



Sustainable partnerships for NCD prevention: implications for public health

Erica Di Ruggiero¹ · Zee Leung² · Modi Mwatsama³ · Greg Hallen²

Received: 12 March 2018 / Accepted: 10 April 2018 / Published online: 15 May 2018
© Swiss School of Public Health (SSPH+) 2018

While largely preventable, the global burden of non-communicable diseases (NCDs) remains overwhelming, calling for collaboration across public and private sectors. Globally, 70% of all deaths are attributable to non-communicable diseases (NCDs). NCDs disproportionately affect people in developing countries where three-quarters of these deaths occur (World Health Organization 2017a). Concerted action is required to tackle the multiple risk factors of NCDs particularly unhealthy diets and their social, cultural, economic, commercial and environmental determinants. Buse and Hawkes (2015) argue that only a paradigm shift in global health efforts can support the prevention of NCDs and contribute meaningful progress towards the Post-2015 Development Agenda. They identify five challenges, including shifting the focus from treatment towards prevention, enhancing intersectoral and coordinated leadership that acts on the socioeconomic, political and legal drivers of health, and implementing effective means to tackle the commercial determinants of health. While the 17 Sustainable Development Goals (SDGs) reflect a more holistic view of health compared to their predecessor, the Millennium Development Goals, they also reveal several inherent tensions. For example, SDG3 on health and well-being includes as a target the reduction of one-third premature mortality from NCDs, while SDG17 encourages partnerships between academic, public, private and civil society actors to achieve these goals (United Nations 2016). This encouragement to partner may lend legitimacy to public/private partnerships, without recognizing that these efforts can also compromise and conflict with public health goals, especially when involving

industries that directly or indirectly profit from the consumption of products shown to contribute to NCDs (e.g. tobacco, alcohol, unhealthy foods) (Kickbusch et al. 2016). The constant push and pull for multi-stakeholder partnerships that include the commercial sector raises a number of challenges for researchers, practitioners and policy-makers whose mandate is to protect and promote population health, despite potentially lucrative opportunities to expand programs. These challenges relate to issues of governance, transparency, accountability and conflicts of interest.

Global institutions such as the World Health Organization (WHO) have responded by offering member states guidance and tools for managing conflicts of interest (COI). The WHO tool for managing COI in nutrition programs is one such guiding framework for public health policy development (World Health Organization 2017b). Others have recommended several ‘tests’ for public policy makers to consider before engaging in corporate partnerships (e.g. Are the corporate social responsibility activities of the corporation independently audited? Is their role limited to implementation and not policy development, which should be the purview of government?) (McKee and Galea 2014). Lima and Galea (2018) have proposed a framework for systematically analyzing the actions of corporations, using a multi-dimensional power lens. They outline different vehicles (e.g. political and legal environments) via which commercial power can exert influence on population health. For researchers, Brisbois et al. (2016) suggest assessing the potential effects on researcher autonomy and agency, impact on the research agenda, and unintended consequences when considering the ultimate root causes of the public health challenge.

Despite such efforts, scholarship that documents the real world experiences of engagement between the public and private sectors, and that rigorously evaluates the challenges and opportunities from these interactions is still limited,

✉ Erica Di Ruggiero
e.diruggiero@utoronto.ca

¹ Dalla Lana School of Public Health, University of Toronto, Toronto M5T 3M7, Canada

² International Development Research Centre, Ottawa, Canada

³ UK Health Forum, London, UK

particularly in low- and middle-income countries. The need for more study in this area arose during a workshop¹ on strengthening the governance of diet and nutrition partnerships (UK Health Forum 2018) and a literature review on the available evidence of public/private interactions to prevent NCDs (Di Ruggiero et al. 2017). In response to this research and policy gap, the UK Health Forum recently published a Casebook that aimed to “raise awareness and support action on strengthening governance to avoid and/or mitigate against conflicts of interest” (UK Health Forum 2018, p. 12). It features 12 case studies and 4 regional commentaries, which capture lessons learned from different geopolitical and policy contexts, highlighting the management of conflicts of interest as a recurring challenge across all cases. For example, a case from Fiji describes the ethical challenges faced by government actors when the food and beverage industry is engaged in the development of NCD policies. Similarly, the case on the Global Health Council demonstrates the complexity of managing conflicts of interest when engaging the drinks industry in a civil society arrangement.

These cases underscore the need for more rigorous and geographically relevant understandings of the essential governance structures and processes that can mitigate the aforementioned challenges, particularly as multi-stakeholder platforms continue to influence public policy processes. When engaging with the commercial sector, public health policy makers often lack the governance mechanisms for ensuring an ethical, open and accountable policy development process that safeguards the public’s health. Examples of positive and effective public/private interactions with food producers who provide access to more healthy minimally processed foods are also missing from the literature. We hope that the Casebook will stimulate

further dialogue and scholarship on the positive and unintended consequences arising from such multi-stakeholder partnerships.

References

- Brisbois BW, Cole DC, Davison CM et al (2016) Corporate sponsorship of global health research: questions to promote critical thinking about potential funding relationships. *Can J Public Health* 107(4–5):e390–e392
- Buse K, Hawkes S (2015) Health in the sustainable development goals: ready for a paradigm shift? *Glob Health* 11(13):1–8
- Di Ruggiero E, Viehbeck S, Mwatsama M et al (2017) Public-private partnerships in public health research and policy. In: McQueen D (ed) *Oxford bibliographies in public health*. Oxford University Press (OUP), New York
- Kickbusch I, Allen L, Franz C (2016) The commercial determinants of health. *Lancet Glob Health* 4(12):e895–e896
- Lima JM, Galea S (2018) Corporate practices and health: a framework and mechanisms. *Glob Health* 14:21
- McKee M, Galea G (2014) Public-private partnerships with large corporations: setting the ground rules for better health. *Health Policy* 115(2–3):138–140
- UK Health Forum (2018) *Public health and the food and drinks industry: the governance and ethics of interaction*. In: *Lessons from research, policy and practice*. UKHF, London
- United Nations (2016) Sustainable development goals. <http://www.un.org/sustainabledevelopment/sustainable-development-goals/>. Accessed 5 Mar 2018
- World Health Organization (2017a) Non-communicable diseases: fact sheet. World Health Organization. <http://www.who.int/mediacentre/factsheets/fs355/en/>. Accessed 5 Mar 2018
- World Health Organization (2017b) Approach for the prevention and management of conflicts of interest in the policy development and implementation of nutrition programmes at country level. <http://www.who.int/nutrition/consultation-doi/nutrition-tool-1stversion.pdf?ua=1>. Accessed 5 Mar 2018

¹ The workshop engaged twenty participants from fourteen countries working in universities, donor agencies, global institutions and non-governmental organizations.