Web consultation with non-State actors on their involvement in WHO governance

26 August-15 September 2019

REPORT
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This publication contains the results of a web survey conducted with non-State actors on their participation in WHO governance. The opinions and views expressed in this report reflect those of the respondents to the survey and they do not necessarily represent the decisions, policy or views of the World Health Organization. The responsibility for the interpretation and use of the results lies with the reader.
Background and objectives

As part of the World Health Organization (WHO) governance reform processes, including the Transformation agenda, WHO Member States are seeking ways to improve the involvement of non-State actors in the work and governance of WHO. Following discussion of recommendations contained in the document EB145/4 WHO governance reform processes: Involvement of non-State actors at its 145th meeting in May 2019, the WHO Executive Board requested that a web consultation with non-State actors should be organized to hear their views and proposals regarding their participation in WHO governing bodies and potential organization of an informal meeting.

The purpose of this report is to present the results of the above-mentioned web consultation. Non-State actors were asked a set of questions about their participation in WHO governing bodies and their views on how to further improve their participation in these meetings. Proposals were also invited on how to best form non-State actor constituencies for making statements at WHO governing bodies, as well as on organizing a separate informal meeting for stimulating non-State actor involvement in WHO governance. The conclusions from this consultation will be presented to the WHO Executive Board members for their consideration of future options for non-State actor engagement. The issue can also be informally discussed at regional level, with a view to elaborating the proposal for Member States’ consideration.

Methodology

Information was collected from non-State actors on their participation in WHO governance through a web consultation using a survey questionnaire accessible on the WHO website from 26 August until 15 September 2019. Non-State actors in official relations and other non-State actors engaging with WHO were invited to complete the survey. Non-State actors in official relations were invited by email to complete the survey. They were also encouraged to share the link to the consultation with the non-State actors in their networks. Invitations to complete the survey were also sent by email to the members or close non-State actor collaborators of WHO hosted partnerships. Only one set of responses was accepted per non-State actor.

The survey included number of questions in 6 different sections:

1. Information on the respondent
2. Participation in the World Health Assembly and WHO Executive Board meetings
3. Involvement in the World Health Assembly and/or WHO Executive Board meetings
4. Participation and involvement in WHO Regional Committees
5. Country level consultation ahead of WHO governing body meetings
6. Organization of separate informal meeting to stimulate non-State actor involvement in WHO governance.

The survey questionnaire can be found in Annex 1.

At the close of the web consultation, 204 responses had been submitted. After all the responses were verified, it was revealed that 4 entities submitted their responses twice, and one entity submitted the responses anonymously. Therefore, 5 sets of responses submitted were not admitted for the final results,
and the remaining 199 sets of responses were assessed. The statistical responses, without explicit proposals and recommendations, are published in Annex 2 anonymously for all the respondents.

The survey results were assessed for all the respondents in an aggregated manner, as well as separately in an aggregated manner for the two different groups:
1. Non-State actors in official relations with WHO; and
2. Non-State actors not in official relations.

The proposals of those non-State actors in official relations who agreed that their proposals can be published, are published in the Annex 3 of this document.

Information on the respondents

Respondents were asked questions related to the size and activities of the non-State actor they were representing. Out of 199 responding non-State actors, over half (i.e. 55%) were non-State actors in official relations. Among all the respondents, a large majority were non-governmental organizations (85%), 5% were academic institutions, and 5% were private sector entities, including international business associations, which amounted to 2% of all respondents. Philanthropic foundations totaled 1% of all respondents.

Among non-State actors in official relations, there were 104 nongovernmental organizations (95%), 4 international business associations (4%), and 1 philanthropic foundation (1%). Among non-State actors not in official relations, there was more variety in the type of entities: 73 nongovernmental organizations (81%), 10 academic institutions (11%), 6 private sector entities (7%), and 1 philanthropic foundation (1%).

Altogether, 139 of the non-State actors were membership entities, with the members being either entities or individuals, or both. Out of non-State actors in official relations, 86 (79%) were membership entities. The size of their membership varied from small (1-99 members) to very large (over 100,000 members); the largest proportion (37%) of non-State actors reported members between 100 and 2999, with an equal spread between small to very large. Non-State actors in official relations reported proportionally somewhat larger memberships.
The size of the entities according to the number of their staff varied widely from very small (0-3 staff) to very large (over 100 staff). Both non-State actors in official relations and those not in official relations had a similar distribution of the size of staff.

The survey participants were asked to indicate how important certain areas of the work were for their entity. The most important areas of work for respondents appear to be awareness raising and communications; policy advice; and institutional partnerships and multifaceted cooperation. Other areas considered almost as important included advocacy; implementation of projects and technical support; and education and training. Monitoring and evaluation, and research were considered somewhat less important. Grant making was considered the least important area of work for the responding entities. This may reflect the nature of the work of the non-State actors participating in this consultation, rather than non-State actors in general.

**Participation in the World Health Assembly and WHO Executive Board meetings**

The World Health Assembly (WHA) is usually attended by 71% of all the respondents to the survey, whereas the WHO Executive Board (EB) meetings are attended by 53% of all respondents. Approximately half (51%) of all respondents participate both in the WHA and the EB, either always, often, or occasionally, depending on the agenda items. A large majority (92%) of non-State actors in official relations said they attend the WHA, 73% participated in the EB meetings, and 72% said they participated in both meetings.

Those non-State actors that are not in official relations and are attending either WHA (46%) or EB (26%), said they attended them as a member of a delegation of a non-State actor in official relations.

When asked at what level was the entity represented at WHO governing body meetings, 84% of the non-State actors in official relations said that their top leadership participated in these meetings, 62% said their management, and 57 % said their staff. The proportions for those not in official relations that participated in either of the WHO governing body meetings were 39%, 35% and 22% respectively. Among
non-State actors in official relations, 37% said that their members formed part of the delegation, and 29% reported that volunteers were included in their delegations. The respective figures for non-State actors not in official relations were 19% and 20%.

Most non-State actors participated in the WHO governing body meeting during their whole duration or approximately half of the duration, though some said that this may depend on the topics of discussion. For some the length of participation was also dependent on the cost of their stay.

Of those who participate in the WHO governing body meetings, a majority (89%) said that the participation in these meetings is either very important or somewhat important for their entity and its annual work. For non-State actors in official relations, the figures showed the same proportion, with 7% saying neutral and 3% not very important. The importance of the participation is probably reflected in the fact that more than half of the non-State actors in official relations attending the WHO governing body meetings say that their top leadership forms part of their delegation.

The 143 respondents who said they participated in WHO governing bodies were asked to rank up to 4 of 8 aspects of WHO governing body events as most relevant for their organization.

As can be seen from the chart, the most relevant aspect for all non-State actors to participate in the WHO governing body meetings was staying up-to-date with decisions made by WHO on technical areas of interest. For non-State actors in official relations, the second most relevant aspect was meeting with WHO technical units, and making statements at the Executive Board meetings or Committee A or B at the World Health Assembly. They also considered formal technical briefings and side-events very relevant. For non-State actors not in official relations, the second most relevant aspect was meeting with other entities working on the same topics.
Challenges for participation

Almost all the respondents responded to the question “What are the biggest challenges, if any, for your entity to be able to participate in the WHO governing body meetings?”. According to the responses, the main challenges were related to funding, capacity and timing. Many non-State actors said they do not have sufficient funding to participate in the WHO governing body meetings, and they also indicated that it is difficult for them to mobilize the right personnel to participate, as the invitations and agendas are received late, and by that time the relevant persons may already have made other commitments.

Recurrent and last-minute changes in the programme of work of the WHO governing body meetings impact the cost of participation for non-State actors. Many entities cannot afford to participate for the whole duration of the meetings and would be interested in participating only when the agenda item they are most interested in is discussed, but as its timing in the programme may change, it is difficult for them to plan their participation.

Non-State actor in official relations: “It is very resource intensive and costly to attend and participate in WHO governing body meetings (travel, accommodation, staff time) which affects our ability to attend for the full length of meetings. Furthermore, there are often last-minute changes to the agenda, which affects our ability to prepare and respond to developments. We have had to miss key agenda items due to last minute changes that conflict with travel arrangements.”

Another challenge is making statements. While some non-State actors prepare their statements in advance, many others prefer to prepare them while following the deliberations to be able to address relevant issues that may come up during the Member States deliberations. When there are frequent and last-minute changes in the programme of work, it makes it difficult for non-State actors to consult their constituencies to make changes in the statements in a timely way. This also means that the non-State actor representatives may not be able to be present when it is their turn to make statements.

Non-State actors indicated that, for them, the purpose of making statements at WHO governance meetings is to widen the perspectives of the decision makers, particularly from the point of view of the people concerned with the topic in question and most affected by decisions, to deliver expertise and aid decision making. Therefore, when the opportunity to speak comes at a late stage in the decision-making process, where the Member States have already delivered their positions, it is perceived that the decisions have already been made and non-State actor statements appear to be a mere formality, rather than an opportunity to bring relevant stakeholder expertise to inform the discussions and decision making.

Limiting the time for making statements makes it difficult for non-State actors to change the content of the statement, especially if it is a joint statement by several non-State actors, and to convey the full meaning of the message, which further appears to make non-State actor statements a formality. More flexibility would be appreciated regarding who can deliver non-State actor statements, including not having to name the speaker in advance.
Many non-State actors in official relations identify as another challenge the lack of a formal mechanism to engage with Member States, including the opportunity to meet face to face and support the governance process. Some others also identify difficulty in connecting with technical units as a challenge.

Non-State actor not in official relations: “No mechanism to meet with member states: The most important reason for attending EB/WHA meetings is the opportunity for side meetings with Ministers and Member State delegations. We organize this bilaterally with a number of delegations, often at their request which demonstrates that this is also a valuable opportunity for them to gather views from civil society stakeholders.”

Non-State actors that are not in official relations said that they find the process of achieving official relations status to be cumbersome and lengthy, and, therefore, a main challenge for participation. Some of those not in official relations who participate in the meetings as part of the delegations of non-State actors in official relations indicated that they often get the invitation very late, and decisions on how many representatives may participate from their part is often made very late so that the persons are not available any longer to join the delegation.

Proposed changes to allow more meaningful engagement in WHO governing bodies

In response to the question “What changes would need to take place in order to provide entities a more meaningful opportunity to engage in WHO governing bodies?”, non-State actors had several proposals. They indicated that financial support for participation would be helpful, possibly through a grant application process. They were calling for changes in the processes for participation to make them less bureaucratic, such as simplifying the time-consuming registration process. It was also proposed to allow an easier access with public badges to the governing body meetings to entities and individuals that are not in official relations with WHO, to relieve non-State actors in official relations from “hosting” civil society colleagues within their delegations and reduce their size. In addition, many non-State actors called for the invitations and the detailed programme of work with early access to WHO governing bodies meeting documents sent earlier to allow proper planning with their membership and constituencies for the participation by the non-State actors, as well as consideration of joint statements.

Non-State actors recommended setting up a self-governed space to be able to have consultations with each other before the sessions and to facilitate coordination, as well as minimize duplication of statements. They also called for a centralized web-based platform, and/or non-State actor community page to be set up for the purposes of information sharing and coordination, for example for joint statements. To increase the number of group statements, rules should be amended to allow more time for group statements and not to count names of supporting organizations towards word limit of statements. There were also calls for stricter time controls throughout, and for improved non-State actor seating areas as well as better access for the non-State actor speakers to the floor.

Several non-State actors proposed that for there to be a formal and inclusive process to engage them already at an early stage in drafting governing body resolutions to give their views and input. Timely, transparent and systematic open consultations on the proposed governing body documents could be organized with relevant non-State actors preceding the governing body meetings. In addition, all WHO
action plans, resolutions, roadmaps and strategies should be presented to online consultations. Calendar of these consultations, as well as responses from such consultation, should be publicly available and published online. More involvement from non-State actors into technical meetings and WHO technical working groups was also called for, which would allow for more inclusive outcomes from these forums. More virtual participation in consultations and in WHO governing body meetings should also be allowed, according to respondents.

Non-State actor in official relations: “Have a pre-briefing organized by WHO NSA with technical unit speakers going through the agenda and also flag upcoming work; whilst decision making is prerogative of Member States, NSA could be informed with much more notice of work in progress to allow for time to liaise with Member States bilaterally.”

There were also proposals to organize a meeting in advance of the governing body meetings. These could be used a) for WHO technical units to go through the agenda with non-State actors to give them an opportunity to give their views on the upcoming resolutions, as well as to discuss any possible work resulting from the resolutions so as to elicit commitments from non-State actors to contribute to that work in collaboration with WHO; and/or b) for non-State actors to express their views and concerns before Member States while they develop their positions for WHO governing body meetings. Such meetings could also be used for preparing interventions at the WHO governing body meetings.

Non-State actor in official relations: “As Member States shape their positions before governing body sessions, a more structured interaction between Member States and non-state actors before these sessions could add value to the discussions and improve the involvement of non-state actors in the work of the governing bodies and thus WHO’s governance.”

It was also suggested that non-State actors would participate through, for example, creating a secretariat co-hosted with non-State actors in agenda setting for the WHO governing body meetings. The agenda should also include space for reflection from WHO on non-State actor engagement and contributions.

Many non-State actors expressed their support for grouping of non-State actors for making statements, if this would allow statements to be considered earlier in deliberations and given a more prominent place, and if individual statements would not be discontinued completely.

Non-State actors called also for more communication and engagement with WHO Regional and country offices, to be more involved in meetings focusing on regional problems, and to conduct national civil society consultation with Member States to facilitate exchange, understanding of and contributions to their governments’ deliberations at WHO meetings.

Lastly, it was proposed that a unit with designated staff at WHO be created to be responsible for coordinating and promoting engagement with non-State actors for the implementation of the GPW13.
Involvement in the World Health Assembly and/or WHO Executive Board meetings

Among those non-State actors in official relations that participated in either the World Health Assembly, WHO Executive Board meetings, or both, 77% make statements; 41% regularly and 36% occasionally. However, half (51%) of those non-State actors in official relations think that making statements provides only very little or “not at all” an opportunity for non-State actors to influence the outcome of the deliberations of the WHO governing bodies. On the other hand, a large majority (85%) think that making statements provides an opportunity to raise awareness of the topic among Member States and a larger audience, and equally (83%) think that it provides an opportunity to raise awareness of the work of their entity among Member States and the audience. Some commented that making statements shows to Member States that there is a group of non-State actors monitoring their deliberations on a variety of issues and contributing to them. Making statements is considered an efficient advocacy tool.

A little over half (53%) of the non-State actors in official relations participating in the WHO governing body meetings said that they post their statements on the dedicated website ahead of the Member States deliberations. Sixty-four percent of them think that posting statements is very or somewhat beneficial in allowing Member States to take them into account when formulating their own positions.

Yet, with such strong interest in participation and with such importance accorded to the participation to the WHO governing body meeting, thirty-seven percent of all the responding non-State actors (37% of non-State actors in official relations and 38% of those not in official relations) said that the current modalities of involving non-State actors in WHO governance are not satisfactory. 33% of non-State actors in official relations and 34% of those not in official relations responded “neutral”; and less than one third (30%) of non-State actors in official relations were satisfied with the modalities.
Those non-State actors in official relations who said that the modalities are satisfactory, appreciated the opportunity to read out their statements at the governing body meetings, but at the same time they were uncertain of the effectiveness of the approach and on the impact of statements on the discussions or decision making of Member States. They also said that the modalities are good if the Member States read the statements posted on the dedicated website before formulating their positions. Therefore, they called for feedback from Member States, as well as statistics from WHO on the number of Member States accessing the statements and on which topics, as well as feedback on whether they find non-State actor statements helpful in their decision-making process. The non-State actors not in official relations who were satisfied with the modalities were often involved in WHO technical meetings or were invited to regional committees to contribute or participate as members of a delegation of a non-State actor in official relations.

Many of those that were neutral in their satisfaction with the current modalities said that non-State actors, especially those not in official relations, are not sufficiently engaged to be able to comment on that question, while others said that there are very few topics that are related to their area of work for them to be meaningfully engaged.

The opportunity to be present at governance meetings and to deliver statements was considered very valuable. However, in many ways, current modalities of non-State actor involvement were seen not to allow active involvement in the deliberations, but, rather, delegate non-State actors to be passive witnesses, with a reduced space to provide their views and opinions. Those who were not satisfied with the modalities felt that the communication about meetings, their content and timing is often poor and comes late. They also mentioned that the process of seeking approval to post and make a statement is time-consuming and frustrating. Only very little time is accorded to non-State actors to present their case and make a statement, and often the statement must be made so short that it loses its key messages and impact. In addition, as the statements are made at the end of the deliberations, it was questioned if they are listened to or even considered by Member States. In many cases, the statements could be perceived as mere reminders to the audience that the non-State actor or civil society still exists. With frequent changes in the programme of work, small delegations find it difficult to follow the agenda items of their interests. There were also requests for improving the seating for non-State actors.

Non-State actor in official relations: “The governing bodies should not leave the impression that WHO only reluctantly engages with non-state actors, viewing them as a necessary nuisance rather
than as key partners for implementation of the WHO technical agenda. Non-state actors have played critical roles on matters of significant health importance, e.g. advancing the Framework Convention on Tobacco Control, affording access to HIV medicines."

Non-State actors that are not in official relations felt that those in official relations take up the space leaving little space for others to be involved or heard, such as implementing NGOs and other stakeholders, whose capacity or accreditation by FENSA is eventually not met due to time and capacity constraints, with the result that only those that have been in official relations are able to participate.

Current engagement opportunities and participation in WHA and EB meetings should be enhanced according to the respondents. There is too little time left to allow meaningful interaction for non-State actors with representatives from Member States in the context of a crowded agenda. Additional opportunities should be offered to non-State actors to meaningfully engage at a timelier moment at the outset of respective processes for policy development and decision making. Possible ideas included increasing the number of face-to-face multi-stakeholder consultations, especially for policy development and decision-making processes, creating a space for non-State actors to meet with each other (to agree on a certain stance or work on statements, declarations, action plan, etc.) prior to governing body meetings, or to have a concerted time to meet with WHO representatives and Member States to present their ideas and initiatives.

Non-State actor in official relations: "Engagement opportunities occur too late in the process to change or inform the discussions in any significant way e.g. contributing additional evidence, expertise to the development of WHA resolution, action plans etc. There are limited opportunities for meaningful engagement at the meetings or preparatory processes e.g. drafting groups, briefings etc."

It was felt that there is no real sense of bilateral communication nor feedback on inputs/suggestions, making it very difficult to maintain engagement. Personal contacts appear to remain the most important and to have most impact. Apart from participation in the WHA there is very limited opportunity and little transparent structure for a representative approach for civil society organizations in WHO. In some cases when a non-State actor is engaging with WHO, it appears that any communication to them is often late in the process, or there is no follow up or further communications on the planned activities.

Non-State actor not in official relations: “The main mechanisms for NSA involvement are the delivery of statements during governing body meetings and posting these statements on the WHO-coordinated website. Neither of these represent a meaningful opportunity to really impact Member State decisions, nor do they offer the opportunity for meaningful dialogue or exchange on the topics. Having a separate forum involving stakeholders that would be tasked with providing views for consideration by Member States and other non-State actors in advance of key governing body sessions. But such a meeting should not preclude or replace the current level or manner of non-State actor participation in WHO deliberations. An opportunity for parties to debate views in an online setting prior to the informal meeting, and afterward, might prove informative to Member States as they prepare for governing body sessions and outcomes. “
When asked about their preferences for organizing non-State actors into constituencies, approximately half (48%) of non-State actors in official relations agreed that they should be organized in constituencies for making their contributions to WHO governing bodies, if the constituencies had a more prominent manner to contribute to the debates. One third (31%) said that they were not sure, and 21% said that they would prefer not to have non-State actors organized in constituencies. Non-State actors not in official relations had a higher preference for organizing non-State actors in constituencies (72%).

When given a choice on how to organize the constituencies, half (49%) of the non-State actors in official relations preferred them to be organized into 5 groups (3 groups of NGOs, and one each of philanthropic foundations and international business associations), 22% chose the option of 3 groups of non-State actors as classified in the Framework for Engagement of Non-state Actors (FENSA) (NGOs, philanthropic foundations and international business associations), and 29% proposed other types of groupings. The non-State actors not in official relations also the organization into 5 groups (52%), the 3 groups were supported by 28%, and the rest, 24%, preferred other types of groupings.

On further proposals for how the constituencies should be built, managed and facilitated, the proposals by respondents included grouping the non-State actors based on the topic of interest/theme, expertise, or sectors in which they function, or based on the topics in the WHO governing board meeting agenda. The non-State actors could also be grouped together according to their similarities and areas of focus, for example, one group could be composed of health professional organizations. Another
proposal included constituencies by "health risk factors", where the three pillars of the WHO structure could be mirrored, and another one proposed constituencies according to their role in the health system. Geographical representation should not be overlooked. An appropriate weight should be given to underrepresented groups, particularly those from low- and middle-income countries and those that represent youth and gender issues. Lessons learnt from the Global Fund and UNAIDS should be taken into consideration on how they manage their constituencies, in particular private-sector participation.

There were proposals where NGOs, philanthropic foundations and international business associations should be in different constituencies, but there were also views that the link between NGOs, philanthropic organizations and international business associations should be strengthened, and the groups should have mixed representation from the different types of entities.

It was also suggested that WHO identify the topic or theme for the constituencies, and non-State actors could choose to participate in 3-5 topic interest groups. On the other hand, it was proposed that the constituencies could be self-determined, and their members would self-assemble and opt-in to participating in a constituency. It was also proposed that the statements would be posted on the statements website and other non-State actors could endorse them, so that only those statements that received a certain number of endorsement would be allowed to be delivered orally at the WHO governing body meetings. Or, with WHO support and guidance, constituencies could set up their own processes and means for coordination/engagement. On the other hand, it was pointed out that civil society as a group is very diverse both in terms of missions as well as interests, and, therefore, it is important to ensure that diverse civil society voices are considered in the discussions. Some non-State actors felt that making them group themselves into representing different views for making statements would dilute their input and be unlikely to bring a meaningful outcome.

Related to the management and facilitation of the constituencies, the proposals were varied. The constituencies could be built and managed through a body that brings them all together and allows them to meet regularly to discuss issues related to areas that they are working on. Some proposed that WHO technical units should play a key role in the building and management of the constituencies, and that there should be a technical officer responsible for the management of the constituency that is relevant to his/her work.

It was also suggested that the constituencies should be coordinated, not by technical units, rather by the WHO division responsible for external relations, and there should be a coordination meeting of interested parties of each constituency ahead of the governing body meetings. Coordination could also be done jointly by a WHO representative and appointed members from each constituency, which would facilitate a representative participation. WHO should make meeting rooms available for each constituency. It was proposed that the chairmanship should be rotating and costs for participation should be borne by the affiliated groups.

Other feedback from respondents included the following:

- There should be a greater opportunity for engagement at the governing bodies online or through videoconferencing, especially for those unable to travel to Geneva.
- Online forums should be developed to facilitate discussions.
• The related processes should be clear and transparent.
• Moderation and facilitation should be organized by independent entities.
• Reports should be made publicly available.

In a broader context, many non-State actors emphasized their role as public interest civil society, representing the people. As such, they consider that they have an important place in providing input and feedback to proposals that would carry direct implications on daily work of these groups and people they serve, as well as their ability to carry out their work, much of which contributes to advancing health. Civil society entities often bring the practical, pragmatic perspective on many issues to the policy discussions, which contributes to ensuring that policies and resolutions are implementable nationally and locally.

It was proposed that WHO should consider setting up an Advisory Committee on WHO-CSO Engagement tasked with supporting, monitoring, and reporting on evolution of WHO’s CSO engagement in its governing body meetings and in WHO’s work in the long term.

**Participation and involvement in WHO regional committees**

Half of all respondents and 65% of non-State actors in official relations participate in regional committees. The participation by non-State actors in official relations is at 30-40% at all regions, except the Eastern Mediterranean region. Reason for not participating in regional committees were related to unavailability of funding, focusing on global rather than regional issues, or not having regional presence. Those non-State actors that are not in official relations participating in regional committees participated as a member of a delegation of a non-State actor in official relations, as an accredited entity to the regional committee meetings, or as an invited guest.

The most relevant aspects for participation in regional committee meetings were staying up-to-date with decisions on WHO technical areas of interest, meetings with WHO technical units and other entities working on same topics, and formal technical briefings and side events.

The majority (76%) of non-State actors in official relations that participate in regional committees make statements. As for the World Health Assembly and WHO Executive Board meetings, they see the impact of the statements more in raising the awareness of the topic among Member States and larger audience (88%) and in raising awareness of their work among Member States and the audience (87%), than influencing the outcome of the deliberations of WHO governing bodies (56%). Almost half (42%) of all respondents said they participate in other regional events.

![Making statements provide an opportunity for non-State actors to](image)

- **influence outcome of the debates of the WHO governing bodies**
- **raise awareness of the topic among Member States and a larger audience**
- **raise awareness on work of my organization among Member States and the audience**
often were mentioned WebEx briefings, separate technical meetings on relevant technical issues, briefings and consultations.

When asked if the non-State actors should be organized in constituencies also for regional committees, 48% of all respondents agreed, and 21% were not sure. 37% of non-State actors in official relations said that the non-State actors should be organized in constituencies for regional committees, whereas 36% did not agree with the proposal. Non-State actors not in official relations had a higher preference for constituencies at regional committees.

There were different views on the types of constituencies. Those who were in support of organizing constituencies for regional committees said that grouping non-State actors by health issue/topic allows stronger and more customized focus on key areas of mutual interest as well as a participatory approach for working together and advising the regional committee in advance of the meetings. Providing a communication framework with a liaison at WHO should increase communication among non-State actors and potentially lead to synergies that benefit WHO, as well as provide more opportunities for partnerships.

The regional offices should have an organized mechanism to hear from and consult with non-State actors and civil society at the regional level, which could be mirror the same principles as at the global level. There is also potential to increase the participation of some entities at the regional level, and at the same time make the attendance worth the cost and time.

However, those who were opposing the proposal of the constituencies for regional committees, said that non-State actors are a very diverse group, both in terms of missions as well as interests, and defining constituencies would not always be able to take into consideration their specific nature, expertise, advise and mission. Trying to reach consensus on a short constituency statement would not be the most effective way to utilize the time and expertise of participating non-State actors and would only serve to dilute the diversity of perspectives and reduce opportunities for dialogue with Member States. Additionally, bigger non-State actors may dilute the contributions from smaller or local stakeholders. This would carry a risk of WHO not receiving the best and varied contributions and undermine WHO effectiveness and policy making. Furthermore, many, if not most, resolutions discussed carry direct implications on daily work of the non-State actor groups. Therefore, the views that various entities represent should be heard individually. It was also highlighted that as non-State actors invest time and money to participate in the
regional committee, they would rather bring their own views to the attention of the Member States, and not in diluted form through a constituency.

It was suggested that as the number of non-State actors participating in regional committees is much lower than those participating in the World Health Assembly or WHO Executive Board, there is no need to organize constituencies, but rather it would be better to improve the existing processes.

Some of the respondents were either unsure or not sufficiently informed about the issue to give an opinion. Others said that their opinion would depend on the modalities of how the constituencies would be organized, how they would contribute to the regional committees, and what would be the lessons learnt from the global level.

**Country level consultations ahead of WHO governing body meetings**

According to the responses to the survey, there were few country level consultations organized ahead of WHO governing body meetings. In total, 20% or all respondents and 22% of non-State actors in official relations are invited to country-level consultations, less than half of them on a regular basis. Almost all the entities that participate in the country-level consultation find them beneficial or very beneficial in providing an opportunity to give input to the Member State on relevant issues. Respondents found it somewhat less beneficial in preparing the entities to participate in the WHO governing body meetings.

Many respondents recommend that WHO encourage Member States to organize country-level consultations ahead of WHO governing body meetings to strengthen multi-stakeholder collaboration and enhance multilateral participation taking local actors into consideration. It was also recommended that Member States consider integrating civil society representatives in their delegations to the WHO governing body meetings.

The respondents also recommended establishing a mechanism for improved country-level interactions between the Member States, WHO and national and international NGOs to obtain the expertise from non-State actors when and as required to support the government and WHO country offices in the implementation of national policies, thereby improving practice, as well as providing services. WHO’s visibility should also be increased in relevant civil society events, to increase communications on WHO activities, and non-State actors support for them.

The involvement of non-State actors with Member States and WHO should, in all cases, be done in a transparent and inclusive manner.

**Non-State actor in official relations:** “National governments should be informed and aware of non-State actors in official relations with WHO in each country - and should be encouraged to consult with non-State actors in advance of WHO governing body meetings. As Member States shape their positions before governing body sessions, a more structured interaction between Member States and non-State actors before these sessions would add value to the discussions and improve the involvement of non-State actors in the work of the governing bodies and thus WHO’s governance”
Organization of a separate informal meeting to stimulate non-State actors’ involvement in WHO governance

A majority of the 109 non-State actors in official relations (88%) and of all the 199 non-State actors (86%) responding to the survey were in favor of the proposal for WHO to organize a separate informal meeting or meetings to stimulate non-State actors’ involvement in WHO governance. Only 6% of both categories of respondents said that such meeting should not be organized. Similarly, 6% of non-State actors in official relations and 8% of all non-State actors responding to the question chose the option “other”, with many mentioning that organizing a separate meeting could be useful, but it should not limit or replace the possibilities that currently exist for direct involvement at WHO governing body meetings.

The respondents were asked which ones of the following groups should be invited to such a meeting: non-State actors in official relations only; non-State actors in official relations and other interested non-State actors engaged in work in support of WHO 13th General Programme of Work; Member States and non-State actors in official relations; or Member States, non-State actors in official relations and other interested non-State actors engaged in work in support of WHO 13th General Programme of Work. Over half (59%) of all respondents and 56% of non-State actors in official relations said that the invited participants for the meeting should include both non-State actors and Member States. A majority (76%) of non-State actors not in official relations would prefer that such a meeting included invitees also from other non-State actors that are engaged in work in support of WHO 13th General Programme of Work, whereas close to half (47%) of non-State actors in official relations would choose to have other non-State actors invited to such a meeting, too.

![Preferences for the types of entities to be invited](image-url)
The other non-State actors that could be invited to the meeting included NGOs and philanthropic foundations not in official relations, as well as WHO Collaborating Centres, followed by individual experts and prominent specialists. Many thought that intergovernmental and UN organizations should also be invited.

Most of the respondents including those in official relations were of the opinion that such a meeting should be organized once a year with varied preferences on the timing. Out of 105 non-State actors in official relations, one fourth preferred a meeting back to back before the World Health Assembly; one fourth preferred a stand-alone independent meeting outside WHO governing body meetings, but before the World Health Assembly after all WHA documents have been released; and another fourth preferred a stand-alone independent meeting outside WHO governing body meetings, during a calmer period; 12% supported timing in January between the meeting of the WHO Programme, Budget and Administration Committee and the Executive Board; and 13% proposed other timing.

Table 1: Respondents’ preferences to the question “When should the informal meeting take place?”

<table>
<thead>
<tr>
<th></th>
<th>January, in between the meeting of the Programme, Budget and Administration Committee and the Executive Board</th>
<th>Back-to-back meeting before the World Health Assembly</th>
<th>A stand-alone independent meeting outside WHO governing body meetings but before the World Health Assembly, after all WHA documents have been released</th>
<th>A stand-alone independent meeting outside WHO governing body meetings, during a calmer period of the year</th>
<th>Any other proposed timing</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All respondents</strong></td>
<td>26</td>
<td>52</td>
<td>49</td>
<td>41</td>
<td>16</td>
<td>185</td>
</tr>
<tr>
<td>%</td>
<td>14%</td>
<td>28%</td>
<td>26%</td>
<td>22%</td>
<td>9%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Non-State actors in official relations</strong></td>
<td>13</td>
<td>25</td>
<td>26</td>
<td>27</td>
<td>14</td>
<td>105</td>
</tr>
<tr>
<td>%</td>
<td>12%</td>
<td>24%</td>
<td>24%</td>
<td>26%</td>
<td>13%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Non-State actors not in official relations</strong></td>
<td>13</td>
<td>27</td>
<td>23</td>
<td>14</td>
<td>3</td>
<td>80</td>
</tr>
<tr>
<td>%</td>
<td>16%</td>
<td>34%</td>
<td>29%</td>
<td>18%</td>
<td>4%</td>
<td>100%</td>
</tr>
</tbody>
</table>

The other timings proposed included: in January alongside the Executive Board or in fall before the Executive Board; in between the January Executive Board meeting and the WHA, but before the WHA documents have been released to enable active contributions from non-State actors. In addition, it was suggested that shorter informal sessions should be organized immediately preceding both the EB and WHA, after meeting documents have been released.

It was also proposed that there should be a stand-alone independent meeting before the EB to give non-State actors time to prepare meaningful statements that reflect their positions and to give Member States an opportunity to reconsider their positions before the World Health Assembly. This meeting should also
include topics of the WHO regional committee so that non-State actors could meaningfully participate in regional meetings and then feed into the EB.

Some of the respondents felt that holding non-State actor meetings in conjunction with the EB or WHA would not be helpful because the timing is too close to discuss agenda items with non-State actor members and constituencies, form an opinion, prepare a statement, and have the statement approved before being read at a WHO meeting.

Some felt that organizing a separate informal meeting to stimulate non-State actor involvement in WHO governance would place additional burden on smaller non-State actors, or those with a smaller budget, and the debate and end result would likely be skewed towards the opinion (which does not necessarily reflect expertise) of those well-resourced, well-funded non-State actors, even if they are separated into constituencies. It was, therefore, recommended by some respondents to allow non-State actors to give their input while the meeting documents are prepared, giving Members States and WHO a chance to reflect on their suggestions, comments and ideas. If additional meetings are organized, they should be specific to an issue and at a time that Member States and WHO still have an opportunity to consider the non-State actors’ input. Careful planning and internal consultations would be required for non-State actors to prepare their inputs and for WHO and Member States to consider them.

As for the agenda for such a meeting, approximately one third of all respondents and of non-State actors in official relations preferred the meeting agenda be based on the main topics of the World Health Assembly and/or the Executive Board meeting, and another third preferred it to be based on selected 2-3 topics related to prominent or emerging issues in global health. Approximately one fifth would prefer having a comprehensive agenda related to the WHO General Programme of Work.

Other proposals for the agenda included main topics of the WHA and EB meetings and 1 or 2 emerging themes, items in consideration or early drafting stage, and main topics of interest for the non-State actors.

Almost half of all respondents (46%) as well as of non-State actors in official relations (44%) would prefer that the results from the meeting with only non-State actors as participants would be presented at the World Health Assembly as an official agenda item. However, among those who say that Member States should also be invited to the meeting, the preference for how the results should be presented varied: 23% of all the respondents and 25% of non-State actors in official relations prefer that there would be a presentation of a report of the discussions per agenda item as part of Member States deliberations, with individual non-State actor statements at the end; approximately 20% of both categories would prefer a presentation of a report of the discussions by the chair of the meeting before Member States deliberations at WHO governing bodies; and 20% of all respondents and 15% of non-State actors in official relations prefer a presentation of the results as a separate agenda item to the World Health Assembly. The overall preference appears to be towards presentation of a report of the meeting as an agenda item at the World Health Assembly.

**Other suggestions by non-State actors for organizing a separate informal meeting to stimulate non-State actors’ involvement in WHO governance**

When asked for other suggestions related to the organizing of such a meeting — for example, hosting, organizing, chairing, and format — the respondents emphasized that the meeting should involve WHO, Member States, and non-State actors, highlighting meaningful participation by all three. They also stated
that non-State actors should be heavily engaged in the design and execution of the convening to ensure their priorities are heard and recognized. This could be done through an online consultation to get inputs and feedback from non-State actors for the agenda items, format of the meeting and nature of participation.

Most respondents agreed that the meeting should be hosted just before the WHO governing body meetings or alongside an existing meeting to allow for greater participation. The meeting could be co-hosted by WHO and non-State actors. Type and format of consultations should be planned according to the aim of the meeting and promote sharing of diverse viewpoints. New formats for interaction can be tested, and virtual participation should be possible.

It was suggested that the meeting should be organized reflecting the technical work of WHO divisions, and accordingly the agenda would be based on WHO workplan and the plans of the divisions. Sessions could run in parallel, and at each session items on the WHA agenda relating to the work of a corresponding WHO division would be discussed. The chairs of sessions could be determined by division heads, and in addition to the non-State actors, participants would include representatives from WHO technical divisions, WHO Collaborating Centres, individual experts and specialists, and other selected entities with track record working with WHO on issues relating directly to WHO’s general programme of work. There were diverging opinions about inviting private sector representatives to these meetings.

Others proposed that the meeting should be a forum for themed sessions led by the non-State actors engaged in the work of the theme, for example a session on Cardiovascular Disease, Stroke and Kidney Disease would have presentations from the non-State actors in official relations that work on those issues.

There were different proposals for chairing the meeting: either have co-chairing by WHO or the chair of the Executive Board and an elected representative from the non-State actors in official relations, or have the chairing planned along the format of multi-stakeholder panels used in the UN High-level meeting on Universal Health Coverage. The chair should be selected each year on a rotating basis. It was also proposed that Member State co-facilitators be selected, especially for country-level consultations.

Respondents emphasized several times that the additional meetings should not limit non-State actors’ access to the WHO governing body meetings or the right to submit statements.

Non-State actors in official relations further highlighted that for the meeting to be accessible to as many entities as possible, it should occur just before the WHO governing body meetings as that would also facilitate access to other conference services, such as interpretation. Communication on the dates and details should take place well in advance to allow internal consultations within the non-State actor groups. Non-State actors should be involved in the design and execution of such meeting, and meaningful dialogue between WHO leadership, Member States, and non-State actors should be encouraged.

The respondents were also asked to provide any additional ideas for improved interaction between Member States and Non-State actors in the context of WHO governance. In their responses, the non-State actors emphasized that civil society engagement is both fundamental and instrumental for WHO and its work, both during the governing body meetings and especially outside them. Non-state actors often represent either a specialized technical perspective or a perspective of the affected populations and their technical advice and guidance should be brought to the attention of the Member States to inform their discussions and decision making, in particular if the interested parties are going to be affected by the decisions. Therefore, there should be increased WHO and Member State consultations with non-state
actors on technical and policy proposals prior to governing body meetings. The outcomes would be reflected in WHO governance and advance action and in-country implementation. In general, organizing fair and transparent public hearings and consultations with non-State actors on WHO documents under development received support from non-State actors, as this is seen to be a very important way of being involved not only in WHO governance but in shaping the global public health agenda.

While many respondents emphasized that the additional meetings should not limit non-State actors’ access to the WHO governing body meetings or the right to submit statements, it was also suggested that such pre-consultations, if organized, could replace to a large extent the need for individual interventions by non-State actors. However, they should not replace the opportunity to observe the meetings of WHO governing bodies directly or hinder the opportunity for side meetings and common events during the WHA and the EB, as these events are seen as an excellent opportunity for WHO to obtain support and partnerships.

The participation should be reciprocated; Member States and WHO technical staff should be invited to and participate in the annual events and technical meeting/conferences, as well as board meetings organized by non-State actors, to increase mutual understanding and collaboration.

In general, civil society and non-State actors can support the implementation of WHO initiatives at the national level through raising awareness, educating people, and empowering citizens. For that reason, country level with non-State actors would be a valuable opportunity for national governments to obtain local support, manpower, and resources. Member States should invite non-State actors working on topics of interest to them to meet with them. WHO should facilitate such encounters, to enable non-State actors to prepare themselves and to support the Member States to prepare for meetings of regional committees, the WHO Executive Board and the World Health Assembly. This should systematically include community representatives, professional and youth organizations as well as those living with health conditions who are most affected by the issues on the agenda.

Non-State actor not in official relations: “Evidence shows that the involvement of stakeholders - crucially in design to evaluation as well as implementation - is most effective. No single Organisation, State or stakeholder can solve modern problems or meet needs alone. True partnerships and effective co-operation is the way forward to meet common or diverse needs, goals, objectives and targets. We urge that all States, WHO and UN entities invest in developing true partnership working based on mutual respect, transparency and equity.”

Conclusions

The web consultation has confirmed the importance non-State actors place on their involvement in WHO governing bodies and a high level of dissatisfaction among non-State actors with the current modalities for their involvement. The main interest for non-State actors for their participation seems to be in technical exchanges with the WHO Secretariat and Member States and in consultative hearings with WHO and Member States that would feed into WHO decision-making processes.

Most non-State actors were in favor of organizing a separate meeting involving non-State actors, WHO technical units and Member State representatives to stimulate non-State actors' involvement in WHO governance. This meeting should not only feed into the WHO governing bodies but also support increased
collaboration with non-State actors and WHO in the planning and implementation of their work. Nevertheless, the additional meeting should not limit non-State actors’ access to the WHO governing body meetings or their right to submit statements.

While there was strong support for a separate meeting, support for the proposal to organize non-State actors into constituencies was not as strong. In general, grouping non-State actors into constituencies was seen as a good idea, if the constituencies had a more prominent manner to contribute to the deliberations. Non-State actors also felt that their interventions during the deliberations on an agenda item at WHO governing body meetings should take place earlier than is the current practice. Many non-State actors were of the opinion that if they are to be organized into constituencies for making statements, this should not replace completely individual statements at the end of the debates.