Thank you, chairperson.

I speak on behalf of Consumers International, the global federation of consumer organisations worldwide and IBFAN founding member.

For 3 years, we have actively contributed to the debate on WHO’s engagement with external actors hoping that this would lead to ensuring that such engagements, will further the fulfillment of WHO’s constitutional mandate while protecting WHO’s independence, integrity and trustworthiness. As the debate approaches its decision-making phase, we hoped the Secretariat’s Report would advance the Reform in that direction.

EB 134/8 does not distinguish between public-interest actors, who are guided by a public-health mission, and private commercial sector and other actors who are guided by market profit-making logic. Making this distinction is critical from a public health perspective, and is a politically indispensable step in the process. The working definitions illustrate this problem. Moreover, PPPs and multi-stakeholder engagements are entirely left out of the scope.

Also missing is the analysis requested by Member States of what policies and internal procedures are in place, what worked in their implementation and what did not with respect to the safeguarding WHO’s mandate.

We are concerned by paragraph 25 on conflict of interest. It introduces the inappropriate, and in the context of conflict of interest debate, irrelevant concept of, ‘intellectual bias’ and, ‘fixed policy position’ as a secondary interest. This argument would exclude experts with ‘fixed’ pro-public health positions from contributing to WHO’s work. Conflicts of interest that pose the greatest risks to WHO’s integrity, independence and trustworthiness are invariably related to interaction with commercial and for-profit interests. Member States may wish to call for, as part of the planned series of consultations before the WHA, an expert meeting on conflicts of interest with public participation.