

### Governance and Work structure of the WHO Action Network on Measuring Population and Organizational Health Literacy (M-POHL)

Version: November 2023 - agreed at the General Assembly on 23 November 2023

### Content

1	Aims of M-POHL3		
2	2.1 B	member countries	
3	M-POHL	M-POHL General Assembly5	
4	Cooperation with WHO-Europe5		
5	5.1 B 5.2 R	associated members	
6	6.1 B	observers	
7	7.1 B		
8	8.1 B	Board members	
9	9.1 F	onal Coordination Center (ICC)	
10	M-POHL projects1110.1Initiating a project1110.2Responsibilities (rights and obligations)11		
11	M-POHL	Working Groups11	





12	Collaboration with other networks or organizations12	
13	M-POHL communication structure1213.1M-POHL Meetings1213.2M-POHL website and newsletter13	
14	M-POHL publications and presentations13	
15	<ul> <li>M-POHL database and tools</li></ul>	



### 1 Aims of M–POHL

The aims of the WHO Action Network on Measuring Population and Organizational Health Literacy (M-POHL) are to:  $^{1}$ 

- promote health literacy by strengthening the collaboration between research and policy,
- address the personal health literacy of the general population and of patients,
- institutionalize regular, high-quality internationally comparative population health literacy surveys,
- address the health literacy-friendliness of systems and organizations,
- support the collection and analysis of data on organizational health literacy (health literacy-friendly structures, processes, and capacities), and
- foster evidence-informed policy and practice.

### 2 M–POHL member countries

M-POHL is a network of member countries from the WHO-European Region under the auspices of WHO-Europe (see Art. 4.1).

#### 2.1 Becoming an M-POHL member country

- 1. Only countries of the WHO-European region can become members.
- 2. To draw on expert skills in policy and research, each member country must be represented by a research representative and a policy representative, who both should be supported by the Ministry of Health of the respective country, if possible.
  - a. The research representative (preferably the national principal investigator (PI) of an M-POHL project in which the country participates) should be a senior researcher with experience in health literacy measurement, ideally with measuring population and organizational health literacy, and be related to a research institution.
  - b. The policy representative (PR, policy expert) should be linked to or be part of the national health administration of his / her country and be able to impact on national decisions in relation to health literacy measurements and interventions.

<sup>&</sup>lt;sup>1</sup> Based on M-POHL (2018): Concept Note for a WHO Action Network on measuring population and organisational health literacy (M-POHL Network) <u>https://m-pohl.net/sites/m-pohl.net/files/2020-08/Con-</u> cept%20Note.pdf

3. Interested countries can apply in writing to the International Coordination Center (ICC, see Art. 9). Membership will be decided by the General Assembly (see Art. 3) based on a proposal of the M-POHL co-chairs (see Art. 7.2).

and Organizational Health Literacy of WHO-Europe

4. Any member country may terminate their participation in the M-POHL network by written notification to the co-chairs via the ICC. In addition, the General Assembly can decide to terminate participation of any member country contradicting M-POHL rules and regulations, based on a proposal by the M-POHL co-chairs.

### 2.2 Responsibilities (rights and obligations) of M-POHL member countries

- 1. M-POHL member country representatives (PIs and PRs) should have a genuine interest in health literacy (measuring population and organizational health literacy; policy development on improving health literacy on population and organizational level) and have to participate in at least one M-POHL project (see Art. 10).
- 2. All costs for the participation of a member country in all M-POHL activities must be covered by the member country through the institutions who represent this member country in M-POHL.
- 3. M-POHL member countries have the right to participate in all M-POHL projects. For each project, project participation requires signing a Joint Project Agreement and the payment of the project fee which covers the international coordination, administration, and support of the project, as well as a pro rata contribution to the administration and organization of the M-POHL network.
- There is no specific country membership fee for the period from 2023 2027. Costs for the administration and organization of the M-POHL network are covered by project fees of the member countries participating in M-POHL projects in the period from 2023 - 2027.
- 5. The representatives of the M-POHL member countries (PIs and PRs) are members of the M-POHL General Assembly (see Art. 4) and have the right to vote on all joint decisions of M-POHL (see Art. 4).
- 6. The representatives of the M-POHL member countries may stand for election as M-POHL Network co-chairs (see Art. 7) and Advisory Board members (see Art. 8).
- 7. In case of changes of a PI or PR:
  - a. if the successor PI or PR is a staff member of the same institution/organization as the predecessor: the M-POHL chairs and the ICC need to be notified and in-formation on the successor's expertise has to be provided;
  - b. if the successor PI or PR represents a new institution/organization: the M-POHL chairs and the ICC need to be informed. In addition to information on the successor's expertise, also a description of the affiliated institution/organization has to be provided.





The M-POHL chairs and the ICC will check the eligibility of the affiliated institution/organization and the successor also in relation to FENSA (Details on FENSA are available at <u>WHO's engagement with non-State actors</u>). The M-POHL General Assembly will be notified about any changes at the next possible meeting.

### 3 M-POHL General Assembly

- 1. The General Assembly of M-POHL is constituted of the representatives of the M-POHL member countries (PIs and PRs), the M-POHL co-chairs, a representative of WHO-Europe and the ICC, represented by its international PI.
- 2. M-POHL Action Network related decisions are taken by the General Assembly. This includes especially:
  - a. Electing the co-chairs.
  - b. Electing the Advisory Board members.
  - c. Electing the ICC.
  - d. Accepting new members or observers (see Art. 6).
  - e. Deciding on the implementation of M-POHL Working Groups.
  - f. Deciding on the implementation of M-POHL projects, their general framework and Terms of References.
  - g. Deciding on the funding structure for the M-POHL network and its projects.
  - h. Deciding on the amount of fees for participation in each project.
  - i. Any other aspect of strategic relevance to M-POHL.
- 3. Each member country has one vote in the M-POHL General Assembly.
- 4. The two co-chairs each have one vote.
- 5. The representative of WHO-Europe and the ICC have permanent seats without voting rights.
- 6. Decisions are ideally taken by consensus. In cases where consensus cannot be reached decisions are taken by simple majority vote.
- 7. M-POHL will have at least one General Assembly meeting annually, either in person or virtually, in conjunction with M-POHL network meetings (see Art. 13.1). If strategic decisions are needed in between, tele voting or voting per e-mail is possible.

### 4 Cooperation with WHO-Europe

M-POHL is an action network under the auspices of WHO-Europe.

- M-POHL closely cooperates with the WHO-European Regional Office via communication by its co-chairs and the ICC, and by inviting a representative of the Regional Office to all M-POHL meetings in order to:
  - c. keep WHO-Europe fully informed about developments within M-POHL,



- d. consult with WHO-Europe on any proposals to establish links or collaboration with external institutions and/or potential international partners,
- e. consult with WHO-Europe on proposals to allow non-WHO-European countries to participate in M-POHL.
- f. consult with WHO-Europe on M-POHL's strategic orientation.
- g. participate in WHO-Europe events and conferences where appropriate.
- 2. WHO-Europe:
  - a. informs M-POHL about its use and dissemination of M-POHL project findings,
  - b. informs M-POHL on WHO's health literacy interests and policies,
  - c. establishes or extends links between M-POHL projects and national governments taking interest in and aiming to support favorable conditions for measuring and improving health literacy in the WHO-European Region.

### 5 M-POHL associated members

#### 5.1 Becoming an associated member

- 1. Countries outside the WHO-European region that have an outstanding interest in measuring population and organizational health literacy and are willing to participate in at least one of the M-POHL projects, can become associate members.
- 2. The associate member country must be represented by a research representative and a policy representative, both of whom should be supported by the Ministry of Health of the respective country, if possible.
  - a. The research representative (preferably the national principal investigator (PI) of an M-POHL project in which the country is participating) should be a senior researcher with experience in health literacy measurement, ideally in population and organizational health literacy, and affiliated with a research institution.
  - b. The policy representative (PR, policy expert) should be affiliated with or part of the national health administration of his / her country and be able to impact on national decisions regarding health literacy measurements and interventions.
- 3. Interested countries can apply in writing to the International Coordination Center (ICC, see Art. 8). The eligibility of the affiliated institution/organization of the PI and PR also in relation to FENSA will be checked. The associate membership will be decided by the General Assembly based on a proposal of the M-POHL co-chairs (see Art. 7.2).
- 4. In addition, the project consortium of the project that the associate member wants to join must agree that the applicant country can join the project as an associate member.
- 5. Any associate member country may terminate its participation in the M-POHL network by written notification to the co-chairs via the ICC. In addition, the General Assembly can decide to terminate the participation of any associated member country contradicting M-POHL rules and regulations, based on a proposal by the M-POHL co-chairs.



### 5.2 Responsibilities (rights and obligations) of M-POHL associated member countries

- 1. M-POHL associated member country representatives (PIs and PRs) should have a genuine interest in health literacy (measurement of population and organizational health literacy; policy development to improve health literacy at the population and organizational level) and have the resources to participate in at least one M-POHL project (see Art. 10).
- 2. All costs for the participation of an associate member country in all M-POHL activities must be covered by the associate member country through the institutions representing the associate member country in M-POHL.
- 3. M-POHL associated member countries have the right to participate in all M-POHL projects. For each project, participation requires signing a Joint Project Agreement and the payment of a set project fee, which covers the international coordination, administration, scientific and technical support of the project.
- 4. The rights and obligations of M-POHL associate member countries differ from those of M-POHL members in two concerns: (1) Since M-POHL is a network of the WHO European Region, associate member countries cannot vote in M-POHL Action Network related decisions of the General Assembly and (2) their representatives cannot stand for election as M-POHL Network co-chairs (see Art. 7) and Advisory Board members (see Art. 8).
- 5. In case of a change of PI or PR, the same rules apply for associate member countries as for M-POHL member countries (see Art. 2.2).

### 6 M–POHL observers

#### 6.1 Becoming an observer

- 1. Observer status can be given to representatives of:
  - a. WHO-Europe countries within the WHO-European region,
  - b. countries outside the WHO- European region,
  - c. international institutions/organizations, and
  - d. to individuals actively engaged in health literacy policy, research, or practice.
- 2. Observer status can be applied in writing to the M-POHL co-chairs via the ICC.
- 3. Observer status will be proposed by the co-chairs after being reviewed by the ICC and granted by the General Assembly.
- 4. Any observer may terminate participation in the M-POHL network by written notification to the co-chairs via the ICC. In addition, the General Assembly can decide to terminate participation of any observer contradicting M-POHL rules and regulations, based on a proposal by the co-chairs.



5. Members of national (project) teams of participating countries (in addition to the national PI and PR) are considered as observers and do not need any approval by the General Assembly, e.g., for participating in M-POHL meetings.

and Organizational Health Literacy of WHO-Europe

### 6.2 Responsibilities (rights and obligations) of observers

- 1. Observers can attend M-POHL network meetings but not the General Assembly.
- 2. Observers receive M-POHL related newsletters.
- 3. Observers may be invited to participate in M-POHL project meetings (see Art. 10) by the consortium of the respective project and in agreement with the working group leads via the ICC (see Art. 9).
- 4. Observers cannot participate in any decision-making of the M-POHL network or its projects.
- 5. There is no fee for observers for the period from 2023 2027.

### 7 M-POHL co-chairs

#### 7.1 Becoming an M-POHL co-chair

- 1. M-POHL is represented by two co-chairs: One co-chair represents policy interests, and one represents research interests.
- 2. Co-chairs should have international expertise in health literacy measurement and health literacy policy, as well as the motivation and commitment to take the M-POHL network forward, to develop theoretical and empirical aspects of health literacy measurement and improvement, and/or international policy frameworks related to health literacy.
- 3. The research co-chair should not be employed by the ICC organization.
- 4. M-POHL co-chairs will be elected by the General Assembly for a term of 3 years.
- 5. Co-chairs can step back any time before the end of their 3-year term, which would result in an election for replacement.
- 6. Co-chairs' term can be extended for an additional term of 3 years, with a maximum of two successive terms. Then a break of 3 years is required before a co-chair can stand as candidate again.

### 7.2 Responsibilities (rights and obligations)

Co-chairs work together to ...

- 1. represent the M–POHL network internationally.
- 2. guarantee the smooth progress of the M-POHL network.



- 3. will inform WHO-Europe on all strategic matters relating to M-POHL.
- 4. propose the agenda for, and chair, the General Assembly meetings and M-POHL network meetings.
- 5. chair the Advisory Board.

6. closely cooperate with the ICC which supports the co-chairs to fulfill their responsibilities. The co-chairs' contribution to M-POHL is pro bono.

### 8 Advisory Board members

- » The Advisory Board should consist of at least 2-3 PIs, 2-3 PRs and a representative of the WHO-Europe.
- » The Advisory Board is chaired by the M-POHL co-chairs and supported by the ICC.

### 8.1 Becoming an Advisory Board member

- 1. The M-POHL co-chairs will invite the PIs and PRs to apply for Advisory Board membership.
- 2. Any interested M-POHL member country representative (PIs and PRs) can apply for becoming an Advisory Board member to the M-POHL co-chairs via the ICC.
- 3. A national team member of a member country with noted expertise in health literacy can also apply. The application of a team member needs the approval of the national PI and PR.
- 4. The General Assembly will elect the Advisory Board based on a proposal by the co-chairs.
- 5. Advisory Board members are elected for a 3-year term.
- 6. Advisory Board membership requirements: representative of a M-POHL member country, expertise in health literacy research or policy, and preferably past or current active participation in one or more M-POHL projects.

### 8.2 Responsibilities (rights and obligations)

- 1. Advisory Board members advise the M-POHL co-chairs and the ICC regarding strategic, research and policy directions and on the development of theoretical and empirical aspects of its projects.
- 2. They should participate in 2 to 3 Advisory Board meetings per year.
- 3. They should be prepared to share their expertise with the M-POHL network.
- 4. Advisory Board members will work pro bono.
- 5. The Advisory Board can invite additional experts ad hoc to contribute to specific discussions on specific topics.



### 9 International Coordination Center (ICC)

### 9.1 Functions, pre-conditions, and selection of the ICC

- 1. The ICC coordinates and administrates the activities of the M-POHL network in cooperation with the M-POHL co-chairs and the Advisory Board.
- 2. Any eligible organization (see Art. 9.1.4) from an M-POHL member country can apply for serving as the ICC for example, universities or university departments, national institutes of public health, independent research units.
- 3. Organizations can be self-nominated or suggested (with the candidate's agreement) by representatives of member countries.
- 4. Applying organizations must demonstrate that they have the expertise and capacity to provide the necessary research and organizational/administrative support for the M-POHL network and its projects.
- 5. Applying organizations must demonstrate financial and organizational stability.
- 6. The ICC is elected by the General Assembly for a period of 5 years.
- The ICC is financed by the M-POHL project participants. Ideally, the ICC applicant also contributes to the costs with a financial contribution from its own resources. In general, funding sources need to comply with the WHO Framework for the Engagement of Non-State Actors (FENSA) (Details on FENSA are available at <u>WHO's engagement with non-State actors</u>).

### 9.2 Responsibilities (rights and obligations)

- 1. The ICC coordinates, administrates, and supports M-POHL activities for achieving the M-POHL aims in cooperation with the co-chairs and the Advisory Board.
- 2. This includes:
  - a. communication with M-POHL member countries and observers.
  - b. organization of M-POHL meetings and General Assembly meetings.
  - c. administration of collaboration and coordination with WHO-Europe.
  - d. maintenance of the M-POHL website & developing and disseminating the news-letter.
  - e. maintenance and update of databases and archives for all M-POHL activities, publications, and external use of data and tools.
  - f. supporting dissemination and learning activities regarding past projects (HLS<sub>19</sub>, HLS 2022) and current/future projects.
- 3. The ICC coordinates, administrates, and supports all M-POHL projects.



### 10 M-POHL projects

### 10.1 Initiating a project

- 1. The aims of M-POHL are realized by executing specific projects concerning population and organizational health literacy measurement and improving health literacy.
- 2. Representatives of M-POHL member countries and the Advisory Board can propose projects to the co-chairs via the ICC.
- 3. The General Assembly decides on initiating specific M-POHL-projects, their general framework, and Terms of References, including aims, timeline, and budget, based on a proposal of the co-chairs and the ICC. Based on that a project consortium is established.

### 10.2 Responsibilities (rights and obligations)

- 1. For each project, there will be specific Terms of References and a Joint Project Agreement to regulate project participation and the rights and obligations of participating countries.
- 2. Project participants are expected to actively participate in and contribute to the development of the projects and execute and deliver their national part of the joint effort.
- 3. Usually, project participants must pay fees for the international coordination, administration, and support of the project, based on the national GNI of the country.
- 4. Project participants can lead and join project-related working groups (see Art. 11) in accordance with the respective project's Terms of References.
- 5. Project participants can participate in project-related decisions in accordance with the respective project's Terms of References.
- 6. Project participants are obliged to make their data available to the M-POHL international database (see Art. 15).

#### 11 M–POHL Working Groups

- 1. Specific tasks for M-POHL are conducted by specific Working Groups for each M-POHL project, for underlying research concepts and theories, for methodological issues, for policy issues, thematic areas, and for formulating policy recommendations as well as for the preparation of new joint projects. These Working Groups are established by decision of the General Assembly, based on a proposal of the co-chairs.
- 2. Each Working Group elects a lead and co-lead. They set the agenda for the Working Group, coordinate its activities, ensure that deadlines are met, initiate communication with other Working Groups when needed, and report on the Working Group to the co-chairs, the ICC and at the M-POHL meetings.
- 3. Working Groups can establish sub-working groups if needed.

4. Representatives of M-POHL member countries and proposed experts from M-POHL observers are invited by the Working Group lead and co-lead to join the Working Group according to their specific fields of interest and expertise.

and Organizational Health Literacy of WHO-Europe

5. The ICC supports collaboration between Working Groups to facilitate addressing crosscutting issues.

### 12 Collaboration with other networks or organizations

- 1. Collaboration with other networks or organizations that meet WHO's FENSA criteria can be established to support M-POHL's aims (see Art. 1).
- 2. Any collaboration needs the agreement of the General Assembly.
- 3. Any collaboration will be regulated by a memorandum of understanding (MOU) that outlines the rights and obligations of the collaborating partner and M-POHL in the context of the collaboration.
- 4. In case of sharing M-POHL data, see Art. 15.3.

### 13 M-POHL communication structure

#### 13.1 M-POHL Meetings

- 1. M-POHL meetings are important for communication and cooperation within the M-POHL network either for the full network, the General Assembly or for specific M-POHL projects consortiums.
- 2. M-POHL meetings are organized twice a year or as needed for the coordination of work and scientific exchange within the network.
- 3. The ICC, in cooperation with the M-POHL co-chairs, is responsible for planning and coordinating the content of M-POHL meetings, including their agenda.
- 4. If meetings are held online, the ICC is also responsible for organizing the online technology for the meeting.
- 5. In the case of face-to-face meetings, M-POHL member countries are encouraged to take turns in hosting the meetings which includes providing a meeting venue (meeting rooms, equipment rental etc.), refreshments and staff to support the preparation and organization of the meeting. In particular, those M-POHL member countries that wish to enhance the regional, national, and international visibility of health literacy and / or of M-POHL projects are encouraged to host a meeting.
- 6. In the case of face-to-face meetings, participants must cover their own travel, accommodation, and subsistence costs.



### 13.2 M-POHL website and newsletter

- 1. The M-POHL public website is managed and maintained by the ICC.
- 2. A quarterly M-POHL newsletter with updates on M-POHL activities and projects is prepared by the ICC and distributed to the M-POHL member countries, observers and interested experts.

### 14 M-POHL publications and presentations

Dissemination of results from M-POHL projects is an important part in fulfilling the aims of M-POHL and its projects and may take many forms - from reports and presentations to publications in peer-reviewed journals.

M-POHL project participants will follow a set of general publication rules:

- 1. In each M-POHL project, publications that are based on international results must be approved by all PIs and PRs of the countries participating in the respective project (in the following shortly called project representatives) before the publications are submitted or made public. The project representatives must give fair reasons/substantiation if they choose to withhold a publication.
- 2. Project representatives working within the topic area of a planned publication based on international data shall be invited to collaborate in and contribute to the publication.
- 3. Presentations at conferences that are based on international M-POHL data before these data are published must a priori be reported to and approved by the ICC.
- 4. No international restrictions exist on the release of findings from national results as long as the interests and aims of the project consortium are not violated. The national publications should be made available via the M-POHL website and newsletter. If the publications are not in English, an English abstract would be appreciated.
- 5. The ICC will set up and maintain a publication database where all scientific publications, journal articles, PhD theses, etc. focusing on international data will be registered and archived as soon as they are published.
- 6. The Vancouver Convention on Authorship should be followed (<u>https://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-</u> <u>the-role-of-authors-and-contributors.html</u>). The four main regulations are:
  - a. substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
  - b. drafting the work or revising it critically for important intellectual content; AND
  - c. final approval of the version to be published; AND

 agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

and Organizational Health Literacy of WHO-Europe

- 7. Concerning these rules, co-authorship and acknowledgment must be negotiated between lead-authors and potential co-authors. It is important to find an appropriate and fair or-der for the different contributions of many co-authors. A potential solution is to alphabetically mention the co-authors between first and second lead author and last author.
- 8. For papers which are partly based on chapters in an already published international M-POHL report, all authors who contributed to theses chapters must be invited for co-au-thorship and/or acknowledgement.
- 9. Acknowledgement should be given to:
  - a. the national team or institution or funder who translated, collected, and provided the national data.
  - b. contributors of specific data analyses.
  - c. colleagues who contributed to underlying chapters of an already published international report but are not co-authors of the publication.
- In any case, for publications and presentations using international data, the M-POHL project consortium must be named at the end of the co-author listed by writing "for the M-POHL project consortium" (naming the exact project, e.g., for the HLS<sub>24/25</sub> consortium).

### 15 M-POHL database and tools

### 15.1 Rules for using the international M-POHL project database and tools

The ICC and the PIs of the M-POHL member countries carry the responsibility to ensure that the international M-POHL project database and tools developed within M-POHL projects are used according to their joint rules. The procedures outlined below shall ensure careful monitoring and adequate internal and external use of the international database and tools.

### 15.2 Internal use of M-POHL-projects' data, database, and tools

- 1. The international data are stored in the international database administered and hosted by the ICC.
- 2. Each M-POHL project has a separate database. Pls or PRs can only access the database of the project(s) they participate in.
- 3. The inclusion of national data in the international database implies that permission is granted to use these data for an international report and for subsequent international publications.

4. Pls are granted access to the international database upon request to the ICC immediately after the database has been set up. A specific data exchange agreement must be signed.

and Organizational Health Literacy of WHO-Europe

- 5. For a period of three years after the publication of an international report on a particular M-POHL project, only the PIs and PRs of that M-POHL project have access to the international project database. After that period, data will be made available (upon request to the ICC and after consultation with the co-chair for researchers from non-participating countries). A specific data exchange agreement must be signed.
- 6. Any publication of findings based on data from the international M-POHL database must comply with the M-POHL rules and procedures on publications as laid out in this document (see Art. 14). The ICC and the respective member country representatives are responsible for safeguarding these rules.
- 7. For tools (e.g., questionnaires) developed within an M-POHL project, rules on the internal and external use of the tools must be defined as part of the Terms of References of the project that developed the tools.

### 15.3 External use of international M-POHL data and tools

- Participants in the M-POHL projects are committed to making full use of the rich resource of international research data and tools. Therefore, once the international data and tools are open for external use, ways should be developed to increase their usage by external researchers.
- 2. To ensure the accurate and proper use of the data and tools, the following terms are in place:
  - a. Access to specific international data and tools are granted only to academic or public sector researchers. Access will not be given, under any circumstances, to institutions with commercial interests. M-POHL members and the ICC too are prohibited from any commercial use of the international data and tools.
  - b. Three years after an international report is published, access to international data can be requested by qualified external research institutions.
  - c. The mechanism for access to data and tools will be published on the M-POHL website.
  - d. A specific data exchange agreement must be signed by applicants.