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Capture and corporate cooptation: the role of the Mexican Foundation for Health in public health policy

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Introduction: Corporate capture responds to efforts to strengthen regulation or prohibition of commercial determinants of health [tobacco, alcohol, sugar-sweetened beverages, ultra-processed products (UPFs), commercial milk formula, and pharmaceuticals], in an attempt to interfere with public health policies that threaten the commercial, economic, and political interests of major industries. This manuscript proposes the characterization of the corporate capture of public health in Mexico, exercised through the Mexican Foundation for Health (FUNSALUD).

Methodology: An analysis of FUNSALUD and its stakeholders was carried out under the framework of commercial determinants of health, using a qualitative methodology, and executed in five stages: document analysis from 1985 to 2021; identification and characterization of stakeholders; semi-structured interviews; classification of corporate strategies; and relationship mapping.

Results: Actors in the pharmaceutical, food, tobacco, alcohol, commercial milk formula, and sugar-sweetened beverage industries were identified as corporate members of FUNSALUD. We identify six corporate strategies used to interfere in public health and food policies, highlighting the role of a revolving door bureaucracy in the case of the Ministry of Health.

Conclusion: The Mexican Foundation for Health has functioned as a front organization created by the private sector to influence public policy decision-making, protect corporate interests, and oppose international recommendations to combat non-communicable diseases.

KEYWORDS

commercial determinants of health, corporate practices, conflict of interest, health policy, nutrition policy

Introduction

The capture of public policy is the process whereby political decisions respond to the particular interests of an individual, a group of people, or a private organization, to the detriment of the public interest, through the intentional actions of such private agents. The consequence is unfair regulation or a lack of regulation when it is needed to protect the common good, which is harmed as a result (OECD, 2017). When public policy initiatives seek to regulate products that harm health such as alcohol, tobacco, sugar-sweetened beverages, UPFs, and commercial milk formula (Pérez-Escamilla et al., 2023), corporations become interest groups that take on outsized relevance in public policy debates.

According to Royo et al., corporate capture is exercised through various strategies that were first implemented by the tobacco industry and have since been imitated by the industries of sugar-sweetened beverages, UPFs, alcohol, tobacco, and commercial milk formula (Royo-Bordonada, 2019) in an effort to protect their economic, commercial, and political interests (Carpenter, 1936). According to Duran, corporate capture focuses on processes or situations where an influential elite, develops a collusive relationship with political elites at various levels (local, regional, and national) and in various state instances (regulatory agencies, ministries, and main economic bureaucratic instances; Durand, 2019). These strategies have marked the history of corporate influence on potentially harmful regulation of their products, and they have demonstrated the purchasing economic and political power they have acquired; as well as the impact and aspect it has on the formulation of public policies.

The legitimacy of the state is threatened by the corporate capture of political spaces and a development narrative that assigns a leading role to external private investment (McKeon, 2018). Multiple corporate practices aimed at capturing the state, science, and decision-makers have been documented, specifically, public health agencies are particularly susceptible to corporate capture, a process by which an institution promotes the commercial interests of industries and of other stakeholders, above public interests (Mindell et al., 2012; Wiist, 2016); for this, one of the mechanisms that can potentially lead to the capture of health is the capture of science, whose purpose is to distort the scientific evidence that links the consumption of certain products with health damage; through the financing of research, researchers, and the creation of institutes or front organizations, they tend to divert the narrative about the risk factors that lead to non-communicable diseases (Mialon et al., 2020a,b,c; Scrinis, 2020).

Another corporate aspect is the approach with decision makers to influence policy formulation mechanisms, in legislative and deliberative processes of public health initiatives (Savell et al., 2014); as well as, exercising influence through the revolving door as a way to penetrate the highest government spheres, whose intention is to favor the corporate interests by improving the internal knowledge, increasing the access of corporations to decision making and influencing policy outcomes (Robertson et al., 2019; Miller et al., 2021).

On the other hand, the industry has permeated the public health community by training human resources, creating institutional forums, using public relations or supposed social responsibility, and discrediting organizations, groups, or individuals who promote public health regulations; this has positioned the industry as leaders in public health (Mialon et al., 2015; Mialon and Mialon, 2018), this has been a strategic key for the private sector to lead a narrative on health problems; in addition to influencing public opinion and positioning their interests on the public agenda (Carriedo et al., 2022).

Thus, close relations between corporations and public bodies can result in a lack of transparency and independence of regulatory bodies, which in turn can lessen the effectiveness of the State's efforts to combat non-communicable diseases linked to poor diet (Laswell, 1958). For example, international instruments speak of "institutional corruption," which is the normalization of conduct

that endangers transparency and gives rise to the formation of networks of perverse incentives, in which health agents take advantage of their position in an organization to influence institutional processes and actions. Considering that the risk of undue corporate influence or capture is generated especially by multinationals, trade associations, consortia, and philanthropic foundations, our analysis is especially concerned with these actors, to which we refer as the corporate sector.

At a global level, different corporate practices of advocacy in public health policy have been identified, which have been called commercial determinants of health (CDoH), a term that Gilmore et al. define as "the systems, practices, and pathways through which commercial actors drive health and equity (Gilmore et al., 2023). This definition aims to convey four key issues, (1) encompasses all commercial entities rather than just corporations because we recognize their diversity; (2) goes beyond a simple focus on unhealthy commodities and profits as the sole driver; (3) aims to recognize positive and negative contributions and the potential for change; and (4) focus the definition on health (both human and planetary health, which are interlinked and codependent).

Corporate influence is exerted through seven practices, political, scientific, financial, marketing, supply chain and waste, labor and employment, and reputational management. The extent to which each business entity engages in these practices, and whether they cause harm, depends on that entity's product, business model, and growth strategy. Practices vary according to the context in which the entities operate, with transnational companies having the most power and influence in decision-making; it has also been shown that in low- and middle-income countries they start all their machinery running through gaps in the regulations (Gilmore et al., 2023; Lacy-Nichols et al., 2023).

The concept of commercial determinants of health encompasses different levels, from the micro or individual to the macro or structural. Baron mentions that the structural level is made up of the market and non-market components, which are shaped by corporations to position, market, and promote their products, in this sense, through the market and non-market strategies, they can influence decision-making, in the stakeholders, institutions, and initiatives that seek to regulate corporate action (Baron, 1995). Among the policies that the industry seeks to interfere with are fiscal (tax), regulatory (labeling and advertising), commercial (sale of UPFs), and prohibitive (UPFs in the school environment).

In Mexico there is an institution that has established the country's health agenda for more than 30 years; the Mexican Health Foundation, better known as FUNSALUD, was founded in 1985, with the support of then-Minister of Health, Guillermo Soberon Acevedo, with the aim of "promoting the development of high-level human resources [and] supporting health research, in a framework of collaboration and respect with the federal government" (FUNSALUD, 1985).

In 1985 FUNSALUD had the participation of 22 entities and commercial actors that constituted the assembly of the organization at that time, and that belonged to the financial, ultra-process food, automotive, food and baby products, department stores, construction, pharmaceutical, and hospital sectors. However, with time, various commercial entities have joined the ranks of the

organization; in 2021 a total of 56 people from the board of directors; 61 people from the general assembly of associates (founders, active and honorary); and 26 commercial organizations (commercial associates), these represent shareholders and directors of the main companies in the food, pharmaceutical, health, and financial sectors at a national and international level.

FUNSALUD has been involved in public policy decision-making through varied strategies, among them the strategic placement of its former officers in the federal government. The most documented initiatives the foundation has spearheaded include the modification of the Mexican public health system, with proposals such as universal health service, decentralization, and the creation of popular insurance (Loera, 2016).

In Mexico, various initiatives derived from FUNSALUD corporate capture in the health have been documented, including violations of the Framework Convention for Tobacco Control (Madrazo-Lajous and Zambrano-Porras, 2007; Burch et al., 2010; Guerrero et al., 2010), the Food and Beverage Advertising Self-Regulation Code (PABI Code; Instituto Nacional de Salud Pública, 2020), and Frontal Food Labeling (GDA Labeling; El Poder del Consumidor, 2014; Calvillo and Székely, 2018) and the implementation of the “designated driver” campaign by the alcohol industry (Robaina et al., 2020).

We use a dynamic-relational approach to understand this agreement, identifying the structural and institutional factors that generate or facilitate more marked situations of capture, and the networks used by corporate elites to protect their interest and take advantage. This manuscript proposes the characterization of the corporate capture of public health in Mexico that has been exercised through the Mexican Foundation for Health (FUNSALUD), with emphasis on the commercial determinants of health as well as the influence of members of the foundation and its relationship with the corporations of ultra-processed industries, sweetened beverages, tobacco, alcohol, and commercial milk formula and its influence on government policy agendas for harm prevention.

Materials and methods

An analysis of FUNSALUD and its stakeholders was carried out in the framework of the commercial determinants of health, using a qualitative methodology, and executed in three dimensions: (1) document analysis from 1985 to 2021, (2) stakeholder identification in high command positions in government; and (3) characterization of the corporate capture of the state through the foundation.

Document analysis

For the search of scientific literature, databases such as Pubmed and Scielo were reviewed, using the search terms “FUNSALUD” AND “conflict of interest” “Pharmaceutical” AND “Popular Insurance” AND “Health Policy;” AND “Mexico.” For the review of gray literature, documents from FUNSALUD and the organization’s website, news articles, online books, reports from civil society organizations, congressional minutes, and professional profiles were consulted. For this search, search engines such

as Google, and LinkedIn were chosen, with keywords such as “FUNSALUD” OR “Mexican Foundation for Health” AND “interference” AND “conflict of interest” AND “public policy” AND “tobacco” AND “alcohol” AND “sugar-sweetened beverages” AND “Nestlé” AND “corporations” AND “revolving doors” AND “incidence” AND “Ministry of Health.” Information was collected for the period from 1985 (the year of FUNSALUD’s creation) through 2021.

Stakeholder identification

Our analysis of the General Associates’ Meeting (Spanish acronym AGA) of FUNSALUD helps form a perspective on the people who have held executive and management positions in FUNSALUD in recent years. To analyze FUNSALUD’s AGA, we selected the period from October 2019 to October 2021. The reason for addressing this period is to observe changes in AGA membership under the current federal administration headed by Andres Manuel Lopez Obrador, which took office on December 1, 2018. However, although the analysis of AGA membership focuses on the last 2 years, at the same time we analyzed the positions its members have held in the public and private sectors since the Foundation was created in May 1985. To reconstruct the relationship mapping of AGA members, backward searches were conducted using public sources such as the Public Registry of Commerce (Spanish acronym RPC), reports of companies listed on the Mexican Stock Exchange [Spanish acronym BMV and those submitted by companies to the U.S. Securities and Exchange Commission (SEC)]. The positions of the AGA members in the business sector were defined by their membership status, taking into account if they held a position of high responsibility (general manager or CEO), served on the Board of Directors, or were shareholders or business owners. This way, in the AGA the business sector is linked in two ways: (a) through the owners or members of the founding families who act as active associates, honorary or founders, and (b) through directors with high responsibilities who participate as representatives of institutional partners.

In the case of AGA members who have formerly held positions of high responsibility in the public sector, such as federal cabinet secretaries and undersecretaries, and directors of organizations in charge of health in Mexico, their property declarations registered in the government portal *Declaranet* were consulted. In the case of members holding positions in the social sector, the annual reports of universities, research centers, foundations, and civil society organizations (CSOs) were reviewed.

Characterization of the corporate capture of the state through the foundation

To analyze corporate capture in public health in Mexico through FUNSALUD, we use the framework proposed by Marion Nestle, which focuses solely on the capture of science and public policies in food health; however, we apply it to characterize the strategies in FUNSALUD, which is an organization that in

TABLE 1 Actors who participated in the semi-structured interviews.

Sector	(N = 12)
	Número
Multilateral Organization (MO)	3
NGOs	4
Academics (ACA)	4
Media (MED)	1

Actors: We are referring to people who work in the mentioned sector, not groups of people.

its activities conducts research, finances institutions dedicated to science and exercises political power to influence public policies.

The classification of corporate capture proposed by Nestle (2018), focuses on political strategies such as (a) revolving doors, (b) financing of institutes dedicated to science, (c) use of front groups, (d) granting of monetary prizes or other incentives for research, (e) promoting self-regulation, (f) making use of “corporate responsibility.” The advantage of using this framework is that it focuses solely on the characterization of the capture of science, through interference in institutions that generate scientific evidence, researchers, and decision-makers. The disadvantage is that the framework has only been used to characterize corporate capture in the ultra-processed and sugar-sweetened beverage industry, and has not been used to describe other corporations.

To complement and rectify the documentary information collected, we conducted 12 interviews with actors, who were aware of FUNSALUD’s influence on and interference in different public policies related to big industries (UPFs, sweetened beverages, tobacco, alcohol, and commercial milk formula); and actors who hold or held positions within some government and private agency. The selection of informants was carried out through documentary analysis and the snowball technique (Table 1). For their selection, their relevance and participation in the study topic were considered, as well as their knowledge of public health policies, corporate strategies, and interference in health initiatives by FUNSALUD.

Initially, permission to participate was obtained by signing the informed consent letter for each participant. An interview guide previously piloted with experts in the field was applied, which was made up of four sections. (1) General information of the informant, (2) General knowledge about the incidence of FUNSALUD in the Health System in Mexico, (3) Direct or indirect strategies for corporate capture of public health in Mexico, and (4) Experience in incidence processes in public policies (tax policies, tobacco control, alcohol regulation, food labeling, and infant formula regulation). The interviews lasted ~45 min; a Jitsi meet platform was used for communications, which is an encrypted program to make video calls, the research was carried out in the context of the COVID-19 pandemic, so there were restrictions on face-to-face meetings, which is why it was decided to use Jitsi platform to hold virtual meetings. The semi-verbatim interviews were transcribed, and the information was collected in content matrices; also, participants’ confidentiality and anonymity were ensured.

The analysis of the qualitative information was carried out under the theoretical scheme used, that is, we carried out

selective coding according to the Marion Nestle Framework, and the complementarity of the data with the literature survey was assessed (Busetto et al., 2020; Tenny et al., 2024). The key information we identified in our data was (1) interactions between key leaders of FUNSALUD and corporations; (2) corporate participation in FUNSALUD; (3) use of revolving doors between FUNSALUD directors with government positions; (4) narrative review of our results in the form of mechanisms we identified in which corporations might exert their influence in and through FUNSALUD; (5) corporations funding to institutes dedicated to science; and (6) promoting self-regulation. However, the data not found was the granting of incentives (financial, material, or other), which is contemplated within the Marion Nestlé framework.

Results

Identification of actors

Through the documentary analysis of FUNSALUD we were able to identify 22 partners including Guillermo Soberon (former secretary of health—Government sector), who included department store owners such as Jeronimo Arango (Walmart Mexico), and Nicolas Madahuar (Super Maz); directors of banks such as Carlos Abedrop Davila (bank of the Atlantic); Jose Carral Escalante (Bank of America); and Ruben Aguilar (Banamex), as well as owners and representatives of industrial companies, pharmaceutical firms, and hospitals, and even actors and artists. In Figure 1 we can see a proportion of 21 commercial actors summoned by Guillermo Soberón from his position as minister of health in Mexico. So after finishing his position in the public sector, he became president of the organization.

FUNSALUD’s organizational structure is divided into (1) a general associates’ meeting (FUNSALUD, 2021a,b), (2) a board of directors (FUNSALUD, 2021a,b), and (3) its human resources (FUNSALUD, 2021a,b). The associates’ meeting is divided into (a) founding associates; (b) active associates, who are representatives of corporations, leaders of commercial chambers, lobbyists, and corporate CEOs; (c) honorary associates, many of them former public officials (health sector), directors of foundations, and representatives civil society and (d) institutional associates, mainly from pharmaceutical companies, commercial chambers, and manufacturers of processed foods (Bimbo, Nestlé; see Supplementary material 1). Our sources maintain that FUNSALUD protects the interests of its associates and does not concern itself with the real problem of chronic non-communicable diseases.

“It is necessary to review the historic agenda FUNSALUD has adopted, with minimal commitment to risk factors and no meaningful action on recommendations made by institutions such as WHO, PAHO, and FAO, or even the United Nations program against drugs and crime. They seem to serve only the interests of [manufacturers of] junk food, sugar-sweetened beverages, tobacco, and alcohol...” (NGO 1).

According to FUNSALUD’s bylaws, its “governing body” is the General Associates’ Meeting, which has four types of partners:

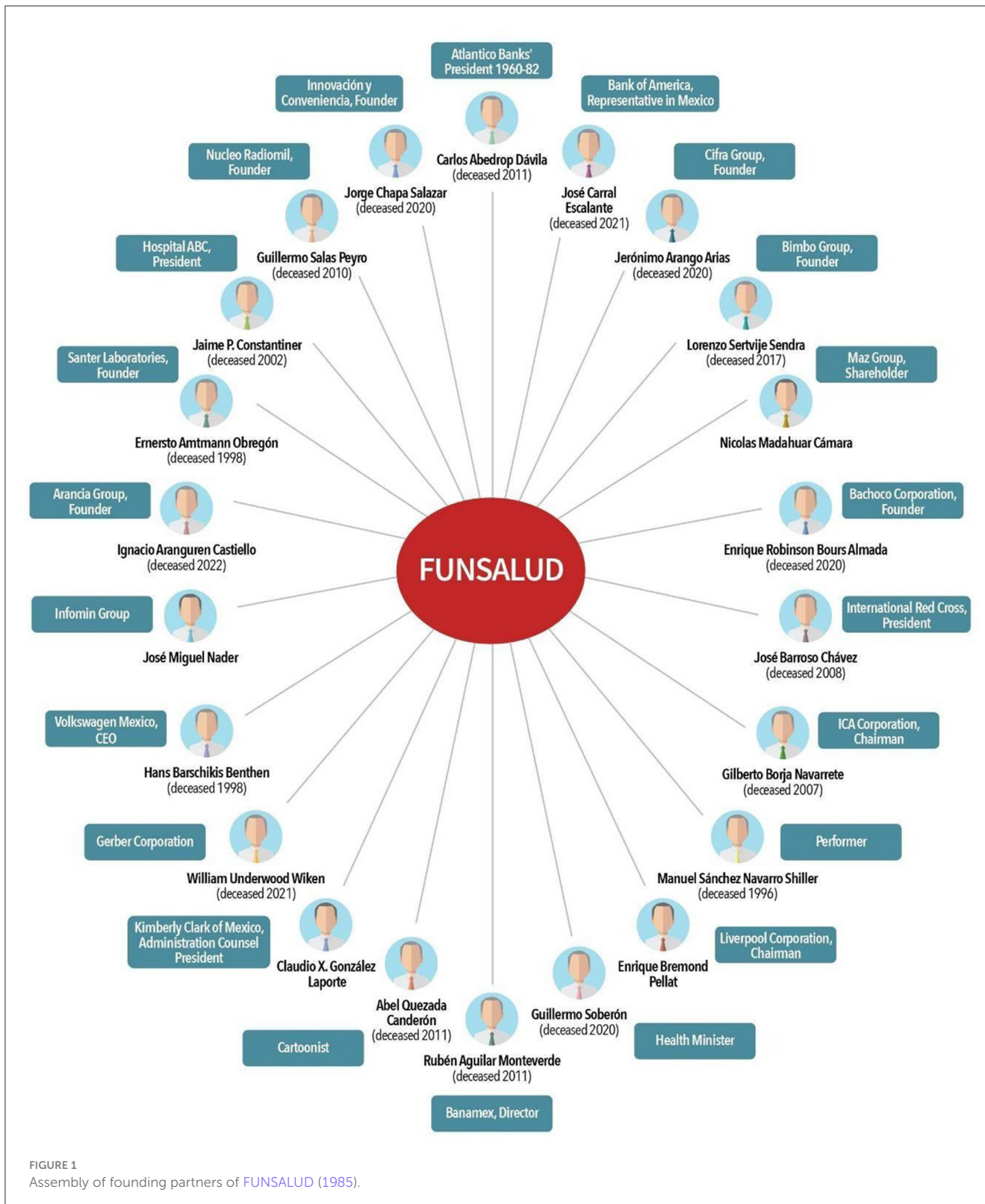


FIGURE 1 Assembly of founding partners of FUNSALUD (1985).

founding, active, honorary, and institutional. From October 2019 to October 2021, the AGA was made up of 79 people who act as founding, active and honorary associates, with 22 companies and 6 chambers and commercial organizations as institutional associates, for a total of 107 members. The existence of the figures

of the executive president and chairman of the board explains the relationship between the public and private sectors in FUNSALUD. Although FUNSALUD has employed 19 high-profile former public servants (revolving doors) since its founding, including five former Ministers of Health named to positions in the AGA, as

president and executive vice-president, or on the Foundation's technical committees, none of the former public officials has been named chairman of the Board of Directors. In addition to being former public officials, the individuals appointed to the AGA are shareholders or hold high-ranking positions in large domestic and international companies in the food, pharmaceutical, health, and financial sectors (see Figure 2). All of these actors were in FUNSALUD before taking a position in the federal or state government; in some cases, like Mercedes Juan, they held positions in both the public and private sectors.

López, held the executive presidency of FUNSALUD from 2009 to 2012, which she resigned to join as secretary of health. The interests of FUNSALUD were immediately placed on the agenda with the proposal for universality of health services. This proposal included having a single fund; financing via general taxes; capitation principle; competition between providers, including the private sector; subrogation of services; and freedom of choice and prioritization of interventions and conditions “in packages” (Ocaranza and Escamilla, 2023).

The reform also initiated the process of decentralizing public health services, delegating functions, authority, and resources to the states. However, at the same time, these changes opened the door for private businesses to get involved in efforts to improve the efficiency and quality of services to expand eligibility to members of the population who lacked social security benefits (Cardozo, 1993; Jaramillo-Cardona, 2007; López and Blanco-Gil, 2017).

Corporate strategies

Revolving doors

FUNSALUD's relevance within the Political System in Mexico is rooted in the roles its members have held in government institutions: 19 high-profile former public officials have joined the Foundation after leaving their posts or have left the government to serve on the AGA or the Board of Directors. Likewise, owners and shareholders of large companies in the domestic and international pharmaceutical, food, and financial sectors have held positions in the country's main public health institutions. Such former officials include three former governors, three former CEOs of Petroleos Mexicanos (Pemex), six former federal cabinet members, five former Ministers of Health, and several heads of major public health organizations (Figure 3).

Of the most emblematic cases, the position of Minister of Health stands out, with five of the last 10 health ministers having passed through FUNSALUD. Guillermo Soberon, who headed the Ministry of Health (Spanish acronym SSA) between 1982 and 1988, and just a year after leaving the SSA, became FUNSALUD's executive president and president emeritus. During his tenure in FUNSALUD, Soberon reached an agreement with Nestlé, to create the Nestlé Fund for Nutrition (Spanish acronym FNN), that is, the Nestlé body to generate scientific evidence in favor of its products. Jesus Kumate Rodriguez, Minister of Health in the period 1988–1994, also joined FUNSALUD years later (2002), holding the position of an honorary member until 2017.

Julio Frenk Mora, who headed the SSA from 2000 to 2006, is another example. Unlike Soberon and Kumate, Frenk Mora passed

through the Foundation first, having been invited by Soberon to serve on its Technical Council and as executive vice-president between 1989 and 1995. During his tenure as Health Minister, the Center for Genomic Medicine was created, under the terms of an agreement signed between the SSA, FUNSALUD, the National Autonomous University of Mexico (UNAM), and the National Council on Science and Technology (CONACyT). In addition, as Minister, Frenk implemented the *Seguro Popular* program based on his “Economy and Health” study, which was financed by FUNSALUD.

The next head of the SSA was Mercedes Juan Lopez, who was executive president of FUNSALUD from 2009 to 2012, resigning to take office as Minister of Health for the period 2012–2016. FUNSALUD's interests were embraced almost immediately by Juan Lopez, in proposals such as universal health services, an issue that FUNSALUD had supported for more than 15 years. Jose Narro Robles, Juan Lopez's successor in the SSA, also joined FUNSALUD as an advisor to the Technical Committee in early 2016, even though he was Minister of Health, and held this position until October 2019.

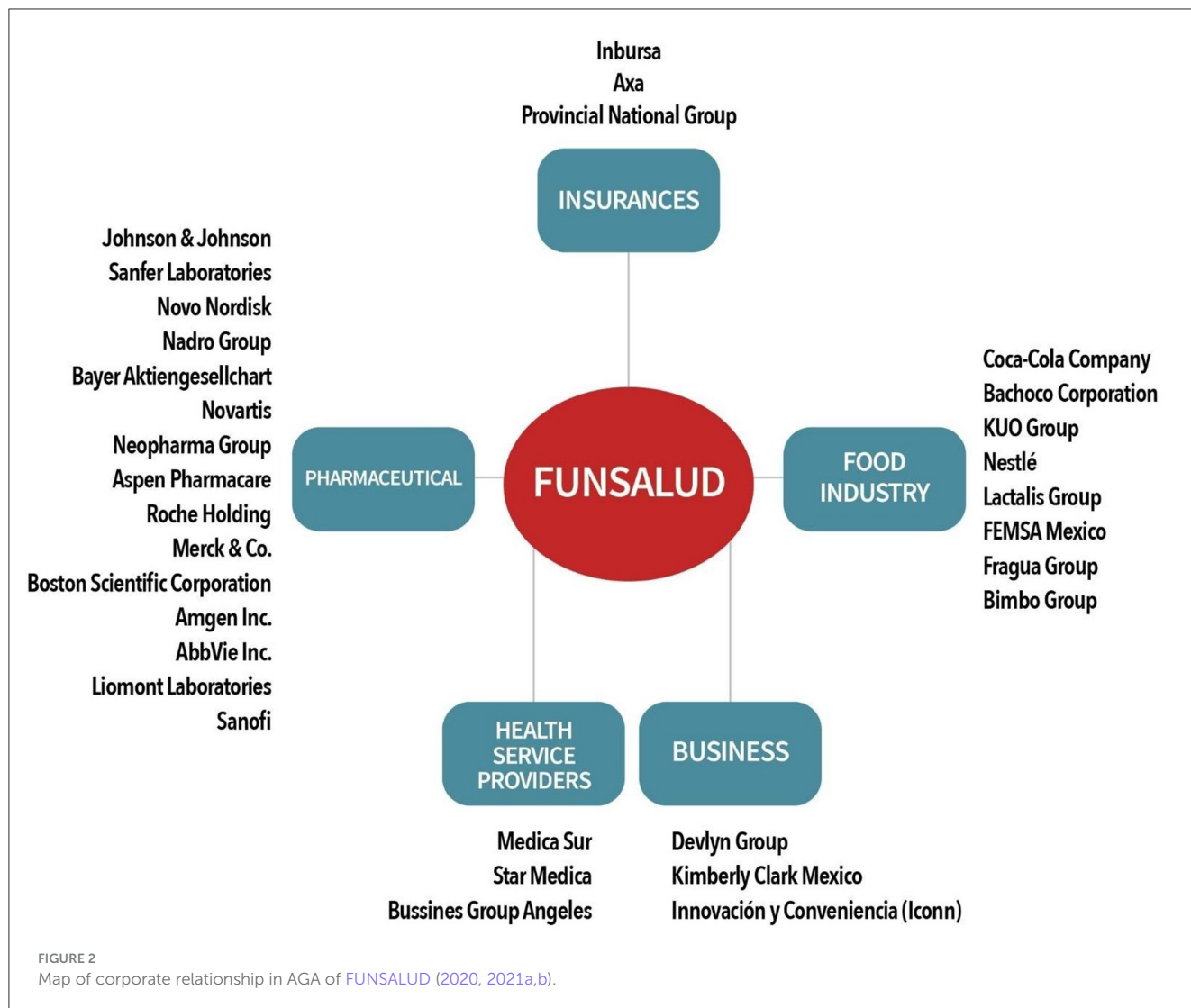
“...the decisive influence FUNSALUD has exercised on the appointment of Ministers of Health represents a clear conflict of interest; and if clearer mechanisms were established, I am sure that those functionaries would not have assumed the position of the Ministry of Health...” (Activist).

From the position of health ministers, they interfered in public health policies such as the anti-tobacco law, the prohibition of advertising aimed at children and adolescents, frontal labeling of food, tax on sugary drinks, among others, they also opened the government to other personalities in the private sphere to protect economic and commercial interests of large corporations.

According to our informants, one of the reasons why FUNSALUD has influenced or interfered in health policies in Mexico is due to the interests of its associates. One of the policies in which FUNSALUD has a significant interest is the reform of the health system; some of our interviewees mentioned that the main commercial entities benefiting from these reforms are pharmaceutical companies, private hospitals, and insurance companies that are part of the organization's network of associates.

On the other hand, some policies such as tobacco control, regulation of alcohol or ultra-processed products, FUNSALUD has had a position against these measures given that at the time industries such as Cigarrera La Moderna (now British American Tobacco) and Bacardi had an important presence within the organization; However, other corporations, such as Coca-Cola and Nestlé, continue to be represented within FUNSALUD, and these last two examples have been the entities with the greatest interference in regulations such as taxes on sugar-sweetened beverages, front warning labeling; and regulation of advertising.

“Instead, there is the interest of corporations to generate an economic benefit and on the other hand there is the intention and obligation as a right, so very frequently we have been able to observe actions and omissions of FUNSALUD that are related to the industry and its representative on different points of the agenda in advance of health protection” (ACA 2).



Financing of institutes dedicated to science

FUNSALUD has allocated funding to public institutions dedicated to research, specialized publications, academic forums, and collaborative projects. Through access to information requests, we were able to identify 28 agreements between Nestlé and FUNSALUD with INMEGEN between 2005 and 2020 (Supplementary material 2), which underscore the intrinsic relationship between the three entities; agreements signed between INMEGEN and FUNSALUD in March 2010 established that the Foundation would be in charge of managing funds allocated by Nestlé to three programs: Nestlé Scholarships in Nutri-genomics, a research project for the treatment of fermented dairy food, and the administration of the Nestlé Chair in Nutri-genomics.

Nestlé has also actively participated in various public health policies in Mexico, such as the National Crusade against Hunger; the National Strategy for the Prevention of Overweight, Obesity, and Diabetes; and the National Strategy for Breastfeeding. Many of them were designed by FUNSALUD and implemented by key actors aligned with the interests of big corporations, such as Julio Frenk Mora and Mercedes Juan Lopez.

Use of front groups

One of the most widely reported cases involving a front group was the Mexican Observatory of Non-Communicable Diseases (Spanish acronym OMENT), which was created in 2014 to support decision-making on the performance of the National Strategy for the Prevention and Control of Overweight, Obesity, and Diabetes (Spanish acronym ENPCSOD) by Dr. Mercedes Juan, at the time Minister of Health, and Under-minister of Prevention and Health Promotion Dr. Pablo Kuri. This observatory had as its stated purpose the surveillance, monitoring, and implementation of public policy against obesity. However, more than half of its members were representatives of the UPFs industry or financed by organizations including the National Chamber of the Transformation Industry (CANACINTRA), the Confederation of Industrial Chambers (CONCAMIN), the Mexican Council of the Industry of Consumer products (ConMéxico); the Mexican Diabetes Federation (Nestlé, Coca-Cola, Bimbo), We Want Active Mexicans (Femsa Coca-Cola, Bimbo, PepsiCo, Qualitas), the Mexican Academy of Pediatrics (Nestlé); the Mexican Foundation for Health (Nestlé), the Mexican Institute for Competitiveness

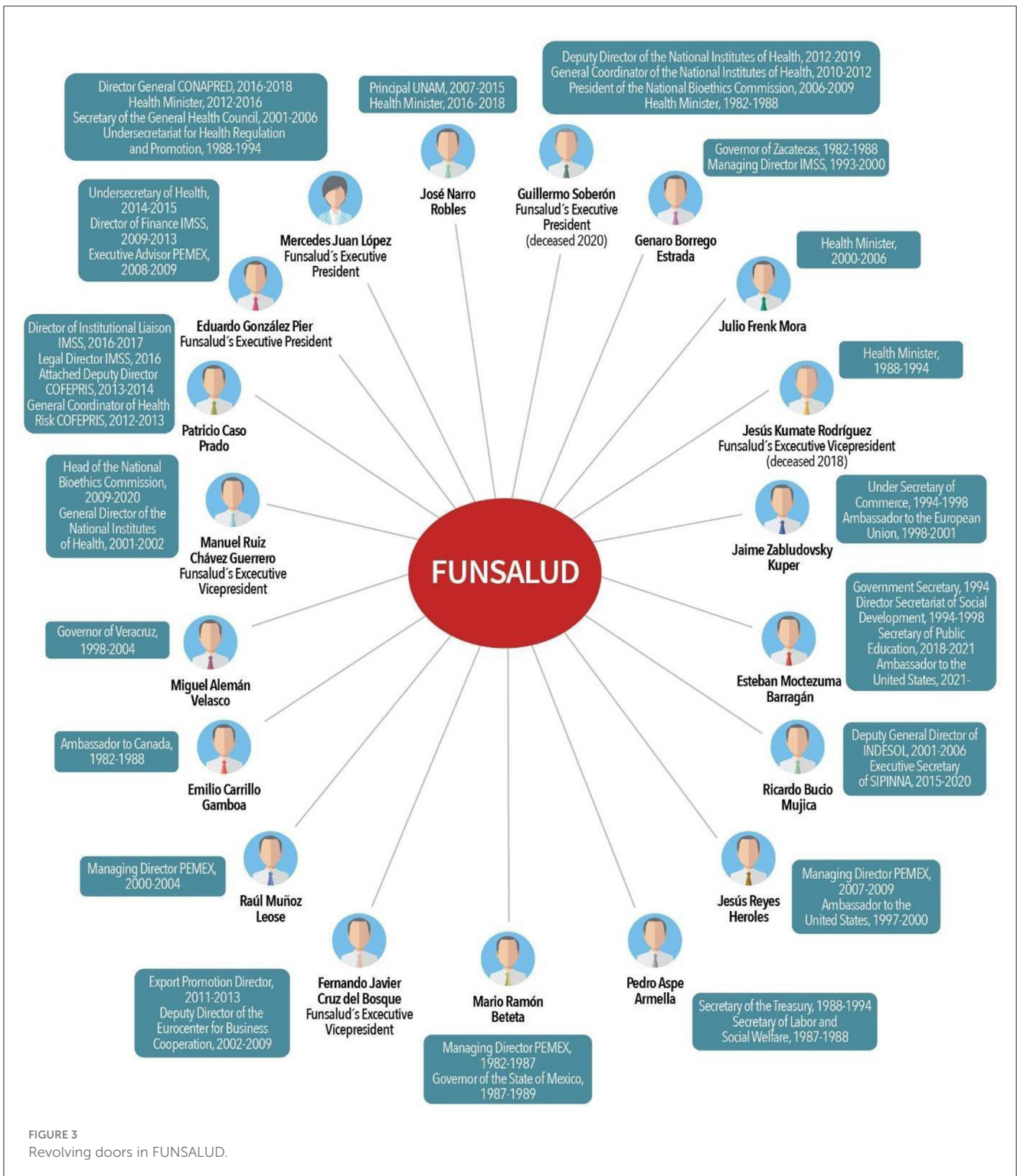


FIGURE 3
Revolving doors in FUNSALUD.

(with Bimbo and ConMéxico represented on its Board of Directors), [and] the Aspen Institute (with representatives of Coca-Cola on its board of directors).

“...let us not forget that Dr. Mercedes Juan herself never wanted to make a public commitment in favor of fiscal policies and front labeling of foods to advance in regulation of these

products, and even Dr. Jose Narro himself, who sometimes employed rhetoric ostensibly in favor of such policies, in practical terms did absolutely nothing” (Multilateral organization).

Within the OMENT, FUNSALUD had a space as an advisor, forming a coalition with the industry to block regulatory initiatives such as the front labeling of foods and the regulation of advertising

aimed at children and adolescents. According to a civil society representative free of conflict of interest who was at the OMENT working tables, she mentions:

“I highlight my participation in the OMENT, I joined at the time when the possibility of implementing new labeling was being discussed, and the industry did not recognize the term ‘ultra-process’ which is an interference tactic, these groups opposed labeling included commercial chambers such as ConMexico, and CONCAMIN; and as ‘representatives’ of civil society were FUNSALUD and the Mexican Diabetes Federation (NGO 3).”

OMENT lobbied in favor of corporations, and public health initiatives that sought to regulate UPFs and sugar-sweetened beverages were blocked. From this observatory, organizations free of conflict of interest such as the National Institute of Public Health were excluded.

Granting of monetary prizes or other incentives for research

Each year, the Nestlé Fund for Nutrition (FNN), the Salvador Zubirán National Institute of Medical Sciences and Nutrition (INCMNSZ), and the Association of Members of Faculties and Schools of Nutrition (AMFEN) sponsor the “Nutrition Research Awards,” which has as its stated aim to “recognize and promote scientific research carried out in Mexico in different areas of nutrition, with emphasis on research aimed at solving health and nutrition problems.” From 2015 to 2021, the awards supported 30 research projects in applied science, basic science, and social and cultural environment, in areas including epigenetics, metabolic changes, and individual eating habits as risk factors for the problem of NCDs.

Promoting self-regulation

Starting in 2010, Mexico adopted the use of daily nutritional guidelines (Spanish acronym GDA), a labeling system designed by the food and beverage industry, which was not based on scientific evidence and was difficult to understand even for students of nutrition. Despite widespread criticism and pressure from CSOs to regulate front labeling of food, in 2014 it was declared mandatory by the Federal Commission Against Sanitary Risks (Spanish acronym COFEPRIS), led by Mikel Arriola Peñalosa, and with support from Dr. Mercedes Juan in the SSA. At this time, Patricio Caso Prado was the Counterpart Director-General in COFEPRIS and was responsible for establishing mandatory criteria for GDA labeling (driven by the industry), in collaboration with Matiana Ramirez Aguilar and Juan Leonardo Menes Solis.

The implementation of the GDA label in Mexico was in complicity between Patricio Caso Homologous Director General of COFEPRIS and Coca-Cola; this was documented thanks to an email exchange between both parties; and once Patricio Caso finished his work within COFEPRIS, he joined the ranks of Coca-Cola as Senior Director of Government Affairs. Currently, Patricio Caso represents Coca-Cola in FUNSALUD as a member of the General Assembly of Associates.

During the presidency of Vicente Fox Quesada, with Julio Frenk Mora heading the SSA, Mexico would ratify the Framework

Convention for Tobacco Control. However, weeks before, Health Minister Julio Frenk signed an agreement with the tobacco companies (known as the Frenk Agreement) that established guidelines for advertising and imposed a ban on sales of cigarettes to minors, mandating warning labels and barring companies from making investments in products aimed at children. The Frenk agreement did not adhere to the international recommendations of the Framework Convention for Tobacco Control, contained in Article 5.3, which states that no decision-maker should negotiate with the tobacco industry, but instead forced the tobacco companies to contribute to the SSA's Fund for Protection against Catastrophic Expenses (FPGC), stipulating a contribution of “one peso per pack.” Such contributions did not continue and were maintained only until 2007 when Julio Frenk resigned from the SSA. Once Frenk finished his administration as head of the health ministry, he worked at the Carso Foundation, which received funds from tobacco companies (revolving doors), and according to our informants, this action cost him the WHO Directorate.

Use of corporate social responsibility

FUNSALUD has collaborated to award corporate social responsibility badges to its members through the Mexican Center for Philanthropy (Spanish acronym CEMEFI), of which FUNSALUD is a founding partner. CEMEFI's programs with the greatest impact include the Socially Responsible Company (Spanish acronym ESR) distinction, and in 2021 alone companies that obtained this certification were in the areas of mining, UPFs, pharmaceutical, automotive, alcoholic beverages, stock trading, health services, universities, convenience stores, gas stations, radio, television, [information] technologies, telecommunications, agrochemicals, hotels, etc. Regarding UPFs (production and distribution), corporations such as Grupo Bimbo, Walmart México, Jugos del Valle, Nestlé México, Oxxo, Grupo Lala, Unilever, FEMSA, and JUMEX, among others, have obtained this ESR distinction, despite evidence that Coca-Cola and Nestlé are the companies that generate the largest amount of plastic waste, in addition to the impact their products have on NCDs.

Discussion

Our literature review and interviews allow us to confirm that FUNSALUD and its associates have exercised a powerful influence on public health policy in the last three decades in Mexico. Through corporate strategies such as lobbying, revolving doors, creation of front groups, cooptation of science, and promotion of self-regulation, they have sought to protect products that are harmful to human health and are considered CDoH. Corporate capture has been a strategy widely used by the private sector in Mexico through FUNSALUD; in this way influences the public agenda, establishing priorities in public health, and interfering in those initiatives that seek to regulate unhealthy products.

FUNSALUD was founded and constituted as an organization of the corporate sector, where pharmaceutical companies; manufacturers of UPFs, sugar-sweetened beverages, commercial milk formula, and alcoholic beverages; insurers; hospitals; banks; laboratories; and medical service providers converge in space for advocacy and lobbying on health policies in Mexico. At a global

level, the ultra-processed and sugar-sweetened beverage industry has used the organization International Life Sciences Institute (ILSI) as a source of scientific evidence (Mialon et al., 2020a,b,c, 2021a,b) and lobbying to interfere in fiscal (tax), regulatory (labeling and advertising), commercial (sale of UPFs), and prohibitive (UPFs in the school context) policy (Pedroza-Tobias et al., 2021). This body has been singled out in cases of conflict of interest and putting commercial interests before public health at the global level (Jacobs, 2019). Recently, the conference on climate change (COP27) held in Egypt in 2022, was pointed out as being conducted with a conflict of interest, given that The Coca-Cola Company was the main sponsor to carry out the meeting, taking into account that the soda is the industry with the highest production of plastic pollution (Allen, 2022). In a recent study, Carriedo et al. (2022) evidenced that the Academy of Nutrition and Dietetics receives funds from corporations such as Nestlé, Pepsico, pharmaceuticals, and agribusiness corporations. This has had implications for DNA pro-corporate stances regardless of whether it goes against the global and public health agenda (Carriedo et al., 2022).

Our findings are consistent with other studies that show revolving doors as one of the many resources corporations use to protect their interests. In the case of FUNSALUD, it was shown that 19 high-level officials such as governors; officials in the areas of trade, social development, government, the oil industry, internal revenue, foreign service, and health have held positions in the foundation. It is worth highlighting the role of the last five Ministers of Health, who have played an important role in interfering with health policies such as tobacco control, front labeling of food, and the tax on sugar-sweetened beverages. An exemplary case of the revolving door phenomenon involves Vicente Fox, a former official of Coca-Cola's Latin America division who later was elected president and during his administration actively worked to help Coca-Cola expand its market (Gómez, 2019); an illustrative case has been Patricio Caso, who was deputy director of COFEPRIS, during the exercise of his work within the institution, allowed the intrusion of Coca Cola in COFEPRIS to influence the front-of-package labeling; and as of 2020, he joined as Senior Director of Government Affairs of the soda company (Velázquez and Rosales, 2021). In Colombia, Coca-Cola collaborated with the Ministry of Health to create education and food support programs for families with children under 2 years of age (Mialon et al., 2020a,b,c). In Brazil, Ecuador, Panama, and Venezuela, the tobacco industry has penetrated governments; and has influenced national policies such as tobacco production, illegal market policies, and economic revival through the marketing of tobacco products (Valdivieso et al., 2021).

Officials linked to FUNSALUD by having held positions such as president, vice president, or honorary adviser have promoted corporate self-regulation from the Ministry of Health. On the one hand, Dr. Julio Frenk was singled out for a conflict of interest with the tobacco industry for signing the “Frenk agreement,” which cost him the leadership of the World Health Organization (Madrado-Lajous and Zambrano-Porras, 2007; Burch et al., 2010). Dr. Mercedes Juan implemented mandatory GDA labeling, which was implemented by Coca-Cola and COFEPRIS (El Poder del Consumidor, 2014), and was instrumental in the creation of the OMENT as an initiative to combat CNCDs. Despite the denouncement that the OMENT represented a conflict of interest

because it gave representation to industrial chambers (Ojeda et al., 2020); Jose Narro Robles continued this project notwithstanding the fact that in 2016 he issued a health alert for obesity and diabetes in Mexico (Secretaría de Salud, 2016). A literature review by Chimonas et al. (2021) found that the pharmaceutical industry uses health ministers, decision-makers, and regulatory entities to position their products and thus benefit from health reforms at the global level. Legg et al. (2021) have evidenced the corporate practices of the tobacco industry worldwide, characterized by the widespread use of influence in political circles and with government officials to evade and violate tobacco control legislation. Philip Morris International unsuccessfully sued the Australian and Uruguayan Governments to block the implementation of their laws requiring a series of regulations such as plain packaging and warning labels on tobacco products (Crosbie et al., 2018; MacKenzie et al., 2018).

Finally, we were able to show that FUNSALUD works as an agency that finances scientific organizations to produce evidence on health, in addition to granting financial incentives to researchers or institutions through the FNN through the “Nestlé Research Award” for genomic research projects on molecular, metabolic, and individual risk factors for NCDs. This practice has been documented globally as a strategy to divide the scientific consensus or alter the narrative on health issues. In the United States, it was shown that Coca-Cola financed the organization Global Energy Balance Network to emphasize physical inactivity as the major problem causing overweight, obesity, and diabetes in the country (O'Connor, 2015; Scrinis, 2020). On the other hand, Legg et al. (2021) have shown that Phillip Morris is the main donor of the Foundation for a Smoke-Free World (Legg et al., 2021), an organization with the stated objective of “helping to stop smoking traditional tobacco and focusing efforts on the promotion of vaping” (Foundation for a Smoke-Free World, 2022).

This study demonstrates how the Mexican Health Foundation has exercised outsized influence on health policy in Mexico, putting the commercial interests of its associates before public health. Through various strategies, it has hijacked the national health agenda by placing its operatives in the Ministry of Health, where they have worked to block various initiatives seeking to regulate products that are harmful to the Mexican population, such as tobacco, UPFs, and sugar-sweetened beverages.

We could not access the financial issues of the foundation, because the research was carried out during the pandemic, which made it difficult to access economic information. This is important since we do not know the contributions of corporations to FUNSALUD.

Data availability statement

The original contributions presented in the study are included in the article/Supplementary material, further inquiries can be directed to the corresponding author.

Author contributions

CT carried out the corresponding research and participated in the design of the study and in the writing of the manuscript. AC

participated in the design of the study and in the writing and critical reading of the manuscript. JZ participated in the writing and critical reading of the manuscript. All authors contributed to the article and approved the submitted version.

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Conflict of interest

CT, AC, and JZ were employed by El Poder del Consumidor.

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Supplementary material

The Supplementary Material for this article can be found online at: <https://www.frontiersin.org/articles/10.3389/fpos.2024.958854/full#supplementary-material>

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