

# International Baby Food Action Network (IBFAN)

## Meeting:

Sixty-eighth World Health Assembly (A68/1)

## Agenda Item:

11.2 Framework of engagement with non-State actors

## Statement:

I speak on behalf of IBFAN, a global network of 273 organisations working to protect, promote and support breastfeeding and IYCF.

We thank MS for their work on the Framework in the lead up and during this Assembly. We appreciate the challenge which development of comprehensive and effective policies to protect WHO from undue influence and to ensure its integrity, independence, and public trust represents.

The current draft as we understand it, still raises concerns:

- It reasserts old channels of undue influence: e.g. it contains a new Official Relations policy which, instead of re-examining the constitutionality of accrediting business-interest associations as “NGOs”, proposes their wholesale admission, and moreover that of philanthropies.
- It legitimizes new channels of undue industry influence: ‘Participation’, provision of ‘resources’, ‘evidence’ creation and ‘advocacy’ are all categories of high risk for undue industry influence, usually considered as “at risk areas” for conflicts of interest.
- It gives false impression that risks of interactions with TNCs and philanthropies, including conflicts of interest, are adequately addressed. The conflict of interest section still presents an incorrect Col concept and continues conflating Cols , conflicts WITHIN a person or institution, with conflicts BETWEEN actors. Institutional conflict of interest are situations where WHO’s primary interest as reflected in its Constitution may be unduly influenced by secondary interests of WHO or its staff in a way that affects, or may reasonably be perceived to affect, the independence and objectivity of WHO’s work.

We call for reevaluation of the Framework. Concepts need to be clarified, missing evidence obtained, and a public review of the adequacy of existing relevant WHO policies carried out. This debate should include how best to assure adequate core funding of WHO. WHO’s budget is, after all, less than 1/3 of the budget of the CDC Atlanta.

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