IFPMA comments on Discussion Paper on WHO's engagement with non-State actors

The International Federation of Pharmaceutical Manufacturers and Associations (IFPMA) applauds the World Health Organization's (WHO) efforts to become an organization able to meet the health challenges of tomorrow. Two elements are vital to this end: firstly, WHO’s role as the leading standard-setting and technical assistance authority ought to be informed by the best possible evidence and best practices. Secondly, converting policy into action will often be more effective through embracing partnership approaches. In achieving the above, the WHO may often work with a wide range of non-state stakeholders, as appropriate, including other UN bodies and multi-lateral agencies, academia, health professionals, civil society and the private sector.

IFPMA would like to contribute some written reflections on a discussion paper published on October 8, 2013 by the WHO Secretariat.

Due Diligence

Every actors has a potential conflict of interest. An overall principle when defining engagement lies in the management of conflicts of interest. If addressed in a transparent and straightforward manner, conflicts of interest should not undermine the trust in WHO’s interactions with non-state actors. Potential conflicts as they relate to the for-profit sector are observable, but can also apply to other stakeholders, even if they do not represent a commercial interest. For example, policies pursued by the WHO could impact the eligibility of countries for funding, or the ability of nongovernmental actors to attract funding for particular causes, as they are often recipients of government aid funds. IFPMA believes transparency is a cardinal element in recognizing and dealing with such potential conflicts.

A robust policy to manage different interests. Transparency can be achieved through a robust policy applying equally to all stakeholders. Conflict of interest issues must be addressed in an open and transparent manner, but should not be used as a reason to exclude any stakeholders who can positively contribute to improving health. As such, the WHO should be able to bring together the best minds from all sectors, while maintaining its independence from commercial or any other vested interests. A successful example is the Roll Back Malaria Partnership which has contributed to the significant progress in the fight against malaria. RBM is a robust Public-Private Partnership characterized by a dynamic and widespread stakeholder base representing many non-state actors. To manage these relationships it operates a robust declaration of interest policy which is common across all partners.

Participation

All non-state actors should have equal access. The ability of WHO to meet health challenges of tomorrow is also dependant on, and measured by, the ability of the organization to talk and listen to a diverse range of partners. As a consequence IFPMA believes that participation should be open to all actors sharing WHO's vision/mission. While all potential partners are equal in principle and have an equal right to engage with institutions like the WHO, intensive engagement should only happen if the
core goals of the partner organizations are aligned to contribute positively and tangibly to global health outcomes and some fundamental principles are met. These include transparency, evidence-based and patient-centered approaches.

Transparency Register. IFPMA supports adoption of a similar system to the Transparency Register used by the European Union. In this way information about funding, plans, priorities, and governance would be publicly disclosed and accessible as needed. The system should be standardized and flexible enough to be adopted and implemented at regional and country levels. However, this system should be built in a way to not overburden overstretched resources both in WHO and partner organizations.

Collaboration Plan as a valuable tool. The current system of a 3-year collaboration plan should be preserved when WHO will elaborate its new policy. The collaboration plan, which could benefit from further improvement, is a key tool to guarantee accountability and traceability. IFPMA believes that engagement with WHO should be based on concrete, measurable terms. The collaboration plan allows evaluating the value-adding component of a specific engagement. Having a collaboration plan could be a prerequisite to obtaining accreditation.

To enhance full non-state actors participation, a series of practical steps could be adopted:

- Reinforce online consultation processes through the creation of virtual workspace accessible to both Member States and non-state actors;
- Consider in the future inclusive mechanisms that would enhance non-state actors participation (based on past experiences like the Ministerial NCD meeting in Moscow, 2011);
- Delete 24-hour rule and establish a code of conduct as suggested in the paper.

Evidence and Advocacy

Any non-state actor wishing to engage with WHO must be able to base its actions on fact-based evidence. In the case of IFPMA members, fact-based evidence is a fundamental guiding principle when defining their policies. Lessons learned on the ground from our members point out to the need to engage in patient-centered approaches that deliver value to communities. Interactions between WHO and non-state actors should consider the importance of this approach, as it will guarantee beneficiary populations are actively involved in health interventions.