

TERMS OF REFERENCE OF THE WHO HEALTH INEQUALITY MONITORING NETWORK

1. Introduction

In the global health landscape context, achieving health equity and establishing universal health coverage are central principles outlined in the <u>General Programme of Work</u> by the World Health Organization (WHO). Recognizing the urgency to confront health inequities and foster inclusive health systems, the WHO Health Inequality Monitoring Network (hereafter referred to as the "HIM Network") is established as a WHO dedicated led initiative committed to advancing these objectives and facilitating the implementation of the Inequality Monitoring and Analysis Strategy.

Building upon the foundation laid by GPW 13, WHO envisions an overarching framework for <u>Fourteenth General Programme of Work (GPW 14)</u>. As the GPW 14, 2025–2028 takes effect, the HIM Network remains steadfast in its commitment to these principles within the updated framework.

The network's commitment is aligned with the Seventy-fourth World Health Assembly Resolution (WHA74.16). This resolution underlines the importance of addressing social, economic, and environmental determinants of health, outlining the value of multi-stakeholder collaboration to achieve health equity. It calls on Member States to strengthen monitoring systems and intersectoral actions, underscoring the necessity of inclusive engagement with stakeholders including intergovernmental and nongovernmental organizations, academia and the private sector. These principles underline the rationale for establishing the HIM Network and its role in driving global collaboration to tackle health inequality.

2. Status

The HIM Network is a WHO informal network and not a separate legal entity and derives its legal status from WHO. Thus, it is administered and housed in WHO. The HIM Network is an informal forum within WHO, fostering knowledge exchange, facilitating information sharing, and promoting technical collaboration. The operations of the HIM 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 policies, rules, practices and procedures including the WHO Framework of Engagement with Non-State Actors (FENSA)¹.

3. Purpose

The primary purpose of the HIM Network is to provide a platform for raising awareness and advocating to enhance health inequality monitoring at global, regional, and country levels, including through exchanging views and sharing information with regard to capacity strengthening, product development, and the effective utilization of health inequality monitoring best practices, tools, and resources.

 $^{^1\,}Framework\ of\ engagement\ with\ non-State\ actors\ \underline{https://apps.who.int/gb/ebwha/pdf_files/wha69/a69_r10-en.pdf}\ .$

4. Mission

The HIM Network is driven by a mission to support Member States with the monitoring of health inequalities.

5. Core Principles of the HIM Network

The HIM Network is governed by the following principles:

a. Technical Excellence and Expertise

To ensure all activities align with WHO's policies, norms and standards. To uphold the highest professional standards, ensuring that the network's endeavours in the promotion of health inequality monitoring are characterized by competence and knowledge.

b. Credibility

To build and maintain trust in contributions from the participants towards health inequality monitoring through transparent practices, including the operational strategy and HIM Network activities, and adherence to the highest ethical standards.

c. Diversity and Inclusion

To be inclusive and diverse in membership and structure, ensuring adequate representation from relevant stakeholder groups, geographical regions and income settings. To foster an inclusive environment that recognizes, and respects varied perspectives, experiences, and backgrounds.

d. Collaboration

To facilitate coordination among participants to advance WHO's priorities on health inequality monitoring. To foster a culture of dialogue and mutual learning among all stakeholders. To cultivate collaborative relationships by advocating for collaboration within the HIM Network and with external stakeholders, as appropriate.

e. Innovation

Commitment to innovation drives the evolution of health inequality monitoring, allowing to adapt to changing landscapes and pioneer solutions for more effective outcomes.

These core principles represent the commitment of the HIM Network and its participants to making a meaningful and lasting impact on health equity globally.

6. Governance and Secretariat

WHO serves as the Secretariat of the HIM. The Secretariat is responsible for the governance of the HIM Network. It facilitates the coordination of HIM Network activities, to ensure that activities align with the HIM Network's overall mission and objectives and to preclude influences of individual or organization-specific agendas. The HIM 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 HIM Network.

More specifically, key responsibilities of the Secretariat are as follows:

• Serves as the interface between the HIM Network and its participants;

- Selects and manages participation in the HIM Network in line with WHO policies, rules, and procedures, HIM Network selection criteria and HIM Network terms of reference;
- Chairs the HIM Network meetings and information sharing sessions;
- Coordinate correspondence with HIM Network participants, as required, to facilitate participation and collaboration among participants.

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

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

6.1 Steering Committee

The Steering Committee comprises 6-12 members, depending on the size of the Network, who are appointed by WHO. The selection process will strive for a balanced representation of the HIM Network participants, with respect to gender, age, geographical area and organization type. Steering Committee decisions will be made through consensus of Committee members. With the exception of the Secretariat, the duration of the term of appointment of the Steering Committee members shall be for an initial term of two (2) years, with the possibility of renewal once.

The Steering Committee is chaired by the Secretariat, who may appoint one member of the Steering Committee as the Vice-Chair for a two-year term.

Key responsibilities of the Steering Committee are as follows:

- Provide overall strategic direction, for the operative work of the HIM Network. This includes supporting development of the overall HIM Network plans and strategies;
- Jointly coordinate with the Secretariat the annual or biennial participants meeting of the HIM Network, including development of relevant documentation and logistical support;
- Coordinate the establishment of working groups, approve their workplans, and oversee all working group activities;
- Monitor and evaluate activities and processes of the HIM Network, proposing amendments as necessary to WHO, to optimize HIM Network functioning and impact.

7. Participation

The HIM Network shall consist of representatives² from academic institutions with demonstrated expertise in health inequality monitoring, or closely related fields as well as governmental agencies with a technical mandate linked to health inequality monitoring. Academic institutions contribute to the HIM Network's mission through their unique role in education, skill development, and research, fostering specialized knowledge and training to advance health inequality monitoring

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

- The aims and purposes of the entity should be consistent with the WHO Constitution and conform with WHO policies, rules, and procedures;
- The entity should contribute significantly to the advancement of public health and to the purpose, mission, and goal of the HIM Network and demonstrate documented support for the WHO Health

² Individuals are not eligible for the HIM Network membership

Inequality Monitoring work;

- 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 equity, health inequality monitoring, and related fields with proven experience and expertise in the subject matter;
- 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;
- The entity is required to fulfil the language proficiency criteria established by the HIM Network, as the primary language of communication within the HIM Network is English.
- Individuals are not eligible to join the HIM Network.

7.2 Duties and roles of network participants

Each participant in the HIM Network is expected to commit to strengthening the capacity for health inequality monitoring through:

- Support WHO in identifying the needs for training courses and targeted capacity-building workshops for Member States.
- Familiarizing themselves with WHO publications, methods, tools and resources on health inequality monitoring and adhering to WHO guidelines shared within the HIM Network.
- Sharing knowledge and experience to develop training programs based on WHO health inequality
 monitoring methods, tools and training resources, tailored to the needs of WHO and its Member
 States.
- Providing technical input for WHO's consideration that may inform its activities in delivering training
 programs to support establishing robust and effective inequality monitoring systems in Member
 States.
- Providing technical inputs to WHO that may support strengthening technical expertise for health inequality monitoring in Member States, fostering continuous learning and improvement.
- Providing technical inputs for WHO's consideration that may inform its work for effectively integrating data disaggregation into health information systems, while ensuring accurate and meaningful interpretation of disaggregated data in Member States.
- Facilitating the exchange of best practices and lessons learned regarding health inequality monitoring, fostering a culture of knowledge sharing across Member States.
- Providing technical input for WHO's consideration in improving existing and new methods, approaches, tools, and technical resources for health inequality monitoring.

7.3 Each participant of the HIM Network must:

- Adhere to the Terms of Reference of the HIM Network;
- Actively participate in and support the HIM Network, its purpose, goals, objectives, guiding principles, work and activities;
- Attend and actively participate at the HIM Network's 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.
- Keep the Secretariat informed of activities relevant to the HIM Network's mission and vision.
- Shall not make public statements about the HIM Network activities or on behalf of the Secretariat without the prior written consent of the Secretariat.

8. 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 undergo evaluation and approval by the Secretariat.

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.

The entity will also sign the letter of participation and the tobacco-arms disclosure statement without alteration.

9. Meetings

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

10. Termination and withdrawal

Each participant has the right to withdraw from participation in the HIM Network at any time, subject to providing one month written notice to the Secretariat and to the orderly conclusion of any ongoing activities.

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

The Secretariat 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 HIM Network shall terminate if and when such participant:

(a) no longer subscribes or adheres to the goals, objectives and/or guiding principles of the HIM 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 HIM Network, as set forth in these Terms of Reference.

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

11. Monitoring, Evaluation and Reporting

The HIM Network Secretariat will evaluate the overall processes and outcomes of the HIM Network on a regular basis, with the aim of assessing whether WHO should continue the HIM Network. The annual progress report should be submitted to WHO (HMP) for tracking and information sharing.

12. Communications

12.1 Visual Identity

To ensure that the HIM Network is deliberately communicating with one voice to external parties on topics of substance (principles, priorities, target product profiles, standards, plans and actions, funding, and all confidential information, etc.) any communication in the name of the HIM Network will take place through the Secretariat.

The HIM Network is eligible to develop a visual identifier such as a logo which will help identify the network to its audience. The visual identifier must be approved and registered by relevant departments before it is used. The visual identifier will be accompanied by the statement "WHO Managed Network" as an integral part. The right to use the visual identifier including on publications, may be granted to participants on a case-by-case basis with prior written approval of the Secretariat. Participants shall not use WHO's name, acronym and emblem. This includes, inter alia, the display of the WHO logo and name on any premises, equipment, as well as on any communication and/or training materials, training certificates, social media tools or publications.

12.2 Publications

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

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

12.3 The HIM Network website

The HIM Network has a webpage that is housed within WHO's domain. The webpage includes a list of participants entities, subject to their consent.

12.4 Intellectual property and Confidentiality

All Intellectual Property that is generated by the network shall vest in WHO. Depending on the agenda item being discussed, each participant in the HIM 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. Finance

Participants will be responsible for their own expenses in relation to all aspects of the HIM Network unless agreed otherwise by the Secretariat. If participants receive third party funding to support participation in the HIM Network meetings and activities, this must be disclosed to the Secretariat.

The Secretariat support and related day-to-day operations of the HIM Network will be financed by voluntary contributions from the members. The Secretariat may raise funds from other sources to support the work of the HIM Network, in accordance with WHO policies, 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 HIM 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 policies, rules, and procedures.

14. Confidentiality

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

15. Zero tolerance for all forms of sexual misconduct and other types of abusive conduct, fraud or corruption

All HIM Network members are expected to ensure that the conduct of their employees and any other persons engaged by them is consistent with the WHO standards of conduct. In particular, WHO has zero tolerance towards any form of sexual misconduct (an all-inclusive term encompassing all forms of sexual exploitation, sexual abuse, sexual harassment and sexual violence), other types of abusive conduct, fraud or corruption.

In this regard, and without limiting any other provisions contained herein, each HIM Network member warrants that it shall:

- (i) take all reasonable and appropriate measures to prevent any form of prohibited behaviour by any of its employees and by any other persons engaged by it to perform any activities or to provide any services for WHO on the entity's behalf. This refers, in particular, to:
 - a. sexual misconduct, as defined and addressed in the WHO Policy on Preventing and Addressing Sexual Misconduct;
 - b. other types of abusive conduct, as defined and addressed in the WHO Policy on Preventing and Addressing Abusive Conduct; and,
 - c. all forms of fraud or corruption, as defined and addressed in the WHO Policy on Prevention, Detection and Response to Fraud and Corruption.
- (ii) promptly report any actual or suspected violations of these WHO policies of which the entity becomes aware to the WHO Office of Internal Oversight Services ("IOS") at investigation@who.int;
- (iii) promptly communicate to IOS any measures that may be necessary or appropriate to protect the confidentiality and wellbeing of the survivor or victim; and,
- (iv) promptly respond to any actual or suspected violations of the above referenced WHO policies of which the entity becomes aware, and to cooperate with and to keep IOS informed of the status and outcome of any measures of protection, corrections to operations, investigation, and disciplinary action taken against any perpetrator by the entity.

16. Duration

The HIM Network will be launched upon final approval by the ADG/DDI of these Terms of Reference. Unless decided otherwise by WHO and subject to the availability of sufficient dedicated human and financial resources, the HIM network shall cease to exist on 31 December 2030.

17. Amendments

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