REPORT ON THE IMPLEMENTATION OF THE FRAMEWORK OF ENGAGEMENT WITH NON-STATE ACTORS

Introduction

1. In May 2016, the World Health Assembly adopted the Framework of Engagement with Non-State Actors (hereinafter “FENSA” or “Framework”). Given the independent legal status of the Pan American Health Organization (PAHO), this policy framework did not automatically apply to PAHO until such time as it was expressly approved and adopted by a 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. In doing so, 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 PAHO’s constitutional and legal framework.”

The Director was requested to report on the implementation of FENSA to PAHO’s Executive Committee in its June sessions under a standing agenda item, through its Subcommittee on Program, Budget, and Administration. The Director was also requested to submit a progress report on FENSA implementation to the 29th Pan American Sanitary Conference (the Conference).

Implementation of FENSA

3. Upon the adoption of FENSA by PAHO Member States in September 2016, the PASB began its immediate implementation, conducting due diligence and risk assessments on all new engagements between PAHO and any non-State actor under this new policy framework.

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1 Resolution WHA69.10 (2016).
2 Resolution CD55.R3 (September 2016).
4. PASB also issued General Information Bulletins to all staff regarding FENSA and its immediate effect; describing the Framework in general terms; identifying PAHO’s FENSA focal point; and explaining applicable procedures within PASB. Additionally, in November 2016 all PAHO/WHO Representatives, Department Directors, and other PAHO Managers received briefings on FENSA together with more detailed instructions and procedures to be followed for its implementation. PAHO/WHO Representatives and Department Directors also received information and updates on FENSA procedures and implementation during the Subregional Managers’ Meetings in 2017.\(^3\) Another updated guidance note on FENSA and applicable procedures was issued to PAHO/WHO Representatives and Department Directors in July 2017. As of the writing of this progress report, training materials are being developed in order to continue more in-depth training programs for all PAHO staff during the second semester of 2017 and the first semester of 2018.

5. Additionally, in accordance with Resolution CD55.R3, PASB reported on the implementation of FENSA to the 160th Session of the Executive Committee in June 2017, through the Eleventh Session of the Subcommittee on Program, Budget, and Administration in March 2017. The report was shared with the WHO Secretariat.

6. Furthermore, and as requested by Member States through Resolution CD55.R3, PASB continues to coordinate closely with WHO’s Secretariat on FENSA thus ensuring a coherent and consistent implementation of FENSA. For example, in September 2016, PASB staff met in Geneva with the global FENSA focal points from all WHO regions to consider ways to strengthen coordination and consider the type of information needed from non-State actors for engagement. In April 2017, PASB staff also participated in a video conference with the global FENSA focal points to discuss the first draft of the “WHO Guide to Staff on Engagement with non-State Actors” (WHO Guide for Staff), which is one of the FENSA tools currently under development. PASB provided extensive written comments to the WHO Secretariat on this first draft. In August 2017, an updated draft of the WHO Guide for Staff was circulated by PASB to PAHO staff for comment. In addition, the PASB’s FENSA focal point has frequent communication with WHO’s Secretariat on FENSA issues.

7. The FENSA tools currently under development by WHO’s Secretariat include:
   a) the Register of non-State Actors, for which a new version was recently launched, although not yet fully operational;
   b) the WHO Guide for Staff, which is still in draft form as of the writing of this progress report; and
   c) the “WHO Handbook for non-State Actors,” a draft of which should be circulated soon by the WHO Secretariat to FENSA focal points. All of these tools are needed to enable PASB to fully implement FENSA in PAHO. PASB will continue to work and coordinate closely with the WHO Secretariat in order to fully implement FENSA, taking into account PAHO’s legal status and Constitutional framework.

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3 Subregional Managers’ meetings in 2017: Caribbean in February; South America in March; and Central America, Cuba, Mexico, and the Dominican Republic in April.
8. The above described steps are on schedule and should permit the Organization to achieve full implementation of FENSA within the two-year time frame established by PAHO Member States in accordance with Resolution CD55.R3 (2016).

**Action by the Pan American Sanitary Conference**

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