Introduction

1. In May 2016, the World Health Assembly adopted the Framework of Engagement with Non-State Actors (FENSA).\textsuperscript{1} Given the independent legal status of the Pan American Health Organization (PAHO), this policy framework did not automatically apply to PAHO until it was expressly approved and adopted by resolution of PAHO’s Member States through its Governing Bodies.

2. In September 2016, PAHO Member States at the 55th Directing Council adopted FENSA through Resolution CD55.R3. PAHO Member States instructed the Director of the Pan American Sanitary Bureau (PASB) to implement FENSA in a coherent and consistent manner, and in coordination with the Secretariat of the World Health Organization (WHO), with a view to achieving full operationalization within a two-year timeframe, taking into account the constitutional and legal framework of PAHO. The Director was also requested to report on the implementation of FENSA to PAHO’s Executive Committee, through its Subcommittee on Program, Budget, and Administration, under a standing agenda item to be considered each year during the June session of the Committee. This document contains the PASB report for 2019.

3. PASB’s annual report on Non-State Actors in Official Relations with PAHO, which is part of the implementation of FENSA in PAHO, will be presented to the Subcommittee on Program, Budget, and Administration under a separate agenda item.

Implementation of FENSA

4. PASB began implementation of FENSA immediately after it was adopted by PAHO Member States in September 2016. To ensure consistent implementation, the PAHO FENSA focal point has continuously informed staff of all applicable procedures and has provided guidance and recommendations at the initial stages of potential

\textsuperscript{1} Resolution WHA69.10 (2016).
engagements. Relevant internal policies and procedures have been revised and implemented without disrupting ongoing engagements.

5. As requested by PAHO Member States through Resolution CD55.R3 (2016) when adopting FENSA, PASB coordinates closely with the WHO Secretariat to ensure the coherent and consistent implementation of FENSA, taking into account the legal status and Constitution of PAHO. The PAHO FENSA focal point regularly discusses FENSA issues with the WHO Secretariat and exchanges information to maintain a coordinated approach while streamlining processes. PASB also adapted the WHO Guide for Staff to PAHO, in conformity with Resolution CD55.R3.

6. With regard to WHO’s FENSA tools, the WHO Secretariat has informed its Governing Bodies that it has enhanced the WHO Register of non-State actors to include profiles, engagements, collaboration plans, and annual reports of non-State actors in official relations.

7. PASB has also developed and conducted training sessions for PAHO personnel. Training materials are regularly updated and adjusted to take account of comments and experiences, including best practices and practical examples of engagements. Training will continue to evolve iteratively, based on participant feedback. In addition to implementing training sessions, the PAHO FENSA focal point has provided briefings on FENSA as part of its outreach activities throughout PASB, including a FENSA session for the annual meeting of PAHO administrators.

8. Although significant efforts have been made, and FENSA has been fully implemented in PAHO, some challenges persist. There remains a lack of sufficient resources, both financial and human, required to fully develop, implement, and maintain a due diligence and risk assessment system across the Organization, for both standard and simplified procedures. Resource constraints also make it challenging to implement a robust training program that must continually evolve to be most effective, and to monitor and update guides and procedures to ensure ongoing relevance and applicability.

Engagement

9. As the Organization has done for many years, including prior to FENSA under its Guidelines for Collaboration with Private Enterprises, PAHO proactively engages with a broad range of non-State actors in an effort to support Member States and to fulfill the Organization’s mission. For each proposed engagement, PASB conducts due diligence to assess any risks and balance them against expected benefits, thereby promoting engagement with non-State actors while preserving the Organization’s independence, integrity, and reputation.

10. In 2019, PASB conducted over 200 standard due diligence and risk assessment reviews, an almost 70% increase over the preceding year, as well as hundreds of simplified
reviews for low-risk engagements. The significant uptake of FENSA reviews in 2019 is a result of continued engagement by the Organization and outreach efforts by the PAHO FENSA focal point to ensure that FENSA processes are followed. Some examples of the resulting engagements include, among many others: a) working with nongovernmental organizations on early childhood health and development; b) collaborating with a university to develop a compendium of best practices and contributions of nursing and midwifery practice in primary health care; c) engaging with a foundation to support PAHO’s review of the impact of pneumococcal conjugate vaccines on mortality; and d) engaging with a private sector entity to disseminate information on food safety. In addition, PASB frequently participates in meetings and events with non-State actors, inviting them to PAHO meetings and attending meetings and events convened by non-State actors. PASB also maintains close collaboration with non-State actors in official relations with PAHO. For example, 38 delegates from 15 non-State actors in official relations attended the 57th Directing Council in September 2019, and many of these non-State actors provided valuable statements on items of interest to them.

Action by the Subcommittee on Program, Budget, and Administration

11. The Subcommittee is invited to take note of this report and provide any comments or recommendations it might consider pertinent.

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2 PASB conducts a standard due diligence and risk assessment review if a proposed engagement involves, among other things, a financial or in-kind contribution; policies, norms, and standard setting; the private sector or any entity affiliated with the private sector; or non-State actors whose policies or activities negatively affect human health. A simplified review may be conducted when the proposed engagement is repetitive in nature (that is, an assessment of the non-State actor has previously been conducted and the activities are the same) or is considered low-risk (e.g., participation in a meeting with a non-State actor that is not categorized as “private sector,” and the meeting does not involve policies, norms, or standard setting).