following conditions:</p> <p>(a) the acceptance of a contribution does not constitute an endorsement by WHO of the philanthropic foundation;</p> <p>(b) the acceptance of a contribution does not confer on the contributor any privilege or advantage;</p> <p>(c) the acceptance of a contribution as such does not offer the contributor any possibility for advising, influencing, participating in, or being in command of the management or implementation of operational activities;</p> <p>(d) WHO keeps its discretionary right to decline a contribution, without any further explanation.</p>	<p>11. The acceptance of contributions (whether in cash or in kind) should be made subject to the following conditions:</p> <p>(a) the acceptance of a contribution does not constitute an endorsement by WHO of the philanthropic foundation;</p> <p>(b) the acceptance of a contribution does not confer on the contributor any privilege or advantage;</p> <p>(c) the acceptance of a contribution as such does not offer the contributor any possibility for advising, influencing, participating in, or being in command of the management or implementation of operational activities;</p> <p>(d) WHO keeps its discretionary right to decline a contribution, without any further explanation.</p>	<p>-NO CHANGES-</p> <p>11. The acceptance of contributions (whether in cash or in kind) should be made subject to the following conditions:</p> <p>(a) the acceptance of a contribution does not constitute an endorsement by WHO of the philanthropic foundation;</p> <p>(b) the acceptance of a contribution does not confer on the contributor any privilege or advantage;</p> <p>(c) the acceptance of a contribution as such does not offer the contributor any possibility for advising, influencing, participating in, or being in command of the management or implementation of operational activities;</p> <p>(d) WHO keeps its discretionary right to decline a contribution, without any further explanation.</p>
<p><i>Specific policies and operational procedures</i></p> <p>12. Any acceptance of resources from a philanthropic foundation is handled in accordance with the provisions of this framework and relevant</p>	<p><i>Specific policies and operational procedures</i></p> <p>12. Any acceptance of resources from a philanthropic foundation is handled in accordance with the provisions of this framework and relevant</p>	<p>-NO CHANGES-</p> <p><i>Specific policies and operational procedures</i></p> <p>12. Any acceptance of resources from a philanthropic foundation is handled in accordance</p>

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<p>other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO’s policies governing procurement.</p>	<p>other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO’s policies governing procurement.</p>	<p>with the provisions of this framework and relevant other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO’s policies governing procurement.</p>
<p>14. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [philanthropic foundation] towards [description of the outcome or activity]”.</p>	<p>14. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [Philanthropic foundation] towards [description of the outcome or activity]”.</p>	<p>-NO CHANGES-</p> <p>14. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [Philanthropic foundation] towards [description of the outcome or activity]”.</p>
<p>15. Contributions received from philanthropic foundations are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>	<p>15. Contributions received from philanthropic foundations are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>	<p>-NO CHANGES-</p> <p>15. Contributions received from philanthropic foundations are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>
<p>16. Philanthropic foundations may not use the fact that they have made a contribution in their promotional materials. However, they may make reference to the contribution in their annual reports or similar documents. In addition, they may mention the contribution in a transparency listing on their websites, in special non-promotional pages of their website and similar</p>	<p>16. Philanthropic foundations may not use the fact that they have made a contribution in their promotional materials. However, they may make reference to the contribution in their annual reports or similar documents. In addition, they may mention the contribution in a transparency listing on their websites, in special non-promotional pages of their website and similar</p>	<p>-NO CHANGES-</p> <p>16. Philanthropic foundations may not use the fact that they have made a contribution in their promotional materials. However, they may make reference to the contribution in their annual reports or similar documents. In addition, they may mention the contribution in a transparency listing on their websites, in special non-</p>

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<p>publications, provided that the content and context have been agreed with WHO.</p>	<p>publications, provided that the content and context have been agreed with WHO.</p>	<p>promotional pages of their website and similar publications, provided that the content and context have been agreed with WHO.</p>
<p>EVIDENCE</p> <p>17. Philanthropic foundations can provide up-to-date information and knowledge on technical issues, and share their experience and engage with WHO in the following: generation of evidence, knowledge management, scientific reviews, information gathering and research.</p>	<p>EVIDENCE</p> <p>17. Philanthropic foundations may provide their up-to-date information and knowledge on technical issues, and share their experience with WHO, as appropriate, subject to the provisions of the overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.</p>	<p>EVIDENCE</p> <p>17. Philanthropic foundations can [may] provide their up-to-date information and knowledge on technical issues, and share their experience with WHO in the following: generation of evidence, knowledge management, scientific reviews, information gathering and research [, as appropriate, subject to the provisions of the overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.]</p>
<p>ADVOCACY</p> <p>18. WHO collaborates with philanthropic foundations on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint</p>	<p>ADVOCACY</p> <p>18. WHO collaborates with philanthropic foundations on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint</p>	<p>-NO CHANGES-</p> <p>ADVOCACY</p> <p>18. WHO collaborates with philanthropic foundations on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater</p>

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<p>action is required. Philanthropic foundations are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach.</p>	<p>action is required. Philanthropic foundations are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach.</p>	<p>coherence between non-State actors where joint action is required. Philanthropic foundations are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach.</p>

DRAFT WHO POLICY AND OPERATIONAL PROCEDURES ON ENGAGEMENT WITH ACADEMIC INSTITUTIONS

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<p>1. Academic institutions contribute to global health through education, research, clinical care and the generation, synthesis and analysis of evidence. Therefore, WHO engages with this group of key actors in global health to leverage their support in the fulfilment of WHO's mandate.</p>	<p>1. DELETED</p>	<p>1. DELETED</p>
<p>2. This policy regulates specifically WHO's engagement with academic institutions by type of interaction.[1] The generic provisions of the framework also apply to all engagements with academic institutions.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>	<p>2. This policy regulates specifically WHO's engagement with academic institutions by type of interaction.[1] The generic provisions of the framework also apply to all engagements with academic institutions.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>	<p>-NO CHANGES-</p> <p>2. This policy regulates specifically WHO's engagement with academic institutions by type of interaction.[1] The generic provisions of the framework also apply to all engagements with academic institutions.</p> <p>FOOTNOTE 1: See paragraphs 15–21 of the overarching framework for the five types of interaction.</p>
<p>3. The engagement with academic institutions at the institutional level has to be distinguished from the collaboration with individual experts working for academic institutions.</p>	<p>3. The engagement with academic institutions at the institutional level has to be distinguished from the collaboration with individual experts working for academic institutions.</p>	<p>-NO CHANGES-</p> <p>3. The engagement with academic institutions at the institutional level has to be distinguished from the collaboration with individual experts working for academic institutions.</p>
<p>PARTICIPATION</p> <p>Participation by academic institutions in WHO meetings</p> <p>4. WHO can hold consultations with academic</p>	<p>PARTICIPATION</p> <p>Participation by academic institutions in WHO meetings</p> <p>4. WHO can invite academic institutions to</p>	<p>PARTICIPATION</p> <p>Participation by academic institutions in WHO meetings</p> <p>4. WHO can hold consultations with [invite]</p>

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<p>institutions in the preparation of policies. Consultations can be electronic or in person, and may take the form of hearings at which academic institutions can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or for other cases by the Secretariat.</p>	<p>participate in consultations, hearings or other meetings in accordance with paragraph 16 of the overarching framework. Consultations and hearings can be electronic or in person.</p>	<p>academic institutions in the preparation of policies. [to participate in consultations, hearings or other meetings in accordance with paragraph 16 of the overarching framework] in the preparation of policies. Consultations [and hearings] can be electronic or in person , and may take the form of hearings at which academic institutions can present their views. The format of such consultations is decided on a case-by-case basis either by the governing body at the session at which a hearing or consultation is mandated or in other cases by the Secretariat. [This language is the one provided on para. 16]</p>
<p>5. WHO can invite academic institutions to participate in other WHO meetings. Such participation is on the basis of discussion of an item in which the academic institution has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is also for the exchange of information and views, but not for the formulation of any advice.</p>	<p>5. Participation in other meetings is on the basis of discussion of an item in which the academic institution has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice. 5bis. The nature of participation of academic institution depends on the type of meeting concerned. The format, modalities, and the participation of academic institution in consultations, hearings, and other meetings is</p>	<p>5. WHO can invite academic institutions to participate in other WHO meetings. Such Participation [in other meetings] is on the basis of discussion of an item in which the academic institution has a particular interest and where its participation adds value to the deliberations of the meeting. Such participation is for the exchange of information and views, but never for the formulation of advice. [5bis. The nature of participation of academic institution depends on the type of meeting concerned. The format, modalities, and the</p>

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	<p>decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from academic institutions shall be made publicly available, wherever possible. Academic institutions do not take part in any decision making process of the Organization.</p>	<p>participation of academic institution in consultations, hearings, and other meetings is decided on a case-by-case basis by the WHO governing bodies or by the Secretariat. Participation and inputs received from academic institutions shall be made publicly available, wherever possible. Academic institutions do not take part in any decision making process of the Organization.]</p>
<p>Involvement of the Secretariat in meetings organized by academic institutions</p> <p>6. WHO can organize joint meetings, or cosponsor meetings organized by academic institutions, as long as the integrity, independence and reputation of the Organization are preserved, and as long as this participation furthers WHO’s objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by academic institutions in accordance with the Organization’s internal rules. WHO’s participation in meetings organized by academic institutions does not constitute an official WHO support for, or endorsement of, that academic institution, and shall not be used for promotional purposes.</p>	<p>Involvement of the Secretariat in meetings organized by academic institutions</p> <p>6. WHO can organize joint meetings, or cosponsor meetings organized by academic institutions, as long as the integrity, independence and reputation of the Organization are preserved, and as long as this participation furthers WHO’s objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by academic institutions in accordance with the Organization’s internal rules. The academic institution shall not misrepresent WHO’s participation as official WHO support for, or endorsement of, the meeting, and shall agree not to use WHO’s participation for promotional purposes.</p>	<p>Involvement of the Secretariat in meetings organized by academic institutions</p> <p>6. WHO can organize joint meetings, or cosponsor meetings organized by academic institutions, as long as the integrity, independence and reputation of the Organization are preserved, and as long as this participation furthers WHO’s objectives as expressed in the General Programme of Work. WHO staff members may participate in meetings organized by academic institutions in accordance with the Organization’s internal rules. [The academic institution shall not misrepresent] WHO’s participation in meetings organized by academic institutions does not constitute [as] official WHO support for, or endorsement of, that academic institution the</p>

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		meeting, and shall not be used [agree not to use WHO's participation] for promotional purposes.
<p><i>Operational procedures</i></p> <p>7. The participation of WHO in meetings organized by academic institutions as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of the framework for engagement with non-State actors.</p>	<p><i>Specific policies and operational procedures</i></p> <p>7. The participation of WHO in meetings organized by academic institutions as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of the framework for engagement with non-State actors.</p>	<p><i>Specific policies and operational procedures</i></p> <p>-NO CHANGES-</p> <p>7. The participation of WHO in meetings organized by academic institutions as co-organizers, cosponsors, panellists or speakers shall be managed according to the provisions of the framework for engagement with non-State actors.</p>
<p>RESOURCES</p> <p>[...]</p> <p><i>Specific policies and operational procedures</i></p> <p>10. Any acceptance of resources from an academic institution is handled in accordance with this framework and relevant other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO's policies governing procurement.</p>	<p>RESOURCES</p> <p>[...]</p> <p><i>Specific policies and operational procedures</i></p> <p>10. Any acceptance of resources from an academic institution is handled in accordance with this framework and relevant other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO's policies governing procurement.</p>	<p>RESOURCES</p> <p>[...]</p> <p>-NO CHANGES-</p> <p><i>Specific policies and operational procedures</i></p> <p>10. Any acceptance of resources from an academic institution is handled in accordance with this framework and relevant other rules such as the Staff Regulations and Staff Rules, the Financial Regulations and Financial Rules and WHO's policies governing procurement.</p>
<p>11. For reasons of transparency, contributions from academic institutions must be publicly acknowledged by WHO in accordance with its policies and practices.</p>	<p>11. For reasons of transparency, contributions from academic institutions must be publicly acknowledged by WHO in accordance with its policies and practices.</p>	<p>-NO CHANGES-</p> <p>11. For reasons of transparency, contributions from academic institutions must be publicly acknowledged by WHO in accordance with its policies and practices.</p>

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<p>12. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [academic institution] towards [description of the outcome or activity]”.</p>	<p>12. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [academic institution] towards [description of the outcome or activity]”.</p>	<p>-NO CHANGES-</p> <p>12. Acknowledgements shall usually be worded along the following lines: “The World Health Organization gratefully acknowledges the financial contribution of [academic institution] towards [description of the outcome or activity]”.</p>
<p>13. Contributions received from academic institutions are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>	<p>13. Contributions received from academic institutions are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>	<p>-NO CHANGES-</p> <p>13. Contributions received from academic institutions are listed in the financial report and audited financial statements of WHO as well as the Programme budget web portal and the WHO register of non-State actors.</p>
<p>14. Academic institutions may not use the results of WHO’s work for commercial purposes and may not use the fact that they have made a contribution in their promotional materials. However, they may make reference to the contribution in their annual reports or similar documents. In addition they may mention the contribution in a transparency listing on their websites, in special non-promotional pages of their website and similar publications, provided that the content and context have been agreed with WHO.</p>	<p>14. Academic institutions may not use the results of WHO’s work for commercial purposes and may not use the fact that they have made a contribution in their promotional materials. However, they may make reference to the contribution in their annual reports or similar documents. In addition they may mention the contribution in a transparency listing on their websites, in special non-promotional pages of their website and similar publications, provided that the content and context have been agreed with WHO.</p>	<p>-NO CHANGES-</p> <p>14. Academic institutions may not use the results of WHO’s work for commercial purposes and may not use the fact that they have made a contribution in their promotional materials. However, they may make reference to the contribution in their annual reports or similar documents. In addition they may mention the contribution in a transparency listing on their websites, in special non-promotional pages of their website and similar publications, provided that the content and context have been agreed with WHO.</p>

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<p>EVIDENCE</p> <p>15. Academic institutions can provide up-to-date information and knowledge on technical issues, and share their experience and engage with WHO in the following: generation of evidence, knowledge management, scientific reviews, information gathering and research.</p>	<p>EVIDENCE</p> <p>15. Academic institutions may provide their up-to-date information and knowledge on technical issues, and share their experience with WHO, as appropriate, subject to the provisions of the overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.</p>	<p>EVIDENCE</p> <p>15. Academic institutions can [may] provide their up-to-date information and knowledge on technical issues, and share their experience with WHO in the following: generation of evidence, knowledge management, scientific reviews, information gathering and research, [as appropriate, subject to the provisions of the overarching framework, and this specific policy and operational procedures, and other applicable WHO rules, policies and procedures. Such contribution should be made publicly available, as appropriate, wherever possible. Scientific evidence generated should be made publicly available.]</p>
<p>16. Intellectual property arising from collaborations with academic institutions is regulated by the agreement with the academic institution. This should be addressed in consultation with the Office of the Legal Counsel.</p>	<p>16. Intellectual property arising from collaborations with academic institutions is regulated by the agreement with the academic institution. This should be addressed in consultation with the Office of the Legal Counsel.</p>	<p>-NO CHANGES-</p> <p>16. Intellectual property arising from collaborations with academic institutions is regulated by the agreement with the academic institution. This should be addressed in consultation with the Office of the Legal Counsel.</p>
<p>ADVOCACY</p> <p>17. WHO collaborates with academic institutions on advocacy for health and increasing awareness of health issues; for changing behaviours in the</p>	<p>ADVOCACY</p> <p>VERSION AS PROPOSED BY SEPTEMBER INFORMAL CONSULTATIONS</p> <p>17. WHO collaborates with academic institutions</p>	<p>ADVOCACY</p> <p>VERSION AS PROPOSED BY SEPTEMBER INFORMAL CONSULTATIONS</p> <p>17. WHO collaborates with academic institutions</p>

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<p>interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint action is required. WHO favours independent monitoring functions and therefore engages with academic institutions working in this field. Academic institutions are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach.</p>	<p>on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint action is required. WHO favours independent monitoring functions and therefore engages with academic institutions working in this field. Academic institutions are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach.</p>	<p>on advocacy for health and increasing awareness of health issues; for changing behaviours in the interest of public health; and for fostering collaboration and greater coherence between non-State actors where joint action is required. WHO favours independent monitoring functions and therefore engages with academic institutions working in this field. Academic institutions are encouraged to disseminate WHO's policies, guidelines, norms and standards and other tools through their networks so as to extend WHO's own reach.</p>
<p>TECHNICAL COLLABORATION [...] 20. Academic institutions or parts thereof can be designated as WHO collaborating centres in accordance with the Regulations mentioned above. In this context, before granting the status of WHO collaborating centre a due diligence and risk assessment in accordance with this framework is conducted. The collaboration with these collaborating centres is regulated by the aforementioned regulations and reflected in the register of non-State actors.</p>	<p>TECHNICAL COLLABORATION [...] 20. Academic institutions or parts thereof can be designated as WHO collaborating centres in accordance with the Regulations mentioned above. In this context, before granting the status of WHO collaborating centre a due diligence and risk assessment in accordance with this framework is conducted. The collaboration with these collaborating centres is regulated by the aforementioned regulations and reflected in the register of non-State actors.</p>	<p>TECHNICAL COLLABORATION [...] -NO CHANGES- 20. Academic institutions or parts thereof can be designated as WHO collaborating centres in accordance with the Regulations mentioned above. In this context, before granting the status of WHO collaborating centre a due diligence and risk assessment in accordance with this framework is conducted. The collaboration with these collaborating centres is regulated by the aforementioned regulations and reflected in the register of non-State actors.</p>

