

## **Corporate Domination of Trade Advisory Committees Violates Federal Law New Public Interest Advisory Committee on Trade A Small Step Forward**

March 1, 2014 - [CPATH's campaign](#) to end the illegal domination of influential federal trade advisory committees by corporate interests was fueled this week by [graphic illustrations in the Washington Post](#) on the committees' current members.

[CPATH Reports](#) first called public attention to the secretive committees in 2005. Pressure from public health and tobacco control groups led to the appointment of a public interest tobacco control representative to the Agricultural Committee on Tobacco, Cotton, and Peanuts in 2005, [and subsequent Congressional action](#) in 2009.

Congress and the public are increasingly demanding democratic participation in setting global trade policy, including openly disclosing the terms of pending trade agreements.

The United States Trade Representative (USTR) has announced it will solicit applications in the near future through the Federal Register for a Public Interest Trade Advisory Committee (PITAC) to advise the Administration on trade negotiations. The PITAC, to include public health and other public interest representatives, would be a nod towards compliance with the Federal Advisory Act, which requires all such committees to be fairly balanced in terms of points of view represented, and the Trade Act of 1974, which specifies interests that should be included on trade committees.

“Trade agreements are now a key weapon for corporations like tobacco to eliminate laws that prevent more kids from getting addicted to their deadly product. The original economic goals of trade deals, like eliminating tariffs to encourage cross-border trade, were substantially accomplished long ago. But trade rules have a direct impact on public health and domestic policy, including access to affordable medicines and health care, the right and ability of government laws and regulations to protect the public's health from the epidemic of tobacco-related deaths and diseases, internet freedom, industrial farms, preventable climate change, labor rights, and economic instability related to unregulated capital flows,” said Dr. Ellen R. Shaffer, Co-Director of CPATH.

“The U.S is now negotiating major multi-party agreements, including the Trans-Pacific Partnership Agreement (TPP) with 11 Pacific Rim nations, and another with the European Union, affecting a significant percentage of the U.S. and the global economy,” said Joe Brenner, CPATH Co-Director.

“These massive and controversial new trade agreements call for intensified transparency and involvement by the public and our elected representatives in Congress at every stage of trade negotiations,” according to Brenner. “Until now, the TPP has been negotiated without meaningful, informed public input or debate, yet the finance, pharmaceutical, tobacco, energy, communications, processed foods and health insurance industries have had highly privileged access to government trade negotiators.”

"We encourage the Administration also to appoint public health and public interest representatives to all existing tier-3 advisory committees," said Shaffer. "These corporate-staffed committees are where the critical proposals are generated. The public deserves participation." "Equally importantly, we call on the Administration and Congress to prioritize public health in setting our trade objectives," said Shaffer. Public health objectives for trade include:

1. **Assuring democratic participation by public health and transparency in trade policy**, including by opening all proceedings and documents of trade advisory committees to the public, and requiring USTR's consultation with all relevant committees of the House and Senate in the development, implementation, and administration of U.S. trade policy, without renewing presidential trade promotion authority (known as "fast track").
2. **Developing mutually beneficial trade relationships that create sustainable economic development** for the U.S. and our trade partners in an increasingly interdependent world.
3. **Recognizing the legitimate exercise of national, regional and local government sovereignty to protect population health**, and to ensure that countries do not weaken or reduce, as an encouragement for trade, sound policies that contribute to health and wellbeing, including laws on public health, the environment and labor.
4. **Excluding tariff and nontariff provisions in trade agreements that address vital human services** such as health care, water supply and sanitation, food safety and supply, and education, including licensing and cross-border movement of personnel in these fields.
5. **Excluding tobacco and tobacco products**, which are lethal, and for which the public health goal is to reduce consumption, from tariff and nontariff provisions of trade agreements, including advertising, labeling, product regulation and distribution.
6. **Excluding alcohol products**, which present serious hazards to public health. Policies designed to reduce the harm caused by alcohol products should not be subject to compromise in exchange for other trade benefits.
7. **Eliminating intellectual property provisions related to pharmaceuticals from bilateral and regional negotiations**, as these are more appropriately addressed in multilateral fora, **and promote trade provisions which enable countries to exercise all flexibilities provided by the Doha Declaration on Public Health**, including issuing compulsory licenses for patented pharmaceuticals, parallel importation, and other measures that address high prices and promote access to affordable medicines.

The U.S. trade advisory committee system was established by the Trade Act of 1974 to ensure that U.S. trade policy and trade negotiating objectives reflect U.S. public and private sector interests. It consists of a three-tier structure: Advisory Committee for Trade Policy and Negotiations (ACTPN) to provide overall trade policy advice to the President (Tier 1); Tier 2 committees which provide general policy advice from representatives of labor, environmental concerns, and state and local governments; and a series of Tier 3 industry and agricultural sector advisory committees providing technical advice and information. The PITAC would be a Tier 2 committee.

In May, 2009, the Public Health Trade Advisory Committee Act (HR 2293: Doggett-TX and Van Hollen-MD; S 1644: Stabenow and Kennedy) was introduced, which required representation on all Tier 3 trade advisory committees by public health, labor, and public interest groups, and the creation of a Public Health Advisory Committee at Tier 2. In July, 2009, the Subcommittee on Trade of the House Committee on Ways and Means conducted a Hearing on the Trade Advisory Committee System, focusing on how to increase transparency and public participation in the development of U.S. trade policy. Tier 3 committee chairs condemned the bill. CPATH Co-Director Ellen R. Shaffer testified as an invited witness, and spoke in favor.

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