Survey Questionnaire

Implementation of the Framework of engagement with non-State actors (FENSA)

Respondents: WHO/EURO Country Office – Kyrgyzstan

Introduction:

1. The 138th Executive requested the Secretariat to provide a balanced and objective report of the implications of the implementation of the Framework of engagement with non-State actors (FENSA) well in advance of the resumed session of the Open-ended intergovernmental meeting of 25-27 April 2016.

2. To this end, all WHO Regional Offices and Clusters in Headquarters and a selection of Country Offices are invited to provide their inputs through this questionnaire. In addition a more detailed matrix of analysis will be sent for comments to FENSA focal points in regions and clusters.

3. In order to assure that we can present a balanced and objective report to Member States, the External Auditor has kindly agreed to validate and comment this questionnaire, the more detailed analysis matrix and write the final report.

4. The adoption and implementation of FENSA will modify the way WHO manages its engagement with non-State actors (NGO’s, private sector entities, philanthropic foundations and academic institutions). The main changes concern the following points
   a. FENSA is covering all engagements within with all non-State actors, while the current policies covered engagement with private sector entities and NGOs in official relations only
   b. Transparency will be increased through the Register of non-State actors (including information on objectives, governance and funding of non-State actors and description of engagements)
   c. FENSA calls for a consistent implementation at all 3 levels of the Organization and all regions and hosted partnerships through an electronic workflow, due diligence by central unit for, a guide for staff, clear decision making
   d. FENSA will increase accountability towards Members States by strengthened oversight of the Executive Board
   e. The Director General will report annually on engagement with non-State actors

5. Some of the proposals made during the negotiation process have not been included in the text and are no longer under consideration. They should therefore also be excluded from the analysis of implications of FENSA implementation. Such issues include in particular:
   a. FENSA applies only to engagement with non-State actors as institutions and not to engagements with individual experts.
   b. There will not be a defined ceiling for contributions received from non-State actors
   c. Due diligence and risk assessment is a process conducted by the Secretariat with no direct involvement of Member States
   d. Free services provided by non-State actors are an in-kind contribution, but not covered by the not yet agreed provisions on secondments.

6. Several current policies are confirmed by the draft Framework and often made more explicit:
   a. WHO does not engage with the tobacco and arms industries
   b. Official relations (while currently all entities are called NGO’s, non-State actors in official relations will in the future be distinguished in NGOs, International Business Associations and Philanthropic foundations)
c. Several specific paragraphs on private sector engagement (such as clinical trials) are transposed from the current guidelines into the private sector policy.

d. The CPSC (Committee on Private Sector Cooperation) will be replaced by an engagement coordination group ECG

7. For information here are the elements which would likely be covered in the report on implications of implementation of FENSA:

a. Changes to the work of WHO governing bodies

b. Costs of implementation
   i. Direct financial costs of implementation
   ii. Direct human resource costs
   iii. Indirect human resource costs
   iv. Regular training costs
   v. Startup costs
      • GEM build up to provide the IT tool for the Register of non-State actors
      • Training costs
      • Additional burden of filling the register with first time entries

c. Potential efficiency savings through implementation of FENSA
   i. Information gathering
   ii. Clarity on actors, process and earlier decisions

d. Added value of FENSA
   i. Stronger protection from undue influences
   ii. Coherence in engagement across WHO and across different engagements
   iii. Clarity on engagement
   iv. Transparency
   v. Better information, documentation, intelligence and lessons learnt on non-State actors and engagements
   vi. Clear process of senior management decision making

e. Risks of FENSA
   i. Potentially cumbersome process
   ii. High number of engagement
   iii. Lack of flexibility
   iv. Potential bottle-neck in due diligence and risk assessment process

f. Changes to the engagement opportunities and risks
   i. Policy changes in engagement
   ii. Incentive changes for engagement
QUESTIONS:

8. Estimation of the volume of engagements. Questions in paragraphs 9 and 10 try to estimate the volume of engagements which should in the future be handled through the process defined by FENSA. The External Auditors will compile your input from country, regional and headquarter level into an overall estimation. Please note that this refers to formalized engagement as defined in the paragraphs 15-21 of the draft FENSA and not to informal interactions. Formal engagements include amongst others: a meeting with official invitations, agenda, list of participants, etc; any interaction involving a signature of an agreement or MoU to receive resources, work as implementing partner, allow the use of advocacy material, enter into technical collaboration, etc. Preparation for such engagement or informal contacts by phone, e-mail or informal discussion is not considered as engagements. For a meeting only the non-State actors who have actually participated should be counted, not all those who have been invited. A series of meetings in the same year on the same subject with the same or similar invitation lists should be counted as one engagement.

9. Please provide a rough estimate of the numbers of non-State actors you engaged with in 2015 by type of engagement in the following table for your region (excluding country level), cluster or country office respectively.

Country office: Kyrgyzstan (Dr. Jarno Habicht) - <habichtj@who.int>

<table>
<thead>
<tr>
<th></th>
<th>Participation</th>
<th>Resources</th>
<th>Evidence</th>
<th>Advocacy</th>
<th>Technical collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>NGOs</td>
<td>12</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Private sector entities</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Philanthropic foundations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic institutions</td>
<td>2</td>
<td>1</td>
<td></td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

10. Please provide a rough estimate of the numbers of engagements in 2015 by type of engagement in the following table. For engagements covering more than one type count them only once for the most relevant type.

<table>
<thead>
<tr>
<th></th>
<th>Participation</th>
<th>Resources</th>
<th>Evidence</th>
<th>Advocacy</th>
<th>Technical collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>NGOs</td>
<td>55</td>
<td>10</td>
<td>25</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>Private sector entities</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Philanthropic foundations</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Academic institutions</td>
<td>4</td>
<td>1</td>
<td></td>
<td>7</td>
<td></td>
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</tbody>
</table>
Comments on the methodology used and its difficulties of this estimation

- The numbers of engagements are best possible estimates as no monitoring mechanism is in place currently in CO and there are potential mistakes due to retrospective collection of the information. Further it is clear that the NSA policy needs clearly communicated to all staff (professional and administrative) who are meeting NSA (both permanently in CO and those visiting) to allow registration and monitoring.

- There is need to consider to allow to count same NSA under different functions (especially if there are larger CSOs, international organisations and academia with whom WHO can interact in various ways)

- There is need to have clear definitions, registration algorithms and processes, and distribution of roles and responsibilities for future.

11. Please estimate the number of non-State actors your cluster / regional office / country office engages with in emergency situations (as described in the Emergency Response Framework) and describe the type of these engagements

12. Please describe the main opportunities you see for the work of your region / cluster / country office through the adoption and implementation of FENSA

- WHO work with NSA on promotion and implementation of policies, strategies and programmes of WHO in the country. NGOs can be a supportive voice to support recommended by WHO policies and strategies among stakeholders

- Few examples from 2015:
  - Participation of NGO’s in preparations for the MR campaign, (FGP Ass.);
  - Participation of NGO’s at the w/s “Improving small-scale water supply and sanitation”;
  - Participation of Academic Institutions in evaluation of the national strategy on adaptation to Climate change;
  - Cooperation with NGO’s on Tobacco control activities under the national Den Sooluk health program implementation and Joint Annual Review (JAR);
  - Cooperation with NSA under the frame of Den Sooluk health program implementation, thematic meetings and JAR;
  - Cooperation with NGO “Alliance on Reproductive health of Kyrgyzstan”, “Kyrgyz Alliance on Family Planning”, Kyrgyz State Medical Academy, Kyrgyz Medical institute of Post-graduate and Continuous Training on Sexual and Reproductive health and Family Planning, revision of curricula for undergraduate and postgraduate students of new national adaptation of the WHO Pocket book on management of childhood illnesses;
• Cooperation with the Public Health assessment and Kyrgyz Medical Academy on reforms of PHS services and preparations for the EPHO self-assessment.

• The engagement with the private sector is currently limited but will potentially increase as the Government of Kyrgyzstan is strategically increasing in coming years the PPP arrangements in all the sectors including health. It is the opportunity to guide the partners and investors to follow the health plan and increase efficiency of the health system.

13. Please describe the main risks you see for the work of your region / cluster/ country office through the adoption and implementation of FENSA. This question does not refer to the risks of individual engagements as defined in FENSA but rather to the overall risks and challenges of implementing FENSA as a new policy.

1. The NSA at the country level are not sustainable financially (especially the CSOs); except those from private sector. Some limited resources are available for research and analytical work. There is need to manage conflict of interest and expectations of NSAs as well public sector.

2. The key activities of NSA work guided by the financing institution.

3. Changed political context after joining the Eurasian Economic Union in 2015 that would have an impact to the working environment for civil society organizations (CSOs) in coming years.

4. The question is how to manage the perceptions and expectations of the NSAs related to policy, including WHO image as “control institution” and increasing the bureaucracy.

5. While the policy enables WHO to engage with wider range of partners at the same time if not managed well WHO could lose its role as convening agency for health if other partner organizations (e.g. within UN system) don’t have such policy in place.

6. The balance between public and internal information on engagement needs careful consideration as some partners as CSOs might refrain from partnerships.

7. The internal confidential strategic information management system and policy needs to be developed across three levels of the organization.

8. The whole effort needs to be proportional.

14. Please describe the specific resources (staff and activity costs) currently working on engagement with non-State actors within your region / cluster/ country office.

None of the staff is currently working on the topic and the PB for coming years does not include budget for such activities under Category 6.

While on technical level this can be integrated to future Post Descriptions of all staff (e.g. the TB Officer to engage in respective are with academia or NGOs) then there needs to be dedicated time of professional staff to support the HWO on strategic engagement with NSA in particular country (e.g. how the engagement is envisaged in areas or communicable diseases, non-communicable diseases, health systems etc) and followed up, plus administrative staff time to ensure all the documentation.
15. Please describe the specific incremental resources (staff and activity costs) that you would expect to be necessary to implement FENS A. If applicable please give resource needs for the focal points and central processes in regions / clusters separate from estimations for resource needs of technical units and explain your assumptions and methodologies:

<table>
<thead>
<tr>
<th>One off resources/costs:</th>
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<tbody>
<tr>
<td>- Whole system development including forms, platforms, internal practices, communication means etc</td>
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<tr>
<td>- Training of all WHO staff on FENSA</td>
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<table>
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<tr>
<th>Recurring or On-going resources/costs:</th>
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<tbody>
<tr>
<td>- Cost of technical staff (20-50% FTE international staff depending on NSA engagement strategy in particular country)</td>
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<tr>
<td>- Cost of admin staff (20-50% FTE staff)</td>
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<tr>
<td>- Continuous briefing of all employees (one a year)</td>
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</table>

Comment: the information is very preliminary and needs to be tested/piloted and above only the CO level resources are estimated.

**Additional Remarks**

- In paragraph 8, please note that we always count non-State actors as entities. If 5 representatives of the same NGO participate in a meeting it should be counted as one engagement with one non-State actor.
- Paragraph 9 refers to the number of non-State actors. Therefore if OHE engages in the PIP process with 2 meetings with 200 invited and 40 attending both meetings and 20 attending only one of the meetings, this will mean 60 non-State actors under participation. In paragraph 10 this will be counted as one engagement.
- If EURO co-sponsored some panels at the European Health Forum Gastein it should be counted as one engagement with one non-State actor, since the forum was co-organized by the European Health Forum Gastein (a non-State actor) with the Austrian ministry of Health and the European Commission (state actors). In this case the due diligence will also assess 15 co-sponsors of the event and assess the panellist on panels where WHO is involved, but we will not ask them to provide information to the register of non-State actors.
- When WHO participates at the WEF in Davos it is considered one engagement with one non-State actor.
- Paragraph 10 refers to the number of engagements. 7 different grants from the BMGF are to be counted as 7 engagements in paragraph 10 but only 1 philanthropic foundation in paragraph 9.
- When WHO is organizing a conference, it is one engagement in paragraph 10 with x number of non-State actors in paragraph 9 (the number of non-State actors who have participated).
- In paragraph 11 the same table as in paragraph 9 and 10 can be used if this facilitates your answer.
- As a working scenario we will use the flow-chart discussed earlier in the FENSA process (see attached) this does not mean that it is the final workflow but should allow all of us to use the same assumption. Please note that this will only enter into force when FENSA is approved and GEM rolled out.

- For paragraph 15 we cannot provide you with a fixed common methodology. The Auditors wish to see your own assumptions and proposals for a methodology in order to capture the uncertainty and ranges of estimates of resource requirements.