



Dear Dr Koplan,

Since 2006, the World Health Organization (WHO) and the International Association of National Public Health Institutes (IANPHI) have engaged in discussions to establish, as well as conducting, a set of collaborative activities directed towards our mutual goal of strengthening public health capacity at both national and global levels.

Given the productive nature of this relationship, we would like to further formalize means to increase our joint work. Through this letter, we affirm our desire to collaborate and to identify the methods of work and specific joint activities that will be undertaken each year, and reviewed and updated by both parties each calendar year.

WHO and IANPHI have advocated that effective structures and institutions within the health sector are essential to protect and improve the health status of populations. Notably, public sector institutions dedicated to carrying out population-based public health functions are often underfunded and have limited capacity to execute their missions. In the recent decades, some public health responses to crises have revealed signs of limited, outdated and inefficient technologies and capacities. It is therefore important to identify essential public health functions for building sustainable health systems and ensuring the health of the population. These efforts underpin the scope of WHO and IANPHI's collaboration given the comparative advantages of both institutions.

Joint work between WHO and the IANPHI is of interest to a number of WHO Clusters, regional and country offices, and is central to WHO's mission to support countries. Similarly, IANPHI's mission is to enable and support a global network of national public health institutes.

WHO and IANPHI will place emphasis on developing a framework for core competencies for and delivery of public health functions in national health system settings, as well as to support existing key health policy and programmatic efforts such as primary health care. As part of this, we will jointly analyse and present recommendations on core competencies for National Public Health Institutes.

Joint WHO-IANPHI work will focus on supporting national public health institutes' capacity to develop, implement and monitor national public health strategies, for example food safety and health promotion.

WHO and IANPHI will also seek to enhance overarching global capacity and efficiencies of scale that rely on global cooperation and concerted action, for example those that are beneficial to controlling disease outbreaks (H1N1 and others), vaccine production, controlling of non-communicable diseases, and addressing the social determinants of health.

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WHO and IANPHI will establish mechanisms to develop a joint, prioritized annual plan identifying key areas of collaboration, respective responsibilities, and means of monitoring progress. The annual framework will be further reviewed and agreed among the President and Vice-President of the IANPHI and the Assistant Director-General for Information, Evidence and Policy or their designates during a meeting on the occasion of the IANPHI annual meeting or at a separate meeting at WHO.

The implementation of the collaborative activities as set forth in the annual plan will be subject to the availability of necessary and sufficient human and financial resources.

To ensure that our relationships are documented and our expertise linked, we will consistently monitor and update agreed areas of collaboration.

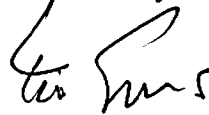
To facilitate our collaboration, WHO has designated Ms Ramesh Shademani and IANPHI has similarly designated Ms Courtenay Dusenbury and Dr Pekka Jousilahti to serve as the WHO/IANPHI Focal Points. Any change of a designation by a party will be communicated to the other party.

Our collaboration as set forth in this letter will start on the date of your signature of this letter and it will continue three years from that date until terminated earlier by a party subject to one month's prior written notice.

Any dispute relating to the interpretation or application of this collaboration arrangement shall, unless amicably settled, be subject to conciliation. In the event of failure of the latter, the dispute shall be settled by arbitration. The arbitration shall be conducted in accordance with the modalities to be agreed upon by the parties or, in the absence of agreement, in accordance with the UNCITRAL Arbitration Rules. The parties shall accept the arbitral award as final.

If you agree to the content of this letter, please countersign it here below and return one copy to me at your earliest convenience.

Yours sincerely,



Dr Timothy Evans
Assistant Director General
Information, Evidence and Research

Agreed and signed on behalf of the International
Association of National Public Health Institutes
(IANPHI)



Dr Jeffrey Koplan
President, International Association of National Public Health Institutes

26 October 2009