

Political ineptitude, public anxiety and the undermining of the WHO

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In the midst of a global pandemic that has already caused the deaths of more than 350 000 people, US President Donald Trump recently announced he was ending the United States' relationship with and funding for the World Health Organisation (WHO).¹ While pulling out of a United Nations global health body at such a moment might seem bizarre, it is entirely consistent with the Trump administration's general tendency to undermine, reverse or weaken policies designed to protect health and the environment. It will likely be greeted with quiet but enthusiastic approval from multinational tobacco companies and their allies, which have sought for decades to weaken or wrest control of WHO. For those working in tobacco control and public health, Trump's actions constitute a very concerning development.

Twenty years ago, the WHO Tobacco Free Initiative released a shocking report based on internal tobacco company documents that detailed the tobacco industry's extensive attacks on the WHO.² The report documented how the industry wielded its financial power to undermine the organization, and used so-called 'independent' surrogates to attack the credibility of WHO leaders and scientific reports. Industry-funded 'experts' promulgated misinformation to distort the emerging scientific consensus about the effects of secondhand smoke, and to deter or weaken policy measures needed to protect the public.

In 2008 another WHO report documented sustained industry efforts to interfere with tobacco control.³ The activity summarised in these reports undoubtedly contributed to many premature deaths that timely policy interventions and resources could have averted. These reports informed development and implementation of the world's major public health treaty, the Framework Convention on Tobacco Control, and demonstrated the need for important industry

monitoring projects like Stopping Tobacco Organizations and Products.

Today, Trump and right-wing corporate media have utilised the well-rehearsed tactics of tobacco companies as they disseminate dangerous misinformation about COVID-19 and its origins, treatment and prevention. Musings and advice regarding internal use of disinfectant and prophylactic use of particular drugs not proven effective against the virus create confusion and lead the public to doubt scientific evidence. Yet, while some of Trump's attacks on others, including the WHO, are most likely efforts to distract attention from his own role in the abysmal US federal response to the current pandemic, they also serve the larger corporate elite's interests. As Trump undermines the WHO's role and status, he privileges scuttlebutt over science, and economic interests over public health. Ultimately, his actions will reduce not only the WHO's ability to address COVID-19, but its ability to restrain corporate disease vectors, whose freedom to profit from selling harmful products continues with devastating consequences.

Public health researchers have challenged the increasing influence of commercial determinants of health on population well-being.^{4,5} As Robert West has previously observed, 'The greatest challenge to improving health may lie in the tension between wealth-creation and health-creation'.⁶ Many non-communicable diseases have their origins in societal structures that allow unfettered corporate marketing of tobacco, unhealthy foods and drinks, use of polluting and climate-disrupting fossil fuels and financial entities that privilege the wealthy and powerful at the expense of the poor and disadvantaged. The WHO has rightly responded to harms arising from growing corporate power by calling on governments to do more to address the role of corporations in shaping health policies and practices.

For tobacco, the WHO Framework Convention on Tobacco Control's (FCTC) Article 5.3, which calls on countries to take steps to protect policymaking from tobacco industry influence, offers a crucial mechanism governments may use to protect their citizens. Although still to be successfully implemented in

many countries, this Article has nonetheless drawn attention to tobacco industry practices and enabled tobacco control advocates to exclude industry voices from policy discussions. More generally, the WHO FCTC Secretariat has urged governments to implement the FCTC and asked other UN agencies to avoid collaboration with tobacco companies.⁷

Given the WHO's leadership in a decades-long struggle to counter the tobacco industry's duplicitous behaviours and prevent the enormous harms their actions have caused, anti-WHO rhetoric is alarming. Weakening the WHO's credibility and capacity to provide leadership is just one element of a rising anti-public health discourse, which insists that free-market approaches to public health problems are a superior alternative to government regulation aimed at reducing the power of the market that created the problems in the first place. These activities are distressing and dangerous, particularly in the context of COVID-19.

Within tobacco control, this emphasis on market-based solutions rather than robust policy measures is most apparent in some 'tobacco harm reduction' circles. A small group primarily acting outside the public health research community seem to have interests remarkably well aligned with those of tobacco companies, perhaps because many of them are recipients of these companies' financial largesse. Rather than push for reducing the availability and attractiveness of, and access to, the most deadly products, they promote the widespread availability and uptake of multiple types of tobacco and nicotine products.

There is an important debate to be had about government-sanctioned use of e-cigarettes and other nicotine and/or tobacco products as alternatives to combustible cigarettes, and talented researchers with differing views are producing robust evidence that will inform this debate. However, some in the 'harm reductionist' camp argue that public health has set the wrong priorities in focusing on policy measures designed to reduce tobacco consumption. Public health experts also stand accused of actively exploiting and 'scapegoating' the poor and indigenous peoples most likely to use tobacco products, particularly during COVID-19 restrictions. Members of these industry-linked groups publish essays in industry-funded publications, which the industry-funded groups that funded the authors then disseminate as though the ideas and conclusions offered were disinterested.

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Soundbites from these ‘outputs’ seem mostly to reverberate within the echo chamber inhabited by tobacco companies and their affiliates, but they may also reach and influence the public and policymakers, and that is, of course, the intention. This thinly disguised industry propaganda may even shape the thinking and discourse of political leaders, such as Trump, who have a responsibility to use scientific evidence to inform decision-making. For tobacco companies and their allies, COVID-19 has created a perfect confluence of political ineptitude and public anxiety—what better time to accelerate ongoing efforts to undermine public trust in health authorities?

As we face an infectious disease pandemic unprecedented in our lifetimes, we must continue to focus on the on-going pandemics caused by corporate interests, remind policymakers of the countless deaths caused by non-communicable diseases, and press for and support the strong global leadership provided by the WHO. We cannot allow the WHO, imperfect though it may be, to become captured

by corporate interests. Public health is relentlessly political, politics is relentlessly about power and power is shaped and reshaped by the tenacity of those who stand up and use it.

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REFERENCES

- 1 BBC. Coronavirus: us to halt funding to who, says Trump, 2020. Available: <https://www.bbc.com/news/world-us-canada-52289056>
- 2 Zeltner T, Kessler DA, Martiny A, et al. *Tobacco company strategies to undermine tobacco control activities at the world Health organization*. Geneva: World Health Organization Available, 2000. <http://www.who.int/genevahearings/inquiry.html>
- 3 World Health Organisation. *Tobacco industry interference with tobacco control*. WHO Press, 2008.
- 4 Kickbusch I, Allen L, Franz C. The commercial determinants of health. *Lancet* 2016;4:e895–6.
- 5 McKee M, Stuckler D. Revisiting the corporate and commercial determinants of health. *Am J Public Health* 2018;108:1167–70.
- 6 West R, Marteau T. Commentary on Casswell (2013): the commercial determinants of health. *Addiction* 2013;108:686–7.
- 7 Silva DC. Engagement with tobacco industry conflicting with UN principles and values, 2017. Available: <https://www.who.int/fctc/secretariat/head/statements/2017/ungc-integrity-review-tobacco-industry/en/>