To view an archived recording of this presentation please click the following link:

https://youtu.be/ZJCJ8sghIIQ

Please scroll down this file to view a copy of the slides from the session.

Disclaimer

This document was created by its author and/or external organization. It has been published on the Public Health Ontario (PHO) website for public use as outlined in our Website Terms of Use. PHO is not the owner of this content. Any application or use of the information in this document is the responsibility of the user. PHO assumes no liability resulting from any such application or use.



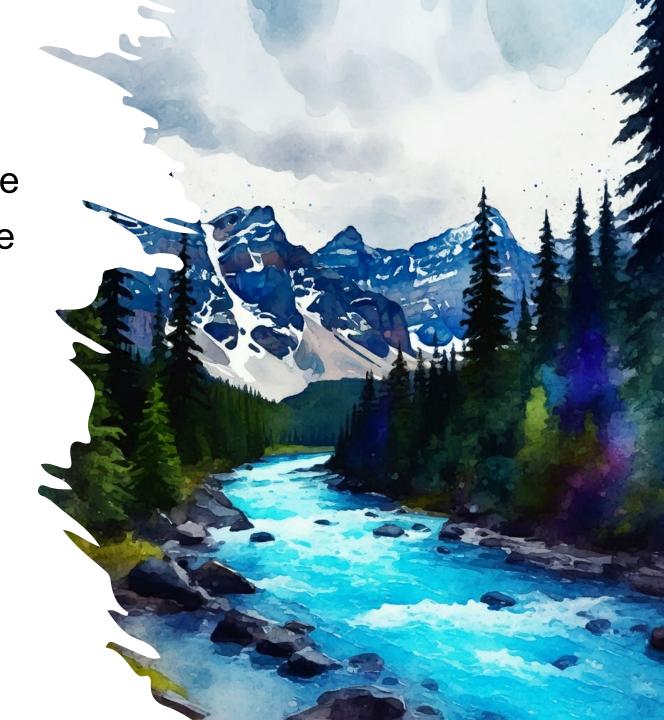
PUBLIC HEALTH ONTARIO WEBINAR

Engaging policymakers on the Commercial Determinants of Health: Lessons from Global Tobacco Control

Professor Kelley Lee

Canada Research Chair Tier 1 in Global Health Governance Faculty of Health Sciences, Simon Fraser University

Scientific Co-Director, Bridge Research Consortium School of Population and Public Health, University of British Columbia Simon Fraser University respectfully acknowledges the unceded traditional territories of the Coast Salish peoples, including the səlilwəta? (Tsleil-Waututh), kwikwaλ'am (Kwikwetlem), Skwxwú7mesh Úxwumixw (Squamish) and xwməθkwəyəm (Musqueam) Nations, upon which the SFU Burnaby campus is located





Learning objectives

- Define the commercial determinants of health (CDoH) and how they support the understanding of key factors shaping health and disease in the 21st century.
- Describe how the CDoH can contribute to both harms and benefits to population health.
- Recognize the opportunities and challenges for bringing together research and policy communities on the CDoH.
- Identify strategies for using the CDoH to build policy alliances across different public health issues, and between public health and other policy communities.



Vertical integration













Retailers





Wholesalers





Wholesalers



Supply chain



Distributors





Distributors











Manufacturers





Suppliers





Suppliers

Businesses from the same level merge



Global trade hits a record in first quarter of 2022

Quarterly world trade in GOODS and SERVICES, in US\$ trillion

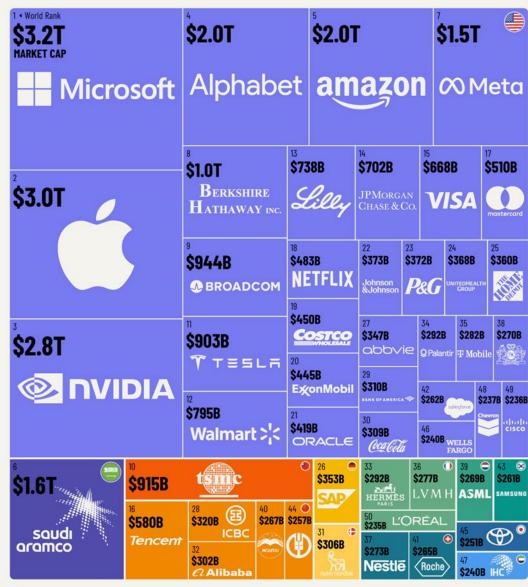


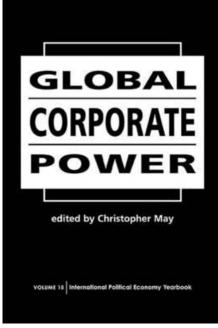
Note: Figures for Q1 2022 are preliminary.

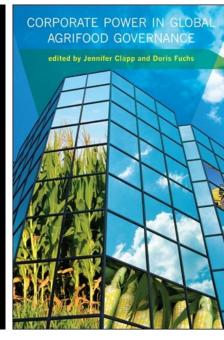
Source: UNCTAD calculations based on national statistics

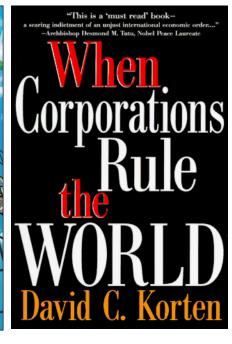
THE WORLD'S 50 MAY 2025

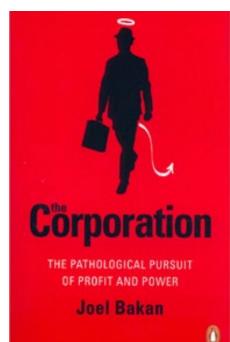
MOST VALUABLE COMPANIES



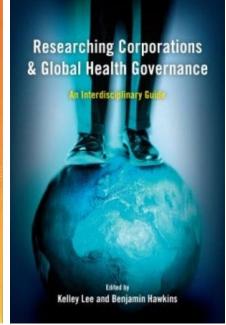






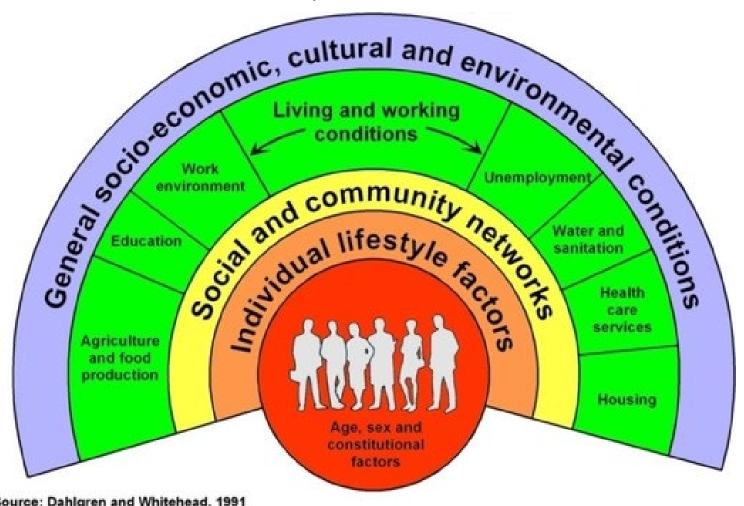






SOCIAL DETERMINANTS OF HEALTH

the non-medical factors that influence a person's health, including their physical and social environment, access to resources, and the conditions in which they live, work, and learn



Source: Dahlgren and Whitehead, 1991

EVOLVING STUDY OF CDoH

19th century study of rise in industrial diseases (occupational health and safety) late 20th – early 21st century case studies of internal tobacco industry documents (legal liability and regulation); study of globalization and health

c. mid 2010s onwards comparative analysis of activities across multiple industries (e.g. playbooks) and association with 21st century capitalism How might we better define and measure CDoH?
How can concept inform public health policy and practice?

20th century study of rise in NCDs associated with consumption of "unhealthy commodities" (risky behaviours)

c. 2010
CDoH coined and growth in study of market and nonmarket activities of wider range of industries
(lobby registers, COI rules,

transparency requirements)

c. 2020s study of CDoH as sustained by and mediated by political/economic systems, stratification, norms, governance (social structures)

Definitions of Commercial Determinants of Health

"strategies and approaches used by the private sector to promote products and choices that are detrimental to health" — Kickbusch et al. (2016)

"the private sector activities impacting public health, either positively or negatively, and the enabling political economic systems and norms"

—WHO (2022)

"how capitalism, globalised corporate and commercial systems and broader political—economic and global governance conditions facilitating these, directly and indirectly shape inequality and health"

— De Lacy-Vawdon et al. (2021)



Evolving Study of CDoH

- products extended beyond "unhealthy commodities" (tobacco, alcohol and ultraprocessed foods) to broader range of goods and services with negative health impacts (e.g., certain pharmaceuticals, firearms, gambling, fossil fuels)
- impacts extended beyond NCDs to accidents and injuries, mental health and addictions, environmental exposures, and communicable diseases
- CDoH actors extended beyond manufacturers of certain products to actors located across supply chain, and involved in broader production, distribution and consumption of health-impacting goods and services (e.g., law firms, consultancy firms, think tanks, trade associations)

- types of activities studied extended to market strategies and non-market strategies
- CDoH extended beyond actions of big companies to the political, economic, and social structures of a society that enable, shape, and sustain certain ways that commerce is conducted (e.g., tax systems, financial markets, regulatory frameworks, norms and values)
- focus extended beyond negative impacts to also positive impacts from CDoH

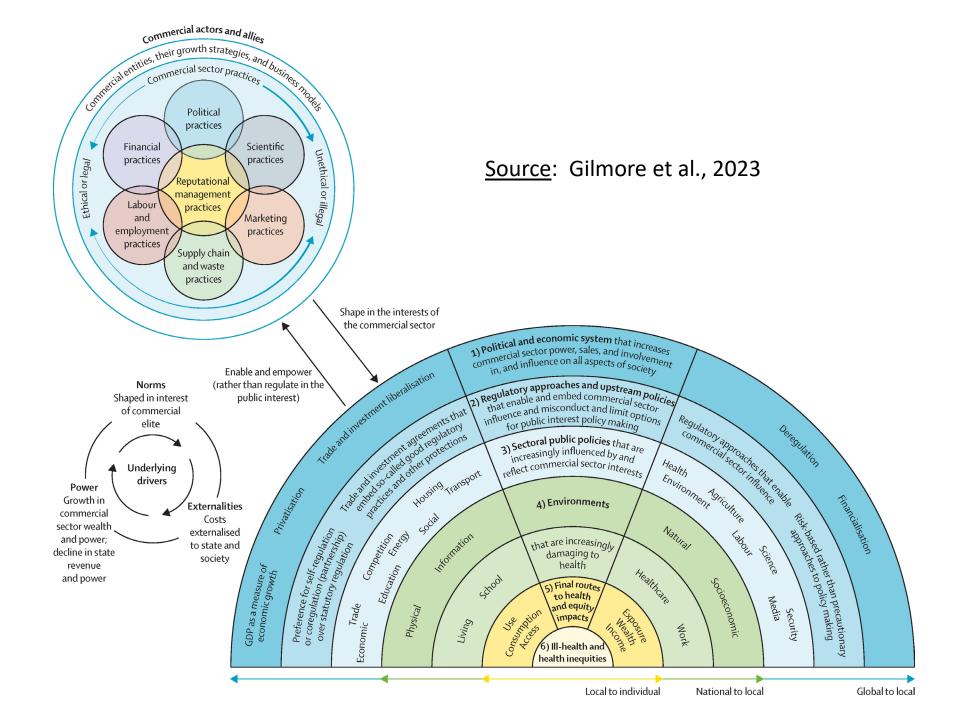


Defining Priorities for Action and Research on the Commercial Determinants of Health: A Conceptual Review

Nicholas Freudenberg, DrPH, Kelley Lee, DPhil, Kent Buse, PhD, Jeff Collin, PhD, Eric Crosbie, PhD, Sharon Friel, PhD, Daniel Eisenkraft Klein, MS, Joana Madureira Lima, PhD, Robert Marten, MPP, Melissa Mialon, PhD, and Marco Zenone, MS

"The ways in which actors (through market and nonmarket strategies) and structures (social stratification, systems, organization, culture/values, regulatory frameworks, governance) operate to generate profit, and thereby influence patterns of health, disease, injury, disability, and death within and across populations."

— Freudenberg et al.



Positive Effects on Health from Commercial Determinants

- production of health-essential goods and services (e.g., pharmaceuticals, healthcare supplies, food and drink, housing)
- income and wealth generation
- logistics capacity (e.g., supply chain)
- research and development
- idea generation and innovation



Why is CDoH concept useful to public health policy and practice?

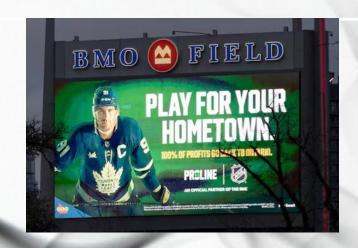
- supports understanding of **common causes and consequences** across different public health issue areas from commercial factors (e.g., common "playbook" across industries)
- enables sharing of evidence and policy actions across public health issue areas
- shifts research, policy and practice from a heavy focus on changing individual behaviours (i.e., stop smoking) to addressing key drivers shaping norms and values, available choices and behaviours
- reveals hindering factors, often hidden, preventing more effective public health policy and action
- promotes understanding of how health-harming industries are enabled by economic and political systems within society

Market Strategies

focus on influencing the marketplace through direct interactions with customers and competitors; aim to improve economic performance by creating value in the market













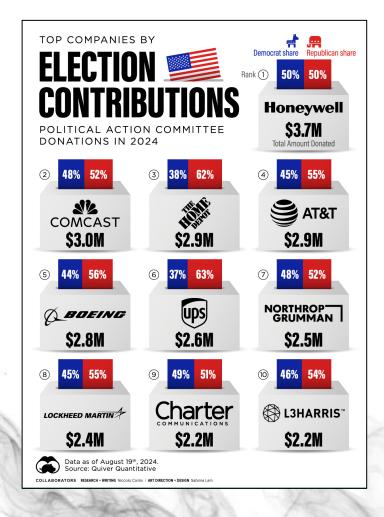
Non-Market Strategies

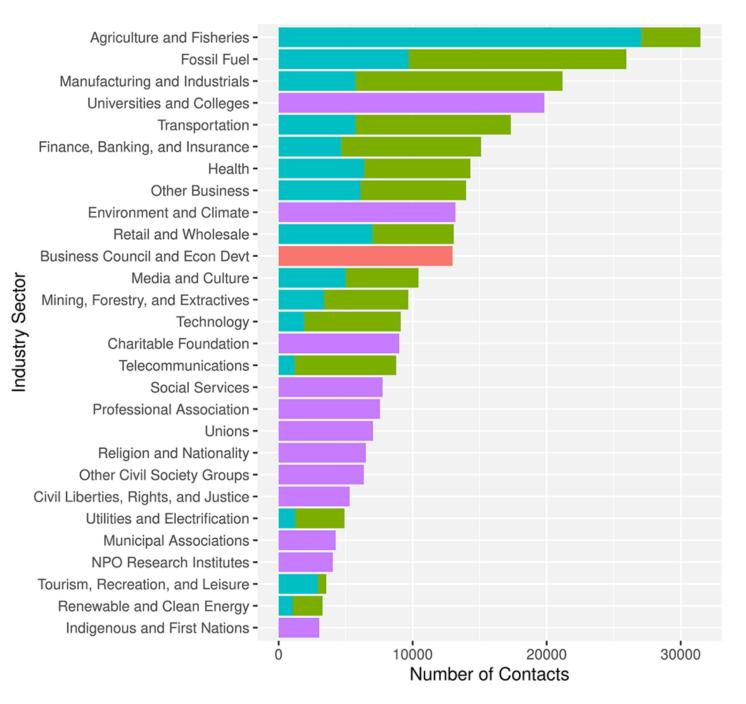
focus on building relationships with external stakeholders, such as governments, regulators, the public, and other non-market entities

Federal Campaign Finance Regulations in Canada and the United States WHY DOESN'T THE UNITED STATES

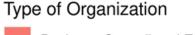
POLICY	CANADA	UNITED STATES	HAVE THIS?
Contribution limits	Yes	Yes, but not for contributions to super PACs	Contribution limits to super PACs struck down by courts
Aggregate contribution limits	Yes	No	Struck down by courts
Limits on self-funding	Yes	No	Struck down by courts
Expenditure limits	Yes	No	Struck down by courts
Public financing via subsidies or grants	Yes	No (present in some states and localities)*	Law not passed
Public financing to parties	Yes	No	Law not passed
Small-donor matching	Yes, via a tax credit	No (present in some states and localities)*	Law not passed

^{*}A little-used program in the United States provides matching funds during the primary elections and grants during the general election to presidential candidates who agree to certain conditions. No major-party nominee for president has used the program since 2008.





Federal lobbying contacts in Canada by industry sector (2011–2022)



Business Council and Econ Devt

Corporation/Business

Industry Association

Non-Corporate Civil Society

<u>Source</u>: Graham N, Evans B, Chen D. Canada's Lobbying Industry: Business and Public Interest Advocacy from Harper to Trudeau. *Canadian Journal of Political Science*. 2023; 56(4): 975–998.



The "Father of Stress" Meets "Big Tobacco": Hans Selye and the Tobacco Industry

Mark P. Petticrew, PhD, and Kelley Lee, DPhil, DLitt, MPA





PLOS MEDICINE

"Efforts to Reprioritise the Agenda" in China: British American Tobacco's Efforts to Influence Public Policy on Secondhand Smoke in China

Monique E. Muggli^{1*}, Kelley Lee², Quan Gan³, Jon O. Ebbert¹, Richard D. Hurt¹

1 Mayo Clinic, Rochester, Minnesota, United States of America, 2 Centre on Global Change and Health, London School of Hygiene & Tropical Medicine, London, United Kingdom, 3 Center for Tobacco Control Research and Education, University of California San Francisco, San Francisco, California, United States of America



Zenone *et al. Globalization and Health* (2021) 17:72 https://doi.org/10.1186/s12992-021-00719-y

Globalization and Health

RESEARCH

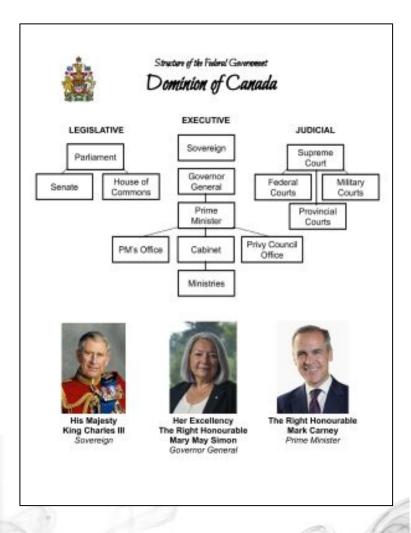
Open Access

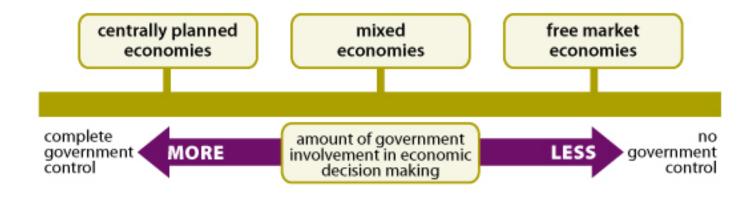
How does the British Soft Drink Association respond to media research reporting on the health consequences of sugary drinks?

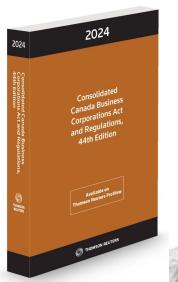


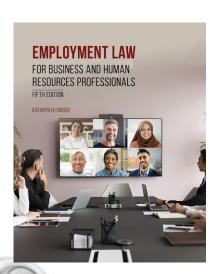
Marco Zenone^{1,2*}, Diego Silva³, Julia Smith² and Kelley Lee²

CDoH as structures and systems

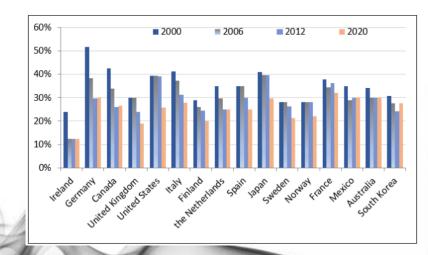








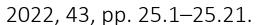
Corporate Income Tax Rates, All Levels of Government, Selected Countries



Annual Review of Public Health

Public Health Roles in Addressing Commercial Determinants of Health

Kelley Lee¹ and Nicholas Freudenberg²



https://www.annualreviews.org/doi/abs/10.1146/annurev-publhealth-052220-020447

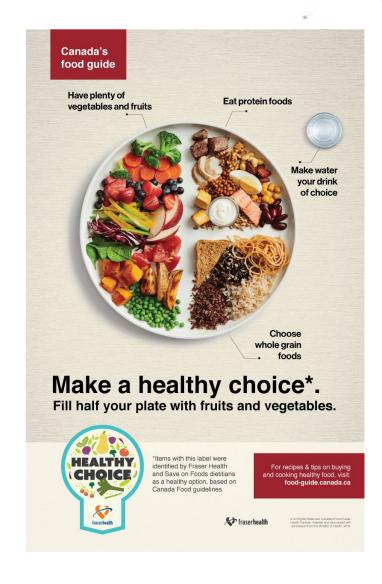
APPROACHES AND STRATEGIES FOR MITIGATING HARMFUL HEALTH EFFECTS OF COMMERCIAL DETERMINANTS OF HEALTH

- Behavioral change: Modify behavior of consumers to reduce exposure to harmful effects of commercial practices.
- Regulation of market and nonmarket business practices: Use regulation to change behaviors of commercial actors.
- Fiscal policy strategies: Use public spending, taxes, financial incentives, and subsidies to alter commercial practices.
- Citizen/consumer activism: Mobilize populations to put pressure on elected officials or businesses to take actions that reduce harmful practices.
- Litigation and other legal remedies: Use the courts and legal system to force commercial actors or government to end harmful practices and determine liability.

Behaviour Change

Modify behaviours of consumers to reduce harmful effects of commercial products and practices

- educate people on the risks from consuming tobacco, cannabis, alcohol, ultra processed food, sugary drinks and other health-harming products
- → promote healthier lifestyles through encouraging behaviors to mitigate risks such as diet, exercise, moderate drinking and gambling
- counter marketing campaigns to amplify pro-health messaging
- → improve availability and affordability of healthier options (e.g., reduce food deserts, increase access to public transit)



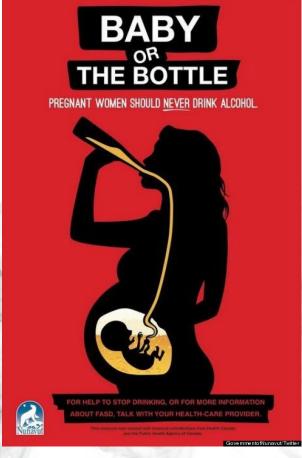
VAPING CAN EXPOSE YOU TO HARMFUL CHEMICALS



CANADA.CA/VAPING-INFO

Canadä







RETHINK your DRINK

Encouraging healthier beverage choices





Online or not, set limits on your gambling.



Learn more



Learn more at KnowMyLimits.ca

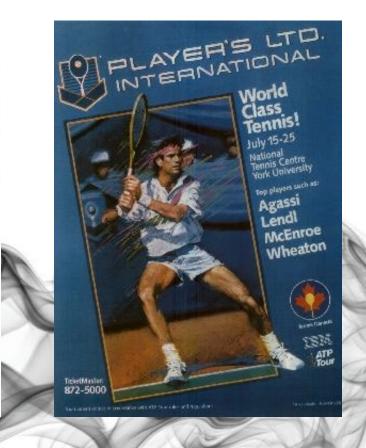
Regulation of Market Practices

Use regulation to nudge behaviours of commercial actors to maximize returns on investment, revenues, profits, shareholder value, and market share

- regulate product ingredients, manufacturing process, packaging and labelling
- regulate product marketing including advertising, sponsorship and promotion
- regulate product accessibility (e.g. minimum age, retail licensing)
- regulate product availability (e.g., vending machines in schools, point of sale marketing of tobacco products, sweets at checkouts, zoning rules)
- o create and enforce clear and binding standards for market practices









CIGARETTES
DAMAGE YOU
ORGANS.





It is ILLEGAL to give or sell TOBACCO or VAPOUR PRODUCTS to anyone under 19 years of age.

Valid photo ID may be required.

Tokocco and Hopeus Products Control Act



Regulation of Non-Market Practices

Use regulation to change behaviours of commercial actors to exert political and economic influence in ways that create and sustain favorable operating environments.

- ensure appropriate firewalls between public and private interests to prevent regulatory capture
- adopt binding (not voluntary) rules governing interactions between business and government to manage conflicts of interest (e.g., lobbyist register, campaign donation limits, corporate hospitality rules)
- Ecreate and enforce processes to ensure appropriate transparency and accountability of non-market practices (e.g., declaration of funding sources, disclosure of COIs)
- limit undue commercial influence of scientific and academic sector (e.g., research funding, endowments, naming rights, scholarships)





FEDERAL LOBBYING BY PHARMA LOBBY GROUP: NUMBER OF MEETINGS (Trade-related meetings excluded)

104

Number of meetings increases as Ottawa considers Pharmacare

49

WHY SO MANY MEETINGS LAST YEAR?

15

Average over 11 yrs.

2018

Records of the Office of the Commissioner of Lobbying of Canada

2021 ANNUAL REPORT

High-qual Innovative

FRASER

High-quality, timely research. Innovative outreach.

CANADA'S MOST INFLUENTIAL THINK TANK How much money are the top fossil fuel industry donors giving to BC's leading political parties?

BC LIBERALS \$3,774,000

Imperial Oil CAPP Pristine Power (Veresen) Chevron Canada Enbridge
CNRL
Fortis BC
Spectra Energy

Encana

Teck
Resources

BC NDP \$270,000

Total contributions by the top 10 industry donors, 2008-2015.



FCTC Article 5.3 Toolkit

Guidance for Governments on Preventing Tobacco Industry Interference





The Atlas Network

"The ideals and activities of the foundation enhance an improved operating environment for all Philip Morris business." — PM staff member (1997)



















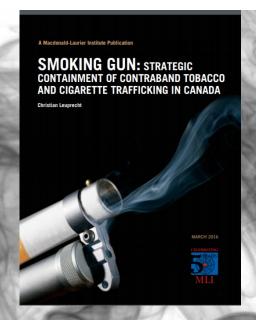


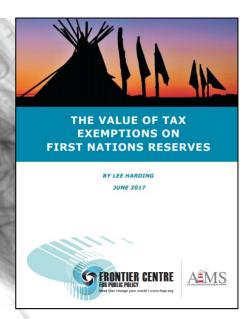
- funding from PM, and other tobacco companies, to develop its Risk and Regulation Centre in 2000; then published book questioning harms of second-hand smoke
- In 2010, received \$43,000 from PM; published report arguing high taxes fuel cigarette smuggling

Tobacco Control "Research" by Atlas Network Members in Canada











Interestingly enough, the government actually makes more money off of tobacco than the tobacco industry (about \$48 billion to \$35 billion). And oddly (and morbidly) smoking probably saves the government money as it just means people die when they're 50 or 60 instead of when they are 70 or 80 (and thus collect less Social Security and Medicare)

Cigarettes are still the most preventable cause of death around. So many would think the 1998 government lawsuit that lead to the Master Settlement Agreement would be a good thing. Not so fast, Here's how Tim Carney describes it,

In exchange for settling all the state lawsuits filed in the 1990's, the companies promised huge annual payments to state governments. To safeguard the new revenue stream, the states passed laws protecting Big Tobacco [the four largest retailers] from smaller competitors. Critics have called the MSA, "one of the most effective and destructive cartels in the history of the Nation."

Many states are now extremely reliant on this tobacco money making, the government and tobacco industry

What the Master Settlement Agreement did was simply cartelize the market. The settlement banned most advertising, which of course favored the big companies with well-known brands. But it also made sure "... that tobacco companies that were never sued, were never accused of wrongdoing, and in some cases didn't exist when the alleged deception and wrongdoing occurred, and certainly never participated in the settlement would pay the same damages as the Big Tobacco companies..." The economies of scale for larger companies





Fiscal Policy Strategies

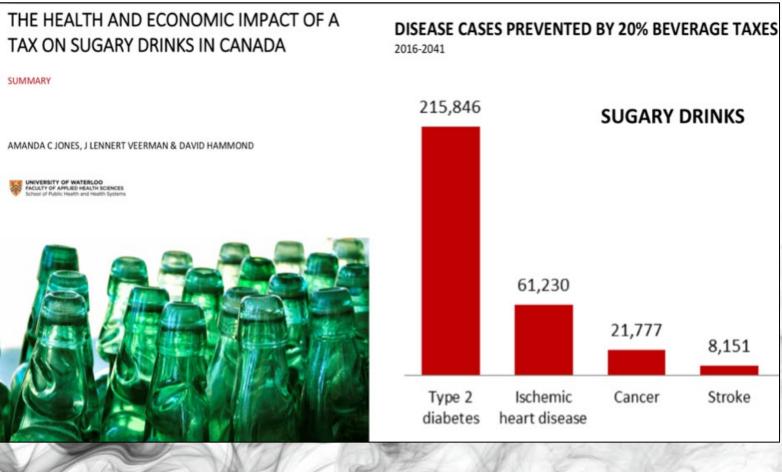
Use public spending, taxation, and financial incentives to encourage health-positive commercial activities

- adopt minimum pricing on health-harming products and services
- increase taxes on health-harming products and services (e.g., soda and sugary drinks, alcohol, cigarettes) to make less affordable, deter consumption and pay social costs (e.g., cleaning up cigarette butts)
- use proceeds from "sin taxes" for health promotion activities
- provide financial incentives to encourage health-positive behaviours (e.g., children's sports fees, public transit)
- support investment and other financial incentives for health-positive commercial activity (e.g., addressing food deserts, encouraging social benefit companies)









Litigation and Other Legal Remedies

Use the courts and legal system to force commercial actors or government to end harmful practices and determine liability

- ★ individual and class action lawsuits to hold companies responsible for health harms from products, negligence, misleading claims or fraud, addiction (e.g., tobacco, opioids, gambling)
- ★ litigation by governments to recover health care and other social costs
 (e.g., tobacco-related disease and death, opioid addiction and death)
- ★ penalties or surcharges for creation of social harms and costs (e.g., product waste, pollution)
- enforcement of rules on false product claims or violation of regulations (e.g. marketing to children, labelling, price fixing)
- ♣ prosecution of companies for criminality (e.g., smuggling, money laundering, tax evasion)
- enforcement of anti-trust laws



SEARCH

RESOURCES

PROJECT HISTORY

ACKNOWLEDGEMENTS

Contact Us → Site Map → Privacy → Help

NEWS & ANNOUNCEMENTS

2012

New papers on trade policy, FCTC and current industry materials

2011

New papers investigate BAT in Central and South America, China, and Indonesia

2010

New papers investigate BAT in China and their influence on the European Union Treaty

July, 2009

New papers on BAT's Activities in South Korea and Ghana

December, 2008

New papers on BAT's international activities

News & Announcements Archive

Welcome to the British American Tobacco Documents Archive

The Guildford Depository located near London, England houses an estimated 6-7 million pages of internal corporate documents related to British American Tobacco Company (BATCo) and its parent, BAT Industries plc. The depository was established as a result of litigation brought against several tobacco companies by the State of Minnesota and Minnesota Blue Cross Blue Shield, As a result of this legislation, an estimated 1 million documents recently produced by British American Tobacco have been placed in the Minnesota Depository in Minneapolis, Minnesota.



The vast majority of documents produced by BAT in litigation were only available at the Guildford Depository. Researchers had to travel to the depository to search the collection and were subject to the difficult conditions of access imposed by BAT, including use of a rudimentary and wholly inadequate index (see Muggli, et al., Big Tobacco is watching, Collin, et al., Unlocking the corporate documents of British American Tobacco, Glantz, The truth about Big Tobacco in its own words). Documents located in Minnesota were equally remote for most researchers. By scanning, indexing, and hosting the documents on this Web site, anyone with access to the Internet can now search and use them.

As of July 2008, the BAT documents were integrated into the Legacy Tobacco Documents Library (LTDL). For your convenience, any query you enter here will return results from the BAT document collection within LTDL. In LTDL you can expand your search to include other U.S. companies in addition to all BAT documents.

Please note: A number of BATDA field codes have been modified in order to provide a uniform search syntax for the merged BATDA and LTDL documents. Before conducting a fielded search query, please consult the Expanded Search Fields page to see what has changed.

SEARCH THE COLLECTION	
Quick Search (please enter a word or phrase):	
	SEARCH















RESEARCH PAPER

Complicity in contraband: British American Tobacco and cigarette smuggling in Asia

J Collin, E LeGresley, R MacKenzie, S Lawrence, K Lee

Tobacco Control 2004;13(Suppl II):ii104-ii111. doi: 10.1136/tc.2004.009357



Research paper

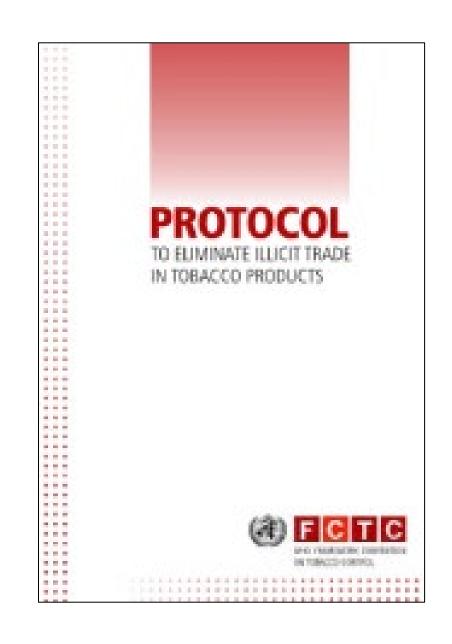
British American Tobacco and the "insidious impact of illicit trade" in cigarettes across Africa

E LeGresley, 1 K Lee, 2 M E Muggli, 3 P Patel, 4 J Collin, 5 R D Hurt 6



Gaining access to Vietnam's cigarette market: British American Tobacco's strategy to enter 'a huge market which will become enormous'

K. LEE¹, H.V. KINH², R. MACKENZIE³, A.B. GILMORE¹, N.T. MINH,⁴ & J. COLLIN⁵



Globalization and Health

RESEARCH

Open Access

"We think globally": the rise of Paraguay's Tabacalera del Este as a threat to global tobacco control



Benoît Gomis¹, Kelley Lee^{1*}, Natalia Carrillo Botero¹, Philip Shepherd² and Roberto Magno Iglesias³

RESEARCH

Open Access

CrossMark

From transit hub to major supplier of illicit cigarettes to Argentina and Brazil: the changing role of domestic production and transnational tobacco companies in Paraguay between 1960 and 2003

Roberto Magno Iglesias¹, Benoît Gomis², Natalia Carrillo Botero², Philip Shepherd³ and Kelley Lee^{2*}







21 DE NOVIEMBRE DE 2018 10:00

Sin Brasil, Tabesa sería nada

Por Juan Cálcena Ramírez

Paraguay reportó menos ventas internas de cigarrillos desde 2002 a 2016. Sin embargo, la producción de Tabesa creció por los cielos. El mercado negro brasileño es clave para la economía de la empresa de Horacio Cartes, dice un estudio canadiense.

22 DE NOVIEMBRE DE 2018 | SEGÚN UNA INVESTIGACIÓN CANADIENSE

Revelan que Tabesa hace fortuna con el tráfico ilegal de cigarrillos al Brasil

Por Juan Cálcena, ABC Color

Tabacalera del Este SA (Tabesa), del expresidente de la Repúbi produce mucho más cigarrillos de lo que se consume en nuest cantidad de su producto termina en el mercado negro de Bras investigación canadiense.



20 DE NOVIEMBRE DE 2018 10:50

Estudio afirma que Tabesa es riesgo para la salud y se expande por contrabando

HEALTH

\$32.5B settlement with tobacco giants approved by creditors, lawyer says

By Paola Loriggio • The Canadian Press

Posted December 12, 2024 6:14 pm · Updated December 12, 2024 6:17 pm · 3 min read



For decades, tobacco marketing failed to mention the highly addictive nature of the products, much less the potentially deadly consequences of smoking. Now, following three decades of legal battles, a deal to compensate current and former smokers suffering from lung cancer and a wide range of other terminal diseases is finally on the horizon. Katherine Ward explains what's being considered. – Oct 18, 2024



By Kanishka Singh

June 29, 2022 12:59 PM PDT · Updated 3 years ago

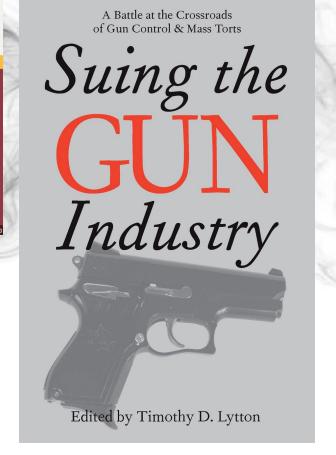


THE ULTRA-PROCESSED FOODS LAWSUIT FOR HEALTH PROBLEMS SUFFERED BY CHILDREN

NEWS

Casino Sued By Compulsive Gambler For Letting Him Lose \$260,000

BY AILA SLISCO ON 12/26/19 AT 11:33 PM EST

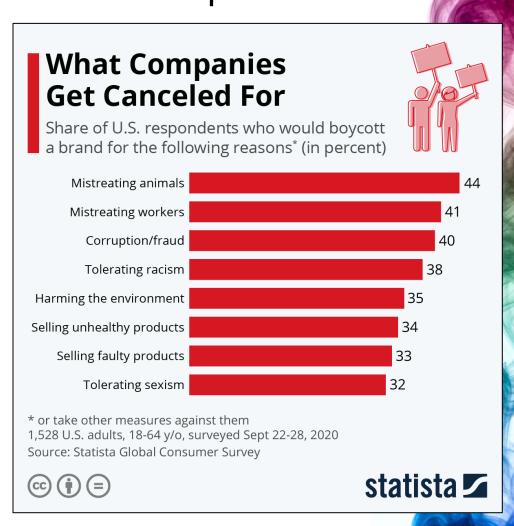


Aa

Citizen Consumer Activism

Mobilize populations to put pressure on elected officials or businesses to take actions that reduce harmful practices

- exposés about health-harming, unethical and even illegal practices in commercial sector
- public awareness and reframing campaigns
- consumer boycotts and buycotts (selective buying of healthy products or products from companies deemed to follow ethical practices)
- shareholder activism



OPINION

State must stop trying to be the public's babysitter

The Nanny State Index explains that countries with more paternalistic policies do not necessarily enjoy better public health outcomes

■ BL PREMIUM

30 MAY 2021 - 08:57

by MARTIN VAN STADEN









AUSTRALIA

It's time to Exit The W.H.O.

Australia is at risk of losing its sovereignty to the World Health Organization (W.H.O.) due to proposed changes to the World Health Assembly's (WHA's) International Health Regulations (IHR) and a proposed 'pandemic treaty'. All this even if Australia votes against the proposals.

The W.H.O wants to become a legislative authority instead of an advisory board, giving them extraordinary powers that are binding on all Australians.



Expert Group and Meetings





Health Topics v

Countries >

Newsroom v

Emergencies v

Data v

About WHO v

Economic and Commercial Determinants of Health

← Social Determinants of Health

Economic and Commercial Determinants of Health The programme of work on Economic and Commercial Determinants of Health (CED) is based in the Department of Social Determinants. It addresses the economic and commercial determinants of health (CDoH) across public health priorities, health-impacting industries, and different populations. It aims to support countries in leveraging the co-benefits of working in partnership with the private sector on common health goals, whilst addressing and preventing harm from conflicts of interest. It takes a social determinants approach in promoting research and action on economic and commercial determinants as structural drivers of health inequities. The programme explores the role of the private sector in determining health and health outcomes, and the roles and responsibilities of the public sector, the private sector and civil society in strengthening accountability for CDoH. CED has multiple activities, including action through catalysing research; multi-country capacity building; convening global stakeholders; coordination with other UN agencies and partners; and advocacy.

Editorial Group of WHO Global Report on the CDOH

Commercial Determinants of Health: Measuring what matters to inform action

September 2022 15:30 - 17:15 CET

Access the recording of the webinar

The World Health Organization is inviting you to the second webinar of the Commercial Determinants of Health. This second webinar will present the challenges and the state-of-the-art empirical science of CDoH, focussing on how health communities, governments and business can approach measurement in CDoH. It will also present approaches to reorient financial indicators towards health, wellbeing, and equity.

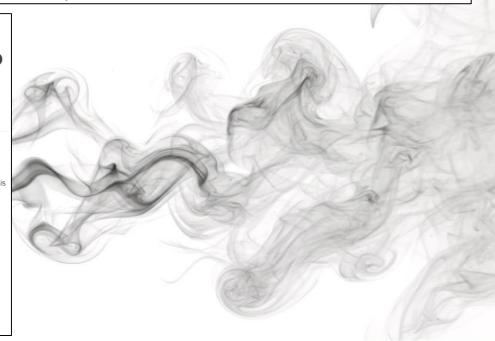
Agenda

Welcome and introductions:

- Etienne Krug, Director, Social Determinants of Health, WHO
- Stephen MacFeely, Director of Data and Analytics, WHO

Keynote presentation:

• Kelley Lee, Professor of Public Health, Simon Fraser University, Canada



PUBLIC TRUST IN CANADA (2016-2021)



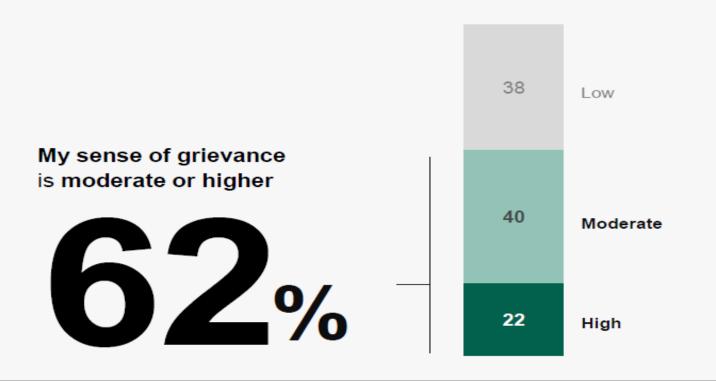
Source: Proof Strategies, 2021

6 in 10 Hold Grievances Against Business, Government, and the Rich

Percent who hold a low, moderate, or high sense of grievance, in Canada

I hold a sense of grievance because:

- Business and government serve select few
- Business and government actions hurt me
- The system favors the rich
- The rich are getting richer







"... an economy designed to serve people and the planet, not the other way around. Rather than treating economic growth as an end in and of itself and pursuing it at all costs, a Wellbeing Economy puts our human and planetary needs at the centre of its activities, ensuring that these needs are all equally met, by default"

Public Benefit Companies



Key Messages

- CDoH now widely used concept in public health in UK, Australia, USA
- accumulating research provides critical evidence of specific product areas/ industries related to market/non-market strategies and structures/processes
- need to bring together evidence to identify common playbooks and overlapping shared interests
- opportunities for policy learning across issue areas, and even coordinated strategies, to address CDoH strategies and structures

- expertise in business studies, political economy and public policy could be better tapped by public health community to provide fuller understanding of the CDoH
- research, policy and advocacy are distinct roles but are allies for protecting and promoting public interests
- potential to engage with commercial actors to find win-wins that address declining public trust by advancing business with social purpose

Thank you

kelley_lee@sfu.ca

