1 Conflicts of Interest:

We welcome the improvement in the phrasing of the policy options and the new overarching principle in Para 11:

“Conflict of interest: Public health policies, strategies and multisectoral action for the prevention and control of non-communicable diseases must be protected from influence by any form of vested interest.”

We look forward to WHO developing a new comprehensive organization-wide policy addressing the avoidance and management of individual and institutional conflicts of interest with the protection of public health as the prime concern. There is a need for 3 separate policies – for NGOs, private commercial entities (producers of goods and services) and those who represent their interests, and Philanthropies. Once adopted, such a policy could be publicized widely to create greater understanding of these critical issues and encourage good practice at national and regional level.

2 Codex:

We called for a strengthening of the recommendation on the implementation of Codex labelling standards and color-coded front-of-the-pack nutrition labels, (Para 36h of the 3rd draft). This has now been replaced with just a call to: “Provide nutrition labeling for all pre-packaged foods for which nutrition and health claims are made.” (Para 32.)

Codex is not mentioned at all nor are the risks of promotional claims on processed packaged products, which invariably promote ultra-processed foods as being healthier than unprocessed foods with serious implications for developing countries. 2

“However, in low-income countries, benefits are less obvious, and the dangers are very apparent. In such countries, consumption of ultra-processed products is low. These countries are therefore the prime targets of transnational corporations. If they reformulate, advertise, and promote some of their less unhealthy products as healthy eg, sodium-reduced (but still high energy dense) packaged snacks or artificially sweetened (but still nutrient-devoid) soft drinks— the overall consumption of ultra-processed products is likely to increase, which would undermine long-established dietary patterns based on fresh or minimally processed Foods.”

In the infant and young child feeding context such strategies invariably undermine breastfeeding and family foods. 3 4 5

1 http://info.babymilkaction.org/Non-State-Actors
3 2010 Resolution 63.23 Urges Member states “to end inappropriate promotion of food for infants and young children and to ensure that nutrition and health claims shall not be permitted for foods for infants and young children, except where specifically provided for, in relevant Codex Alimentarius standards or national legislation”
3 Protection of breastfeeding and appropriate infant and young child feeding:

While the importance of breastfeeding and optimal complementary feeding is recognized, the Action Plan still fails to mention the protection of breastfeeding, namely the implementation of the International Code, subsequent relevant WHA Resolutions and the Global Strategy on Infant and Young Child Feeding.

This is an important omission. Appendix 4 specifically mentions GAIN and SUN, calling for the "integration of the action plan into food and nutrition-related plans, and initiatives (for example, UNSCN’s Scaling Up Nutrition, FAO’s Committee on World Food Security, and the Maternal, Infant and Young Child Health programme of the Global Alliance for Improved Nutrition)

Unfortunately GAIN (and SUN) have yet to tackle the issue of Conflicts of Interest adequately. GAIN, in particular has been working against Resolution 63.23, precisely because it advocates controls on promotional claims. If the call to integrate the Action Plan into these initiatives is to have the real positive impact that is needed, this glaring omission that must be rectified.

Appendix 2 and 3: The Monitoring Framework and Table of cost effective interventions should include the following:

1. Protection, promotion and support for exclusive breastfeeding and adequate and timely complementary feeding, along with continued breastfeeding for up to two years or beyond,
2. Implementation of the Global Strategy on IYCF, the International Code of Marketing of Breast-Milk Substitutes and subsequent relevant WHA Resolution
3. Extension of Baby Friendly Hospital Initiative.
4. The provision of sound and culture-specific nutrition counselling to mothers of young children on making complementary foods, free from commercial influence.

The Tables should also include the suggestions made by WCRF and IASO regarding trans-fats, salt, sugars, school food, marketing to children and the use of economic tools such as taxes and subsidies.

We would like to see more emphasis on legally binding actions, rather than voluntary actions. 7

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7 2010 Resolution 63.23: "Recognizing that national emergency preparedness plans and international emergency responses do not always cover protection, promotion and support of optimal infant and young child feeding; Expressing deep concern over persistent reports of violations of the International Code of Marketing of Breast-milk Substitutes by some infant food manufacturers and distributors with regard to promotion targeting mothers and health-care workers; Expressing further concern over reports of the ineffectiveness of measures, particularly voluntary measures, to ensure compliance with the International Code of Marketing of Breast-milk Substitutes in some countries; Aware that inappropriate feeding practices and their consequences are major obstacles to attaining sustainable socioeconomic development and poverty reduction; Recognizing that the improvement of exclusive breastfeeding practices, adequate and timely complementary feeding, along with continued breastfeeding for up to two years or beyond, could save annually the lives of 1.5 million children under five years of age."

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6 \text{The Business of malnutrition: breaking down trade rules to profit from the poor.} 40\% of the 268 delegates were food industry, with 59 attending as members of Business Interest NGOs (BINGOS). \text{http://info.babymilkaction.org/pressrelease/pressrelease24nov11}.

6 \text{“Improve the food security of farming families affected by volatile food prices” Healthy Food, Healthy Child, FAO EU Food Facility Project in Cambodia to improve dietary diversity and family feeding practices. \text{http://www.youtube.com/watch?v=0rUX6F7aeYY}}.

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4 The Submission on the WHO Global Action Plan on NCDs (V4 29.3.13).