

Commercial Determinants of Health and Nursing Research: Opportunities for Advancement

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Last month's editorial of *Clinical Nursing Research* presented a call for papers focusing on the intersection of social determinants of health (SDoH) and patient care strategies and practices. This call seeks to highlight the significant role clinical nursing research has played in advancing our understanding of SDoH and areas where future research is needed. One such area involves improving understanding of the role of commercial determinants of health (CDoH), which to date, has been largely understudied in the nursing field. To comprehensively advance science related to SDoH, it is imperative for nurses to familiarize themselves with the emerging concept of CDoH and use their distinct nursing perspectives to contribute to the existing body of literature. This month's editorial aims to inform nurses about the various definitions of CDoH, explain commercial actor activity and its relevance to nursing, and demonstrate how nursing researchers are uniquely suited to advance our understanding of this important area of inquiry.

What are CDoH?

CDoH refer to the impact of commercial organizations' actions on health. Although this influence of commercial actors on health has been recognized for a long time, public health researchers have only recently attempted to develop a clear, refined, and precise definition and conceptualization of CDoH (Gilmore et al., 2023). Establishing a widely accepted definition is essential to ensure that scholars exploring this topic share a common understanding; however, the field still lacks general consensus (Gilmore et al., 2023). The definition of CDoH has been a topic of discussion among scholars for over a decade, resulting in many iterations. Initially, in 2013, Millar proposed the term "corporate determinants of health" (Millar, 2013). Subsequent research evaluating how multinational corporations and their commercial activities were causing adverse health outcomes for various populations worldwide resulted in the term "commercial determinants of health" being adopted more regularly in the literature (Kickbusch, 2012, 2016; Hastings, 2012). While there is no singular agreed-upon definition, the term "commercial" has largely replaced "corporate." Below are several definitions

commonly used in the literature; seeing the definition evolve over time can aid nursing researchers' understanding of the concept as it is today.

CDoH Definitions

- "The systems, practices, and pathways through which commercial actors drive health and equity" (Gilmore et al., 2023).
- "Commercial determinants of health are the private sector activities that affect people's health, directly or indirectly, positively or negatively" (World Health Organization, 2023).
- "Social, political, and economic structures, norms, rules, and practices by which business activities designed to generate profits and increase market share influence patterns of health, disease, injury, disability, and death within and across populations" (Freudenberg et al., 2021).
- "Strategies and approaches used by the private sector to promote products and choices that are detrimental to health" (Kickbusch et al., 2016).
- "Factors that influence health, which stem from the profit motive" (West & Marteau, 2013).

As scholars work to distill the influence of commercial activity on health, one important aspect has been to try and distinguish between organizations with a profit motive that contribute to negative health outcomes (health-harming corporations) versus those that promote positive, healthy outcomes. While "good" and "bad" commercial actors exist, the focus has been on the bad (negative health outcome producing) actors. Recognition that good actors exist is essential so as not to generate the false perception that commercial actors *only* produce negative health outcomes. Therefore, it is

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imperative to identify the actors with misaligned incentives, “where there may be a conflict between profits and health” (Maani et al., 2022). Identifying where the pursuit of profits conflicts with public health, and prioritizing research efforts to educate and inform the public about these actions is the primary focus of scholars in this space. This focus can have a significant impact in preventing negative health outcomes caused by bad commercial actors while encouraging and promoting the positive contributions of good actors.

As nursing research has contributed extensively to the understanding of the SDoH, nursing should also turn their attention to and contribute their expertise to the CDoH. As private sector actors continue to gain influence and power, it is essential to understand their influence on health and health policy (Maani et al., 2022). In the past, CDoH research focused mainly on the tobacco industry and its impact on public health outcomes (Bero, 2003). However, since the heyday of the tobacco industry, corporate wealth has grown exponentially, and it is now evident that organizations other than tobacco companies can also have a negative impact on public health. Industries such as alcohol, gambling, pharmaceuticals, ultra-processed food manufacturers, private-equity (PE) firms investing in health care, as well as multinational conglomerates and retailers (such as Amazon and Walmart) have also become immensely wealthy and thus more influential in shaping policy and environments than ever before. In addition, these commercial entities employ millions of individuals (Walmart employs 2.1 million people which is equal to the population of New Mexico) and provide services and products to billions across the world. For context on size and influence, Amazon and Walmart have annual revenues of >\$500B; if either of these companies were countries, they would rank within the top 30 countries worldwide in terms of gross domestic product (Fortune, 2022). Moreover, there are now several healthcare-specific corporate entities such as CVS Health Corporation and UnitedHealth Group who are among the largest (by revenue) companies in the world. As corporations become some of the most dominant institutions in society, it is vital for nurses, who represent the largest workforce within health care, to be aware of these actors’ influence on public health.

How Can Nurse Researchers Contribute to CDoH Research?

Nursing researchers have a strong history of contributing to and extending our understanding of SDoH. Given nurses have routine direct contact with populations and are one of the most trusted professions (Saad, 2022), they are afforded unique context-rich opportunities to examine public health problems that may be less available to other academic disciplines. Nursing research has made significant contributions to SDoH by constructing, validating, and refining SDoH conceptual frameworks. An example of nursing expanding

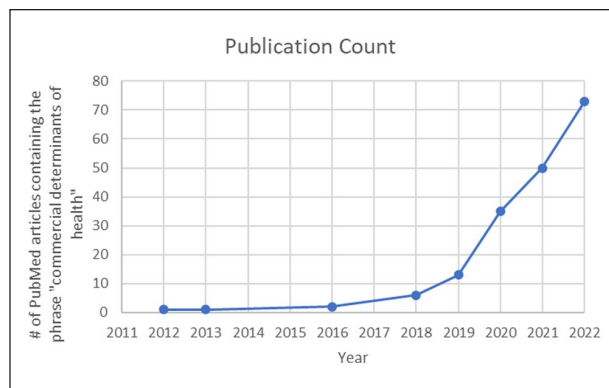


Figure 1. Number of publications annually with the term “commercial determinants of health.”

SDoH understanding was through a recent consensus paper from the American Academy of Nursing in which, they present a unified conceptual framework to describe how SDoH can be addressed through nursing roles and actions at the individual, family, and population levels with a particular focus on the role of health policy (Kuehnert et al, 2021). In addition, SDoH has become one of the main strategic priority areas of nursing research per the National Institute of Nursing Research (NINR) with over 25% of the NINR research budget being allocated to this area of inquiry (NINR, 2023). Given nursing’s continued focus on SDoH and continued development of conceptual frameworks, this is a key area where nursing research can fill a current gap in CDoH research. The first formal book on the CDoH concept published in 2022 describes this gap, “Despite the ubiquity of commercial forces, however, until recently, the commercial determinants remained largely absent from our conceptual frameworks of the social determinants of health” (Maani et al., 2022). Often, SDoH definitions contain an economic domain; thus, there is a logical alignment between the economic factors described within SDoH research and the angle at which CDoH is attempting to explore commercial actor influence on health. Nurse researchers familiar with SDoH research can think of CDoH research as a natural extension of this *economic* line of inquiry that is often cited within SDoH research but rarely explored by nurses or explored only at the individual patient level.

As of 2023, nurse researchers have made minimal contributions to the literature on CDoH. The few nurse researchers who have worked with the concept tend to publish their work in public health and health economics outlets rather than nursing academic journals (Grundy, 2022; Tesler & Malone, 2008). Increasing publication of CDoH research in nursing journals, including *Clinical Nursing Research*, is critical for helping other nurse researchers who are unfamiliar with the concept to understand it and for advancing nursing’s contribution to this area of inquiry in the future. Figure 1 shows a 10-year analysis of the use of

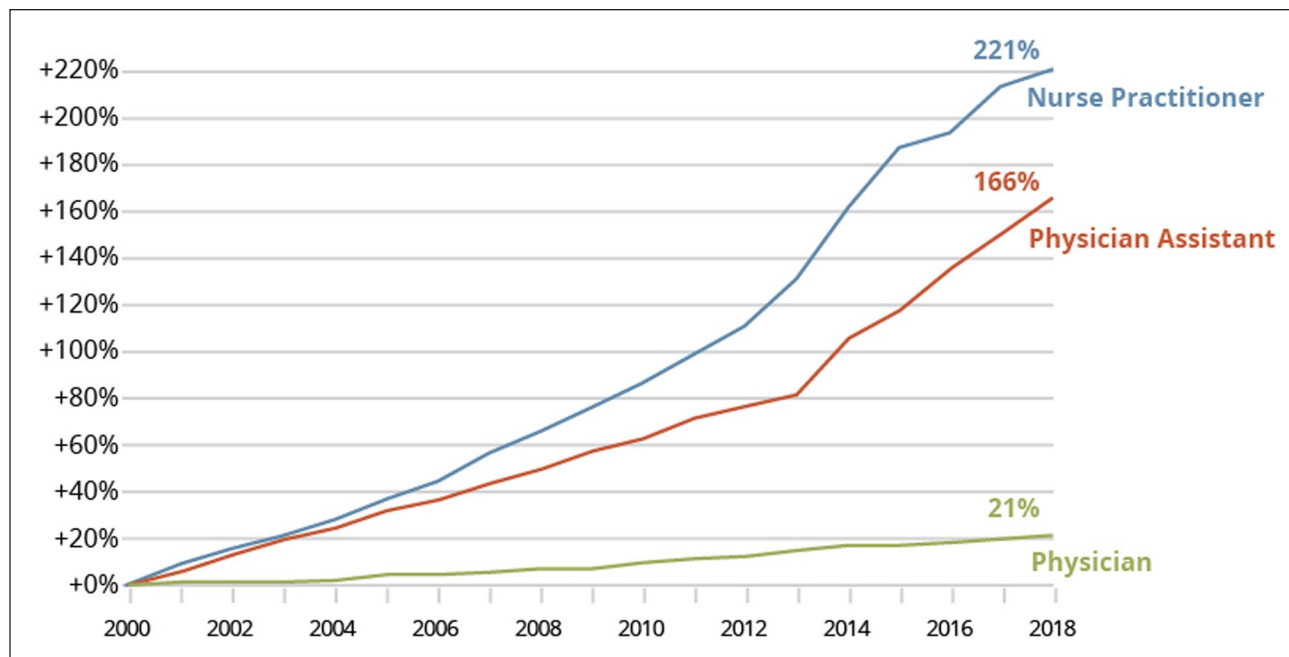


Figure 2. Cumulative % growth per 10,000 population since 2000 for nurse practitioners, physician assistants, and physicians in North Carolina.

the term “commercial determinants of health” in PubMed. The term was coined around 2012 and has since seen an annual increase in use in academic journals. Notably, nursing academic journals have made *zero* contributions to this trend. Given that other disciplines have rapidly explored CDoH and it has a logical adjacency to SDoH, nurse researchers need to be encouraged to contribute to this still-emerging area of research.

The Nursing Profession and Commercial Actor Interactions

Nurses, which constitute one of the largest labor workforces in the United States (and worldwide) and are the largest healthcare workforce (U.S. Bureau of Labor Statistics, 2022), will inevitably interact with commercial actors. The nursing context could be valuable in CDoH research as nursing and commercial actors have more frequent interactions with each other (Grundy et al., 2016, 2023). Nurses, especially advanced practice registered nurses (APRNs), are seeing rapid labor force growth and expansion of their scope of practice, and therefore might be new targets of interest for commercial and industry actors. Figure 2 shows the rapid increase in APRN supply as compared to physician assistants and physicians over the past 20 years in North Carolina (Cecil G. Sheps Center for Health Services Research, n.d.). Commercial actors such as Amazon, through their One Medical acquisition, and CVS via their Oak Street Health acquisition, are delivering more telehealth and more primary care services and will need a

growing labor pool of clinicians if they intend to scale their operations. As the APRN profession experiences significant growth compared to other clinical professions and sees increases in their scope of practice via policy reform, these corporations may more frequently recruit and interface with the APRN population.

Nurse researchers can also benefit from understanding where corporate activity is increasing. An example of where nursing research could advance understanding of CDoH is through examining the impact of recent private equity (PE) market activity and the subsequent and future influence on public health. PE firms have been investing in the healthcare sector at explosive rates since 2000. In 2000, the healthcare sector saw approximately \$2B in deal value from PE, while in 2021, the deal volume rose to approximately \$150B (Bain Capital, 2023). This trend means that commercial actors with a profit motive are increasingly targeting health care as an area where they can enter. PE often enters a business and aims to increase value in a short timeframe (3–7 years) and then sells the business to gain a profit. This value increase is often via adjusting employee workflows and operations to increase efficiency, adjusting staffing to decrease labor costs, and adjusting which products and services are used in certain work settings; all in the sake of decreased costs, increased efficiency, and more value. PE in healthcare touches many areas familiar to nursing, such as nursing homes, hospice, hospitals, surgery centers, staffing firms, digital health startups, medical device companies, and pharmaceuticals (Bain Capital, 2023). However, while PE can promote efficiency and expedite change within an organization, it is often seen

as a misalignment of incentives when PE enters health care. Attempts to increase value and profits in a patient-centric environment ultimately lead to a bad reputation as people often perceive this as, “How can PE firms deliver their promised ‘outsized returns’ to investors on the backs of sick patients?” (Appelbaum & Batt, 2020). For an example of misaligned incentives leading to adverse health outcomes, PE-owned nursing homes have been found to have a 10% increase in mortality rates among Medicare patients when compared to non-PE-owned nursing homes (Gupta et al., 2021).

One additional example of commercial activity and an area where nursing research could advance our understanding of CDoH influence on public health is the recent opioid settlement fund agreements. Multiple corporations have agreed to pay out settlements to states and local governments across the United States for their involvement in the opioid epidemic. Amerisource Bergen, Cardinal Health, McKesson, Walgreens, Walmart, CVS, Johnson & Johnson, and Allergan are currently some of the entities that are providing payments of nearly \$50 billion over the next decade to aid in the abatement of the opioid crisis (National Opioid Settlements, 2023). Nurses encounter the ramifications of the opioid crisis daily, whether in their clinical or non-clinical roles. As such, nurse researchers should start exploring the CDoH nuances between commercial actors like those mentioned above and their impacts on public health outcomes. Although nursing researchers have extensively explored opioid-related problems and affected populations, they could still have profound scholarly contributions to share concerning CDoH and this issue. While numerous examples illustrate the intersection between nursing and commercial entities, it is crucial to outline how future nurses can prepare to comprehend and integrate this reality into their practice to mitigate the impact of these corporate actors on the nursing profession and the public.

CDoH and Nursing Curriculum

As nurses continue to increase their presence in healthcare management and administration, nursing education, especially within nursing administration and leadership programs should start to incorporate CDoH into their curriculums. SDoH is a common concept discussed within most nursing programs, but at this time CDoH are notably absent from any nursing curriculums. Given the increase in commercial activity within health care, it is paramount that future nurses understand why organizations are incentivized to perform certain actions and how they contribute to negative population health outcomes. Nurses would benefit from business educational backgrounds, not to say all nurses should pursue an MBA, but having a core foundational knowledge of organizational theory, management, finance, and economics would prove extremely valuable to future nurse administrators and leaders, as well as nurse researchers, as they

interface with commercial entities or research said entities. For example, if a new chief nursing officer (CNO) were to be informed their health system was going to be bought by a PE firm, the CNO should be aware of what incentives are present for the PE firm and where misalignment with patient care goals or organizational mission exist. Without the requisite business education, nurses may find themselves ill-equipped to meaningfully change or mitigate the patient outcome consequences of such an acquisition. If nursing curriculum cannot advance quickly enough in this respect, there is also ample opportunity to start working more interprofessionally with business and public health colleagues to address these concerns.

Conclusion

The impact of commercial actors on health has been recognized for some time, but the field still lacks general consensus on the definition and conceptualization of CDoH. It is essential to identify and distinguish between organizations that contribute to negative health outcomes versus those that promote positive, healthy outcomes. Nursing researchers can contribute to CDoH research by helping to refine all the varying present definitions by adding a nursing discipline perspective, contribute to incorporating CDoH concepts into SDoH conceptual frameworks thus strengthening the SDoH frameworks, using their unique perspectives to advance the existing body of literature via unique nursing contexts, and by identifying where the pursuit of profits conflicts with public health in ways current disciplines have not considered. As corporations become some of the most dominant institutions in society, it is vital for nurses—who represent the largest, most trusted workforce within health care and are renowned patient advocates—to be aware of the commercial influence on public health. They should prioritize research efforts to educate and inform the public about these actions. By doing so, nurses can help promote positive health outcomes and prevent negative health outcomes caused by bad commercial actors. By leveraging their unique perspectives and expertise, nursing researchers can make important contributions to this emerging area of inquiry. As health care continues to evolve, and commercial entities gain more influence and power, nurses must remain informed about the impact of commercial actors on health and health policy. In doing so, they can help ensure that the healthcare system prioritizes the well-being of individuals and communities over corporate profits, ultimately leading to a healthier and more equitable society.

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