

# International Baby Food Action Network (IBFAN)

142th session of the Executive Board



## Agenda Item EB 4.6 Safeguarding against possible conflicts of interest in nutrition programmes (EB142/23)

Since the first WHA resolution on Col in 1996, IBFAN has worked on preventing and managing conflicts of interest in the nutrition arena.

We maintain that WHO's Col guidance is problematic because it is not based on legal definitions of conflicts of interest which refer to conflicts **within** a person or an institution, between their OBLIGATIONS (e.g. WHO constitutional mandate, roles and functions), and secondary interests (e.g. gaining access to funding). They are NOT conflicts **between** actors who have diverging interests.

If WHO does not correct this definition the institution's integrity, independence and trustworthiness will be endangered.

The approach also introduces a problematic engagement typology, and folds "integrity" into a cost-benefit analysis. Any concern about integrity is thus likely to be overwhelmed by arguments about potential benefits.

The implementation of the proposed *Approach* will lead to a harmful redefinition of Col at national level, an increase of financial Col, and a weakening of any existing national safeguards. It will promote the development of measures that increase rather than reduce risks of conflicts of interest and undue influences, in particular by commercial corporate actors and venture philanthropies, on policy decisions and programme implementation. It will add to the confusion created by FENSA and the Scaling up Nutrition's Col guidance, and undermine government's efforts to build effective Col safeguards in the area of nutrition.

IBFAN calls on the EB to request WHO to:

- correct the Col concept, the 'engagement' typology and clearly distinguish between Col assessment and risk assessment;
- undertake a thorough review of this *Approach* by Legal Col experts and public discussion of the findings;

Finally, IBFAN hopes that the EB will not simply note the Draft *Approach* and will not allow field-testing of this poorly conceptualized Approach in WHO regions.

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