

Open letter to WHO DG candidates: keep policy and priority setting free of commercial influence

In May, 2017, WHO Member States will meet in Geneva for the 70th World Health Assembly (WHA) and a new WHO Director-General (DG) will be elected. As public-interest non-government organisations (NGOs) involved in global health governance and the prevention and treatment of chronic diseases, we believe that a fundamental consideration for Member States when electing the DG will be how the new leadership will ensure appropriate interactions with alcohol, food, pharmaceutical, and medical technology industries. We invite the three candidates to describe what steps they commit to take to ensure greater transparency, rigor, and public scrutiny of WHO's policy and regulatory and norm-setting activities so that they are adequately protected from undue commercial interests.

In May, 2016, WHA adopted the Framework of Engagement with Non-State Actors (FENSA), a policy due to be fully operational by May, 2018. While FENSA envisages that WHO will "exercise particular caution... when engaging with private sector entities ...whose policies or activities are negatively affecting human health.."¹ the rhetoric and direction of WHO's reform process as well as WHO's chronic funding challenges have left us deeply concerned rather than reassured. We fear that instead of protecting WHO's mandate, FENSA risks relegating WHO to a limited role, unable to stand up for human rights and democratic decision making.

We draw attention to the conflict of interest statement signed by more than 175 NGOs and networks representing more than 2000 groups and first launched at the UN High-Level Meeting on Non-communicable Diseases in 2011: "The policy development stage should be free

from industry involvement to ensure a 'health in all policies' approach, which is not compromised by the obvious conflicts of interests associated with food, alcohol, beverage and other industries, that are primarily answerable to shareholders."²

Alcohol, food, pharmaceutical, and medical technology industries should comply with policies developed by WHO and its Member States. Their role is not in public health policy formulation, risk assessments, risk management, or priority setting, nor in determining normative quality standards and legally binding regulations to protect and promote public health. These processes must be undertaken in an environment free of commercial influence.

We believe that only a WHO that protects its independence and integrity of decision making will have the ability to fulfil its constitutional mandate, and look forward to your response to our request.

PR holds shares in Nestlé SA, for the purpose of attending the Annual General Meeting. All other authors declare no competing interests.

**Katherine Brown, Patti Rundall, Tim Lobstein, Modi Mwatsana, Bill Jeffery, on behalf of 61 signatories; a full list of signatories is available in the appendix*

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- 1 Sixty-ninth World Health Assembly. Framework of engagement with non-state actors. Agenda item 11.3. May 28, 2016. http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_R10-en.pdf?ua=1 (accessed April 21, 2017).
- 2 Conflict of Interest Coalition. Statement of concern. 2011. http://info.babymilkaction.org/sites/info.babymilkaction.org/files/COIC150_0.pdf (accessed April 21, 2017).



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