RE: Online public consultation - Clarification on Sponsorship of Health Professional and Scientific Meetings by Companies that Market Foods for Infants and Young Children (due by Monday 17 October 2022, submitted Friday 14 October)

The purpose of this <u>online consultation</u> is to gather relevant information from affected stakeholders and civil society to ensure the clarification is fit-for-purpose, acceptable and feasible, and to identify potential unintended consequences of this clarification for the implementation of <u>WHO Guidance on Ending the Inappropriate Promotion of Foods for Infants and Young Children</u> welcomed by the 69th World Health Assembly. Comments are to be submitted by completing a <u>form</u> requiring the following information:

1.	N	a	m	e	(s)):
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2.Role or Job Title:

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3. Organisational affiliation (if any)

On behalf of the Baby Feeding Law Group (BFLG) UK

4. Country of residence

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6.Is the meaning of the document clear?

Yes

No (add comments below)

7. Please explain what is unclear and / or make suggestions for making it clearer.

In the section on context, the document talks about "health professional colleges and associations" — colleges might not be the best word to use here, as it might seem limiting, could a broader word be used, such as "higher education training institutions" or "health professional training institutions" in place of "colleges" to ensure that comprehensive meaning of the term is understood?

Under the section on "Exhibition space", Point 4 indicates "No gifts, trinkets, sweets, samples, or any branded items are offered or distributed to delegates...."

It is unclear as to whether this includes refreshments being offered from the exhibitor. (e.g., premium coffee, drinks or snacks that are separate from the standard conference or meeting refreshments).

What happens when the content of the meeting has no relation to IYCF? Is a company that produces food products for infants and young children and also produces adult food products allowed to sponsor a meeting purely on adult nutrition? Should the information note explicitly stated that this is not allowed?

What about when the content of the meeting is IYCF and the sponsoring company produces both IYCF products but also non-food products for IYC, e.g. baby toiletries, and they wish to sponsor the event but are

promoting only their non-food products (this happened with HiPP organic and a conference organised by one of the Royal Colleges in the UK, where the event organisers deemed it appropriate).

We believe it is important to include a definition of conflict of interest in the document.

8	8.Is there some type of sponsorship that is not discussed in the document but should be?			
1	0	Yes	(add comments below)	
	0	No		

9.Please explain what type of sponsorship is not discussed in the document but should be?

One area which doesn't seem to be explicitly addressed by the draft information note is companies paying for the travel expenses/speaker fee or other costs of invited lecturers. This is common, and the lecturers sometimes get incredibly well treated if they are key opinion leaders. Sometimes this is done through the conference organisers, as part of a sponsorship package (but might be seen by some as less direct support than the actual conference organisation support) and sometimes this is done directly from company to healthcare professional 'would you be interested in presenting at XXXX conference - we can arrange the trip for you'. It would be helpful to have some explicit guidance on these activities, which are widespread and can serve to develop quite powerful affinity between key opinion leaders and the companies.

Another issue where organisations could do with some more guidance, is what counts as a formula company rather than what counts as sponsorship. At a recent British allergy society/world allergy organization conference, where a lot of work went on in the background to ensure that formula sponsorship was kept out of it, two issues arose:

- 1. Sponsorship was received from a company called 'Aimmune therapeutics' which makes one specific allergy product that is nothing to do with formula. The company is however owned by Nestle, so is a 'Nestle Health Science company' Home | Aimmune https://www.aimmune.com/node/1
 Professional organisations would appreciate some guidance on when this is a problem. Use of the banner 'Nestle Health Science company' probably pushes this beyond what is acceptable.
- 2. The society also accepted sponsorship for the conference from a large multinational called Reckitt, who purchased Mead Johnson a couple of years ago. When challenged, the society's response was 'Reckitt have a range of allergy products, they did not promote milk products at the meeting.'

 Some guidance from WHO on how to manage sponsorship from a company that is owned by a large brand which owns a formula company; or from the large brand itself, without carrying the name of a formula company, would I think be appreciated.

Other potential issues might arise with something like the 'Gerber foundation', a not-for-profit charity set up by US formula company Gerber many years ago. They sponsor health professional activities, research and even Cochrane Neonatal — there was some discussion in Cochrane about this, and after due diligence the Cochrane conflict of interest team (led by highly respected Lisa Bero who is well known at WHO) decided it was probably ok since Gerber foundation was a sufficiently separate organisation from Gerber products limited - but again, guidance from the top would be appreciated as there certainly seems to be some brand alignment there with trusted sources of healthcare advice which probably isn't helpful.

Would it be possible for the WHO to keep an up-to-date resource or website that lists companies and foundations that are owned by companies that market foods for infants and young children?

What about products that are not clearly "Foods for Infants and Young Children" but are also problematic? So, companies that produce feeding bottles, teats, pacifiers (dummies), breast pumps, nipple creams, formula preparation devices, probiotics for infants, maternal supplementary drinks, etc. What is the guidance around companies that produce these products (e.g., Medela, Ardo, Tommee Tippee, Lansinoh Laboratories, etc.) and their sponsorship of health professional or scientific meetings?

It would also be interesting, and we think important, to consider companies making human milk-based products (e.g. fortifiers, dried human milk, but also liquid human milk that may have just been pasteurised), and if/how they might be considered even if certain of these products may not be seen as breastmilk substitutes.

0	Yes (add comments below)
0	No

10. Are there setting specific or contextual issues that should be considered?

11.Please explain the setting specific or contextual issues that should be considered and describe how the content could be changed to accommodate them.

Past experience shows that clinicians or health professionals working in clinical settings and / or in private settings and /or with adults are likely to simply ignore this information note, and feel that it does not apply to them, stating that if it is not included in national legislation, then they do not need to comply. The suggestion in response to point 13 may assist to strengthen the status of this information note.

12. Are there implication for implementation or feasibility that we should consider?				
0	Yes	(add comments below)		
0	No			

13. Please describe the implications for implementation or feasibility that we should consider.

What is the status of an information note? It is not the same 'status' as a WHA resolution. Would it be possible to indicate somewhere that the WHO encourages countries to incorporate this guidance into national regulations on IYCF marketing? In which case, can it be called a guidance note rather than an information note?

14.If there is something else you would like to say about the content, please write it in the box below.

It would be good for WHO to expand guidance on sponsorship wider, taking into account early years settings, wider education settings, food banks/community food providers and local authorities also since these are all avenues where parents/carers and professionals other than health care professionals could be influenced across our whole system.

At the second WHO/BMJ webinar entitled "The problem with the formula milk industry--should health professional associations refuse industry funding?" on 29 September, Dr Laurence Grummer-Strawn of the WHO said that "Acceptance of any funds other than from membership has the potential to create conflicts of interest". It might be good for this document (currently an information note) to recommend that health professional and scientific meetings should be organised with minimal industry funding and influence, to reduce any possible conflicts of interest.