TERMS OF REFERENCE
OF
WHO Faith Network

1. **Mission**
To support more effective national responses to health emergencies, by strengthening information exchange and collaboration between the World Health Organization and faith actors\(^1\), particularly in the context of health emergency preparedness and response: thereby resulting in more people being better protected, prepared and resilient to health emergencies; more people enjoying better health and well-being; improved trust and social cohesion (GPW 13 Strategic Priorities 2.2.1 and 2.2.2).

2. **Status**
The Faith Network is a WHO informal forum for stakeholders to exchange views; share information; and disseminate relevant WHO guidance. The Faith Network is not a separate legal entity and derives its legal status from WHO. Thus, it shall be administered and housed in WHO. The operations of the Faith Network shall in all respects be administered in accordance with the WHO Constitution and General Programme of Work, WHO’s Financial and Staff Regulations and Rules, WHO’s manual provisions, and applicable WHO rules, policies, procedures and practices including the WHO Framework of Engagement with Non-State Actors (FENSA)\(^2\).

3. **Vision and Goal**
The Faith Network envision that more people have timely access to the right information in order to be able to make decisions to protect their health and the health of their communities, particularly during health emergencies. The goal of the Faith Network is to increase access to accurate and relevant information and build a community of collaborative faith networks, sharing on topics related to health, safety and wellbeing. To achieve these goals the Faith network aims to:

1. Facilitate opportunities for ongoing engagement of faith actors in WHO’s emergency preparedness and response work at global, regional and country levels;

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\(^1\) Faith actors include religious leaders, faith-based organizations and local faith communities

2. Create a space where faith actors can share concerns, questions or feedback from their faith networks;
3. Facilitate opportunities for capacity building, mentoring and connecting faith actors with WHO experts;
4. When appropriate, highlight faith-led initiatives and identify opportunities to collaborate in line with WHO rules and policies;
5. Ensure WHO engagement with faith actors is diverse, gender-balanced, inclusive and meaningful for all involved.

4. **Core Principles of the Faith Network**
   
The Faith Network is governed by the following principles:
   
   - To be inclusive and diverse in membership and structure, ensuring adequate representation from relevant stakeholder groups, geographical regions and income settings;
   - To be transparent in all processes, including the operational strategy and Faith Network activities;
   - To ensure all activities align with WHO’s norms and standards;
   - To facilitate coordination among interested parties to advance WHO’s priorities on emergency preparedness and response.

5. **Objectives**
   
   5.1 **Objective 1:** Conduct advocacy activities that increase support to WHO public health objectives and raise awareness around the importance of engaging faith in emergency preparedness and response. To achieve this, the Faith Network will:
      - Promote and disseminate information and resources aligned with WHO recommendations on health, emergency preparedness and response, mental health and psychosocial wellbeing;
      - Promote and support, when and where relevant, WHO public health messages and as appropriate, events on faith engagement at global and regional level.

   5.2 **Objective 2:** Strengthening communication and knowledge sharing. To achieve this, the Faith Network will:
      - Facilitate communication between stakeholders through regular virtual meetings, briefings and email exchange;
      - Strengthen and increase communication amongst the participants, with other stakeholders.

6. **Governance and Secretariat**
   
The Secretariat of the Faith Network is formed within WHO and may involve more than one department or office. The secretariat is responsible for governance of the Faith Network and will facilitate coordination of activities, to ensure activities align with the Faith Network overall mission and objectives, and to preclude influences of individual or organization-specific agendas.
The Faith Network is not a decision-making body, nor does it have any bearing over the work and activities of its participants that occur outside the Faith Network.

More specifically, key responsibilities of the Secretariat are as follows:
- Serves as the interface between the Faith Network and its participants;
- Selects and manages participation in the Faith Network in line with WHO rules and policies;
- Chairs the information sessions and any other meetings;
- Coordinate correspondence with the Faith Network participants, as required, to facilitate participation and collaboration of all participants;

Subject to the availability of sufficient human and financial resources for this purpose, Secretariat support and coordination for the Faith Network will be provided by WHO. Secretariat support will be provided in accordance with WHO’s rules, regulations, policies and procedures.

The Secretariat reserves the right not to implement any the Faith Network activity which it determines gives rise to undue financial, legal or reputational liability or is contrary to WHO policies, regulations and procedures.

7. Participation
The Faith Network may consist of representatives\(^3\) from:
- Member States
- Philanthropic foundations
- Intergovernmental faith organizations;
- Non-governmental faith organizations;
- Academic institutions;
- International, national or local faith organizations;
- Faith-led Initiatives
- Religious leaders

Faith organizations will be represented by constituencies, such that there will be broad representation from different geographical locations and diverse settings. There may be global, regional, local organizations or initiatives; including medical and health associations and organizations or initiatives that support infodemic management, risk communication and community engagement during health emergencies.

All entities seeking to participate in the Faith Network must meet the following criteria:

\(^3\) Individuals are not eligible for the WHO Faith Network membership unless as a religious leader
• The aims and purposes of the entity should be consistent with the WHO Constitution and conform with WHO’s policies;
• The entity should contribute significantly to the advancement of public health and to the objectives, vision and goal of the Faith Network and demonstrate documented support for the WHO work emergency preparedness and response;
• The entity should respect the intergovernmental nature of WHO and the decision-making authority of Member States as set out in the WHO Constitution;
• The entity should be actively working in the field of health and wellbeing and/or emergency preparedness and response;
• The entity should have an established structure, constitutive act, and accountability mechanism;
• The entity, if a membership organization, should have the authority to speak for its participants and have a representative structure;
• If a non-State actor is applying to participate, the entity is required to provide the following information and documents: name, objectives and mission of the entity, copy of the legal status (such as bylaws, constitution), governance structure, names and affiliations of the participants of main decision-making bodies (such as Board, Executive Board), the assets and funding sources (list of donors and sponsors), main relevant affiliations and website address. The entity will also sign the tobacco-arms disclosure statement without alteration.

Each participant of the Faith Network must:
• Adhere to the Terms of Reference of the Faith Network;
• Actively participate in and support the Faith Network, its purpose, goals, objectives, guiding principles, work and activities;
• Attend and actively participate at the Faith Network various meetings;
• Share knowledge and information with other participants (such as resources, data, case studies, experience etc.);
• Act in the best interest of public health in alignment with WHO policies; and

Participants shall not make public statements about the Faith Network activities or on behalf of the Secretariat without the prior written consent of the Secretariat

7.1 Applications to participate
A standardized form and application process will be developed by the Secretariat. Participant approval will be based on an assessment, due diligence process, and review of submitted documents, in accordance with the eligibility criteria and in accordance with WHO’s rules and policies. All participation applications will be approved by the Secretariat.

8. Meetings
As the Secretariat of the Faith Network, WHO convenes participants meetings at its discretion. Participants are accountable for informing their respective organizations on the Faith Network.

9. Termination and withdrawal
Each participant has the right to withdraw from participation in the Faith Network at any time and should inform the Secretariat promptly.

If a participant does not attend three successive meetings, without appropriate written explanation, the participant will be deemed to have withdrawn from the Faith Network.

The Secretariat also has the right to terminate participation at any time, upon providing written notice thereof to such participant. Without limiting the foregoing, the participation of any entity in the Faith Network shall terminate if and when such participant: (a) no longer subscribes or adheres to the goals, objectives and/or guiding principles of the Faith Network, as described in these Terms of Reference; (b) engages in activities that are not compatible with WHO Policies, and/or (c) ceases to meet the membership criteria for the Faith Network, as set forth in these Terms of Reference.

WHO has the right, exercisable in its sole discretion, to close the Faith Network, at any time upon providing written notice thereof to the participant(s) concerned.

10. The Faith Network evaluation
The Faith Network Secretariat, will evaluate the overall processes and outcomes of the Faith Network on a regular basis, with the aim of assessing whether WHO should continue the Faith Network.

11.2 Publications
The Faith Network shall not produce publications, unless exceptional approval is given by the Secretariat. Any publication by a participant, other than WHO, referring to the Faith Network shall contain appropriate disclaimers as decided by WHO, including that the content does not reflect the views or stated policy of the participants.

The participants must ensure that the work of the Faith Network is not misrepresented, and appropriate disclaimers are included where necessary. The Faith Network activities shall not include the development of technical materials, normative documents or policy papers.

11. Finance
Participants will be responsible for their own expenses in relation to all aspects of the Faith Network unless agreed otherwise by the Secretariat. If participants receive third party funding to support participation in the Faith Network meetings and activities, this must be disclosed to the Secretariat.
The Secretariat may raise funds from other sources to support the work of the Faith Network, in accordance with WHO rules and procedures, as appropriate. All Secretariat funds shall be received, administered and acknowledged in accordance with WHO’s policies including its financial regulations, rules, and practices. The Secretariat reserves the right to require that the Faith Network name not be used in grant applications. Any contributions by participants including donations (in cash or in kind), will be acknowledged by the Secretariat in accordance with WHO’s applicable rules, policies and practices.

12. Confidentiality
Depending on the agenda item being discussed, each participant in the Faith Network may be required to abide by confidentiality obligation and sign a standard confidentiality undertaking using the form provided by WHO for this purpose.

13. Amendments
These Terms of Reference may be amended from time to time by WHO.