IBFAN Comments on the WHO reform document A65/5
With focus on ‘Effective engagement with other stakeholders’ and ‘Conflicts of Interest’

I. Overall comments

Improving vs. Widening of engagement.
When discussing engagement with ‘stakeholders’, WHO should put the focus on the improvement of the engagement rather than its widening in some instances even restricting engagement may be required. In the case of tobacco control, the Framework Convention (FCTC) benefited from the narrow definition of the NGOs involved, which made it possible to avoid the inclusion of typical industry front groups, lobbying for tobacco and often positioning themselves as NGOs. Such groups promoting business interest only are then typically referred to as BINGOs and some of them have managed incorrectly to obtain the status of Official relations with WHO (e.g. the ISDI-International Special Dietary Industries).

Improving existing relations of WHO with nongovernmental organisations, would require the following steps:

- Take into consideration the recommendations of the 2002 Review Report (http://www.who.int/civilsociety/documents/en/RevreportE.pdf), developed as part of the Civil Society Initiative, which suggested a new policy to be drafted. Such policy was to, among others, “establish principles to distinguish between different kinds of NGOs and their related interests”, and to distinguish between an NGO accreditation to WHO’s governing bodies meetings and NGO collaboration with WHO.
- Clearly distinguish between the different types of NGOs on the basis of the nature of their interest: public-interest NGOs (PINGOs) versus business-interest NGOs (BINGOs). This is fundamental for the entire organisation not only for improving the relationship with NGOs, but for avoiding unacceptable conflicts of interest and appropriately managing conflicts of interest that, based on a thorough analysis, are considered acceptable.
- BINGOs currently in official relations with WHO, should be clearly identified, and filtered out of the NGO list. They should be dealt with through the same policy/ies governing relations with private for profit sector.

Need for comprehensive safeguards against conflicts of interest (Col)
The explicit distinction between individual and institutional conflicts of interest noted in the A65/5 is a welcome progress. However, having conflicts of interest clauses in specific policies will not solve the problem for the whole organization. WHO currently has no definition of ‘conflicts of interest’ and the existing approach to deal with these is not comprehensive.

WHO needs to develop a comprehensive policy framework on conflicts of interest and related criteria. These tools will ensure that WHO has the means to avoid inadmissible conflicts of interest and appropriately manage those that cannot be avoided at both individual and organizational levels. The interaction with profit-oriented actors is inextricably linked with the issues of conflicts of interest. Therefore, the work of developing the new frameworks for interaction with private commercial entities and philanthropic organizations, and the definition of criteria for business interest organisations (BINGOs), must be closely linked with the work of developing a comprehensive policy framework on safeguards against conflicts of interest.
Involvement and oversight of WHO with partnerships

WHO’s involvement in partnerships, and in particular, given the above, in public-private-partnerships and in other forms of multi-stakeholder initiatives needs to be assessed in order to address a very important questions: Has this involvement enhanced or undermined WHO’s ability to fulfill its constitutional mandate of working for health for all?

It is important that ALL partnerships are reviewed and not only those hosted by WHO, as called for in the A65/5 report. Independent partnerships in which WHO is involved, are particularly critical as they pose the greatest risk to WHO’s reputation, given the limited control WHO exercises over them.

The results of the review of partnerships should be made publicly available. Transparency is key. WHO should thus make publically available a full list of hosted and independent partnerships in which it engages, and update it regularly.

Clear definition of the private sector

WHO needs to have a clear definition of what it considers to be the private commercial (for-profit) entities. In addition to business companies, this category should also include business front groups, currently dealt with as NGOs (see above), and private philanthropic organisations (e.g. Bill and Melinda Gates Foundation, GAIN). While these groups may be set up as non-for-profit entities, they are not always ‘at arms-length’ from the originating industries and lobby on behalf of their interests.

A clear analysis of the WHO relations with the private sector is needed, and it should build on work done by UNRISD, in analyzing the various types of UN relations with the private sector and philanthropic foundations, and in distinguishing between ‘at arms-length’ and ‘close’ relations.

At the Board meeting, in January 2012, the Secretariat was making two proposals (doc EB 130/5 Add.4): “(a) To review and update the principles governing WHO’s relations with nongovernmental organizations. […] (b) To develop comprehensive policy frameworks to guide interaction with the private for-profit sector as well as not-for-profit philanthropic organizations.”

In the current document, the not-for-profit philanthropic organizations have disappeared from the agenda, and it is not clear whether they will be dealt with in any of the reports or draft policies that the Secretariat will prepare as proposed in A65/5, para 54, or if they have been left out completely. The latter would be a very unfortunate omission as it would undermine the call for development of a comprehensive policy frameworks for interaction with both the private commercial sector (which should also include BINGOs) and the philanthropic organizations. WHA thus may wish to urge WHO to follow the direction proposed and adopted in the doc EB 130/5 Add.4.

Challenging the term ‘stakeholders’

The term ‘stakeholder’ as well as other words such as ‘corporate services’ and ‘partnerships’ used throughout the document are unhelpful. They blur lines among actors and convey a misleading image of WHO as a corporate entity. The term ‘stakeholders’ is particularly problematic as it groups together very different types of actors with divergent interests, such as public interest NGOs and private companies, thus communicating a wrong message that all ‘stakeholders’ carry at heart the same interest of health for all. Nowhere in the WHO constitution does this word ‘stakeholder’ appear, and there is no definition of what is meant by it.

According to its constitution, WHO is the lead organisation working for the realization of health for all the people, not the stakeholders.