TERMS OF REFERENCE FOR THE UN INTERAGENCY TASK FORCE ON THE PREVENTION AND CONTROL OF NONCOMMUNICABLE DISEASES
The United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases (Task Force) and all its members affirm the right to health as a human right, as enshrined in the Universal Declaration of Human Rights and the Constitution of the World Health Organization (WHO).

Actions of the Task Force and its members are to support, in accordance with their respective mandates, the realization of the commitments made in the Political Declaration of the High-level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases and further elaborated in the WHO Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013-2020.

**Introduction**

1. In paragraph 13 of the Political Declaration, Heads of State and Government and representatives of States and Governments recognized the leading role of WHO as the primary specialized agency for health, including its roles and functions with regard to health policy in accordance with its mandate, and reaffirmed its leadership and coordination role in promoting and monitoring global action against non-communicable diseases in relation to the work of other relevant United Nations agencies, development banks and other regional and international organizations in addressing non-communicable diseases in a coordinated manner.

2. In paragraph 51 of the Political Declaration, Heads of State and Government and representatives of States and Governments called upon WHO, as the lead specialized agency for health, and all other relevant United Nations system agencies, funds and programmes, the international financial institutions, development banks and other key international organizations to work together in a coordinated manner to support national efforts to prevent and control non-communicable diseases and mitigate their impacts.

3. In paragraph 1.1 of resolution 66.10, the World Health Assembly endorsed the WHO Global Action Plan 2013-2020. The Plan aims to operationalize the commitments by Heads of State and Government included in the Political Declaration. The Global Action Plan comprises a set of actions which, when performed collectively by (a) Member States, (b) international partners and the private sector, and (c) the WHO secretariat, will support Governments in their national efforts to contribute to the attainment of nine voluntary global targets for non-communicable diseases by 2025. The building and coordinating of results-oriented engagement or collaborative efforts, as appropriate, including with non-health and non-State actors, a at the national, regional and global levels, for the prevention and control of Non-communicable diseases are essential components of the WHO Global Action Plan 2013-2020.

4. In paragraph 3.5 of resolution 66.10, the World Health Assembly requested the WHO Director General to work together with other United Nations funds, programmes and agencies to conclude the work, before the end of October 2013, on a division of tasks and responsibilities for United Nations funds, programmes and agencies and other international organizations.

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*a* Non-State actors include academia and relevant non-governmental organizations, as well as selected private sector entities, as appropriate, excluding the tobacco industry, and including those that are demonstrably committed to promoting public health and are willing to participate in public reporting and accountability frameworks.
5. In paragraph 1 of Economic and Social Council resolution 2013/12 on the United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases, the Council requested the Secretary-General to establish the Task Force by expanding the mandate of the existing Ad Hoc Inter-Agency Task Force on Tobacco Control. The Task Force will be convened and led by WHO, report to the Council through the Secretary-General and incorporate the work of the Ad Hoc Inter-Agency Task Force on Tobacco Control, including the work to support the accelerated implementation by parties to the WHO Framework Convention on Tobacco Control.

6. In paragraph 2 of Council resolution 2013/12, the Council decided that the Task Force would coordinate the activities of the relevant United Nations funds, programmes and specialized agencies and other intergovernmental organizations to support the realization of the commitments made by Heads of State and Government in the Political Declaration, in particular through the implementation of the WHO Global Action Plan 2013-2020.

7. In paragraph 3 of the same resolution, the Council urged all members of the existing Ad Hoc Inter-Agency Task Force on Tobacco Control and other United Nations funds, programmes and specialized agencies, and intergovernmental organizations, to contribute, within their respective mandates, as appropriate, to the activities of the Task Force.

8. In paragraph 4 of that resolution, the Council requested the Secretary-General, in close collaboration with the WHO Director General, and in full consultation with Member States through WHO, to develop the terms of reference for the Task Force, incorporating, but not limited to, the work of the Ad Hoc Inter-Agency Task Force on Tobacco Control and the current work of the WHO secretariat to develop a division of tasks and responsibilities, as exemplified by appendix 4 to the WHO Global Action Plan 2013-2020, and also requested the Secretary-General to include the terms of reference in his report on the implementation of the resolution for the consideration of the Council at its substantive session of 2014.

9. This appendix outlines the terms of reference for the Task Force, including a division of tasks and responsibilities for members of the Task Force.
Terms of reference

10. The terms of reference outline the purpose of the Task Force, as well as its objectives, participants, responsibilities of participants, periodicity of general meetings, working groups, secretariat, administrative arrangements and accountability, and include a collaborative division of tasks and responsibilities for members of the Task Force.

Purpose of the Task Force

11. The purpose of the Task Force described in paragraph 2 of Economic and Social Council resolution 2013/12 of 22 July 2013 is to:

coordinate the activities of the relevant United Nations funds, programmes and specialized agencies and other intergovernmental organizations to support the realization of the commitments made by Heads of State and Government in the Political Declaration of the High level Meeting of the General Assembly on the Prevention and Control of Non-communicable Diseases, in particular through the implementation of the World Health Organization Global Action Plan for the Prevention and Control of Non-communicable Diseases 2013-2020.

Objectives of the Task Force

12. Pursuant to Council resolution 2013/12, the objectives of the Task Force are as follows, taking into account the overall principles and approaches outlined in the Political Declaration and the WHO Global Action Plan 2013-2020, and in support of a global coordination mechanism for the prevention and control of non-communicable diseases:

• To enhance and coordinate systematic support to Member States, upon request, at the national level, in efforts to support responses to prevent and control non-communicable diseases and mitigate their impacts.

• To facilitate systematic and timely information exchange among entities of the United Nations system and intergovernmental organizations about existing and planned strategies, programmes and activities to prevent and control non-communicable diseases and mitigate their impacts, at the global, regional and national levels, including through the establishment of a virtual practice community for members of the Task Force, with updates regularly circulated to subscribers, and the preparation and regular updating of an inventory of United Nations system activities on the prevention and control of non-communicable diseases.

• To enhance information on available resources to support national efforts to prevent and control non-communicable diseases and mitigate their impacts, and to undertake resource mobilization for the implementation of agreed activities, including for joint programmes in accordance with guidelines of the United Nations Development Group.

• To strengthen advocacy in order to raise the priority accorded to the prevention and control of non-communicable diseases on the international development agenda, including the post-2015 development agenda, and sustain the interest of Heads of State and Government in realizing their commitments through statements, reports and participation in panels by high-level United Nations officials.

• To incorporate the work of the Ad Hoc Inter-Agency Task Force on Tobacco Control, including by utilizing the matrix of work of the members of the Task Force on the implementation of the WHO Framework Convention, and to ensure that tobacco control continues to be duly addressed and prioritized in the new task force mandate.

• To strengthen international cooperation in support of national, regional and global plans for the prevention and control of non-communicable diseases, inter alia through the exchange of best practices in the areas of health promotion, legislation, regulation and health systems strengthening, training of health personnel, development of appropriate health-care infrastructure and diagnostics, and by promoting the development and dissemination of appropriate, affordable and sustainable transfer of technology on mutually agreed terms and the production of affordable, safe, effective and quality medicines and vaccines.
Members of the Task Force

13. Membership of the Task Force will be open to United Nations system agencies, funds and programmes, the international financial institutions, development banks and other key intergovernmental organizations and treaty secretariats. The potential members are included in a list that appears at the end of this document.

Responsibilities of the members of the Task Force

14. Within their respective mandates, as appropriate, the responsibilities of the members of the Task Force are to support, in a harmonized manner, the implementation and monitoring of relevant policy options and proposed actions for international partners included in the WHO Global Action Plan 2013-2020, as well as the objectives of the Task Force.

Periodicity of meetings of the Task Force

15. It is envisaged that WHO would convene the Task Force twice annually, which would include a one-day annual session devoted to tobacco control and the implementation of the WHO Framework Convention on Tobacco Control. While the meetings will be led by WHO, it is proposed that each meeting be co-chaired by WHO together with another member of the Task Force through rotation. Efforts should be made to have different members host the meetings, including in low- and middle-income countries. Additional regional and ad hoc meetings could also be convened by WHO, as deemed necessary. Meetings will be held by default at the seats of the convening or partner institutions.

16. In accordance with the objective of the Task Force, a biennial workplan will be developed, which will be monitored and reviewed during the meetings of the Task Force.

Secretariat for the Task Force

17. The Task Force will be convened and led by WHO, which will provide the secretariat for the Task Force. The secretariat for the Task Force will be an integral part of the WHO Non-communicable Diseases and Mental Health Cluster.

18. The main responsibilities of the secretariat for the Task Force will be to:

- Convene and lead meetings of the Task Force.
- Encourage and facilitate strategic collaborative arrangements and alliances among the members of the Task Force to enhance support to national-level efforts to realize the commitments made by Heads of State and Government in the Political Declaration, in particular through the implementation of the WHO Global Action Plan 2013-2020.
- Create and manage a virtual practice community for members of the Task Force.
- Create and update an online inventory of commitments and activities of the members of the Task Force on the prevention and control of non-communicable diseases.
- Act as a point of enquiries and information regarding activities being undertaken by members of the Task Force.
- Prepare summary reports of the meetings of the Task Force and publish these at www.who.int/nmh/en, as well as progress reports in achieving the objectives of the Task Force, which will serve as an input into a global coordination mechanism for the prevention and control of non-communicable diseases.
- Coordinate the preparation of the report to the Economic and Social Council through the Secretary-General and incorporate the work of the former Ad Hoc Inter-Agency Task Force on Tobacco Control, including the work to support the accelerated implementation by parties to the WHO Framework Convention on Tobacco Control.
- Without prejudice to the accountability obligations of the Task Force, inform the Economic and Social Council and the World Health Assembly on a regular basis on the progress made by the Task Force in the implementation of the WHO Global Action Plan 2013-2020, including an evaluation assessing its contribution as part of the final report foreseen for 2021.

The list of potential members that appears at the end of this document was prepared by the secretariat of the Task Force in December 2013 at the request of the formal meeting of Member States held in November 2013 and was submitted to the 134th session of the WHO Executive Board and the sixty-seventh World Health Assembly as part of the report of the formal meeting of Member States.
Administrative arrangements for the secretariat for the Task Force

19. WHO programme budgets will include budgetary provisions for the activities of the secretariat for the Task Force.

20. Members of the Task Force should, in principle, be responsible for meeting their own expenses in relation to activities under the Task Force (including, but not limited to, travel and subsistence for attending meetings and inter-agency collaborations).

Accountability

21. In accordance with paragraph 1 of Economic and Social Council resolution 2013/12, the Task Force will report to the Council through the Secretary-General and incorporate the work of the Ad Hoc Inter-Agency Task Force on Tobacco Control, including the work to support the accelerated implementation by parties to the WHO Framework Convention on Tobacco Control.

Conflicts of interest

22. Public health policies for the prevention and control of non-communicable diseases must be protected from undue influence by any form of vested interest.

23. In carrying out responsibilities under the WHO Global Action Plan 2013-2020, members of the Task Force are guided by their relevant conflict of interest policies.

24. Should a conflict of interest arise from a situation involving members of the Task Force or external parties, the secretariat for the Task Force will be required to act as a repository with a view to compiling incidents of conflicts of interest and provide a platform to discuss such issues.

Links with a global coordination mechanism for the prevention and control of non-communicable diseases

25. In paragraph 3.2 of resolution 66.10, the World Health Assembly requested the WHO Director General to develop draft terms of reference for a global coordination mechanism for the prevention and control of non-communicable diseases.

26. The Task Force, in accordance with its mandate provided by the Economic and Social Council, and within the respective mandates of its members, will contribute, as appropriate, to the work of a global coordination mechanism and participate accordingly.

Division of tasks and responsibilities

27. The division of tasks and responsibilities outlines how the members of the Task Force will work jointly and collectively to coordinate the activities of the relevant United Nations organizations and other intergovernmental organizations to support the realization of the commitments made by Heads of State and Government in the Political Declaration, in particular through the implementation of the WHO Global Action Plan 2013-2020.

28. These tasks and responsibilities build on, and include, existing work being undertaken on the prevention and control of non-communicable diseases by members of the Task Force. The work areas identified by members of the Task Force are dynamic in nature and may reflect changes that may be necessitated by emerging health risks, shifts in disease burdens and new requirements identified by Member States. The Task Force will include in its reporting to the Economic and Social Council and the World Health Assembly a biennial update of the division of tasks and responsibilities, and amendments, as appropriate.

29. The following division of tasks and responsibilities is organized around the six objectives of the WHO Global Action Plan 2013-2020, and currently includes 27 work areas within the six objectives. Each objective has convening and partner institutions, acting in accordance with their respective mandates, as appropriate.

30. The responsibilities of convening institutions are as follows:

- To determine a scope of work, develop a workplan and report progress against it, as it pertains to the objectives of the WHO Global Action Plan 2013-2020.

- To facilitate the identification of country-level needs and lead on setting the agenda across the United Nations system.
• To ensure that work is in line with the WHO Global Action Plan 2013-2020 and to encourage the harmonization of activities across the United Nations system.

• To safeguard public health interests from undue influence by any form of real, perceived or potential conflicts of interest.

• To lead advocacy and communication on the prevention and control of non-communicable diseases across the United Nations system, in line with the WHO Global Action Plan 2013-2020.

• To provide timely inputs to the secretariat for the Task Force to enable it to draft reports to the Economic and Social Council through the Secretary-General, including the work to support the accelerated implementation by parties to the WHO Framework Convention on Tobacco Control and to report to the World Health Assembly on the implementation of the WHO Global Action Plan 2013-2020.

• To report, as appropriate, on progress made in integrating relevant activities into the agendas of their respective governing bodies.

31. The responsibilities of partner institutions are as follows:

• To support the determination of a scope of work and development of a workplan and report progress against it, as it pertains to the objectives of the WHO Global Action Plan 2013-2020.

• To collaborate on activities that are in line with the WHO Global Action Plan 2013-2020 and to support the harmonization of activities across the United Nations system.

• To work with convening institutions to safeguard public health from undue influence by any form of real, perceived or potential conflicts of interest.

• To work with convening institutions to support advocacy and communication on non-communicable diseases across the United Nations system, in line with the WHO Global Action Plan 2013-2020.

32. A division of tasks and responsibilities is outlined in the table below. This table was developed by organizations in the United Nations system, taking into account discussions between December 2011 and July 2013, and builds on appendix 4 to the WHO Global Action Plan 2013-2020. The table was finalized during the first meeting of the Task Force, held in Geneva on 2 and 3 October 2013.

The full list of meetings is available from www.who.int/nmh/events/ncd_task_force/en/.

Examples of collaborative divisions of tasks and responsibilities; concerns a provisional list only. A division of labour is being developed by the United Nations funds, programmes and agencies.
## Division of tasks and responsibilities for the United Nations Inter-Agency Task Force on the Prevention and Control of Non-communicable Diseases (as at 3 October 2013)

<table>
<thead>
<tr>
<th>Objective&lt;sup&gt;a&lt;/sup&gt;</th>
<th>Convening institution</th>
<th>Suggested areas of work</th>
<th>Linkages with actions for international partners&lt;sup&gt;b&lt;/sup&gt;</th>
<th>Partner institutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. To raise the priority accorded to the prevention and control of NCDs in global, regional and national agendas and internationally agreed development goals, through strengthened international cooperation and advocacy</td>
<td>WHO</td>
<td>1.1 Advocacy for attention to/integration of NCDs in the international development agenda/goals</td>
<td>23 (a), (b), (c), (f)</td>
<td>IAEA UNAIDS UNDP UN-Habitat UNICEF UNSCN</td>
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<td></td>
<td></td>
<td>1.2 Multi-stakeholder partnership management and resource mobilization</td>
<td>23 (d), (e)</td>
<td>IAEA UNAIDS UNDP UN-Habitat WFP</td>
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<td></td>
<td></td>
<td>1.3 Mainstreaming of the prevention and control of NCDs in international development cooperation initiatives</td>
<td>23 (c)</td>
<td>FAO IAEA UNAIDS UNDP UNEP UNICEF UNSCN World Bank</td>
</tr>
<tr>
<td>2. To strengthen national capacity, leadership, governance, multisectoral action and partnerships to accelerate country response for the prevention and control of NCDs</td>
<td>UNDP WHO UNAIDS (for 2.3 only)</td>
<td>2.1 Multisectoral action planning and coordination</td>
<td>32 (a), (g)</td>
<td>UNAIDS</td>
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<td></td>
<td></td>
<td>2.2 Mainstreaming of the prevention and control of NCDs in national development plans/poverty reduction strategies</td>
<td>32 (d), (g)</td>
<td>FAO IAEA IARC UNAIDS UN-Habitat UNFPA UNHCR UNICEF UNSCN WFP World Bank</td>
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<tr>
<td></td>
<td></td>
<td>2.3 Integrate NCDs and HIV responses where appropriate</td>
<td>32 (g) and 50 (b)</td>
<td>ILO UNFPA UNHCR World Bank</td>
</tr>
<tr>
<td>Objective&lt;sup&gt;a&lt;/sup&gt;</td>
<td>Convening institution</td>
<td>Suggested areas of work</td>
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<tr>
<td>2.4 Innovative financing for national NCD responses</td>
<td></td>
<td>50 (a) and 32 (g)</td>
<td>World Bank</td>
<td></td>
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<tr>
<td>2.5 Supporting enabling legal and regulatory environments that promote favourable health outcomes for NCDs (including universal access to essential medicines and basic technologies)</td>
<td></td>
<td>32 (f) and (g)</td>
<td>IDLO UNFPA WIPO WTO&lt;sup&gt;c&lt;/sup&gt; World Bank</td>
<td></td>
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<tr>
<td>2.6 Addressing gender and human rights dimensions of NCD prevention and control in national NCD responses</td>
<td></td>
<td>32 (e) and (g)</td>
<td>IDLO UNFPA</td>
<td></td>
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<tr>
<td>3. To reduce modifiable risk factors for NCDs and underlying social determinants through creation of health-promoting environments</td>
<td>Secretariat of the WHO Framework Convention on Tobacco Control&lt;sup&gt;d&lt;/sup&gt; FAO ILO&lt;sup&gt;e&lt;/sup&gt; UNFPA&lt;sup&gt;f&lt;/sup&gt; UNICEF WHO</td>
<td>3.1 Implementation of the WHO Framework Convention, taking into account the matrix summarizing the areas of collaboration included in para. 61 of document E/2012/70</td>
<td>45</td>
<td>Secretariat of the WHO Framework Convention UNCTAD UNDP World Bank</td>
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<tr>
<td>3.2 National capacity development to implement the Global Strategy to Reduce the Harmful Use of Alcohol</td>
<td></td>
<td>45</td>
<td>UNDP UNICEF World Bank</td>
<td></td>
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<tr>
<td>3.3 Implementation of the WHO Global Strategy on Diet, Physical Activity and Health</td>
<td></td>
<td>45</td>
<td>IAEA UNDP UNEP World Bank</td>
<td></td>
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<tr>
<td>3.4 National capacity development to reduce the risk of NCDs among children/adolescents</td>
<td></td>
<td>45</td>
<td>FAO IAEA UNFPA UNICEF&lt;sup&gt;f&lt;/sup&gt; WFP</td>
<td></td>
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<tr>
<td>Objective&lt;sup&gt;a&lt;/sup&gt;</td>
<td>Convening institution</td>
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<tr>
<td>3.5 National capacity development to reduce the risk of NCDs among women and girls</td>
<td></td>
<td>32 (a), (e), (f), (g)</td>
<td>IAEA, UNDP, UNICEF, UNFPA, UNHCR, WFP</td>
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<tr>
<td>3.6 NCD prevention and care integrated into maternal health</td>
<td></td>
<td>32 (a), (e), (f), (g)</td>
<td>IAEA, UNAIDS, UNFPA, UNICEF, UNHCR, WFP</td>
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<tr>
<td>3.7 Health promotion in environment and energy policies</td>
<td></td>
<td>32 (a), (e), (g)</td>
<td>UNDP, UNEP, World Bank</td>
<td></td>
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<tr>
<td>3.8 Health promotion in the education sector</td>
<td></td>
<td>32 (a), (e), (g)</td>
<td>ILO, UNEP, UNICEF, World Bank</td>
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<tr>
<td>3.9 Health promotion in the labour sector, including occupational safety and health</td>
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<td>32 (a), (e), (g)</td>
<td>ILO, UNEP</td>
<td></td>
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<tr>
<td>3.10 Health/nutrition promotion in the agricultural sector and in food systems</td>
<td></td>
<td>32 (a), (e)</td>
<td>ILO, UNEP, UNSCN</td>
<td></td>
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<tr>
<td>4. To strengthen and orient health systems to address the prevention and control of NCDs and the underlying social determinants through people-centred primary health care and universal health coverage</td>
<td>WHO IAEA (for 4.4 only)</td>
<td>50 (b), (d)</td>
<td>ITU, UNAIDS, UNDP, UNFPA, UNHCR, UNICEF, World Bank</td>
<td></td>
</tr>
<tr>
<td>4.1 Health system strengthening to address NCDs</td>
<td></td>
<td>50 (b), (d)</td>
<td>ITU, UNAIDS, UNDP, UNFPA, UNHCR, UNICEF, World Bank</td>
<td></td>
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<tr>
<td>Objective&lt;sup&gt;a&lt;/sup&gt;</td>
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<tr>
<td>4.2 Resource mobilization for financing of universal health coverage that incorporates NCD prevention and care</td>
<td>UNAIDS UNDP UNFPA UNICEF World Bank</td>
<td>50 (a)</td>
<td></td>
<td></td>
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<tr>
<td>4.3 Promote the development of electronic communications technologies and the use of mobile devices</td>
<td>IAEA UNICEF</td>
<td>50 (c)</td>
<td></td>
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<tr>
<td>4.4 Support increased access to radiation medicine</td>
<td>IAEA</td>
<td>50 (c)</td>
<td></td>
<td></td>
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<tr>
<td>5. To promote and support national capacity for high-quality research and development for the prevention and control of NCDs</td>
<td>WHO</td>
<td>5.1 Promote an international research agenda that ensures the next generation of medicines and technologies for NCDs</td>
<td>IAEA IARC UNDP</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>5.2 Support national efforts to increase access to existing essential medicines and basic technologies to treat NCDs</td>
<td>IAEA ITU UNAIDS UNCTAD UNDP UNHCR UNFPA WIPO WTO&lt;sup&gt;c&lt;/sup&gt;</td>
<td></td>
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<tr>
<td>6. To monitor the trends and determinants of NCDs and evaluate progress in their prevention and control</td>
<td>WHO</td>
<td>6.1 National NCD monitoring and surveillance systems</td>
<td>IARC UN-Habitat UNICEF World Bank</td>
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<td></td>
<td></td>
<td>6.2 Regular reporting against global voluntary targets</td>
<td>UN-Habitat</td>
<td></td>
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</tbody>
</table>
**Note:**

The United Nations Office on Sport for Development and Peace will assess opportunities to contribute as a convening or partner institution in a number of areas in the table, for example through the establishment of a “Sport and health” thematic working group in the context of the Sport for Development and Peace International Working Group.

**Abbreviations:**

The United Nations Office on Sport for Development and Peace will assess opportunities to contribute as a convening or partner institution in a number of areas in the table, for example through the establishment of a “Sport and health” thematic working group in the context of the Sport for Development and Peace International Working Group.

<table>
<thead>
<tr>
<th>Description</th>
<th>Reference</th>
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</thead>
<tbody>
<tr>
<td>The six objectives in this table are the six objectives included in the WHO Global Action Plan 2013-2020. These objectives are linked to the nine voluntary global targets, as referenced in appendix 3 to the Global Action Plan.</td>
<td>a</td>
</tr>
<tr>
<td>Included in the WHO Global Action Plan 2013-2020.</td>
<td>b</td>
</tr>
<tr>
<td>In carrying out this task, WTO will provide technical and factual information regarding relevant WTO agreements in order to support, upon request, relevant ministries and government departments to address the interface between trade policies and health issues in the area of non-communicable diseases.</td>
<td>c</td>
</tr>
<tr>
<td>As pertains to area of work 3.1.</td>
<td>d</td>
</tr>
<tr>
<td>As pertains to area of work 3.9.</td>
<td>e</td>
</tr>
<tr>
<td>As pertains to areas of work 3.5 and 3.6.</td>
<td>f</td>
</tr>
<tr>
<td>Will facilitate this area of work.</td>
<td>g</td>
</tr>
</tbody>
</table>
Potential members of the United Nations Inter Agency Task Force on the Prevention and Control of Non-communicable Diseases

Relevant programmes and funds reporting directly to the General Assembly:

• International Trade Centre
• Office of the United Nations High Commissioner for Refugees
• United Nations Children’s Fund
• United Nations Conference on Trade and Development
• United Nations Development Programme
• United Nations Capital Development Fund
• United Nations Volunteers programme
• United Nations Office on Drugs and Crime
• United Nations Environment Programme
• United Nations Human Settlements Programme
• United Nations Population Fund
• United Nations Relief and Works Agency for Palestine Refugees in the Near East
• World Food Programme

Regional commissions reporting directly to the Economic and Social Council:

• Economic Commission for Africa
• Economic Commission for Europe
• Economic Commission for Latin America and the Caribbean
• Economic and Social Commission for Asia and the Pacific
• Economic and Social Commission for Western Asia

Other related relevant bodies reporting directly to the Economic and Social Council:

• International Narcotics Control Board
• United Nations System Standing Committee on Nutrition

Relevant specialized agencies, related organizations, funds and other United Nations entities:

• Food and Agriculture Organization of the United Nations
• International Civil Aviation Organization
• International Fund for Agricultural Development
• International Lab our Organization
• International Maritime Organization
• International Monetary Fund
• International Telecommunication Union
• United Nations Educational, Scientific and Cultural Organization
• United Nations Industrial Development Organization
• Standing Committee on Nutrition (a subsidiary body of the United Nations System Chief Executives Board for Coordination)

• Universal Postal Union

• World Bank Group

• World Health Organization, including the International Agency for Research on Cancer

• World Intellectual Property Organization

• World Meteorological Organization

• World Tourism Organization

Relevant related organizations:

• International Atomic Energy Agency

• World Trade Organization

Relevant secretariats of conventions:

• Convention on the Rights of Persons with Disabilities

• WHO Framework Convention on Tobacco Control

United Nations trust funds:

• United Nations Fund for International Partnerships

Relevant intergovernmental organizations having received a standing invitation to participate as observers in the sessions and the work of the General Assembly:

• International Criminal Police Organization

• International Development Law Organization

• International Organization for Migration

• Organization of Islamic Cooperation

• Common Fund for Commodities

• World Customs Organization

• Global Fund to Fight AIDS, Tuberculosis and Malaria

Other relevant entities having received a standing invitation to participate as observers in the sessions and the work of the General Assembly:

• International Committee of the Red Cross

• International Federation of Red Cross and Red Crescent Societies

• International Olympic Committee

• Inter-Parliamentary Union