



Mr. Menno van Hilten, Senior External Relations Officer
World Health Organization
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By email to: ncdcommission@who.int and vanhiltenm@who.int

February 16, 2018

Re: conflict of interests of nominees to the WHO Independent Global High-level Commission on NCDs

Mr. van Hilten,

Seeking input from the global public health community about possible conflicts of interest of WHO appointments should begin with the WHO publishing nominees' conflict of interest declarations and the results of WHO's vetting. Doing so would incentivize nominees to scrupulously disclose conflicts and help demonstrate WHO's commitment to transparency and due diligence in vetting declarations.

We found significant, extensive, and obvious financial conflicts of interest for six appointees from cursory Internet searches. It seems that WHO has not yet concluded that such financial conflicts of interest warrant public disclosure or constitute barriers to serving in key advisory roles. The terms of reference of the Independent High-level Commission on NCDs include "identifying options for political choices, governance, ...accountability mechanisms, [and] commercial determinants." One might reasonably wonder, for example, how some Commissioners could provide unbiased advice about the regulation, marketing, and consumption of food and alcohol, pharmaceutical drugs, and medical technologies when doing so could put their impact their own personal or institutional investments. Please consider the following information about six nominees.

1. **Katie Dain, CEO, NCD Alliance** heads an organization that was founded with a US\$1 million grant from the world's largest medical technology company (Medtronic) and has been financially sustained by a comparable amount of annual funding from a handful of the world's largest pharmaceutical companies (e.g., [Novo Nordisk](#), [Sanofi](#), [Lilly](#), and [Merck](#)) that collectively manufacture and sell approximately [\\$200 billion worth](#) of health products that are directly subject to extensive [WHO Guidance to national governments](#). As such, NCD Alliance has financial incentives to promote the approach of medicating rather than preventing non-communicable disease. While NCD Alliance's financial statements have not been disclosed every year since its launch in 2009, available reports credit financial support from these and other industry groups every year and note that, as recently as [2016, 46% of its revenue was obtained directly from such companies](#). Additional funds from unspecified private foundations might also have been obtained from the private sector. Non-industry members of NCDa's 7-member [Steering Group](#) such as the [World Heart Federation](#) (see link pp. 17 and 19) and the [International Diabetes Federation](#) (see link pp. 27 and 29) are also substantially funded by pharmaceutical companies. The NCD Alliance was also appointed co-chair of the [WHO Civil Society Working Group on the third High-level Meeting of the UN General Assembly on Noncommunicable Diseases](#) to represent civil society globally despite the significant industry involvement in its funding and governance.
2. **Festus Gontebanye Mogae, former president Botswana** serves as [chairman of the Choppies supermarket group](#) (according to Reuters), a chain of food retailers operating in seven Sub-Saharan countries.

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3. **Eric Hargen, Deputy Secretary of Health and Human Services** is a [shareholder at the Chicago office](#) of the law firm of Grenberg Taurig. Though Mr. Hargen was recently appointed to US President Trump's sub-cabinet, he remains a shareholder in a global US-based law firm and is one of [133 of the firm's lawyers that specialize in defending the interests of food, agriculture, alcohol, pharmaceutical, and health care companies](#).
4. **Arnaud Bernaert, Global Health and Healthcare, World Economic Forum** is employed by the World Economic Forum which is funded by 1,000 companies, including some of the world's largest food, beverage, alcohol, pharmaceutical, and medical technology companies which pay membership fees ranging from approximately US\$50,000 for basic corporate membership to US\$600,000 for [WEF "Strategic Partners," including food companies Nestlé, Coca-Cola, PepsiCo, and Unilever, pharmaceutical companies Novartis, Pfizer, Takeda Pharmaceutical, and his former employer, Royal Phillips \(a health technology company\)](#).
5. **Former WHO DG candidate Dr. Sania Nishtar** wrote a letter to the editor of the prestigious medical journal, *The Lancet* in which she advocated the creation of a new external agency (to be called the "NCDs Cooperative") to bypass even the meagre conflict of interest safeguards in the WHO's *Framework of Engagement with Non-State Actors*. [Her letter, published The Lancet in October 2017, states: "WHO's mandate and governance structure may preclude it from leading and hosting a multisectoral public-private partnership](#). Drawing insights from challenges faced by WHO's...Framework of Engagement with Non-State Actors, it is now time...to bridge the public-private NCDs chasm since the private sector needs to be part of the solution [including] pharmaceutical products...[and] the myriad technology innovations...."
6. **Jack Ma, Alibaba Group** has extensive financial interests in the [pharmaceutical retail industry](#) and, just last month, CNBC reported a developing partnership between [Alibaba and US grocery retailer Kroger for the retail sale of food](#).

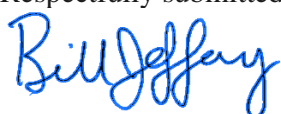
Who could reasonably expect these six commissioners (and possibly others) to advocate approaches to NCD prevention or treatment that could harm the financial interests of food and pharmaceutical companies? None of this can be news to the World Health Organization. Most of these facts came to light in our small NGO within a few hours of Internet research by a student (which I verified). Nonetheless, [Director General Tedros has already confirmed the nominations](#) before or immediately following a two-week public solicitation for information about conflicts of interest, apparently scheduling no time to consider input received.

It remains unclear whether WHO believes there is *any* type of financial interest in food, beverage, alcohol, pharmaceutical, or other industry that would give rise to a problematic conflict of interest for the Commission. The failure of WHO to publish conflict of interest declarations for all appointees and to explain how it intends to manage conflicts of interests it identifies appears inconsistent the spirit of the WHO's [2016 Framework of Engagement with Non-State Actors \(FENSA\)](#), article 5 of which commits to the overarching principles to "protect WHO from any undue influence...where possible avoiding conflict of interest...[and to] be conducted on the basis of transparency, openness, inclusiveness, accountability..."

These appointees, and possibly others, seem disqualified from serving on the Commission by reason of financial conflict of interest. However, now that they have been confirmed, please:

- web post disclose appointees' conflict of interest declarations and a summary of WHO's vetting results,
- explain why nominees with financial conflicts of interest were appointed to the Commission anyway, and
- indicate what steps will be taken to ensure that conflicted commissioners will recuse themselves from deliberations related to their conflicts, and to declare such conflicts and recusal in Commission reports.

Respectfully submitted,



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nonprofit Centre for Health Science and Law
and invited expert for the 2015 WHO technical report: [Addressing and managing conflicts of interest](#)