

Director-General's Roundtable Meeting with
Nongovernmental Organizations

Geneva, 16 May 2003



**Global Strategy on Diet, Physical Activity and Health
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Meeting Note

Introduction

On 16 May 2003, Dr Gro Harlem Brundtland, Director-General, hosted a Roundtable meeting between the World Health Organization (WHO) and representatives of leading international Nongovernmental Organizations (NGOs)/Civil Society Organizations (CSOs). The NGOs/CSOs who attended the Roundtable were: APAN and People's Health Movement, Consumers International, European Heart Network, International Association of Consumer Goods Association, International Baby-Food Action Network, International Diabetes Federation (IDF), International Obesity Task Force, International Union Against Cancer, International Union of Nutritional Sciences, National Heart Forum, Trim Fitness Sport for All Association, World Heart Federation and World Hypertension League.

The objective of the Roundtable was to hear the views of the NGOs/CSOs on the development, as well as the implementation, of the Global Strategy. It was seen as a further stage in the consultative process, in addition to providing an opportunity for WHO to better understand their vision for the work that could be achieved together on the Global Strategy.

A. Dr Gro Harlem Brundtland's speech entitled 'Interacting with NGOs to reduce chronic disease burden'

Dr Brundtland noted that noncommunicable disease control was a priority for WHO and its Member States, and acknowledged the work of nongovernmental organizations (NGOs) in bringing the issue to the attention of governments. Moving from evidence to action posed an enormous challenge. National action by governments was an important starting point, and could be very effective. However, in an increasingly globalized and interdependent world, WHO's goals can only be met through broader, multi-sectoral involvement with diverse stakeholders.

NGOs play a key role in shifting and influencing consumer demand, as well as national and international political priorities. To ensure that civil society's voice is heard, WHO and NGOs should work closely. Messages about diet and physical activity needed to be focused, realistic and clear; however, achieving this simple, shared goal, was a complex and demanding exercise. In order to succeed, it was necessary to ensure that all stakeholders – civil society, industry, governments and international agencies such as WHO – work constructively together for the greater public good.

Dr Brundtland briefed the NGOs on her recent meeting with the private sector. While noting that many NGOs wished to see WHO push for a strong charter on food, she emphasized that food was different from tobacco. There was a need to recognize that food, in its complexity, was not tobacco, nor was it similar to infant feeding. Shifting the pattern of diet and physical activity behaviour across the global population demanded a more nuanced and multifaceted approach than that adopted for tobacco. WHO intended to pursue a constructive dialogue with all parties to develop a Strategy that could most effectively address these complex issues.

B. Summary of NGO representatives' comments

All the NGOs present at the meeting expressed their appreciation to WHO for highlighting these crucial issues.

1. Interaction with for-profit sector: NGOs supported WHO in its need to engage with industry, but emphasized that WHO should maintain its role as "keeper of the evidence". They noted not only that WHO needed to be fully transparent in all engagement with industry but also the risks of WHO's name being exploited by industry. NGOs sought regulation of industry-led education/campaigns, as these could violate consumers' rights to information about healthy choices. NGOs asked WHO to use a "full supply chain" approach when addressing industry (by including producers, processors, retailers, advertisers). End-users/consumers should also be part of the processes that affect them.

2. Role of WHO: NGOs requested WHO to raise the profile of health concerns and provide leadership in inter-governmental processes (particularly WTO and Codex). WHO should encourage governments to take a cross-sectoral approach to health promotion, review health care financing and increase long-term investment. WHO has an effective voice concerned with health implications of inequality, privatization, food 'dumping' and other 'market imperfections', and should apply relevant pressure on governments and institutions.

3. Role of NGOs as 'watchdog': NGOs raised the importance of their role as a "watchdog" of civil society interests.

4. Physical activity: NGOs emphasized the need to seek greater use of existing facilities, and raise priority of physical activity at all stages of life. Physical activity should not be restricted to the young, male or elitist sports, but be accessible to all and part of the enjoyment of life.

5. Multisectoral approach needed: NGOs considered that insufficient attention was paid to the root causes of ill-health in the world. "Disease is the result of multi-sectoral failures," so there is a need to adopt a sector-wide approach.

6. Life-course approach needed: NGOs called for a life-course approach to the Strategy, and stressed the importance of sound infant feeding practices.

C. NGOs' proposed priority areas for interaction:

- NGOs were united in calling for controls on the marketing of unhealthy food to children. They asked WHO to take the lead in developing, reviewing and assessing possible instruments, including a marketing code or binding regulations, to address these concerns.
- Capacity-building among nutrition practitioners in developing countries; development of social/economic analysis to support scientific knowledge.

D. Summary of comments from Dr Gro Harlem Brundtland

- WHO and NGOs can work complementarily, and capacity-building in the developing world and development of effective social responses to WHO's science-based approach are needed.
- There was a need to protect children who are vulnerable to poor diet and physical inactivity. Their status as the adults/policy-makers of the future underlined the importance of this Strategy.

- The reduction of physical activity in schools constituted a serious omission. Its occurrence in the developed world (where it was not the result of insufficient resources) was of particular concern.
- WHO was aware of the potential for conflicts of interest in engaging with business but regarded building bridges with business and government as necessary to be effective at the global and national level.
- Thorough understanding of government processes, legal processes, etc. will ensure proper exposure of key messages at key moments. Civil society organizations (CSOs) should extend their role from that of “watchdog” and apply their influence of determined principles and policy positions direct to principal players (national governments and industry) rather than lobbying WHO to do this.

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