



NEWS

World Health Assembly hears warnings over WHO's relationship with industry

Anne Gulland

London

Delegates at the World Health Assembly have failed to agree on how the World Health Organization should collaborate with industry and other bodies.

Member states spent the week discussing WHO's draft framework of engagement with non-state actors, a document that spells out the ground rules for WHO's relationship with bodies from industry, academia, and non-governmental and philanthropic organisations. However, delegates could not come up with a final draft and agreed that an intergovernmental meeting, taking place no later than October, should produce a final statement in time for WHO's executive board meeting in January.

Many non-governmental organisations and member states see the framework as crucial in clarifying WHO's relationship with industries and avoiding conflicts of interest. Some have been concerned that the draft framework was not strong enough and did not spell out which industries WHO should exercise caution with

Kavitha Kolappa, a US based trainee psychiatrist speaking on behalf of the non-governmental organisations Health Action International and the Young Professionals Chronic Disease Network, said that a large number of countries were keen to list which industries—such as food, beverage, and alcohol—were the main drivers of non-communicable diseases.

"A number of countries, including Zimbabwe on behalf of the African group of countries and India, wanted the listing of these industries in order to give WHO the mandate to then cautiously engage and restrict engagement where appropriate," she said. However, countries including the United States, Canada, and Norway had rejected that notion, she added.

Kolappa said she was confident that the industry would lobby hard to ensure that it was not disadvantaged by any future document. She cited examples of industry attempts to resist policies that could harm it, such as the drinks companies' successful efforts to overturn a proposal by New York City's board of health to limit the size of sugar sweetened beverages. The ban on drinks larger than 16 oz was eventually ruled illegal.

She added that one of the problems facing WHO was the lack of untied funding, as the organisation was largely dependent on voluntary funding. "Governments need to step in and protect [WHO's funding], and the framework should create a fence around WHO, guarding it from interference," she said.

In a statement WHO said that delegates recognised the importance of working with non-state actors and said that it would draw up a register of such bodies for next year's assembly. It added that delegates were keen to ensure that the "risks of such engagement were managed robustly at global, regional and country level."

The assembly also urged drug companies to introduce more affordable vaccines and greater transparency on global vaccine prices.

The charity Médecins Sans Frontières, which has launched a campaign urging the drug companies GlaxoSmithKline and Pfizer to drop the price of the pneumonia vaccine, welcomed the resolution. "While it's positive to see countries standing up for the health of their people, it also reflects the sad reality that vaccines are becoming increasingly too expensive for a large part of the world's population," said Manica Balasegaram, executive director for the Médecins Sans Frontières Access Campaign.

Delegates also agreed to establish a \$100m (£65m; €92m) contingency fund to deal with health emergencies announced by Margaret Chan, WHO director general, in January, as well as a new emergency programme.²

The assembly also voted for the first time to tackle the health effects of air pollution, highlighting the key role of national health authorities in raising awareness about the potential to save lives and reduce healthcare costs.

- Gulland A. Drug firms must cut price of pneumonia vaccine, says MSF. BMJ 2015;350:h2238.
- 2 Gulland A. WHO's crisis handling to be overhauled after slow response to Ebola. BMJ 2015;350:h460.

Subscribe: http://www.bmj.com/subscribe

Cite this as: BMJ 2015;350:h2909

© BMJ Publishing Group Ltd 2015