

PRINCIPLES GOVERNING RELATIONS BETWEEN THE WORLD HEALTH ORGANIZATION AND NONGOVERNMENTAL ORGANIZATIONS¹

1. *Introduction*

1.1 As stated in Article 2 of the Constitution, one of the main functions of the World Health Organization (WHO) is to act as the directing and coordinating authority on international health work. In support of this function, and in accordance with Article 71 of the Constitution, WHO may make suitable arrangements for consultation and cooperation with nongovernmental organizations (NGOs) in carrying out its international health work.

1.2 WHO should, in relation to NGOs, act in conformity with any relevant resolutions of the General Assembly or Economic and Social Council of the United Nations.

1.3 The objectives of WHO's collaboration with NGOs are to promote the policies, strategies and programmes derived from the decisions of the Organization's governing bodies; to collaborate with regard to various WHO programmes in jointly agreed activities to implement these strategies; and to play an appropriate role in ensuring the harmonizing of intersectoral interests among the various sectoral bodies concerned in a country, regional or global setting.

2. *Types of relations at the global level and their development*

2.1 WHO recognizes only one category of *formal relations*, known as *official relations*, with those NGOs which meet the criteria described in these Principles. All other contacts, including working relations, are considered to be of an informal character.

2.2 The establishment of relations with NGOs shall be an evolving process proceeding through a number of separate stages as described in the following paragraphs.

2.3 First contacts with an NGO in order to create mutual understanding and assist in developing mutual interests frequently take the form of exchanges of information and reciprocal participation in technical meetings. This type of *informal contact* may continue on an *ad hoc* basis, without time limit

¹ Text adopted by the Fortieth World Health Assembly (resolution WHA40.25), in replacement of the Principles adopted by the First and Third World Health Assemblies.

and without written agreement. However, the definition of the broad objectives of collaboration and the possibility of enlarging its scope to include specific joint activities in line with the particular expertise of the non-governmental organization are also explored at this stage.

2.4 When a number of specific joint activities have been identified, collaboration may be taken a stage further by proceeding to a period (usually two years) of *working relations* entered into by an exchange of letters. Such letters set out the agreed basis for the collaboration, indicating details of the activities to be undertaken during the period, providing an estimate of the resources to be supplied by WHO and the NGO, and naming focal points in the NGO and in WHO (designated technical officer). A joint assessment of the outcome of the collaboration thus planned is undertaken at the end of the period of working relations by the parties concerned, including also consideration of the future relationship. This may result: in the continuation of the working relations for a further period; in an application for admission into official relations with WHO from an international NGO, for examination by the Executive Board, should there be a number of activities which might form the basis of a long-term and closer relationship with WHO; or in a decision that there is no scope for further contacts in the foreseeable future. This arrangement for consultation and cooperation with NGOs is considered as informal.

2.5 The Executive Board shall be responsible for deciding on the admission of NGOs into *official relations* with WHO.

3. *Criteria for the admission of NGOs into official relations with WHO*

3.1 The main area of competence of the NGO shall fall within the purview of WHO. Its aims and activities shall be in conformity with the spirit, purposes and principles of the Constitution of WHO, shall centre on development work in health or health-related fields, and shall be free from concerns which are primarily of a commercial or profit-making nature. The major part of its activities shall be relevant to and have a bearing on the implementation of the health-for-all strategies as envisaged in the Global Strategy for Health for All by the Year 2000 and the WHO general programme of work covering a specific period.

3.2 The NGO shall normally be international in its structure and/or scope, and shall represent a substantial proportion of the persons globally organized for the purpose of participating in the particular field of interest in which it operates. When there are several international NGOs with similar

areas of interest, they may form a joint committee or other body authorized to act for the group as a whole.

3.3 The NGO shall have a constitution or similar basic document, an established headquarters, a directing or governing body, an administrative structure at various levels of action, and authority to speak for its members through its authorized representatives. Its members shall exercise voting rights in relation to its policies or action.

3.4 Thus, organizations eligible for admission into official relations with WHO include various types of international NGOs with a federated structure (made up of national or regional groups or having individual members from different countries), foundations that raise resources for health development activities in different parts of the world, and similar bodies promoting international health.

3.5 In exceptional cases a national organization, whether or not affiliated to an international NGO, may be considered for admission into official relations, in consultation with and subject to the recommendations of the WHO Regional Director and the Member State involved. Such a national organization (or a number of national organizations working under a federated (umbrella) structure) shall be eligible for admission provided that: the major part of its activities and resources are directed towards international health and related work; it has developed a programme of collaborative activities with WHO as indicated in paragraph 2.4; and its activities offer appropriate experience upon which WHO may wish to draw.

3.6 There shall normally have been at least two years of successfully completed working relations, as described in paragraph 2.4, prior to an application for admission into official relations.

4. Procedure for admitting NGOs into official relations with WHO

4.1 Applications should normally reach WHO headquarters not later than the end of the month of July in order to be considered by the Executive Board in January of the following year. They shall specify a structured plan for collaborative activities agreed upon by the organization and WHO. Applications from national organizations shall contain the endorsements of the WHO Regional Director and the Government of the Member State concerned. Applications should normally be transmitted to Board members by the Secretariat two months in advance of the session at which they will be considered.

4.2 During its January session the Board's Standing Committee on Non-governmental Organizations, composed of five members, shall consider applications submitted by NGOs, voluntarily or by invitation, and shall make recommendations to the Board; it may invite any such organization to speak before it in connection with the organization's application. Should the applicant organization be considered not to meet the established criteria, and bearing in mind the desirability of ensuring a valuable continuing partnership based on defined objectives and evidenced by a record of successful past collaboration and a framework for future collaborative activities, the Standing Committee may recommend postponement of consideration or rejection of an application.

4.3 The Board, after considering the recommendations of the Standing Committee, shall decide whether an organization is to be admitted into official relations with WHO. A re-application from an NGO shall not normally be considered until two years have elapsed since the Board's decision on the original application.

4.4 The Director-General shall inform each organization of the Board's decision on its application. He shall maintain a list of the organizations admitted into official relations, and this list and any amendments thereto shall be circulated to the Members of WHO.

4.5 A plan for collaboration based on mutually agreed objectives and outlining activities for the coming three-year period shall form the basis of official relations between WHO and the NGO. This plan shall be transmitted also to the WHO regional offices to encourage closer collaboration at regional level as appropriate.

4.6 The Board, through its Standing Committee on Nongovernmental Organizations, shall review collaboration with each NGO every three years and shall determine the desirability of maintaining official relations. The Board's review shall be spread over a three-year period, one-third of the NGOs in official relations being reviewed each year.

4.7 The Board may discontinue official relations if it considers that such relations are no longer appropriate or necessary in the light of changing programmes or other circumstances. Similarly, the Board may suspend or discontinue official relations if an organization no longer meets the criteria that applied at the time of the establishment of such relations, or fails to fulfil its part in the agreed programme of collaboration.

5. *Relations with NGOs at the regional and national levels*¹

5.1 *Regional or national NGOs affiliated to international NGOs in official relations with WHO*

These NGOs are, by definition, in official relations with the WHO regional office(s). They shall develop and implement a programme of collaboration with the regional and national levels of WHO to ensure implementation of health-for-all strategies at the country level.

5.2 *Regional and national NGOs for which there is no international NGO*

The regional office concerned may establish *working relations* with these organizations, subject to consultation between the Regional Director and the Director-General of WHO. A programme of activities developed and implemented as described in paragraph 2.4 would be essential.

5.3 *Regional or national NGOs affiliated to international NGOs not in official relations with WHO*

In order that WHO may promote and support the formation of strong international NGOs in the various technical fields, the regional office concerned may establish *working relations* with the above-mentioned regional or national organizations, subject to consultation between the Regional Director and the Director-General of WHO. Such working relations shall be based on a programme of activities developed and implemented as described in paragraph 2.4.

6. *Privileges conferred on NGOs by relationship with WHO*

6.1 The privileges conferred by official relationship shall include:

- (i) the right to appoint a representative to participate, without right of vote, in WHO's meetings or in those of the committees and conferences convened under its authority, on the following conditions:

whenever the Health Assembly, or a committee or conference convened under WHO's authority, discusses an item in which a related NGO is particularly interested, that NGO, at the invitation of the chairman of the meeting or on his acceding to a request from the organization, shall be entitled to make a statement of an expository nature, and may, with the

¹ Before working relations are established between WHO and a national NGO, and before a programme of collaboration with such an organization is agreed, appropriate measures will be taken to consult the Government concerned in accordance with Article 71 of the WHO Constitution.

consent of the meeting, be invited by the chairman to make, in the course of the discussion of the item before the meeting, an additional statement for purposes of clarification;

(ii) access to non-confidential documentation and such other documentation as the Director-General may see fit to make available through such special distribution facilities as WHO may establish;

(iii) the right to submit a memorandum to the Director-General, who would determine the nature and scope of the circulation.

6.2 In the event of a memorandum being submitted which the Director-General considers might be placed on the agenda of the Health Assembly, such memorandum shall be placed before the Executive Board for possible inclusion in the agenda of the Assembly.

6.3 Privileges similar to those stated above shall normally be accorded to national/regional NGOs having working relations with WHO regional offices, in accordance with section 5, as determined by the Regional Directors in consultation with the regional committees.

6.4 A national organization which is affiliated to an international NGO covering the same subject on an international basis shall normally present its views through its government or through the international NGO to which it is affiliated, unless other arrangements are made in view of its particular relationship with WHO.

7. Responsibilities of NGOs in their relationship with WHO

7.1 NGOs shall be responsible for implementing the mutually agreed programme of collaboration and shall inform WHO as soon as possible if for any reason they are unable to fulfil their part of the agreement.

7.2 NGOs shall utilize the opportunities available to them through their normal work to disseminate information on WHO policies and programmes.

7.3 NGOs shall collaborate individually or collectively in WHO programmes to further health-for-all goals.

7.4 NGOs shall individually or collectively collaborate with the Member States where their activities are based in the implementation of the national/regional/global health-for-all strategies.
