

World Obesity comments on the WHO global coordination mechanism discussion paper: 'how to realize governments' commitments to engage with the private sector for the prevention and control of NCDs'

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About World Obesity

The World Obesity Federation is a not-for-profit organisation representing professional members of the scientific, medical, and research communities from over 50 regional and national obesity associations. Through our membership we create a global community of organisations dedicated to studying and solving the problems of obesity. World Obesity is officially recognized as a nongovernmental organisation by the World Health Organization (WHO). For more information visit www.worldobesity.org

General Comments on the Discussion Paper

We thank the WHO for this opportunity to comment on the discussion paper on how to realize government commitments for engaging with the private sector for the prevention and control of non-communicable diseases (NCDs). We support the continued efforts of the WHO to provide member states with guidance and technical support to help achieving the global NCD targets. Overall, we commend the wide range of issues addressed in this discussion paper, the five key topic areas and the emphasis on learning from past and current experiences in dealing with these issues.

In particular, we welcome:

- The emphasis on government leadership (paragraph 46) and that engagement with the private sector should be for the purpose of policy implementation rather than for agenda setting or policy making (paragraph 7)
- The acknowledgement of the monitoring role that Civil Society Organisations (CSO), non-governmental organisations (NGOs) and academia play and can use to support governments (paragraph 11, 42)
- The emphasis on the need for more progress to address the key policy areas in low- and middle-income countries (LMIC), reflecting the fact that many LMIC have undergone a 'nutrition transition' and are now exposed to many of the same risk factors as high-income Countries (HIC)
- Section 5.2 which highlights the fundamental role of regulation. In particular we support a) the comments made in paragraph 34 emphasising the need for strong

regulatory frameworks to be in place so as to support government action and b) the comments made in paragraph 49 emphasising the need for statutory frameworks be in place to allow for standardised action and to provide clear goals for industry, for instance for food labelling and nutrition profiling.

- Paragraph 35 which highlights the fact that corporations are often better resourced than governments and may actively undermine regulation. Furthermore the point made in paragraph 60 that some multinationals chose to act in one jurisdiction but not another which “goes beyond passive inaction to active opposition to proposed measure to tackle public health issues” is particularly important (paragraph 59). If multinationals are forced to act more responsibly and to the same standards across all jurisdictions, some of the capacity issues for LMIC should be relieved
- The emphasis on reformulation is part of a wider strategy to improve the food supply chain (paragraph 18), is important but needs to recognise that reformulation only deals with processed products rather than minimally processed food and ingredients, and should not imply that reformulated processed foods are better than minimally processed foods and ingredients. This point applies to all policies related to improving the distribution, storage and access to food across the food supply chain
- The recognition in paragraph 54 that conflicts of interest must be managed at a national level along with the WHO, as well as the considerations noted in paragraph 55 are welcomed, and we support the notion that member states can learn from the guidelines that are place for tobacco control as part of the Framework Convention for Tobacco Control (FCTC).
- Moves by the WHO and International Development Law Organisation to deliver national capacity-building workshops on healthy diet, physical activity and law (paragraph 48)

We also wish to raise a number of concerns regarding the discussion paper, including:

- The use of the term partnership in section 5.7. We would prefer the use of the term ‘careful collaboration’ to emphasise that action should remain government-led
- The implication in paragraph 9 and 53 that the WHO has issues of conflicts of interest under control, when in fact the non-state actor engagement discussions remain of concern to many public interest organisations.
- The emphasis on transparency and disclosure to manage conflicts of interest in paragraph 55. While essential, this is not an end in itself and actions need to also be taken to restrict the engagement that needs disclosing in the first place.
- In the context of NGO-led and CSO-led engagement with the private sector, we wish to draw attention to the fact that some NGOs can be described as being business

interest NGOs (BINGOs) rather than public interest NGOs (PINGOs). With this in mind reliance on NGOs to manage the relationship with industry on reformulation needs to be done with caution (paragraph 17).

- Over-stressing the progress that has been made in HIC as these are often weaker than required to be effective. This runs the risk of LMIC copying inadequate policies rather than adopting necessary policies (paragraph 13)
- Insufficient acknowledgement that LMIC face different political constraints to HIC and therefore, while lessons can be learned from HIC, the policy models may not be suitable for direct implementation
- The stronger focus on salt reformulation at the expense of other ingredients and nutrients, in particular sugar, high-fructose corn syrup and trans fat (section 3.2)
- The implication that voluntary actions are good when there is a lack of support for regulation. The lack of support needs to be tackled, rather than being used as a pretext for poor voluntary measures which may then pre-empt further action. It needs to be more strongly stated that the food and beverage industry is unlikely to support regulation and their opposition should not be taken as reason to implement inadequate, voluntary measures (paragraph 47)
- While aligning business and health objectives may sometimes be necessary to achieve change, some caution is required here. Business objectives focus on the creation of new markets – in relation to nutrition this often includes the production and promotion of items often high in fat, sugar and salt, which lend themselves to a diet of ultra-processed products rather than traditional food. Fortification should not be used as an entry-point for highly processed food products. (paragraph 37)
- The challenges raised in Paragraph 43 are relevant not only to reformulation, but to the definition of 'healthy food and drinks' and for nutrient profiling in the context of implementing food-based dietary guidelines and controlling labelling and promotional marketing.
- In relation to health systems, it is important to emphasise that obesity and NCDs present a huge burden to healthcare systems and national economies. As such it needs to be fully recognised that preventing NCDs will help to free up health-service resources such as time, staff and finance, for other conditions, which are less preventable.(Paragraph 51)

We would also like to make the following additional comments:

- On the issue of raising financial support for actions for NCD prevention and control, taxation of harmful ingredients (e.g. sugar) or products (e.g. sugar-sweetened beverages) may be a useful tool, not only to reduce purchase and consumption, but

to generate revenue which can be invested back into public health activities (paragraph 33)

- A number of independent monitoring programmes are in place to evaluate government and industry actions to improve food environments. This includes the International Network for Obesity/NCD Research, Monitoring and Action Support (INFORMAS), which seeks to monitor public and private sector implementation of policies to improve food environments and Access to Nutrition Index (ATNI), which monitors corporate actions to improve food supply. Such tools, in particular INFORMAS which is led by civil society and academia, help to present the business case for action and support governments that have insufficient capacity to carry out their own monitoring. (paragraph 38/39, 42)
- Regarding self-regulatory activities, we draw attention to the following reference which proposes four aims and eight standards that should be met before self-regulatory efforts by the food industry are considered as good faith, potentially impactful, or a possible substitute for government regulation: Sharma, Teret & Brownell. The Food Industry and Self-Regulation: Standards to Promote Success and to Avoid Public Health Failures. *Am J Public Health*. 2010. 100(2): 240–246.
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2804645/>

Responses to the Questions Raised in the Discussion Paper

Question 1: Are there any other specific examples of engagement with the private sector on the five areas included in the political declaration that have led to measurable progress

Co-regulatory approaches to marketing to children: Some good progress through the Danish marketing code (see

<http://kodeksforfoedevarereklamer.di.dk/SiteCollectionDocuments/Foreningssites/kodeksfoedevarereklamer.di.dk/Downloadboks/Kodeks%20eng%20sep%202008%20samlet.pdf>)

Government-led reductions in salt in the UK: e.g.

<https://www.food.gov.uk/scotland/scotnut/salt/saltreduction>

Question 2: What were the critical success factors for these successful examples?

In order for engagement between the private sector and government to work, leadership must remain with the government at all times. If this leadership is lost, the risk of the policy becoming weakened in favour of business interests rather than the public interest increases.. (Not sure Danes had CSO involvement)

Question 3: Are there any other challenges or bottlenecks to making further progress with calling on the private sector to contribute meaningfully to NCD prevention and control that are not addressed in this section?

- A lack of political courage and/or will to address the 'causes of the causes' in relation to NCDs, such as those related to the environment we live in, or the market freedoms enjoyed by the commercial sector, can mean that commercial actors are not held accountable for their actions or inactions sufficiently to alter population dietary patterns or health outcomes.
- A lack of definition of healthy diet/health food/healthy beverage for governments to use as the basis for policies remains a barrier to effective change: further tools are needed to interpret food-based dietary guidelines into health policies.
- A lack of recognition that the commercial refers both to the manufacturers of ultra-processed products or "Big Food" on the one hand, and to the suppliers of minimally processed foods such as family farmers, community markets, and supermarkets on the other. Working with the latter may achieve a closer alignment in objectives between business and public health.
- Aligning health and business objectives runs the risk of too much focus on fortification of processed foods which alone does not equate to healthy diets/promote reduction in NCDs. A greater understanding of how to align these interests while still promoting healthy, sustainable diets is required.
- A lack of meaningful upstream indicators, with associated targets and timelines and responsible persons to implement and to monitor.

Question 4: What other actions or approaches will assist governments in managing institutional conflicts of interest when engaging with the private sector on NCD prevention and control?

- Cross-sectoral health impact assessments will ensure that health is considered across the board
- The establishment of inter-departmental taskforces to coordinate government strategies to tackle NCDs, taking account of all aspects of food supplies and nutrition security, the physical environment and secure physical activity. This should be undertaken in a manner that ensures that conflicts of interest are managed in a consistent way through the government

Question 5: Are there other themes or issues that the working group should consider in developing advice for Member States and means of realizing the commitment to call on the private sector, as outlined in the political declaration

- The working group/WHO should provide further guidance and technical assistance to member states on understanding the food supply system and identifying the key levers and strategies for implementation, so as ensure that progress can be made (paragraph 57). This may also support understanding of where conflicts of interest may arise and may assist governments in managing these potential conflicts.
- The working group/WHO should also support governments in defining what constitutes a healthy diet/food/beverage (using food-based dietary guidelines and nutrient profiling schemes) so as to inform their work with private sector
- The working group/WHO could provide clear guidance to member states on their obligations in relation to international charters (e.g. for human rights), agreements (e.g. for tobacco) and recommendations (WHO) and how they apply to tackling NCDs.
- The working group/WHO could advise member states on the opportunities that exist to negotiate better health protection through cross-border agreements, e.g. on marketing, trade and investment.
- The working group/WHO could advise government on how to best use internal purchasing power to build healthier consumption patterns e.g. by supporting the inclusion of health and nutrition criteria for awarding government supply contracts and using school, workplace, and hospital food policies as beacons of good practice in the community.
- The working group/WHO should advise governments and the private sector on core principles that should be implemented as part of workplace health. Governments should be urged to take the lead for their own workforce and act as case studies for action.