

Part 8, Article X1: Participation

(a): States should establish and maintain processes and mechanisms to enable members of the public to have meaningful avenues to participate in developing, monitoring, and evaluating laws, regulations, policies, and programs, and international agreements, that may [are likely to] affect [have an impact on] their right to health.

(b) These avenues of participation shall be developed and, as needed, changed or reinforced through processes that meet the standards for such avenues of participation, as specified in in Article X1(c).

(c) These avenues of participation shall:

- i) Provide a genuine opportunity to influence decisions related to the development, substance, implementation, and enforcement of the laws, regulations, policies, programs, and international agreements at issue;
- ii) Exist at local and other sub-national levels, nationally, and for decisions affecting bilateral and multilateral agreements, whether binding or non-binding, for which the state is participating in negotiations or in preliminary discussions that may lead to negotiations and an agreement;
- iii) Ensure that marginalized and disadvantaged populations have the full opportunity to participate, including, as appropriate, through measures described in Article X3;
- iv) Include means of participation for non-governmental [civil society] organizations [,as such organizations may represent groups of people, including people who may not be able to directly participate themselves, and may be mandated to protect and promote people's right to health]
- v).....

(d) States shall periodically [every X years] review the effectiveness of these avenues of participation and make changes accordingly.

i) This review shall be undertaken with the meaningful participation of members of the public, including members of marginalized and disadvantaged populations, and non-governmental [civil society] organizations.

ii) The findings from this review shall be made publicly available, including on the Internet.

Article X2: (a) States should consider, as possible avenues of participation, the following mechanisms and processes:

- i) Legislative hearings;
- ii) Notice and comment periods;
- iii) Individual and small group meetings with public officials;
- iv) Public meetings with public officials (such as town hall meetings);
- v) Health facility committees that include members of the public and civil society;

- vi) Village, district, national, and similar health committees that include members of the public and civil society;
- vii) Health-related committees, task forces, or working groups that have a role in policymaking and are comprised of members of the government as well as the public, including members of marginalized and disadvantaged populations, and non-governmental [civil society] organizations;
- viii) Participatory budgeting;
- ix) Citizens' juries;
- x) ...

(b) The Secretariat shall develop guidance and advise states on possible avenues of participation.

Article X3: States shall take special measures to ensure that members of marginalized and disadvantaged populations have at least as much opportunity to meaningfully participate in developing, monitoring, and evaluating laws, regulations, policies, and programs, and international agreements that may [are likely to] affect [have an impact on] their right to health as other members of public and as any organizations that may provide input.

(a) These measures may include:

- i) Providing funding to enable participation in meetings with policymakers and other avenues of participation that require individual expenditures;
- ii) Increasing access to the Internet and other [information and] communications technology for members of these populations through funding, direct provision, or other effective means;
- iii) Ensuring that policymaking processes proceed on a timescale that enables these populations to meaningfully participate;
- iv) Information and communication campaigns working with and targeting these populations to ensure that they are aware of opportunities to participate;
- v) Using modes of communication and opportunities to participate that are specifically tailored to these communities, including with respect to language, culture, format, and level of formal education [OTHER CHARACTERISTICS?];
- vi)

(b) The Secretariat shall develop guidance and advise states on special measures to ensure the meaningful participation of marginalized and disadvantaged populations.

(c) States shall take into special consideration and provide additional weight in their health-related policymaking processes to the perspectives expressed by members of marginalized and disadvantaged populations, including with respect to their priorities, policy preferences, and views on ways in which policies will likely impact them, their rights, and their health.

Article X4 (a): States shall take all necessary measures to ensure that all avenues of participation are accessible in order to enable full and effective participation on a non-discriminatory basis.

(b) States shall facilitate such accessibility through measures such as free or affordable and accessible transportation, universal design and accessibility of spaces for participation, visual aids, accessible signage in multiple formats to assist participants in reaching locations for participation, interpreters and facilitators and material in multiple formats and languages to ensure full understanding of all communications.....
[OTHERS?]

(c) The Secretariat shall develop guidance and advise states on special measures to ensure such accessibility.

Article X5: (a) Members of the public, including members of marginalized and disadvantaged populations, and non-governmental [civil society] organizations, shall have the opportunity to recommend avenues of participation, which may build on or be in addition to any that otherwise exist.

(b) The state shall provide public channels, including on the Internet, for members of the public to offer these recommendations.

(c) The government shall, within a reasonable time period, respond to recommendations on avenues of participation and shall provide a rationale for any decisions taken with respect to such recommendations.

i) The state shall respond through the public channels developed under Article X5(b).

ii) Exceptions to public responses may be made as needed to protect privacy and confidentiality.