

Information Disclosure Policy

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1 Introduction

1. The World Health Organization (WHO) is committed to making information about its activities available to the public. WHO considers public access to information a key component of effective engagement with all stakeholders, including WHO's Member States and the public, in the fulfilment of its mandate. Public access to WHO information facilitates transparency and accountability and enhances trust in WHO's activities to further public health.
2. This Information Disclosure Policy ("this Policy") encapsulates WHO's existing rules, policies and practices regarding information disclosure. It provides necessary changes to, and supersedes and replaces, the previous version of the Information Disclosure Policy, issued in March 2017.

2 Purpose and objectives

3. This Policy is intended to ensure that information concerning WHO's activities is made publicly available, subject to the limitations set out in this Policy. To that end, this Policy explains principles, practices and procedures and defines clear categories of information according to their status with regards to public disclosure.
4. Information held by WHO is made available primarily through the WHO website, Regional Office and country office websites and webpages of WHO hosted-partnerships. Specifically, information on WHO's Programme Budget (PB) and financing is available through the Programme Budget Web portal¹. WHO documents are available through WHO's institutional repository for information sharing (IRIS)².

3 Scope of this Policy

5. This Policy applies to all WHO staff, independent of their location, grade, type or duration of appointment, and including Temporary Appointment holders, and Secondees. This Policy also applies to all WHO collaborators, notwithstanding their contractual or remuneration status: i.e., individuals who have any form of contractual relationship with WHO³, such as temporary advisers, Special Service Agreement (SSA) holders, Agreement for Performance of Work (APW) holders, consultants, interns, national partners funded by WHO, as well as third party entities such as vendors, contractors, technical partners, or others in official relations with WHO.
6. This Policy applies to all Information in the custody of WHO. For the purposes of this Policy, "Information" means any produced content, in any medium (paper, electronic or sound, visual or audio-visual recording) concerning a matter relating to WHO's activities.
7. This Policy does not apply to data collected in Member States, which are governed by WHO's data sharing policies⁴.

¹ <http://open.who.int/>

² <http://apps.who.int/iris/>

³ This includes, but is not limited to, temporary advisers, Special Service Agreement (SSA) holders, Agreement for Performance of Work (APW) holders, consultants, interns, national partners funded by WHO, as well as third party entities such as vendors, contractors, technical partners, or others in official relations with WHO.

⁴ Policy statement on data sharing by WHO in the context of a Public Health Emergency of International Concern (<https://apps.who.int/iris/handle/10665/254440>). Policy on use and sharing of data collected in Member States by WHO outside the context of public health emergencies, and policy on open access (<https://www.who.int/about/policies/publishing/data-policy#:~:text=WHO%20policy%20on%20the%20use.scientific%20and%20public%20health%20benefits.>).

8. Information jointly owned with third parties, for example, memoranda of understanding, donor agreements, and other contractual arrangements, will be made available on a case-by-case basis with the prior agreement of the parties concerned.

4 General principles of access to Information

9. Information accessible to the public shall be made available, as far as reasonable and practical, through the WHO website. An overview of information presently available to the public (or which is made available on an on-going basis) is listed in [Annex 1](#).
10. This Policy is guided by the principles of openness and transparency, such that any information concerning WHO is publicly accessible, or available upon request, unless one or more of the exceptions to the Policy applies.
11. The disclosure of data is subject to the applicable WHO policies in each case, including the WHO Information and Data Classification Policy, the WHO Policy on Cybersecurity, the WHO Policy on Sharing and reuse of health-related data for research purposes. The disclosure of personal data is addressed at paragraph 13 below.
12. Unauthorized disclosure of Information by a WHO staff member could result in disciplinary measures further to WHO Staff Rule 1110.

5 Access to Personal Data

13. The disclosure of personal data is subject to the WHO Personal Data Protection Policy, which lays down the rules and principles relating to the onward transfer and processing by and within WHO of personal data of individuals.⁵ Any requests for access to personal data are subject to, and should be made pursuant to, the relevant provisions of the WHO Personal Data Protection Policy.

6 Categories of Information

14. WHO is committed to open and transparent disclosure of information. Nevertheless, there are legal, operational and other practical considerations that are necessary to preserve the interests of the Organization, as well as those of its staff, Member States and third parties with which WHO collaborates. The application of these considerations has resulted in some exceptions to the principle of disclosure. As such, WHO information is classified by reference to three broad categories: publicly available information, information available on request, and confidential information.

6.1 Category 1: Publicly available Information

15. [Annex 1](#) sets out an overview of publicly available information (i.e. information which is available on the WHO website).
16. Information about WHO's grants and procurement awards is published on WHO's procurement website on an annual basis: [WHO Procurement - contract awards](#).

⁵ Not yet published.

6.2 Category 2: Information available on request

17. WHO makes available certain types of information on request only. In some cases, limitations may apply with regard to the types of requestor to whom information will be made available. For example, WHO's internal audit reports addressed to senior management are made available to WHO Member States upon request. In addition, restrictions (e.g. redaction of content) or conditions may be applied to the use of information available on request. [Annex 2](#) sets out an overview of information available on request.

6.3 Category 3: Confidential information

18. Information identified as "confidential" or "strictly confidential" by WHO, pursuant to the WHO Information and Data Classification Policy or other legal obligation, constitutes an exception to the principle of public disclosure. For the purposes of this Policy, "confidential" information encompasses "strictly confidential" information. [Annex 3](#) provides an overview of information considered by WHO to be confidential. The exceptions to disclosure reflect what is necessary to preserve legitimate public or private (including personal privacy) interests, and to address the interests of the Organization as a matter of priority in the event that the interests of the Organization could conflict with private interests.
19. Decisions and resolutions of the World Health Assembly and the Executive Board, may contain information disclosure limitations. Nothing in or relating to this Policy will be deemed in any way to limit or modify the application of decisions or resolutions of the WHO governing bodies.
20. Harm test and public interest override. In exceptional circumstances, WHO reserves the right to disclose information deemed "confidential". WHO may exercise this right if it determines that the overall benefits and public interest of such disclosure outweigh the likely harm to the interest(s) protected by the exception(s). This may include situations in which the disclosure of certain confidential information would, in WHO's view, be likely to avert imminent and serious harm to public health or safety, and/or imminent and significant adverse impacts on the environment. Such disclosure by WHO would be on the most restricted basis necessary to achieve the purpose of the disclosure. If the confidential information has been provided by or relates to a Member State or third party, WHO would make such disclosure only after informing the Member State or third party of its concerns and considering their plans to address and mitigate the potential harm involved.

7 Procedure for submitting requests for disclosure of information

21. Any individual or entity may request the disclosure of WHO's non-confidential information that is not otherwise available through WHO public-access websites or web-pages of WHO's hosted partnerships. Requests for disclosure of information should be clearly formulated and as specific as possible, and should identify the individual or entity making the request, the information being requested (with the title of the document, if known), the purpose of the request and the time period covered by the request, where relevant.
22. This Policy does not apply to data existing only in raw form, either physically or electronically. WHO is not able to respond to requests that require the selection and/or manipulation of data to produce content.
23. Any request for disclosure of information must be submitted to the following email address: informationrequest@who.int.

8 Conditions for facilitating requests for disclosure of information

24. WHO will endeavour to process requests for disclosure of information as promptly as possible. Depending on the complexity of the request, WHO will seek to respond to requests within 60 days of receipt of the request. WHO may charge a fee to cover the cost of material and labour related to the disclosure of information, based on the estimated costs of retrieving and supplying the information requested, which will be communicated to the requestor in advance and must be paid in advance. WHO will refund the fee if the information requested is not provided. WHO reserves the right to charge an additional fee in complex cases.
25. The controller of informationrequest@who.int shall submit the request to the appropriate internal business unit of WHO, which shall assess the request and prepare a response after consultation with the Director of the relevant Department or Office at WHO Headquarters or in the relevant Region, as appropriate.
26. If a requestor is not satisfied with WHO's response to a request for disclosure of information, he/she may submit a written request for an internal review of WHO's response, specifying the reasons for the request. Requests for internal WHO review should be submitted to informationrequest@who.int. Subject to the complexity of the request, WHO will endeavour to respond within 60 days of receipt of the request for internal WHO review. WHO may deny a request for disclosure of information, in whole or in part, if any of the following situations apply:
 - i. If one or more of the limitations set out or referred to in this Policy or its Annexes applies;
 - ii. If the request is deemed by WHO, in its sole discretion, to be an excessive demand upon WHO's resources, i.e. requiring a total of two or more days of full time staff hours (or its equivalent);
 - iii. If, in the judgment of WHO, the request is unreasonable, repetitive, abusive or vexatious; or
 - iv. If the request is related to one or more similar request(s) that have been denied by WHO.
27. If only part of the information that is responsive to a particular request for disclosure is subject to one of the limitations set out in this Policy or its Annexes, WHO may decide, at its sole discretion, that the remaining part of the information, responsive to that request, will be disclosed. In such cases, WHO will take appropriate measures to preserve the confidentiality of the information that is not disclosed.
28. The implementation of this Policy is subject to the intellectual property and other proprietary rights of WHO and third parties, including but not limited to patents, copyrights, and trademarks, which may, *inter alia*, limit the right to reproduce or exploit information.
29. The disclosure of information pursuant to this Policy shall not be construed as conveying any intellectual property or other rights to any third parties, including any requestor, of Information, which shall remain vested in WHO or parties collaborating with WHO, as the case may be.
30. No representation is made or warranty given, express or implied, as to the completeness or accuracy of information made available by WHO. Moreover, WHO does not warrant that the use of any third-party-owned individual component contained in the requested information will not infringe on the rights of those third parties. The risk of claims resulting from such infringement rests solely with the requestor/user. It is the responsibility of the requestor/user to determine whether permission is needed for any use of the information and to obtain permission from the copyright holder. In no circumstances will WHO be liable for any direct or indirect loss arising from the use of information.
31. Nothing contained in or relating to this Policy, or done pursuant to it, shall be construed as a waiver of any of the privileges and immunities enjoyed by WHO under national or international law, and/or as submitting WHO to any national court jurisdiction. Without limiting the generality of the previous

sentence, the disclosure of information in response to a request for disclosure, will not constitute a waiver, express or implied, of any of the privileges and immunities of WHO.

32. Disclosure requests as well as decisions taken with regard to disclosure requests and requests for internal review shall be logged by WHO. Responses to information requests and requests for internal review shall be copied to informationrequest@who.int
33. The WHO Director-General, or his or her designated representative, may issue internal directives, procedures or guidelines with regard to the implementation of this Policy, including with regard to the delegation of authority to disclose Information on behalf of WHO.

9 Archived information

34. Records that have been transferred to WHO Archives pursuant to WHO's Records Retention Schedules can be disclosed only if the requirements of the policy on External Access to WHO Archives are fulfilled and in compliance with the procedures for access set out in this Policy.

10 Entry into force and application of this Policy

35. This Policy shall enter into force on the date it is signed by the Director-General of WHO. It applies to information created or coming into WHO's possession after its entry into force.
36. Heads of WHO Departments and Offices are responsible for ensuring compliance with this Policy, and for defining and periodically reviewing the classification of information for which they are responsible, in accordance with this Policy.
37. This Policy will be reviewed by the WHO Secretariat within three years of entry into force.

ANNEX 1

Overview of WHO information available on dedicated WHO websites ("Publicly available information")

1. Institutional information

1.1 About WHO

1.2 The work of WHO

➤ Health programmes

- Information about health (by health topic)
- WHO Health Emergencies Programme
- Global Health Observatory (GHO) data
- Information about and reports of WHO technical meetings

➤ WHO work at country level

- Common Country Assessments/United Nations Development Assistance Frameworks (CCA/UNDAF)
- Country Cooperation Strategies developed with other UN system agencies
- Country Programme Documents

1.3 WHO Constitution and basic documents

2. Governance and Oversight

2.1 Governing Bodies

- World Health Assembly
- Regional Committees
- Executive Board
- Programme Budget and Administration Committee

2.2 Independent Oversight

- Independent Expert Oversight Advisory Committee
- Independent Oversight Advisory Committee for the WHO Emergencies Programme

2.3 Engagement with non-State Actors

- Framework of Engagement with non-State Actors (FENSA)
- Global Engagement Management tool (for Framework of Engagement with non-State Actors)

3. Management information and internal governance

3.1 Finance

- WHO Financial Regulations
- WHO Financial Rules
- WHO financial statements
- WHO Programme Budget, financing and results

3.2 Human Resources

- WHO Staff regulations
- WHO Staff rules
- WHO Human Resources strategy
- Annual reports on Human Resources

3.3 Accountability and risk management

- Annual report of the external auditor
- Annual report of the internal auditor
- WHO Financial and Programmatic reports
- Evaluations
- WHO Principal Risks
- Delegations of authority and Letters of Representation of Regional Directors
- Delegations of authority and Accountability Compacts of Assistant Director Generals

3.4 Internal senior management meetings

- Reports of the Director-General on meetings of the Global Policy Group

3.5 Internal Policies and Strategies

- Information for prospective vendors about doing business with WHO
- Information about procurement contracts for amounts in excess of US\$ 25,000 and certain grants awarded by WHO
- WHO e-Manual
- WHO Code of Conduct for responsible Research and Policy on Misconduct in Research
- WHO Personal Data Protection Policy
- WHO policy on Preventing and Addressing Retaliation
- WHO policy on Preventing and Addressing Abusive Conduct
- WHO policy on Preventing and Addressing Sexual Misconduct
- WHO Policy on Global Social Media
- WHO Policy on the registration and public disclosure of results of clinical trials funded or sponsored by WHO
- WHO Policy on Road Safety and Vehicle Management
- WHO Policy on Cybersecurity
- WHO Policy on open access
- WHO Policy statement on data sharing by WHO in the context of a Public Health Emergency of International Concern
- WHO Policy on use and sharing of data collected in Member States by WHO outside the context of public health emergencies

- WHO Policy on Sharing and reuse of health-related data for research purposes
- Guide for Staff on Engagement with Non-State Actors

Disclaimer: This list is not exhaustive. WHO may, at its discretion, following a case-by-case review, decide to classify other types of information as “Publicly available information”.

ANNEX 2

Overview of types of WHO information available on request ("Information available on request")

This comprises all remaining information which is not publicly available on the WHO website ([Annex 1](#)), but is not classified by the Organization as confidential information ([Annex 3](#)).

Access to some information in this category may be restricted to Member States only. This includes internal audit reports and reports of due diligence on non-State actors (in accordance with paragraph 42 of the [Framework of Engagement with non-State actors, resolution](#) WHA69.10).

ANNEX 3

Overview of types of WHO information considered to be confidential ("Confidential information")

Confidential information is not normally subject to disclosure.

Confidential information encompasses "strictly confidential information", which applies to data assets and information that are highly sensitive and whose unauthorized disclosure, alteration or destruction could represent a significant risk of grave damage to the Organization, Member States or individuals.

The following categories of information are classified as "Confidential information":

1 Personal information

WHO does not provide access under this Policy to information and documentation pertaining to either staff members or collaborators that has not already been made public by a staff member, collaborator or third party, including:

- Private and employment-related information beyond the title of a position, including human resources records, medical records, salaries and benefits, personal communications;
- Personal information received from individuals performing work for WHO including technical and scientific experts;
- Information on staff appointment and selection processes;
- Specific information on claims and internal conflict resolution proceedings;
- Personal declaration of interest forms and related internal deliberations or similar issues submitted by WHO staff members, as well as other individuals performing work for WHO and experts participating in WHO technical meetings;
- Prior to conclusion of a disciplinary process following an investigation, personally identifiable information of a subject of an investigation, allegations and/or investigations of allegations of misconduct (other than as reported to WHO Governing Bodies, or as required on a confidential basis to comply with inter-agency protocols/mechanisms, international or humanitarian obligations, or as a condition of donor funding).

2 Security and safety

- Information, the disclosure of which may endanger the life, safety or security of any individual, or
- Information, the disclosure of which may endanger the security of Member States or the public or prejudice the security or proper conduct of any operation or activity of WHO;
- Information, the disclosure of which may compromise the security and safety of any international organization (or its personnel) with which WHO collaborates;
- Information, the disclosure of which may compromise the security and safety of any non-State Actor (or its personnel) with which WHO collaborates;
- Information, the disclosure of which may jeopardize WHO property;
- Information about logistical and transport arrangements related to WHO shipments of its property and documents and the shipment of staff members' personal effects.

3 Information concerning WHO Member States or other intergovernmental organizations

- Information, the disclosure of which may adversely affect WHO's relations with a Member State or other intergovernmental organization;

4 Information obtained or shared in confidence

- Information received from or sent to Member States or third parties under an expectation of confidentiality;
- Information obtained in confidence from a government, international organization or other entity or person that would or would be likely to, if disclosed, compromise the Organization's relations with that party.

5 Confidential Internal documents

- Internal email correspondence;
- Internal reports, analyses, reviews, notes for the record of internal meetings or meetings with third parties, statistics prepared solely to inform WHO's internal decision-making processes;
- Investigation reports of the WHO Internal Oversight Services (IOS);
- Medical records and personal medical information that is subject to doctor/patient confidentiality;
- Requests for ethics advice addressed to, and ethics advice provided by, the Ethics Unit.
- Requests for advice addressed to, or provided by, the Office of the Ombudsperson and Mediation Services (OMB);
- Internal policy, guidelines, standard operating procedures, unless otherwise decided;
- Internal telephone directories;
- Information pertaining to corporate administrative matters.

6 Deliberative information

- Information concerning WHO's own internal deliberations, communications (including internal inter-office or intra-office documents such as emails, memos, and draft documents);
- Documents relating to the communications, deliberations and decisions of WHO internal bodies and internal advisory committees, including but not limited to the Research Ethics Review Committee, the Guidelines Review Committee, the Contract Review Committee, the Advisory Committee on Compensation Claims, the Global Advisory Committee on formal complaints of abusive conduct, and other technical committees;
- Contributions to and deliberations of WHO expert panels and committees, technical advisory groups, including communicators between WHO and its experts;
- Internal management documents produced by WHO for the information of senior management including without being limited to internal briefings, reports, self-assessments, corporate risk register;
- Communications of Member States' representatives and/or their offices;
- WHO's communications and deliberations with Member States or other entities with which WHO collaborates.

7 Privileged information

- Information covered by legal privilege, or the disclosure of which may expose WHO to legal risk;
- Legal advice and requests for legal advice;
- Information related to due process rights of individuals involved in internal audits and investigations⁶;

⁶ However, summarized information relating to internal audits and investigations is publicly disclosed to the competent governing body

8 Financial information

- Documents, analyses, correspondence or other information prepared for financial and budgetary transactions, or for the development of internal or external financial reports;
- Banking or billing information of WHO offices, Member States, WHO's contractors and vendors (companies or individuals), including consultants.

9 Commercial information

- Commercial information which, if disclosed, may harm either the financial interests of WHO or those of third parties;
- Information relating to WHO's procurement processes (except for publicly available information listed in Annex 1, [section 3.5](#)), such as information submitted by prospective bidders, tenders, proposals or price quotations;
- Information relating to the WHO Pre-Qualification of Medicines Programme (PQP), including but not limited to information and data submitted by manufacturers about products submitted for evaluation;
- Information that is subject to obligations of confidentiality or non-disclosure pursuant to confidentiality agreements or other contractual or legal obligations of the Organization or which could, if disclosed, expose the Organization to disproportionate legal risk or violate applicable law or the Organization's internal regulations, rules and procedures.

10 Other

- Other kinds of information, which because of its nature, content or the circumstances surrounding its creation, use or communication is deemed confidential in the interests of WHO or third parties;
- Passwords, pins and other access codes for WHO systems.

Disclaimer: This list is not exhaustive. WHO may, at its discretion, following a case-by-case review, decide to classify other types of information as "Confidential information".