



Driving Corporate Involvement in Community Health and Well-being

Steve Rochlin
IO Sustainability

Stephen Jordan
IO Sustainability

Cheryl Y. Kiser
The Lewis Institute for Social Innovation
Babson College

health+
well-being

Table of Contents

About this Report and Acknowledgments	5
Acknowledgments.....	6
I. Executive Summary	7
II. Expectations and Challenges for Business	11
Identifying the expectations for corporate involvement in community health and well-being.....	13
Barriers to corporate involvement	14
III. Making the Business Case for Community Health and Well-being	15
Community health and well-being can help drive down health care-related costs.....	15
Enhancing enterprise value, performance, and reputation.....	21
Opening up market development and revenue opportunities.	22
Implications for corporate involvement in community health and well-being	22
IV. Taking an Entrepreneurial Approach to Community Health and Well-being	23
V. Applying Lessons from the Sustainability Movement	28
Core drivers of the corporate sustainability movement.....	31
Rules driver.....	32
Reputation driver	34
ROI driver.....	36
Relationship driver.....	40
Resources driver	42
VI. Next Steps	45
Leverage the emerging health and well-being movement.....	45
Reframe sustainability around health and well-being.....	45
Use health and well-being as a driver to connect silos within companies.....	46
Activate the entrepreneurial mindset inside and outside the corporation	46
Learn from social entrepreneurs and innovators.....	47
Appendix I: Organizations Participating in the Business Advisory Council on Health	48
Appendix II: Examples of Corporate Involvement in Community Health and Well-being	48
Bibliography	53



About the Research Organizations

Babson College's Lewis Institute for Social Innovation

The Lewis Institute illuminates pathways for students, faculty, staff, foundations, and corporate partners seeking social innovation solutions. By drawing upon Babson's core methodology of Entrepreneurial Thought & Action®, we activate unexpected and fruitful collaborations and integrative designs for action. The result is business prosperity and societal improvement. We extend our impact through the Babson Social Innovation Lab, an action tank powered by Toyota, that incubates people and ideas in the world of the social innovation.



IO Sustainability

IO Sustainability, LLC (IO) is an international research and management consulting firm that helps clients connect the dots between their environmental, social, and governance performance and long-term value. We have deep expertise in corporate responsibility, sustainability, public-private partnerships, and traditional business disciplines such as business strategy, marketing, operations, new product development, public affairs, and communications. We combine these skills with extensive networks spanning business, government, and nonprofit leaders that uniquely position us to help our clients address cross-sector challenges. By understanding and leveraging good practices across sectors and combining these approaches with keen insights into the drivers of return on investment, we provide long-term value for our clients and partners.

Introduction

About this Report

This report is the product of an 18-month project examining the business case for corporate involvement in community health and well-being. The project was supported by the Robert Wood Johnson Foundation (RWJF) and led by a partnership between Babson College's Lewis Institute for Social Innovation and IO Sustainability.

The views expressed here do not necessarily reflect the views of the Foundation.

A set of core questions guided the project's research:

- How can we encourage companies to become involved in supporting and contributing solutions to community health and well-being (H&WB) in the United States?
- Can we find a clear and compelling financial business case for corporate involvement in community H&WB based on existing research and data?
- What lessons can both companies and those championing corporate involvement in community health and well-being learn and apply from the corporate sustainability movement?

To answer these questions, the project team of IO Sustainability and Babson College reviewed over 500 studies and reports that:

- Directly consider the business case for community health and well-being
- Review examples of corporate involvement in community health and well-being
- Examine the connection between the social determinants of health to business performance
- Assess the key drivers of the corporate sustainability movement
- Investigate adjacent business cases for corporate support of health and well-being overall (notably reviewing the business case for employee health and well-being).

To supplement the research, the project team interviewed over 50 key stakeholders, including 30 companies, to understand the factors driving and constraining corporate involvement in community health and well-being. The team then assessed the current landscape with regard to:

- The challenges and opportunities that the current health care environment poses to business
- The sustainable business movement and how it guides and affects corporate involvement in community H&WB.

Advising the entire process was a multi-sector consortium of companies that the project team convened, called the Business Advisory Council on Health (BACH). The BACH met three times to provide direction and feedback. Appendix I provides the list of corporate participants.

This report highlights key findings that address the core questions outlined above. Ensuing sections provide:

- Context for why community health and well-being matters for business
- An emerging business case for corporate involvement in community health and well-being
- Implications for companies and the actions they can take
- Lessons learned from the corporate sustainability movement regarding ways to encourage corporate involvement¹

The report shares select examples meant to provide ideas for the ways to design and pursue corporate involvement.

Acknowledgments

The authors wish to express their considerable gratitude to the Robert Wood Johnson Foundation (RWJF) for its support of this work.

The corporate members of the Business Advisory Council on Health demonstrated both a passion and level of commitment that gives us great hope for the future. The authors wish to thank the tireless efforts of these corporate volunteers who lent their invaluable time, expertise, and critical eyes to the project. They include: Nebeyou Abebe, Melinda Bostwick, Lisa Boyd, Kim Brooks, Kyle Cahill, Reggie Chappel, Yasmin Cruz, Erin Davies, Caroline Decker, Todd Furniss, Lisa Gable, Christina Hsu Evans, Karyn Ferro, Steve Lafferty, Kate Loovis, Perry Markell, Amy McDonough, David Minifie, Barbara Mintz, Peter Nicholson, Lynn Ostrowski, Patti Petrella, Kathy Pickus, Jennifer Silberman, Mike Spicci, Dave Stangis, Kathleen Tullie, Rada Yovovich, and Hugh Welsh.

This report would not be possible without the expert guidance of Professor Richard Bliss of Babson College, and IO Sustainability's Senior Advisor Louise Hilsen. In addition, an extraordinary amount of credit for the results of this report go to the top-notch team of researchers supporting the project, including Hannah Edens, Eleanor Field, Will Hancuch, Katie O'Sullivan, Amanda Pope, Susannah Smith, Richard Sykes, and Madeleine Wood. Finally, we would like to express our gratitude to Jennifer MacDonald and Emily Weiner for their support across all phases of the project.

¹ For shorthand, the Report will use the term "corporate involvement" to refer to "corporate involvement in community health and well-being."

I. Executive Summary

Improving community health and well-being (H&WB) is an overlooked, yet vital strategy for business.

In the US, business accounts for \$600 billion, or 20% of the country's total annual health care spending.² This is a substantial portion of the \$1.8 trillion in U.S. business profits reported in 2016. These figures don't even include the estimated hundreds of billions of dollars the private sector loses due to health-related absenteeism and reduced productivity.³ It's no wonder why businesses care so much about finding better ways to promote health outcomes and reduce costs.

In recent years, business has increased its programming and investments in employee workplace wellness in an attempt to reduce insurance costs, maintain productivity, and reduce absenteeism and presenteeism. Yet this approach has not delivered desired results because it does not sufficiently address major root causes and drivers affecting a company's health profile. At least 22% of the private sector's annual spending on health is attributed to 10 risk factors, such as obesity, tobacco use, and stress, that are strongly influenced by the social determinants of health. This report submits that addressing community health drivers more intentionally and effectively holds the potential to substantially reduce burdensome health-related costs and deliver a range of business benefits. This kind of compelling business case should drive more strategic business interest in community health and well-being (H&WB).

Estimates also suggest that as much as 25% of current health care spending is ineffective, improving neither outcomes nor quality.⁵ This represents an urgent gap for businesses to close. Yet few businesses possess a systematic strategy to address community H&WB. **Logically, the only way for business to address health costs, needs, opportunities, and challenges systemically is to help advance wider community H&WB.**

Furthermore, evidence suggests that improving strategies for addressing the social determinants of health will deliver financial and competitive returns on investment (ROI) for business by:

- Reducing costs related to health care, productivity losses, absenteeism, and presenteeism
- Enhancing key performance indicators such as enterprise value, financial performance, and reputation
- Creating new revenue generating opportunities

² Centers for Medicare & Medicaid Services, "National Health Expenditure Fact Sheet 2016," <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/nationalhealthexpenddata/nhe-fact-sheet.html> and "National Health Expenditures 2015 Highlights," <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/nationalhealthexpenddata/downloads/highlights.pdf>

³ Center for Diseases Control and Prevention. "Worker Illness and Injury Costs U.S. Employers \$225.8 Billion Annually." January 2015, Available from: <http://www.cdcfoundation.org/pr/2015/worker-illness-and-injury-costs-us-employers-225-billion-annually>. And, Robert Wood Johnson Foundation. "Issue Brief: Why Healthy Communities Matter to Businesses," May, 2016, p. 3.

⁴ Goetzel RZ, Pei X, Tabrizi MJ, et al. Ten modifiable health risk factors are linked to more than one-fifth of employer-employee health care spending. *Health Aff.* 2012;31(11):2474-2484.

⁵ Magnan, S., E. Fisher, D. Kindig, G. Isham, D. Wood, M. Eustis, C. Backstrom, and S. Leitz. 2012. Achieving accountability for health and health care. *Minnesota Medicine* 97(11):37-39.

The Robert Wood Johnson Foundation (RWJF) has developed a framework that addresses community H&WB along with the fundamental drivers of the system as a whole. The Culture of Health approach (*see the box insert below*) sets an aspirational vision for companies. It encourages companies to meld rational calculations of short and long-term financial returns with purpose-driven considerations of how to bring organizational values to life. It encourages partnership with civil society and government; the design of win-win strategies that deliver shared value; and the prioritization of improving community H&WB.

CULTURE OF HEALTH: CORE PRINCIPLES

1. Good health flourishes across geographic, demographic, and social sectors
2. Attaining the best health possible is valued by our entire society
3. Individuals and families have the means and the opportunity to make choices
4. Business, government, individuals, and organizations work together to build healthy communities
5. No one is excluded
6. Everyone has access to affordable, quality health care
7. Health care is efficient and equitable
8. The economy is less burdened by excessive and unwarranted health care spending
9. Keeping everyone as healthy as possible guides public and private decision-making
10. Everyone in America understands that we are all in this together

Despite emerging evidence and growing support, executives cite a range of obstacles limiting their engagement in community H&WB. These include the lack of knowledge and expertise, guidance, trust among stakeholders, performance and business case metrics, and an agreed view of accountability.

To help address these obstacles, the research team studied other business movements, in particular the modern corporate sustainability movement, for insights into strategies that could support business efforts to change their approach.

While acknowledging differences, there are many points of comparability, and the issues that community H&WB and Culture of Health encompass ***all fall under the larger umbrella of the corporate sustainability movement.***

Research into the business case along with the Corporate Sustainability Movement suggest that promising strategies to deepen corporate involvement in community H&WB would include:

- Activating an entrepreneurial mindset inside and outside the corporation. This includes encouraging business to adopt an entrepreneurial approach to H&WB that coordinates strategies around community health, employee health, environmental health, and customer health. Such an approach should be designed to improve both the financial bottom line and community well-being.
- Leveraging key strategies successfully employed by the Corporate Sustainability Movement defined in Figure 1:

Figure 1: Leveraging strategies successfully employed by the corporate sustainability movement

STRATEGY	KEY ELEMENTS
Establish both formal and voluntary Rules for Corporate Involvement	<ul style="list-style-type: none"> • Encourage corporate disclosure and reporting on health and well-being impacts • Encourage multiple stakeholders to define voluntary standards regarding the impacts of business on community H&WB • Define market-making rules that encourage large-scale purchasers to buy from companies that support community H&WB
Employ strategies to influence corporate Reputation	<ul style="list-style-type: none"> • Create effective systems that rate, rank, and recognize community H&WB leaders • Influence and support brand and reputation positioning for community H&WB leaders
Enhance the financial ROI of community H&WB approaches	<ul style="list-style-type: none"> • Mobilize investors to favor companies that take a strategic approach to community H&WB • Reveal high value, low cost opportunities to advance community H&WB • Deepen research that proves the business case for corporate involvement in community H&WB
Develop strategic Relationships	<ul style="list-style-type: none"> • Enhance the accountability of companies to community H&WB stakeholders • Encourage suppliers to become more accountable for their impacts on community H&WB • Use competitive rivalry to drive greater commitments to community H&WB • Build supportive partnerships
Create Resources that companies can utilize to help advance community H&WB	<ul style="list-style-type: none"> • Support the creation of “integrators” that broker corporate involvement strategies and partnerships • Form intermediaries that provide information and guidance on good practices • Develop knowledge-building campaigns for the C-Suite • Establish business networks and associations
Take an Entrepreneurial approach to advance the community H&WB movement	<ul style="list-style-type: none"> • Leverage the emerging health and well-being movement that is building a US market of over \$1 trillion • Encourage the sustainability movement to build in health and well-being metrics and objectives • Use H&WB as a value driver for multiple functions within companies • Activate the entrepreneurial mindset inside and outside the corporation • Learn from social entrepreneurs and innovators

EXECUTIVE SUMMARY

While some companies experience success in addressing workplace health challenges, many business health strategies have profoundly misaligned the resources they are deploying against the challenges they are trying to address.

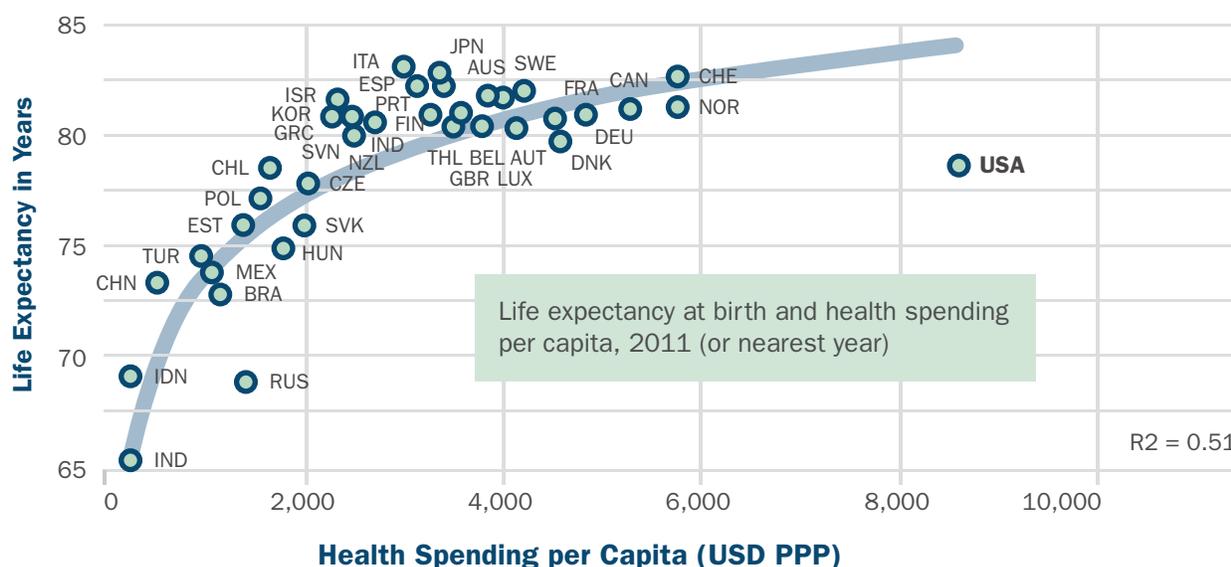
The lessons of sustainability show that while no single entity can do everything, a movement where different organizations take ownership of a variety of drivers of corporate behavior can drive large-scale change. This is why a few catalytic organizations can have an enormous impact far beyond their own capabilities. By creating a support system and empowering others, organizations that are committed to promoting a Culture of Health can leverage resources as well as other people's skills and expertise far in excess of what they could accomplish on their own.

The benefits of incentivizing more intentional and systemic business strategies to address community health drivers are growing increasingly clear. A roadmap based on the experiences of others who have gone before, but with a clear vision of the unique challenges and opportunities of community H&WB is waiting to be built. If successful, those advancing corporate involvement will set in motion a powerful engine for future prosperity and enhanced quality of life for the businesses that embrace the Culture of Health vision and the people in the communities that they serve.

II. Expectations and Challenges for Business

The challenges facing individual and community health are acute and well-known. Figure 2 provides compelling evidence showing that US health metrics, “lag behind those in most developed countries by a wide margin, despite the fact that the United States spends substantially more on health care than its peers.”

Figure 2: Indicative performance of US health vs. peers



Source: OECD Health Statistics 2013, <http://dx.doi.org/10.1787/health-data-en>; World Bank for non-OECD countries. StatLink <http://doi.org/10.1787/888932916040>

The US shows substantial H&WB “disparities by race, income, and geography, and has experienced an absolute worsening in mortality rates in many US counties over the last decade.” Improving population H&WB in the US will require much more than high-quality, affordable health care.⁶ Public health experts are finding that the so-called “social determinants of health” (or “social determinants” for short) play a core role in population health. The US Centers for Disease Control and Prevention (CDC) defines the social determinants of health as “life-enhancing resources, such as food supply, housing, economic and social relationships, transportation, education, and health care, whose distribution across populations effectively determines length and quality of life. These include access to care and resources such as food, insurance coverage, income, housing, and transportation.

⁶ Sources: IOM (Institute of Medicine) and NRC (National Research Council), 2013. U.S. health in international perspective: Shorter lives, poorer health. Washington, DC: The National Academies Press, & Kindig, D., and E. Cheng. 2013. “Even as mortality fell in most US counties, female mortality nevertheless rose in 42.8 percent of counties from 1992 to 2006.” *Health Affairs* 32(3):451-458.

Social determinants of health influence health-promoting behaviors, and health equity among the population is not possible without equitable distribution of social determinants among groups.”⁷ These social determinants are a central variable in predicting ongoing health and well-being,⁸ prevalence of illness,⁹ and mortality rates.¹⁰

The role and impact of the social determinants means that one cannot improve population health through the doctor’s office and medications alone. Promoting health means promoting well-being which incorporates physical fitness, nutrition, mental health, clean air and water, safety and security, and a decent standard of living.

As such, the Robert Wood Johnson Foundation has defined core principles that guide all institutions — including business, government, civil society, and their various partners — towards a pathway to improve the country’s H&WB. To summarize, RWJF’s Culture of Health approach builds on the following (Figure 3):¹¹

Figure 3: Core principles for a culture of health

CORE PRINCIPLES

1. Good health flourishes across geographic, demographic, and social sectors
2. Attaining the best health possible is valued by our entire society
3. Individuals and families have the means and the opportunity to make choices
4. Business, government, individuals, and organizations work together to build healthy communities
5. No one is excluded
6. Everyone has access to affordable, quality health care
7. Health care is efficient and equitable
8. The economy is less burdened by excessive and unwarranted health care spending
9. Keeping everyone as healthy as possible guides public and private decision-making
10. Everyone in America understands that we are all in this together

The Culture of Health approach takes an important step to reinforce a growing trend. Increasingly, civil society leaders, health care professionals, policy-makers, and thought leaders share the perspective that improving H&WB in the United States will require the active partnership and engagement of business. The Culture of Health approach sets an aspirational vision for companies to adopt. It encourages companies to engage and meld rational calculations of short and long-term financial returns with the purpose-driven considerations of how to bring organizational values to life. It encourages companies to partner with civil society and government; design win-win strategies that deliver shared value; and prioritize improving community H&WB.

The Culture of Health approach looks at strengthening community health as a competitive advantage for companies. Instead of thinking about health as a cost center and an expense, it positions health as an asset to be cultivated which ultimately contributes to enterprise value.

⁷ Brennan Ramirez, Laura K.; Baker, Elizabeth A.; Metzler, Marilyn (2008). Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health (PDF). United States Centers for Disease Control and Prevention. p. 6.

⁸ Deborah Bachrach, Helen Pfister, Kier Wallis, and Mindy Lipson, “Addressing Patients’ Social Needs: An Emerging Business Case for Provider Investment,” *Manatt Health Solutions*, May, 2014, p. 10-11; Raj Chetty et al., “Where is the Land of Opportunity? The Geography of Intergenerational Mobility in the United States,” *The Quarterly Journal of Economics* 129, no. 4 (Sept. 14, 2014): 1553-1623, doi: 10.1093/qje/qju022.; Gopal K. Singh, Mohammad Siahpush, and Michael D. Kogan, “Neighborhood Socioeconomic Conditions, Built Environments, and Childhood Obesity,” *Health Affairs* 29, no. 3 (March 2010):503-512, doi: 10.1377/hlthaff.2009.0730. Conditions, Built Environments, And Childhood Obesity. *Health Affairs*. 29(3): 503-512.; Harry J. Heiman and Samantha Artiga, “Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity” Nov 4, 2015. <http://kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>.; Paul A. Jargowsky, *The Architecture of Segregation: Civil Unrest, the Concentration of Poverty, and Public Policy*, (The Century Foundation, August 9, 2015), http://www.tcf.org/assets/downloads/Jargowsky_ArchitectureofSegregation.pdf;

Culture of Health is an important framework for business to consider when addressing the growing expectations for their involvement in community H&WB.

Identifying the expectations for corporate involvement in community health and well-being

Civil society leaders, health care professionals, thought-leaders, and policy-makers increasingly expect business both to lead and to partner in advancing community H&WB. These expectations create different kinds of pressures and/or incentives for companies.

1. Business faces pressure to improve community H&WB

Businesses are increasingly perceived by activists as using their “raw power” to shape public policy, and affect the distribution of the social determinants of health in ways that support corporate profits at the expense of the general population’s H&WB.¹² This includes the perception that companies make decisions that negatively impact the social determinants through their behaviors and actions — from selling unhealthy products and services to restricting access to vital services and needs due to high prices to harming the environment in ways that impact human H&WB,¹³ to name a few. These stakeholders expect companies to make up for such perceived faults by playing an increasing role in strengthening population health.¹⁴

2. Business is seen as an essential partner in improving community H&WB

The Rio Political Declaration on Social Determinants of Health — shaped by multiple countries and a cross-section of stakeholders — calls for greater collaboration with the private sector.¹⁵ In addition, conversations with experts find the lack of effective multi-sector collaboration with business a major barrier to improving community health.¹⁶

⁹ Vincent J. Felitti et al., “Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study,” *American Journal of Preventive Medicine* 14, no. 4 (May 1998):245–258.; J. Krieger, and D. L. Higgins, “Housing and Health: Time Again for Public Health Action,” *American Journal Public Health*, May 2002 92(5):758–68.; C. Mansfield and L. F. Novick, “Poverty and Health: Focus on North Carolina,” *North Carolina Medical Journal*, Sept.-Oct. 2012 73(5):366–73.; Seligman, Laraia, and Kushel, “Food Insecurity Is Associated with Chronic Disease,” 2010.; H. K. Seligman, B. A. Laraia, and M. B. Kushel, “Food Insecurity Is Associated with Chronic Disease Among Low-Income NHANES Participants,” *Journal of Nutrition*, Feb. 2010 140(2):304–10; K. W. Strully, “Job Loss and Health in the U.S. Labor Market,” *Demography*, May 2009 46(2):221–46.; J. E. Stuff, P. H. Casey, K. L. Szeto et al., “Household Food Insecurity Is Associated with Adult Health Status,” *Journal of Nutrition*, Sept. 2004 134(9):2330–35.; S. H. Woolf and P. Braveman, “Where Health Disparities Begin: The Role of Social and Economic Determinants—And Why Current Policies May Make Matters Worse,” *Health Affairs*, Oct. 2011 30(10):1852–59.

¹⁰ L. Calvillo-King, D. Arnold, K. J. Eubank et al., “Impact of Social Factors on Risk of Readmission or Mortality in Pneumonia and Heart Failure: Systematic Review,” *Journal of General Internal Medicine*, Feb. 2013 28(2):269–82.; Vincent J. Felitti et al., “Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study,” *American Journal of Preventive Medicine* 14, no. 4 (May 1998):245–258.; S. Galea, M. Tracy, K. J. Hoggatt et al., “Estimated Deaths Attributable to Social Factors in the United States,” *American Journal of Public Health*, Aug. 2011 101(8):1456–65.; Harry J. Heiman and Samantha Artiga, “Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity” Nov 4, 2015. <http://kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>.; L. A. Lebrun-Harris, T. P. Baggett, D. M. Jenkins et al., “Health Status and Health Care Experiences Among Homeless Patients in Federally Supported Health Centers: Findings from the 2009 Patient Survey,” *Health Services Research*, June 2013 48(3):992–1017; Michael Marmot et al., “Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health,” *The Lancet* 372, no. 9650 (Nov. 8, 2008):1661–1669.; T. J. Matthews and M. F. MacDorman, “Infant Mortality Statistics from the 2008 Period Linked Birth/Infant Death Data Set,” *National Vital Statistics Reports*, May 2012 60(5).; National Center for Health Statistics, *Health, United States, 2011: With Special Feature on Socioeconomic Status and Health* (Hyattsville, Md.: NCHS, 2012).; H. K. Seligman, A. F. Bolger, D. Guzman et al., “Exhaustion of Food Budgets at Month’s End and Hospital Admissions for Hypoglycemia,” *Health Affairs*, Jan. 2014 33(1):116–23;

¹¹ <http://www.rwjf.org/en/how-we-work/building-a-culture-of-health.html>

¹² Raphael, D. (2014). “Beyond policy analysis: The raw politics behind opposition to healthy public policy”. *Health Promotion International*. 30: 380–96. doi:10.1093/heapro/dau044. PMID 24870808.

¹³ Sources: Hagenstein, P. R. et al. (2003). Air emissions from animal feeding operations: Current knowledge, future needs. National Academies Press, 56. Retrieved August 30, 2012.; Jessica Hendricks, “When People and Industry Live Side-by-Side: Health Impacts of PM Pollution,” *Physicians for Social Responsibility (PSR)*, August 20, 2012. <http://www.psr.org/environment-and-health/environmental-health-policy-institute/responses/when-people-industry-live-side-by-side.html?referrer=https://www.google.com/>.

¹⁴ Business for Social Responsibility. A New CSR Frontier: Business and Population Health. 2013. Available at http://www.bsr.org/reports/BSR_A_New_CSR_Frontier_Business_and_Population_Health.pdf

¹⁵ WHO, “Rio Political Declaration on Social Determinants of Health” Rio de Janeiro, Brazil, 21 October 2011, p. 3

¹⁶ RWJF, *Using Social Determinants of Health Data to Improve Health Care and Health: A Learning Report*, May 2, 2016, <https://healthleadsusa.org/wp-content/uploads/2016/06/RWJF-SDOH-Learning-Report.pdf>, p.21-22

Barriers to Corporate Involvement

Despite the mounting benefits of addressing community H&WB challenges, most companies have engaged them in a limited manner due to a number of obstacles and concerns.

Beyond surveys of corporate philanthropic contributions, few data sources help identify the scope and scale of private sector investment in community H&WB. Many companies tend to assign H&WB as the sole responsibility of the HR department. Companies have focused primarily on employees and, in some industries, customers.¹⁷

The barriers listed in Figure 4 can appear daunting, and convincing business to engage at the broader community level and to adopt the Culture of Health approach has been a challenge.¹⁸

Figure 4: Factors inhibiting the adoption of a culture of health by business¹⁹

INHIBITING FACTORS	
Lack of a clear business case	Companies perceive they benefit more by supporting other community needs, such as education, workforce development, etc.
Lack of know-how	Companies often perceive community H&WB as requiring special skills, knowledge, and capabilities beyond their expertise. Large businesses suggest they need tools and partnerships that could help them deliver concrete, actionable, scalable, and replicable results ²⁰
Lack of trust among stakeholders	Companies perceive that they are often blamed as a cause of community H&WB deficiencies

Companies do not have unlimited resources. There are many competing priorities for the resources they do have. This is why addressing these obstacles and raising awareness about the value of adopting a Culture of Health strategy need to be core activities of advocates hoping for widespread business adoption of more systemic community engagement.

¹⁷ Business for Social Responsibility. A New CSR Frontier: Business and Population Health. 2013. Available at http://www.bsr.org/reports/BSR_A_New_CSR_Frontier_Business_and_Population_Health.pdf.

¹⁸ Sources: National Academies of Sciences, Engineering, Medicine, “Business Engagement in Building Healthy Communities: Workshop Summary”, (2015) p. 15.; Andrew Webber, Suzanne Mercure, “Improving Population Health: The Business Community Imperative” Preventing Chronic Disease Dialogue, October 15th, 2010 8:46 am ET - Volume 7: No. 6, November 2010, <https://blogs.cdc.gov/pcd/2010/10/15/improving-population-health-the-business-community-imperative/>

¹⁹ Adapted from: Nicolaas P. Pronk, PhD, Catherine Baase, MD, Jerry Noyce, MBA, and Denise E. Stevens, PhD, “Corporate America and Community Health Exploring the Business Case for Investment”, JOEM, Volume 00, Number 00, 2015, p. 7

²⁰ Interviews by the authors with companies.

III. Making the Business Case for Community Health and Well-being

“Health is impacting every aspect of [business] success....We are spending more than twice as much as any other country, on a relative basis, and getting worse outcomes. That’s not good. And it’s causing social capital erosion....This is not an isolated problem. It’s completely intertwined with our issues of education and infrastructure...[and] is destructive to business profitability and success.”²¹

—Dr. Catherine Baase, Global Director of Health Services, The Dow Chemical Company

The business case for corporate involvement has three elements. Community health and well-being:

1. Has the potential to drive down a company’s health care-related costs
2. Can enhance enterprise value, performance, and reputation
3. Can help open up market development and related revenue opportunities

Community health and well-being can help drive down health care-related costs

“Business leaders must understand that an employer can do everything right to influence the health and productivity of its workforce at the worksite, but if that same workforce lives in unhealthy communities, employer investments can be seriously compromised.”²²

—Andrew Webber, President and Chief Executive Officer, National Business Coalition on Health

H&WB challenges facing business are intensifying. H&WB issues cost American businesses annually over \$600 billion, or approximately 20% of total US health care spending.²³ This translates into the equivalent of 25-33% of corporate profits allocated to health care.²⁴ As a response, companies have increased investment in workplace health and wellness programming. Surveys identify that 79% of employers offer health improvement programs. For these companies, the price per employee of such programs has been on a fast-moving trajectory (Figure 5), increasing over 60% since 2010.

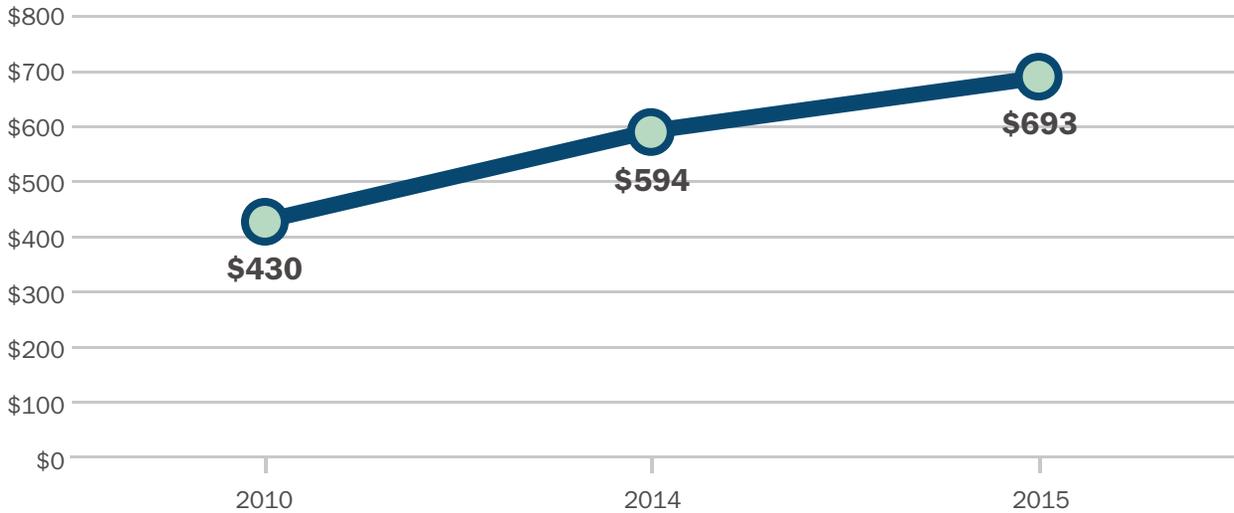
²¹ Heather Jordan, “Dow Chemical director: Health affects ‘every aspect’ of business success” January 21, 2015, http://www.mlive.com/business/mid-michigan/index.ssf/2015/01/health_experts_talk_about_why.html

²² Andrew Webber, Suzanne Mercure, “Improving Population Health: The Business Community Imperative” Preventing Chronic Disease Dialogue, October 15th, 2010 8:46 am ET - Volume 7: No. 6, November 2010, <https://blogs.cdc.gov/pcd/2010/10/15/improving-population-health-the-business-community-imperative/>

²³ Centers for Medicare & Medicaid Services, “National Health Expenditure Fact Sheet 2016,” <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/nationalhealthexpenddata/nhe-fact-sheet.html> and “National Health Expenditures 2015 Highlights,” <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/nationalhealthexpenddata/downloads/highlights.pdf>

²⁴ Environmental Scan: Role of Corporate America in Community Health and Wellness; HERO Employer-Community Collaboration Committee, 2014. To pick just one snapshot, U.S. Bureau of Economic Analysis, Corporate Profits After Tax (without IVA and CCAAdj) [CP], retrieved from FRED, Federal Reserve Bank of St. Louis; <https://fred.stlouisfed.org/series/CP>, May 29, 2018 reports profits of \$1.68 trillion in Q4 2017.

Figure 5: Large firm spending on health and well-being per employee²⁵ N = 121 (for 2015)



Larger companies (> 20,000 employees) are spending the most: the per-employee average climbed to \$878, up from \$717 in 2014. The average for companies with between 5,000 and 20,000 workers rose to \$661, up from \$493 in 2014.

Investments in workplace health and wellness concentrate on a mix of employee assistance, nutrition, and fitness programs often offered at the workplace site shown in Figure 6. Comparably, few companies either prioritize or offer community H&WB programs.²⁶ Companies interviewed suggest that community well-being programs for the most part likely refer to charitable contributions provided to federations such as the United Way.²⁷

²⁵ Sources: Rand; National Business Group on Health / Fidelity Investments; <http://www.statista.com/statistics/420999/corporate-spending-on-wellness-incentives-per-employee-us/>;

²⁶ PricewaterhouseCoopers LLP, 2016. Health and Well-being Touchstone Survey Results. Retrieved from <https://www.pwc.com/us/en/hr-management/publications/assets/pwc-touchstone-survey-2016.pdf>

²⁷ Interviews conducted by the Project Team under the Chatham House Rule.

Figure 6: H&WB programs offered by business²⁸

WELLNESS PROGRAM	FIRMS*
Employee Assistance Program	93%
Health Risk Questionnaire	80%
Biometric Screening	77%
Physical Activity/Fitness Discount	73%
Tobacco Cessation	73%
Weight Management	64%
Body Mass Index (BMI)	63%
Health Coach	61%
Stress Management	55%
Nutrition	55%
On-site Fitness	53%
Financial Well-being	51%
Ergonomics	38%
Executive Health Team	28%
Community Well-being	23%
On-site Health Clinic	19%

*(n=1,100) 2016

The share of health care related costs continues to rise as does the investment in workplace health and wellness. Moreover, health concerns are driving substantial additional costs.

For example, the impact of an unhealthy workforce on productivity is considerable. One study estimates a cumulative US output loss of \$47 trillion over the next two decades due to non-communicable diseases, chronic respiratory diseases, cancer, diabetes, and mental illness.²⁹ In 2015, the productivity loss associated with absenteeism and presenteeism had an economic impact of 5% of GDP.³⁰ The CDC finds that annually absenteeism and presenteeism cost US employers \$225.8 billion.³¹ However, other studies suggest these costs may be as much as four to five times greater.³² These studies indicate that the costs of health and well-being for business far exceed formal expenditures on health care. Figure 7 shows the costs of common health conditions on the bottom line.

28 PricewaterhouseCoopers LLP, 2016.

29 The Global Economic Burden of Non-Communicable Diseases (Rep.). (2011). Harvard School of Public Health & World Economic Forum.

30 Rasmussen, B., Sweeny, K., & Sheehan, P. (2016). Health and the Economy: The Impact of Wellness on Workforce Productivity in Global Markets. (Rep.). U.S. Chamber of Commerce.

31 Center for Diseases Control and Prevention. "Worker Illness and Injury Costs U.S. Employers \$225.8 Billion Annually." January 2015, Available from: <http://www.cdcfoundation.org/pr/2015/worker-illness-and-injury-costs-us-employers-225-billion-annually>. And, Robert Wood Johnson Foundation. "Issue Brief: Why Healthy Communities Matter to Businesses," May, 2016, p. 3.

32 Gallup-Healthways. Well-Being Index. 2013; and, Virgin Pulse. Clocking in and Checking Out: Why Your Employees May Not Be Working at Optimal Levels and What You Can Do About It. 2016. Retrieved from http://community.virginpulse.com/en/workplace-presenteeism?utm_source=resourcespage&utm_medium=website&utm_campaign=CAM-2016-04-gc-presenteeism

Figure 7: The costs of health on business

HEALTH CONDITION	COSTS TO BUSINESS
Cancer	<ul style="list-style-type: none"> • Approximately 12% of an employer’s total medical expenditure is attributed to cancer-related expenses, costing an estimated a \$264 billion a year in medical care and lost productivity³³ • Cancer is the leading cause of long-term disability among employees, resulting in more than 33 million disability days per year³⁴ • Treatment of breast cancer in early stages is estimated at an average cost of \$22,000 per patient, whereas Stages 3 and 4 are associated with costs in excess of \$120,000³⁵ • A study of major employers found that patients with cancer cost 5x as much to insure as patients without cancer (\$16,000 vs. \$3,000 in annual costs)³⁶
Cardiovascular	<ul style="list-style-type: none"> • In a study involving more than 46,000 employees from six large US companies, employees with a higher risk of heart disease had health care expenditures about 228% higher than peers³⁷ • In an analysis of insurance claims for about 4 million individuals covered by benefit plans of large US companies, the annual mean payment for those with heart-related claims was over \$4,000 per patient, more than double the average payment of over \$2,000 for all other conditions³⁸ • The average cost for every stroke or heart attack is about \$100,000 for Fortune 500 employers
Chronic Respiratory	<ul style="list-style-type: none"> • In 2010, absenteeism costs due to chronic obstructive pulmonary disease (COPD) were \$3.9 billion³⁹ • An estimated 16.4 million days of work were lost due to COPD each year⁴⁰ • In 2010 those who were employed and have COPD missed an average of 4.6 days of work in the previous six months⁴¹
Diabetes	<ul style="list-style-type: none"> • The costs of increased absenteeism from diabetes is estimated to be \$5 billion and increased presenteeism is \$20.8 billion⁴² • Employees at high risk for high blood glucose had \$3,362 higher medical expenditures, 0.6 additional days of absenteeism, and 1.2 additional days of presenteeism⁴³ • People with diagnosed diabetes incur average medical expenditures of about \$13,700, of which about \$7,900 can be attributed to diabetes⁴⁴

³³ NBCH. “Action Brief: Breast Cancer”. Available from: http://www.nbch.org/nbch/files/ccLibraryFiles/Filename/00000003417/NBCH_BREAST%20CANCER_FNL.pdf.

³⁴ See above.

³⁵ See above.

³⁶ Barnett, A., Birnbaum, H., Cremieux, P., Fendrick, A., & Slavin, M. (2000). The costs of cancer to a major employer in the United States: a case-control analysis. *Am J Manag Care*,6(11), 1243-1251.

³⁷ CDC Foundation. “Reducing the Risk of Heart Disease and Stroke: A Six-Step Guide for Employers”. Available from: https://www.cdc.gov/dhdSP/pubs/docs/six_step_guide.pdf.

³⁸ See above.

³⁹ Ford, E. S., Murphy, L. B., et. al. Total and State-Specific Medical and Absenteeism Costs of COPD Among Adults Aged 18 Years in the United States for 2010 and Projections Through 2020. *Chest*. 2015; 147(1), 31-45.

⁴⁰ See above.

HEALTH CONDITION	COSTS TO BUSINESS
Hypertension	<ul style="list-style-type: none"> • Hypertension costs employers \$21 million per year, with \$7 million in direct costs⁴⁵ • Employees with a high risk of hypertension had \$1,702 higher medical expenditures, 0.2 additional days of absenteeism, and 0.4 additional days of presenteeism⁴⁶ • An employee with high blood pressure costs \$730 more per year than peers⁴⁷
Mental Health	<ul style="list-style-type: none"> • Employers incur an estimated \$100 billion annually in direct and indirect costs associated with depression, including as much as \$44 billion lost to employee absences and lower productivity⁴⁸ • Depression causes 200 million lost workdays each year⁴⁹ • Over a 3 month period, patients with depression miss an average of 4.8 workdays and suffer 11.5 days of reduced productivity⁵⁰ • Workers with depression were 70% more costly, in terms of medical care, compared to costs of workers without depression⁵¹
Obesity	<ul style="list-style-type: none"> • Between 1985 to 2015 obesity among workers has doubled from 15% to 30%⁵² • Annual costs from medical care and absenteeism are estimated to be \$400 to \$2,000 higher per person for obese employees⁵³ • Obese workers generate \$644 in increased costs per person due to having 20% more doctor visits, 26% more emergency room visits, and 10% higher presenteeism rates than normal-weight workers⁵⁴ • Lifetime social and public health cost of obesity is, on average, \$92,235 more per person compared with the costs associated with a person of normal weight⁵⁵
Stress	<ul style="list-style-type: none"> • Workplace stress contributes to at least 120,000 deaths each year, with the sources of stress being long hours, lack of control, job insecurity, and other significant stressors⁵⁶

⁴¹ NBCH & Drive4COPD. "Action Brief: COPD, A Major Driver of Avoidable Health Care Costs." September 2012. Available from: www.nbch.org/nbch/files/cclibraryfiles/filename/000000002422/nbch_ab_copd_f.pdf.

⁴² See above.

⁴³ Kowlessar, N. M., Goetzel, R. Z., Carls, G. S., Tabrizi, M. J., & Guindon, A. (2011). The Relationship Between 11 Health Risks and Medical and Productivity Costs for a Large Employer. *Journal of Occupational and Environmental Medicine*, 53(5), 468-477.

⁴⁴ Economic costs of diabetes in the U.S. in 2012. *Diabetes Care* 2013;36:1033-1046. (2013). *Diabetes Care*, 36(6), 1797-1797.

⁴⁵ Metler, Ziv. "Heart Health Blog: Lowering Blood Pressure Can Save Employers Millions." Hello Heart. June 2015.

⁴⁶ Kowlessar, N. M., Goetzel, R. Z., Carls, G. S., Tabrizi, M. J., & Guindon, A. (2011). The Relationship Between 11 Health Risks and Medical and Productivity Costs for a Large Employer. *Journal of Occupational and Environmental Medicine*, 53(5), 468-477.

⁴⁷ See above.

⁴⁸ "The Impact of Depression on the Workplace." American Society for Healthcare Human Resources Administration.

⁴⁹ See above. Also: Centers for Disease Control and Prevention fact sheet on depression: <https://www.cdc.gov/workplacehealthpromotion/health-strategies/depression/index.html>, last updated March 1, 2016.

⁵⁰ See above.

⁵¹ See above.

⁵² Pronk NP. Fitness of the U.S. workforce. *Ann Rev Public Health*. 2015; 36: 131-49.

⁵³ Finkelstein EA, Fiebelkorn IC, Wang G. The cost of obesity among full-time employees. *Am J Health Promot*. 2005; 20 (1): 45-51.

⁵⁴ Goetzel RZ, Gibson T, Short ME, et al. A multi-worksites analysis of the relationships among body mass index, medical utilization, and worker productivity. *J Occup Environ Med*. 2010; 51 (1): S52-8.

⁵⁵ Brookings Institution. "An In-Depth Look at the Lifetime Economic Costs of Obesity." May 2015. Available from: <https://www.brookings.edu/events/an-in-depth-look-at-the-lifetime-economic-costs-of-obesity/>.

⁵⁶ Goh, J., Pfeffer, J., & Zenios, S. A. (2016). The Relationship Between Workplace Stressors and Mortality and Health Costs in the United States. *Management Science*, 62(2), 608-628.

Improving health and well-being of the workforce would make a substantial impact on health-related costs. For example, research finds that moving employees from high-and-medium risk to low-risk chronic disease status would yield an ROI of 6:1 for annual health care claims.⁵⁷

Current approaches to workplace health and wellness are likely addressing some issues, but there seems to be a disconnect between corporate health spending decisions and addressing the root causes that embracing a Culture of Health framework might achieve. Missing from this equation is that many businesses have yet to realize how much community H&WB and social determinants of health

need to be actively engaged and managed across other business and community investment disciplines, given how much these factors drive health outcomes in the workplace and the milieu in which the business operates.⁵⁸

The County Health Rankings Report developed by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation estimates that 50% or more of health outcomes are determined by socioeconomic and environmental factors; 40% come from community-related variables such as income and education; and 10% come from issues related to the physical environment.⁵⁹

Many businesses have yet to realize how much community H&WB and social determinants of health need to be actively engaged and managed across other business and community investment disciplines

Current research indicates that just over 22% of the private sector’s annual spending on health is focused on the 10 risk factors most influenced by these social determinants of health. These targeted factors include:

- Poor nutrition and eating habits
- Obesity
- Depression
- High alcohol consumption
- Physical inactivity
- Tobacco use
- High cholesterol
- High blood pressure⁶⁰
- High stress
- High blood glucose

Figure 8: Studies on the impact of community H&WB on health costs

<p>Investment of \$10 per person per year in proven community-based programs to increase physical activity, improve nutrition, and prevent smoking and other tobacco use could save the country more than \$16 billion annually within five years — an ROI of \$5.60 for every \$1.⁶¹</p>	<p>Proven, community-based public health efforts can have a tremendous return on investment — saving lives, mitigating disease and injury, and curbing health care spending.⁶²</p>	<p>Just a 1% reduction in health risks can lead to a savings of \$83 - \$103 in medical costs.⁶³</p>
--	---	---

⁵⁷ Metler, Ziv. “Heart Health Blog: 22 Surprising Stats Every Corporate Wellness and Benefits Manager Should Know.” Hello Heart. August 2015, Available from: <https://helloheart.com/corporate-wellness-and-benefits-manager-stats/>.

⁵⁸ One pilot study for example, found that high use of health resources was often a marker for unaddressed civil legal problems. When a “super user” patient’s civil legal problems were addressed, health care use and costs dropped. The pilot data suggest a decrease in both 30-day and seven-day readmission rates among the identified patients. Both inpatient and Emergency Department use dropped upward of 50 percent, and overall costs (as defined by charges) fell by 45 percent. “Embedding Civil Legal Aid Services In Care for High-Utilizing Patients Using Medical-Legal Partnership,” Health Affairs Blog, April 22, 2015. DOI: 10.1377/hblog20150422.047143

⁵⁹ Sources: David A. Kindig, George J. Isham, and Kirstin Q. Siemering, “The Business Role in Improving Health: Beyond Social Responsibility.” National Academy of Sciences Institute of Medicine, 2013, p. 2. & County Health Rankings. 2012. County health rankings model. www.countyhealthrankings.org/resources/county-health-rankings-model. These translate into: Education, Employment, Income, Family & Social Support, Community Safety, Air & Water Quality, and Housing and Transit. Many companies may address these issues through other means, but not necessarily through the lens of enhancing health outcomes.

⁶⁰ Goetzel RZ, Pei X, Tabrizi MJ, et al. Ten modifiable health risk factors are linked to more than one-fifth of employer-employee health care spending. Health Aff. 2012;31(11):2474-2484.

⁶¹ Trust for America’s Health. “Report: Prevention for a Healthier America.” July 2008. Available from: <http://healthyamericans.org/reports/prevention08/>.

⁶² “Public Health is ROI.” National Public Health Week. American Public Health Association. 2013. In “How Social Spending Affects Health Outcomes” by Elizabeth H. Bradley and Lauren Taylor, found that “when comparing state-to-state spending between 2000 and 2009, those states with higher ratios of social service spending to health care spending had better outcomes on average. The size of the health effects were substantial. For instance, a 20 percent change in the median social-to-health spending ratio was equivalent to 85,000 fewer adults with obesity and more than 950,000 adults with mental illness.” Types of services that were particularly helpful included: supportive housing, nutritional assistance, case management and outreach. https://www.rwjf.org/en/blog/2016/08/how_social_spending.html

⁶³ “Prevention Means Business” Public Health Institute, 2013. <http://www.phi.org/resources/?resource=prevention-means-business>

Based on these findings, **addressing community H&WB is a core, and typically overlooked, strategy to support improved health and reduced costs.**⁶⁴

Enhancing enterprise value, performance, and reputation

The business case for community H&WB is less defined and publicized than for workplace H&WB. Nevertheless, as noted above, research suggests that in the absence of community health interventions, workplace wellness programs will be insufficient to shield employers from rising health care costs, productivity losses, absenteeism (both for employees suffering ailments as well as employee caregivers aiding loved ones), and presenteeism.⁶⁵

Champions of corporate involvement contend that companies will also miss out on potential opportunities such as attracting and retaining talent, employee engagement, increased productivity, manufacturing and service reliability, sustainability, brand reputation,⁶⁶ share price, and overall bottom-line performance as measured by key performance indicators.⁶⁷ These views are based more on perception than detailed research. Pursuing dedicated research that addresses these claims is advisable.

However, recent research on the business case for corporate responsibility and sustainability provides foundational evidence that strengthens the support in making the business case for corporate involvement. The social determinants of health, as discussed further below, overlap a great deal with indicators of corporate responsibility and sustainability. It may be possible to apply lessons learned from business case research for corporate responsibility and sustainability to community H&WB. In this regard, recent research conducted by IO Sustainability and Babson College finds that the kinds of investments that a company would make to support the social determinants and community H&WB have great potential to enhance enterprise value across a number of KPIs summarized in Figure 9.

Figure 9: The potential value of supporting social determinants of health that relate to corporate responsibility and sustainability⁶⁸

BUSINESS PRIORITY INFLUENCED BY HEALTH	POTENTIAL ROI FROM CORPORATE RESPONSIBILITY & SUSTAINABILITY AND RELATED COMMUNITY H&WB ACTIVITIES
Employee engagement and morale	Improve employee engagement scores 8.5%
Market performance	Increase share price 4-6%
Productivity	Increase employee productivity up to 13%
Recruitment/Retention	Decrease employee turnover 25-50%
Sales	Increase sales 1-20%

⁶⁴ T. Berry Brazelton, MD. "Economic Medicine For Lifelong Health", The Huffington Post. July 7, 2016. http://www.huffingtonpost.com/t-berry-brazelton-md/economic-medicine-for-lif_b_10795490.htm

⁶⁵ Andrew Webber, Suzanne Mercure, "Improving Population Health: The Business Community Imperative" Preventing Chronic Disease Dialogue, October 15th, 2010 8:46 am ET - Volume 7: No. 6, November 2010, <https://blogs.cdc.gov/pcd/2010/10/15/improving-population-health-the-business-community-imperative/>

⁶⁶ David A. Kindig, George J. Isham, and Kirstin Q. Siemering, "The Business Role in Improving Health: Beyond Social Responsibility." National Academy of Sciences Institute of Medicine, 2013, p. 3-4.

⁶⁷ Sources: Business for Social Responsibility. A New CSR Frontier: Business and Population Health. 2013. Available at http://www.bsr.org/reports/BSR_A_New_CSR_Frontier_Business_and_Population_Health.pdf; Andrew Webber, Suzanne Mercure, "Improving Population Health: The Business Community Imperative" Preventing Chronic Disease Dialogue, October 15th, 2010 8:46 am ET - Volume 7: No. 6, November 2010, <https://blogs.cdc.gov/pcd/2010/10/15/improving-population-health-the-business-community-imperative/>

⁶⁸ Steve Rochlin, Richard Bliss, Stephen Jordan, and Cheryl Kiser, "Project ROI: Defining the Competitive and Financial Advantages of Corporate Responsibility and Sustainability." 2015: IO Sustainability.

Opening up market development and revenue opportunities

The accelerating interest in health, fitness, prevention, exercise, and longevity suggests a potential “Culture of Health” era could be emerging. Some estimate that the US H&WB industry will grow beyond \$1 trillion⁶⁹ (global estimates put the H&WB economy at \$3.7 trillion). In the near term, the consumer H&WB market is projected to grow from a \$235 billion to a \$737 billion industry.⁷⁰

Companies across industries as diverse as apparel and footwear, consumer retail, food, health care, and insurance are finding that engagement in community H&WB is a pathway to support the research and development of new products and services with great commercial potential.⁷¹

Implications for corporate involvement in community health and well-being

The upshot from these business case opportunities is that while support for workplace health is certainly necessary, it is not sufficient. When it comes to addressing H&WB, office walls are permeable. ***The only way for business to address health costs, needs, opportunities, and challenges is to include intentional efforts to advance wider community H&WB.***⁷²

The stakes are enormous for business to get this right. While much work still needs to be done to quantify the return on investment of a holistic approach to addressing health, analysis of component elements indicates that it is very substantial, and could be a key to “bending the curve” of rising health costs.

*“We used to think solely in terms of our employees when it came to health care and benefits. But what we realized is that if their kid got sick, they stayed home. If their parents had problems, they stayed home or were distracted trying to get help. Employee performance and productivity are fundamentally affected by their lives outside of work. We needed to re-think our program in order to get the benefits of productivity and performance that we were seeking.”*⁷³

— a Fortune 1000 Company Executive (under Chatham House Rule)

If these findings are correct, then most current business health strategies are misaligned in terms of the resources and programs they are deploying as well as the challenges they are trying to address. The crux of the issue is that, while companies may experience some success in addressing individual health challenges, these over-all trend lines of over-all health cost increases are not likely to fundamentally change any time soon unless companies reframe their strategies to include more effective community health interventions.

Business health strategies are misaligned in the resources they are deploying and the challenges they are trying to address. Health cost trends are not likely to fundamentally change unless companies reframe their strategies to include more effective community health interventions.

⁶⁹ Kerri Krom, “Health and Wellness is the Next Trillion Dollar Industry,” 19 December, 2016, <http://www.womensmarketing.com/blog/2014/11/health-and-wellness-market/>

⁷⁰ <https://www.accenture.com/us-en/insight-consumer-healthcare-market-high-performance-business-research-2013>

⁷¹ Meetings of the Business Advisory Council on Health.

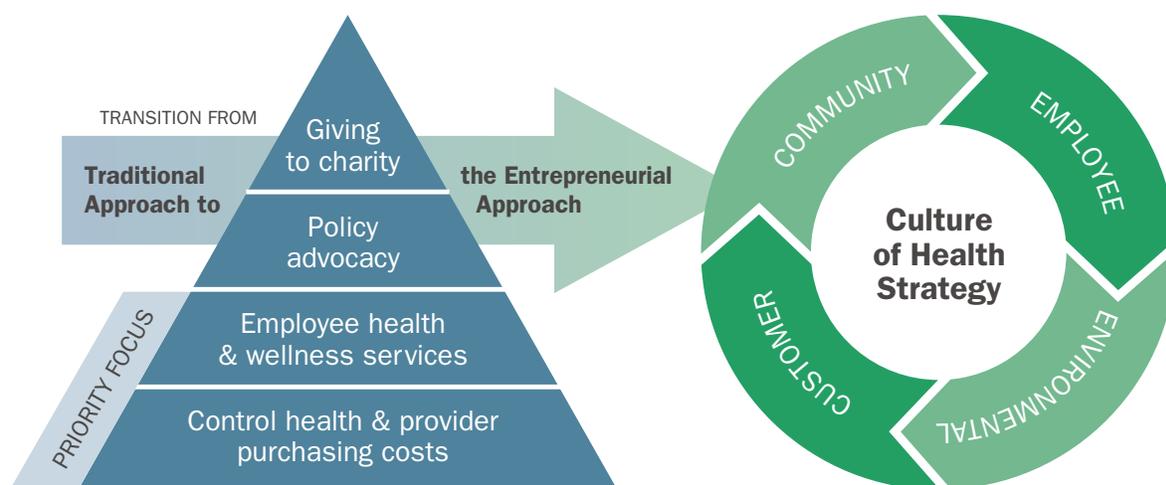
⁷² T. Berry Brazelton, MD. “Economic Medicine For Lifelong Health”, The Huffington Post. July 7, 2016. http://www.huffingtonpost.com/t-berry-brazelton-md/economic-medicine-for-lif_b_10795490.html; Harry J. Heiman and Samantha Artiga, “Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity” Nov 4, 2015. <http://kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>. As one key example, investing in community H&WB should promote greater health equity among demographic groups. National Partnership for Action to End Health Disparities: Health Equity and Health Disparities, U.S. Department of Health and Human Services, Office of Minority Health, accessed Oct. 28, 2015, <http://minorityhealth.hhs.gov/npa/templates/browse.aspx?vl=1&lvId=34>.

⁷³ Interview by the authors with a Fortune 1000 company executive (under the Chatham House Rule)

IV. Taking an Entrepreneurial Approach to Community Health and Well-being

The left side of Figure 10 depicts the current state of the typical corporate approach to health and well-being.

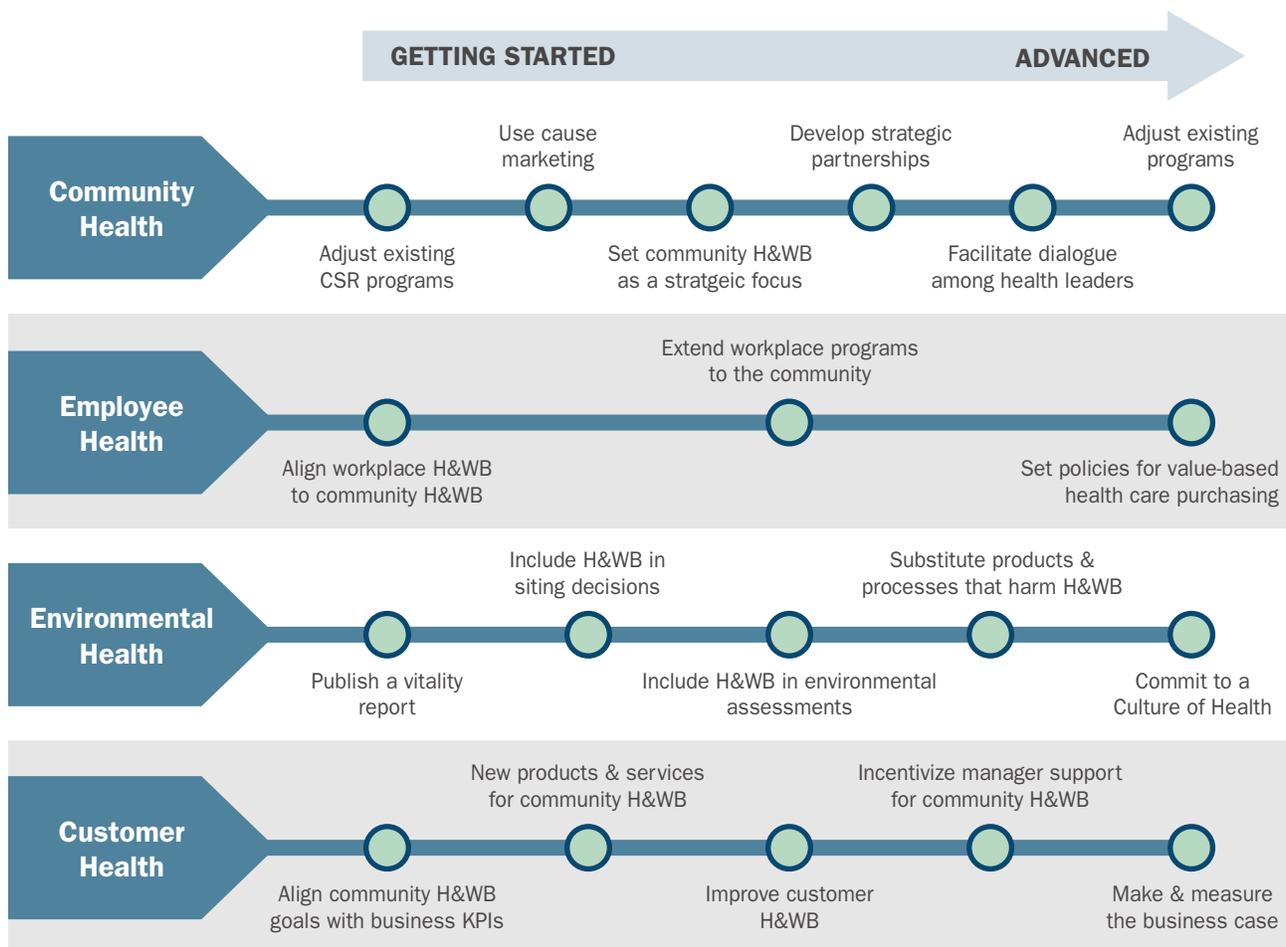
Figure 10: Transitioning to an entrepreneurial approach to corporate involvement in community health and well-being



The core of the current approach depicted on the left side of Figure 10 is to control employee health purchasing costs. This has evolved to create a role — usually for a member of the Human Resources (HR) team — to form and manage workplace wellness programs. The Public Affairs/Government Relations team may become involved in lobbying efforts to reduce the costs of health care imposed on the private sector. In many cases, this team will lean on the efforts of industry associations. The smallest amount of resources will go toward donations to health-related nonprofits, typically overseen by the Corporate Social Responsibility (CSR) team or Corporate Foundation. Often, a company will make health-related donations to nonprofit federations such as the United Way, and/or sponsor charitable galas for federations related to specific conditions and diseases.

The approach on the right side of Figure 10 is based on the findings of IO's and Babson's Project ROI research,⁷⁴ the RWJF supported research grants on building a Culture of Health for business,⁷⁵ and Babson's Entrepreneurial Thought & Action® methodology.⁷⁶ To gain the full benefits and impacts of an approach to community H&WB, ideally companies should take an integrated approach that aligns the four strategic areas identified on the right side of Figure 10 – community health, employee health, environmental health, and customer health. However, companies can also make progress by taking an incremental approach to work on one or more of the strategic areas at a time. Figure 11 provides a more detailed view of each strategic area. It provides a roadmap that allows companies to get started, gain experience, and move incrementally toward more advanced and higher impact approaches over time.

Figure 11: Business strategies to address community H&WB that deliver ROI



⁷⁴ Rochlin, et al, 2016.

⁷⁵ John Quelch, Emily Boudreau. Building a Culture of Health: A New Imperative for Business. 2016: SpringerBriefs in Public Health.

⁷⁶ <http://www.babson.edu/about-babson/at-a-glance/Pages/entrepreneurial-thought-and-action.aspx>

Community health

Getting started on community health strategies typically means modifying existing CSR approaches to identify and address the root causes of health and well-being challenges, such as those defined by the social determinants. This progresses towards programs that involve both CSR and business line functions, and eventually lead to partnerships designed to create value for the bottom-line while improving community health metrics. Examples include the following:

REEBOK Reebok’s BOKS (Build our Kids’ Success) program has been implemented in over 3,000 schools in 4 countries (including the US). The program builds from medical research that finds that getting kids moving in the morning could translate to better academic performance during the school day. The before-school program involves a tested curriculum that includes free play, structured warm-ups, running, skill development, game-playing, and a cool-down period. BOKS aligns with the company’s purpose to inspire people everywhere to be their absolute best—physically, mentally, and socially.⁷⁷ The results of a 12-week study in partnership with Mass General Hospital and Harvard University show that students that participate in BOKS not only saw improvements in body mass index (BMI) but more importantly they are happier and more engaged than students that did not participate in BOKS.⁷⁸

TARGET In 2016, Target invested nearly \$40 million across the US to organizations committed to giving children and families more choices that allow them to increase their physical activity and eat healthy every day. One award-winning example is the partnership with Wholesome Wave on the Fruit and Vegetable Prescription Program (FVRx) in Los Angeles, Houston, and Miami. The program seeks to make healthy eating an affordable choice for low-income individuals and families. This partnership addresses the intertwined problems of obesity and food security; poor diet and reduced health; and poverty and lack of affordable healthy food options. By leveraging a multi-sector partnership with the power of a market-based incentive, the program has been able to improve community health as it relates to residents’ behavior and lifestyles while demonstrating positive mutual benefits for medical providers, retailers, and suppliers of fresh local produce.⁷⁹

Employee health

Getting started on Employee Health means aligning workplace wellness and community H&WB approaches. The next step is to open workplace wellness programs to the community, and vice versa. Companies are then encouraged to support workplace and community health programs based on strategies that tie the investment of resources to outcomes related to agreed H&WB metrics. Examples include:

SODEXO With an eye on addressing the current achievement gap in employer wellness programs, Sodexo and the YMCA of Central Florida have formed a unique partnership resulting in a new comprehensive approach to health and well-being that focuses on expanding the value, availability, access, and effectiveness of workplace wellness programs. The groundbreaking 3-year pilot program, Communities for Health, is currently underway and aimed at combating preventable chronic illnesses that escalate health care expenditures, accounting for 18% of GDP and are projected to rise sharply. The initiative is designed to enhance traditional, and mostly underutilized, employee wellness programs through a comprehensive, systems-based approach that engages employees and the wider community at work and at home, increasing the likelihood of success and yielding a more significant impact than traditional workplace wellness initiatives.

⁷⁷ <https://www.bokskids.org/about-boks>

⁷⁸ Gretchen Reynolds, “A Before-School Exercise Program May Help Children Thrive,” New York Times. February 14, 2018. <https://www.nytimes.com/2018/02/14/well/move/a-before-school-exercise-program-may-help-children-thrive.html?smid=pl-share>

⁷⁹ <https://www.uschamberfoundation.org/modal-content/46363>

The program groups participants by their level of risk and readiness for change, connects employees with a lifestyle coach, embraces a peer-to-peer approach, encourages a “buddy system” that extends into the community, leverages technology, and strategically uses incentives throughout. Communities for Health aims to achieve five specific objectives:

1. Engage individuals to participate in a robust health and wellness program through their employer by building a network of support, in the workplace, the community, and at home;
2. Leverage community health partners, local and national merchants, and integrated technology systems to support health management and incentive-based rewards for healthy behaviors;
3. Strategically segment the workforce to connect participants to the appropriate evidence-based program based on risk level and readiness to change;
4. Reduce employee and family health risks by encouraging healthy behaviors that will positively impact performance and reduce health care costs; and
5. Leverage healthier behaviors of the employee to change the behaviors of their neighboring community.

The program is organized in phases, as it is designed to take an integrated, systems-based approach to improving health at the population and individual level. The approach leverages community-based organizations (including both the public and private sector), employers, health care providers and family/community relationships. Early results have been extremely promising, notably:

- Communities for Health eclipsed national average participation rates of employees identified for inclusion in fitness (21%), weight/obesity (10%), and disease management programs (16%) by achieving rates of 88%, 63%, and 73% respectively.
- A higher percentage of employees transitioned to the lower risk group in Year 2 when compared to Year 1 (+5%). Similarly, there has also been a reduction in those in the higher risk group for Year 2 (- 2% for moderate risk; -5% for high risk). This suggests that employees became healthier over time.
- The program saw improvements in the overall perception of individuals feeling “fit,” “happy with their weight”, “less stressed,” “less trouble sleeping,” and “more energetic” when compared between Year 1 and Year 2 ⁸⁰

Environmental health

Environmental health refers to the ways in which corporate policies, processes, and practices can impact community health, often by affecting the natural environment, working conditions, customer well-being, and community well-being.

To get started, companies can expand on their sustainability-related reporting to publish a Culture of Health (or a “vitality”) report. This would offer the public an objective view on the range of ways — from positive to negative — that companies may be affecting the social determinants. This report would document the commitments and steps that a company is taking to minimize harmful impacts and optimize beneficial impacts. The next step is to integrate health considerations into decision-making processes such as facility and office siting decisions, environmental management, and product design. Advanced companies will formulate an enterprise-wide Culture of Health strategy. Examples include:

⁸⁰ Sources: Nebeyou Abebe, “Companies Have the Opportunity and Responsibility to Improve Employee and Community Health and Well-being,” Diplomatic Courier. May 25, 2016. <http://www.diplomaticcourier.com/companies-opportunity-responsibility-improve-employee-community-health-wellbeing/>; and interviews with Nebeyou Abebe over 2016 and 2017.

HUMANA Humana is a health insurance provider. Its purpose is to empower its members to help them live healthy, active, and rewarding lives. Humana has set a corporate goal that:

- “The communities we serve will be 20 percent healthier by 2020 because we make it easy for people to achieve their best health using five key points of influence: wellness and prevention; primary care; pharmacy; home care; and data analytics”

In 2016, Humana’s first year tracking Healthy Days, its survey results showed:

- 2% decrease in Unhealthy Days for its members across the nation
- 3% decrease across its Bold Goal communities
- Members: significant increase in participation in programs that have helped improve medication adherence (96.6% increase from 2015 to 2016 for diabetic medication adherence) and diabetes control⁸¹

Customer health

The Customer Health strategy starts by aligning community H&WB goals with business KPIs. The next steps involve designing business strategies, products, and services to improve customer and community H&WB. Managers and functions should be measured in part by how they contribute to health. Examples include:

CVS CVS received acclaim when it became the first major retailer to remove tobacco products from its shelves. In 2016, CVS launched Be The First, a five- year, \$50 million initiative to help deliver the nation’s first tobacco-free generation. Be The First focuses on education, advocacy, tobacco control, and healthy behavior programming in partnership with organizations positioned to address this challenge.⁸²

NESTLÉ Nestlé is committed to being a trusted leader in nutrition, health, and wellness. It has aligned community H&WB goals to business KPIs through its 2030 ambition to help to improve 30 million livelihoods in communities directly connected to its business activities. It is taking steps to change the ingredients of its products by reducing sugar, sodium, and saturated and trans-fats to align with global public health recommendations. In addition, it has set a goal to improve nutrition through whole grain and vegetables. By 2020, the company plans to add to its products at least 750 million portions of vegetables, 300 million portions of nutrient-rich grains, pulses and bran, and more nuts and seeds.⁸³

TARGET Introduced in 2013, Simply Balanced is Target’s wellness grocery brand designed to give guests easy options for eating well. All of its more than 350 products are free of artificial colors, flavors, and preservatives, and do not contain added trans-fats or high-fructose corn syrup. Many products are also certified organic or provide nutritional benefits, such as whole grains, fiber, Omega-3s, or a serving of fruits and vegetables. In addition, building on its efforts to make better-for-you living attainable, Target just committed to removing artificial flavors, preservatives, sweeteners, and colors from all of its owned-brand children’s items by the end of 2018.⁸⁴

Appendix II provides additional examples.

The strategy described in Figures 10 and 11 hold the potential to generate positive benefits for society and the financial bottom line. However, companies may still need support to overcome the barriers listed in Figure 4 above and get started. Moving forward will require entrepreneurial action from change agents inside companies, as well as the encouragement of community H&WB advocates from the outside.

Applying the lessons of the corporate sustainability movement, which possesses many commonalities with community H&WB, can help guide companies and advocates on how to take action.

⁸¹ <http://www.humana.com/progress/pdfs/Humana%202015%20Progress%20Report-FINAL-web.pdf>, http://www.pivotgoals.com/http://populationhealth.humana.com/documents/Humana_BoldGoal_2017_ProgressReport-v2.pdf

⁸² <https://cvshealth.com/sites/default/files/2016-csr-report-summary.pdf>

⁸³ Nestlé.com

⁸⁴ <https://corporate.target.com/corporate-responsibility/wellness>

V. Applying Lessons from the Sustainability Movement

Those looking to accelerate the commitment of businesses to adopting a Culture of Health strategy have much to learn from the sustainability movement. The modern corporate sustainability movement of the past twenty-five years has been working to encourage companies to prioritize their environmental, social, and governance (ESG) performance. It is useful to compare the current state of business involvement in community H&WB with a potentially historic movement working to transform the purpose, mission, operations, investments, products and services, behaviors, and performance metrics of the private sector.

Defining Sustainability

Several definitions of sustainability (and its companion term, “sustainable development”) exist. In addition, sustainability is seen as related to, and even synonymous with, other terms such as “Corporate Citizenship,” “Corporate Responsibility (CR),” and “Corporate Social Responsibility (CSR).” These terms and their definitions share a common root in their focus on environmental, social, and governance (ESG) performance. A synthesis of common definitions follows:

Responsible and proactive decision-making and innovation that minimizes negative impact and maintains balance between social, environmental, and economic growth to ensure a desirable planet for all species now and in the future.

There is considerable overlap between the social determinants that drive community H&WB and the ESG issues that companies are expected to manage. While there is no single definition of the social determinants of health, many governmental and non-governmental organizations recognize common factors. Figure 11 shares a synthesized list of the social determinants of health. The adjacent columns identify which determinants can be found among the indicators listed by two of the leading global templates of corporate sustainability performance, the Global Reporting Initiative (GRI)⁸⁵ and the Sustainability Accounting Standards Board (SASB).⁸⁶ The table shows that many industries are expected to manage their positive and negative impacts on the social determinants (even though sustainability frameworks often do not draw an explicit connection between many of the social determinants and health).

⁸⁵ <https://www.globalreporting.org/information/g4/Pages/default.aspx>

⁸⁶ <https://library.sasb.org/sasb-industry-briefs/>

Figure 12: Links between the social determinants of health and sustainability considerations⁸⁷

SOCIAL DETERMINANT OF HEALTH	CONSIDERED AN INDICATOR OF A COMPANY'S SUSTAINABILITY?	
	Across most industries	Across certain industries
Access to mass media and emerging technologies (i.e., cell phones, the Internet, and social media)		●
Addiction		●
Community-based resources to support strong and healthy communities	●	
Culture	●	
Early childhood development		●
Education	●	
Employment and access to job opportunities and job training	●	
Environmental health	●	
Exposure to crime, violence, and social disorder		●
Food supply and security		●
Health care		●
Housing		●
Impact on community and social capital	●	
Insurance coverage		●
Language and literacy		●
Poverty	●	
Prevention of discrimination	●	
Public safety	●	
Residential segregation		●
Social exclusion/inclusion	●	
Social support networks		●
Socioeconomic conditions and impact	●	
Stress		●
Transportation		●
Unemployment	●	

Despite confronting obstacles equal, if not greater, than those listed earlier in Figure 4, the corporate sustainability movement has been able to make considerable progress. Figure 13 summarizes the movement's achievements in a select list of prominent environmental issues over the last 25+ years.

⁸⁷ Sources: CDC (source: <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>); Brennan Ramirez, Laura K.; Baker, Elizabeth A.; Metzler, Marilyn (2008). Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health (PDF). United States Centers for Disease Control and Prevention. p. 6. Retrieved May 3, 2015.; Wilkinson, Richard; Marmot, Michael, eds. (2003). The Social Determinants of Health: The Solid Facts (PDF) (2nd ed.). World Health Organization Europe. ISBN 978-92-890-1371-0.

Figure 13: Select Achievements of the Corporate Sustainability Movement

KEY AREA OF PERFORMANCE	PROGRESS
Carbon Emissions	<ul style="list-style-type: none"> • In the last 10 years, U.S. industry has stopped the decades long increase in carbon emissions. Carbon emissions in 2015 were 12% below 2005 levels⁸⁸ • From 1990 to 2012, U.S. industrial output has increased by 55%, while carbon dioxide (CO2) emissions from industrial processes decreased by a little more than 23%⁸⁹
Energy Use	<ul style="list-style-type: none"> • Companies have reduced their energy consumption by 21% in commercial sectors and 41% in industrial sectors since 1980⁹⁰ • Use of non-fossil fuel renewables, such as utility-scale solar and distributed photovoltaic, has grown rapidly, increasing by more than 100% and slightly over 900%, respectively, between 2009 and 2015⁹¹ • Renewables account for 10% of energy use⁹² and are expected to grow by 2.6% a year through 2040⁹³
Pollution	<ul style="list-style-type: none"> • Stationary sources, e.g. chemical plants, power plants, oil refineries, etc., emit about 1.5 million tons less toxic air per year in 2015 compared to 1990-levels⁹⁴ • Power plants, the highest emitter of air pollution, have reported a 12% decrease in carbon dioxide emissions from 2008 to 2013⁹⁵
Waste and Recycling	<ul style="list-style-type: none"> • Recycling rates of municipal solid waste have more than doubled since 1990, from 16% to 24.5%⁹⁶ • In 2013, 53% of 'large companies' (companies with annual revenues greater than \$1 billion) have set publicly-stated goals for waste-to-landfill reduction⁹⁷
Water	<ul style="list-style-type: none"> • Total industrial water withdrawals decreased 12% between 2005 and 2010, continuing the decline shown each period since 1985⁹⁸
Sustainability Reporting and Disclosure	<ul style="list-style-type: none"> • In 2015, 81% of S&P 500 companies published sustainability reports, up from 20% just five years ago

⁸⁸ <https://www.eia.gov/todayinenergy/detail.php?id=26152>

⁸⁹ <https://www.c2es.org/energy/use/industrial>

⁹⁰ http://www.greenbuildinglawblog.com/uploads/file/mckinseyUS_energy_efficiency_full_report.pdf

⁹¹ <http://www.eia.gov/outlooks/aeo/supplement/renewable/pdf/projections.pdf>

⁹² <http://www.eia.gov/tools/faqs/faq.cfm?id=92&t=4>

⁹³ <http://www.eia.gov/todayinenergy/detail.php?id=26212>

⁹⁴ <https://www.epa.gov/clean-air-act-overview/progress-cleaning-air-and-improving-peoples-health>

⁹⁵ <https://www.ceres.org/press/press-releases/new-report-u.s.-power-sector-continues-to-reduce-air-pollution-emissions-in-advance-of-epa2019s-clean-power-plan>

⁹⁶ <https://www.greenbiz.com/blog/2014/08/18/why-worlds-biggest-companies-are-investing-recycling>

⁹⁷ http://info.greenbiz.com/rs/greenbizgroup/images/Corporate_Sustainability_Practices_-_Waste_Reduction_Report.pdf?mkt_tok=3RkMMJWwF9wsRojuaJ0ZKXonjHpfSx86uwvUKeylMI%2FOER3f0vrPufGjI4FSsdl%2BSLDwEYGJlv6SgFSLHEMa5qw7gMXRQ%3D

⁹⁸ <https://water.usgs.gov/watuse/wuoin.html>

The sustainability movement is still evolving and its outcomes are undetermined. However, there is no question that companies have fundamentally changed their sense of accountability and responsibility for their ESG performance.

The emerging Culture of Health movement will benefit by learning from the lessons of the sustainability movement. While acknowledging differences, there are many points of comparability, and the issues that community H&WB and Culture of Health encompass **all fall under the larger umbrella of the corporate sustainability movement**. Therefore, one can draw useful comparisons to see what translates for champions for Culture of Health to adopt; key areas of inspiration that will help the Culture of Health movement to forge its own innovations; and to see where Culture of Health would productively depart from the sustainability movement.

Core drivers of the corporate sustainability movement

The evolution of the sustainability movement has been complex and multi-faceted. The intent is not to document a history of this massive and diverse movement. Instead, the focus is trying to make sense of its complexity to see what lessons can be applied to advance Cultures of Health in business. Inevitably, this requires summarization that may unintentionally over-simplify the role, workings, and effects of key sustainability drivers.

With this background, five core drivers have helped advance the evolution and overall progress of the corporate sustainability movement. These drivers are:

- Rules
- Reputation
- ROI
- Relationships
- Resources

Before investigating each driver in greater depth, three core points should be emphasized:

1. While it's useful to separate them for the purposes of this analysis, **the boundaries between core drivers are permeable**. Strategies and tactics overlap. As seen in many instances, the activism that has been used to motivate business behavior has often been used to support the creation of both formal and informal rules of behavior. Another example is how the effort to build a company's reputation as a good corporate citizen supports business ROI.
2. **The drivers should be seen as a reinforcing system**. One driver reinforces the efficacy of other drivers and vice versa. The way this system interacts has been essential to increasing the adoption of sustainability. This is important for those advancing a Culture of Health to consider. A key lesson of the sustainability movement is to think how the systemic interaction of drivers will build momentum for business to invest in community H&WB.
3. **The sustainability movement is decentralized**. There is no grand strategy, no leader, and no institution that has served to advance a coordinated approach to the movement. For enabling a Culture of Health it may be the case that having a thousand flowers bloom and compete, as has the sustainability movement, may be the best way to move forward. Or, positive results may be accelerated if leadership, structure, and coordination coalesce around a few organizations or management approaches. A few leaders with a clear vision and strong understanding of the systemic interaction among key drivers may be able to accomplish more — and do it faster — than a more diffuse and decentralized approach.

These core drivers of the sustainability movement generally work in mutually-reinforcing ways, although there are instances when they can conflict. Under each category are a series of sub-drivers that, with one or two exceptions, can line-up on a continuum: sub-drivers that are adversarial towards business to those that are more accommodating (i.e., “sticks” vs. “carrots”).

Rules driver

A key driver advancing the adoption of sustainability has been the creation of new rules and regulations that either force compliance or create voluntary principles as a substitute for formal requirements.⁹⁹ The sustainability movement has shown that rules can take on a variety of forms, and the movement is helping to innovate new approaches to lawmaking, regulation, and governance. Strategies to advance rules often, but not always, start from pressure tactics or from a company's desire to avoid controversy and develop clear guidelines for management.

Pressure tactics can lead to the creation of new sustainability laws and regulations. However, they can also engender significant opposition that leads to a stalemate or even a potential rollback of laws (as currently being witnessed with the Clean Power Plan and the effort to repeal and replace the Affordable Care Act).

Reasonable companies and stakeholder activists in the sustainability space have often been able to overcome stalemates and negotiate mutually agreeable settlements that have led to new industry standards. For example, the Forest Stewardship Council, which was formed as a result of adherence to voluntary standards, has certified nearly 17% of the global industrial roundwood market as environmentally and socially friendly.¹⁰⁰

Stakeholder activism can also motivate an industry to design its own standards. One sees this happening today in the H&WB arena. The food and agriculture industry has been under increasing pressure regarding its impact on illness from chronic conditions and non-communicable diseases such as obesity, diabetes, cardiovascular ailments, and hypertension among others. As a response, the industry has taken a combination of civil regulatory, reporting, and self-policing actions such as:

- Creating the Healthy Weight Commitment Foundation that involves companies such as Bumble Bee Seafood, The Coca-Cola Company, General Mills, The Hershey Company, Hy-Vee, The JM Smucker Company, Nestlé, PepsiCo, and Shearer's Snacks.¹⁰¹
- Participating in the Partnership for a Healthier America (which includes dozens of companies).¹⁰²
- Making voluntary commitments to change their ingredient mix and reduce the use of salt, sugar, and fats. Companies making such commitments include ALDI,¹⁰³ Kellogg's,¹⁰⁴ Mars,¹⁰⁵ Nestlé,¹⁰⁶ PepsiCo,¹⁰⁷ Target,¹⁰⁸ and Walmart.¹⁰⁹

Figure 14 summarizes the kinds of rules the sustainability movement has used.

⁹⁹ Sources: Aguilera, Ruth V., et al. "Putting the S back in corporate social responsibility: A multilevel theory of social change in organizations." *Academy of management review* 32.3 (2007): 836-863.; Berry, Michael A. and Rondinelli, Dennis A. (1998). Proactive corporate environmental management: a new industrial revolution. *Academy of Management Executive*, 12(2), 38-50.; Berns, Maurice et. al. (2009). Sustainability and Competitive Advantage. *MIT Sloan Management Review*, 51(1), 19-26.; Delmas, Magali A. and Toffel, Michael W. (2008). Organizational Responses to Environmental Demands: Opening the Black Box. *Strategic Management Journal*, 29(10), 1027-1055.; Densolow, Diane, Hooker, Robert E., and Giunipero, Larry C. (2012). Purchasing and supply management sustainability: drivers and barriers. *Journal of Purchasing & Supply Management*, 18, 258-269.

¹⁰⁰ FSC, "The global volume and market share of FSC-certified timber." 28 August, 2015. <https://ic.fsc.org/en/news/id/1234>.

¹⁰¹ <http://www.healthyweightcommit.org/about/>

¹⁰² <http://ahealthieramerica.org/our-partners/>

¹⁰³ <https://www.aldi.us/en/grocery-home/aldi-brands/simplynature/made-without-adding-over-125-ingredients/>

¹⁰⁴ https://www.kelloggsnutrition.com/en_UK/knowledge/featured/reducing_sugar.html

¹⁰⁵ <http://www.fooddive.com/news/mars-to-reduce-salt-and-sugar-use-occasional-food-labels-in-20m-program/417509/>

¹⁰⁶ http://www.nestle.com/asset-library/Documents/Library/Documents/Corporate_Social_Responsibility/Nestle-CSV-Summary-Report-2013-EN.pdf

¹⁰⁷ http://www.pepsico.com/docs/album/sustainability-reporting/pep_2013_sustainability_report.pdf?sfvrsn=2

¹⁰⁸ https://corporate.target.com/_media/TargetCorp/csr/pdf/2015-Corporate-Social-Responsibility-Report.pdf

¹⁰⁹ <http://cdn.corporate.walmart.com/db/e1/b551a9db42fd99ea24141f76065f/2014-global-responsibility-report.pdf>

Figure 14: Typology of Sustainability Rules



Rules as a driver for community H&WB: Considerations for action

Corporate executives suggest that advancing rules can be part of a strategy to advance a Culture of Health.¹¹⁰ However, it may serve best as a secondary, rather than as a lead, tactic. Pressure tactics work best when it is easy for stakeholders to frame a company or industry as culpable. In the community H&WB arena, one sees this occurring with food and agriculture; certain elements of the health care industry related to pharmaceuticals and insurance; and energy companies (such as the recent coverage of the Dakota Access Pipeline and its potential impact on the water supply and culture of the Standing Rock Sioux Tribe). Attempting to portray business as culpable for community H&WB challenges would be very difficult in most cases particularly since the private sector currently supports health insurance benefits and spends an average of \$693 per employee on workplace H&WB programs, and other entities are often expected to take the lead in addressing community H&WB issues.

As the sustainability movement has matured, it has been able to skip pressure tactics and encourage either multi-stakeholder or industry-led rule-setting initiatives. The background threat of pressure tactics may help, as does the influence of other drivers to be discussed such as those related to Reputation, ROI, and Relationships.

Certain rule-setting strategies may have advantages in advancing corporate involvement in community H&WB. Consider the following actions:

- **Formal disclosure and reporting.** Champions of corporate involvement should consider advancing milder rule-setting efforts that have precedent from the sustainability movement, such as reporting and disclosure. This requires transparent publication of performance against commonly agreed indicators. Across 64 countries, there are 383 sustainability reporting instruments, an increase of 538% since 2006. The US has 17 such instruments.¹¹¹ As a driver of change, reporting and disclosure is far from perfect and can function as a blunt and inconsistent driver of progress. Nevertheless, reporting has encouraged companies to continuously increase commitments to ESG.¹¹² As applied to H&WB, strategies might include:
 - o Advancing a Culture of Health Report (or a “Vitality report” or a Community H&WB report) that becomes an annual, voluntary disclosure that companies publish.
 - o Working to embed Culture of Health indicators in sustainability reporting frameworks such as the Global Reporting Initiative.

¹¹⁰ Nicolaas P. Pronk, PhD, Catherine Baase, MD, Jerry Noyce, MBA, and Denise E. Stevens, PhD, “Corporate America and Community Health

¹¹¹ Exploring the Business Case for Investment”, JOEM, Volume 00, Number 00, 2015, p. 7

¹¹² Wim Bartels, Teresa Fogelberg, “Carrots & Sticks: Global Trends in Sustainability Reporting, Regulation, and Policy.” 2016: KPMG, GRI, UNEP, Centre for Corporate Governance in Africa, p. 9.; and www.carrotsandsticks.net.

- **Civil regulation and voluntary standards.** These are extra-judicial agreements negotiated among business and NGOs. Agreements are enforced through a mixture of trust, transparency and reporting, and the threat of pressure tactics. For example, Mars aims to have 100% of the cocoa it sources certified as sustainable by voluntary standards systems.¹¹³ Ninety-nine percent of Starbucks coffee is certified as sustainability harvested and produced.¹¹⁴ The prospect of an effort to set rules regarding the private sector's impact on the social determinants of health is daunting to say the least. For comparison, consider that the negative health impacts for tobacco were known (or strongly suspected) for years. Yet it took decades to make any progress in developing health and safety guidelines. Champions of corporate involvement should consider concentrating formal and civil regulation efforts for industries that have a clear, causal link to community H&WB challenges. It will be more productive to focus on specific industries that contribute to specific health concerns when advancing strategies to establish formal rules and civil regulations.
- **Market-making rules.** Instead of punitive measures, these advantage to incentivize to advantage companies that make commitments and demonstrate sustainable behaviors. For example, the US Department of Agriculture's BioPreferred^{®115} program sets incentives to purchase from companies that use bio-based (such as biodegradable) production materials and chemicals. The US Environmental Protection Agency's ENERGY STAR program rewards¹¹⁶ participating companies with a well-known logo that signals products are energy efficient and will save customers money. Champions of corporate involvement should consider how to mobilize large purchasers to favor those businesses that promote community H&WB through their products, their operations, or their community engagement.

Reputation driver

Defining corporate reputation

Reputations are overall assessments of organizations by their stakeholders. They are aggregate perceptions by stakeholders of an organization's ability to fulfill its expectations, whether these stakeholders are interested in buying the company's products, working for the company, or investing in the company's shares.¹¹⁷

Reputation and brand are interlinked. Research estimates that anywhere from 20% to 75% of total stock value is based on a company's reputation,¹¹⁸ and up to 11% of a firm's stock value can be related specifically to its reputation for being a good corporate citizen.¹¹⁹ Reputation is also a key factor shaping enterprise risk. For example, in 1999, Coca-Cola lost by its own estimate \$60 million after schoolchildren reported suffering from symptoms like headaches, nausea and shivering after drinking its products.¹²⁰

The sustainability movement has found ways to affect corporate reputation by employing the strategies listed in Figure 14.¹²¹

¹¹³ <http://www.mars.com/global/sustainability/raw-materials/cocoa>

¹¹⁴ Adam Wernick, "Can coffee become the world's first 100 percent sustainable agricultural product?" <https://www.pri.org/stories/2016-03-20/can-coffee-become-world-s-first-100-percent-sustainable-agricultural-product>.

¹¹⁵ <https://www.biopreferred.gov/BioPreferred/>

¹¹⁶ <https://www.energystar.gov/about>

¹¹⁷ Fombrun, Charles J. (2007). *Essentials Of Corporate Communication*: Abingdon & New York: Routledge.

¹¹⁸ Michael Volkov, "Trust and Integrity: The Value of a Company's Reputation," <http://www.corporatecomplianceinsights.com/trust-integrity-value-companys-reputation/>

¹¹⁹ Steve Rochlin, Richard Bliss, Stephen Jordan, and Cheryl Kiser, "Project ROI: Defining the Competitive and Financial Advantages of Corporate Responsibility and Sustainability." 2015: IO Sustainability, p. 18.

¹²⁰ https://web.archive.org/web/20080503043118/http://www.zurich.com/main/productsandsolutions/industryinsight/2004/june2004/industryinsight20040603_003.htm

¹²¹ Bansal, Pratina and Kendall Roth (2000). Why Companies Go Green: A Model of Ecologic Responsiveness. *The Academy of Management*, 43(4), 717-736.; Brower, Jacob and Mahajan, Vijay (2012). Driven to be Good: A Stakeholder Theory Perspective on the Drivers of Corporate Social Performance. *Journal of Business Ethics*, 117(2), 313-331.; Delmas, Magali A. and Toffel, Michael W. (2008). Organizational Responses to Environmental Demands: Opening the Black Box. *Strategic Management Journal*, 29(10), 1027-1055.

Figure 15: Typology of strategies to influence reputation



Consider the following actions:

Reputation as a driver for community H&WB: Considerations for action

Reputation has the potential to be a core driver that helps advance community H&WB.

- **Brand and reputation positioning.** This approach seeks to use a company’s approach to sustainability to enhance its reputation and brand. Community H&WB lends itself particularly well to brand and reputation-positioning strategies such as:
 - **Goals, commitments, and initiatives.** These are prominent, public, ambitious, and measurable commitments to make a lasting and significant difference. Examples that relate to Community H&WB include:
 - o Kellogg has set a goal to create 3 billion “better days” by the end of 2025, measured by providing 2.5 billion food servings; reaching 2 million children through breakfast programs; supporting farmer livelihoods; employee volunteerism; and consumer and partner engagement¹²²
 - o P&G has set the goal to save one life every hour by 2020¹²³
 - o Unilever has committed to help more than a billion people take action to improve their health and well-being¹²⁴
 - o Volvo set the goal to achieve zero accidents with the company’s products, and to eliminate deaths and serious injuries in the road transport system¹²⁵
 - **Cause-branding and marketing.** Cause marketing contributes a portion of revenue from sales to a worthy cause. Cause branding attaches the company to the support of a prominent issue. Examples relevant to community H&WB include:
 - o Humana has become the “Official Health Care Partner” of the National Parks Centennial. It has supported a variety of programs and public service announcements, including clever promotional videos to encourage individuals to improve their health by visiting parks.¹²⁶

¹²² http://www.kelloggcompany.com/content/dam/kelloggcompanyus/corporate_responsibility/pdf/2016/Kelloggs_CRR_2015%20FINAL.pdf

¹²³ http://www.pg.com/en_US/downloads/sustainability/reports/P&G_2013_Sustainability_Report.pdf

¹²⁴ <https://www.unilever.com/sustainable-living/the-sustainable-living-plan/>

¹²⁵ <http://www.volvogroup.com/en-en/investors/reports-and-presentations/sustainability-reports.html>

¹²⁶ <http://www.multivu.com/players/English/7606451-humana-health-national-parks/>

- o Walmart and Sam’s Club have both supported the Children’s Miracle Network Hospitals for over 27 years, and have raised over \$750 million in donations. For six weeks of the year, Walmart employees solicit donations for the cause from customers at checkout. For a dollar donation or more, customers can put their name on a Miracle Balloon or dedicate it to a loved one. In 2012, the program was calculated to raise \$122 per minute.¹²⁷
- o Coca-Cola’s #MakeltHappy campaign, combated cyberbullying by encouraging positivity. The campaign launched with a Super Bowl commercial and engaged people to share positivity online via hashtag and social media, all in an effort to end the real world negative effects of bullying and share the ‘happiness’ of Coca-Cola.¹²⁸
- **Labeling.** It is estimated that there are 463 eco-labels applied across 25 industry sectors. These are icons used to indicate that the product sold adheres to third-party criteria related to sustainable behaviors. Labels are not without controversy, and their ability to influence consumer purchasing decisions is unclear. Nevertheless, forecasts project that eco-labels will grow to over 750 in use over the next 15 years, and “their power and influence will be much greater than new legislation.”¹²⁹ The key to the brand and reputation positioning strategy is to ensure that efforts are neither used for greenwashing nor shunted aside as a soft, non-strategic communications or philanthropy activity. In this regard partnering with credible NGOs, community based organizations, and thought leaders/experts will be essential.
- **Ratings, rankings, and recognition.** Brand and reputation positioning strategies can be supplemented by efforts to leverage corporate competitiveness and brand imperatives through ratings, rankings, and recognition. The current \$250 million sustainability information market includes some 150 rating systems covering more than 50,000 companies to roughly 10,000 performance metrics. This data has helped lead to more than \$21.4 trillion in sustainability-oriented assets under management to date.¹³⁰ Champions for corporate involvement should consider creating ratings and rankings for community H&WB. This does not need to involve “naming and shaming.” Creating a prominent community H&WB award may inspire companies to become more engaged. In addition, consider developing ratings and rankings that inform:
 - o Investors regarding the links between community H&WB leaders and financial performance
 - o Stakeholders that are able to influence health policy to show how a mix of constructive incentives and moderate rules may help advance community H&WB

ROI driver

“While corporate social responsibility plays an important motivational role, more traction will be possible if improving health can be linked to corporate bottom-line performance.”¹³¹

For the sustainability movement, return on investment (ROI) often refers to efforts to demonstrate that ESG performance improves financial and competitive performance. In addition, this driver also includes efforts that range across the following:

- Redefining corporate goals and the key performance indicators (KPI) and metrics used to measure progress to place impacts on health and well-being on par with financial indicators

¹²⁷ <https://causegood.com/blog/cause-marketing-examples/>

¹²⁸ David Hessekiel, “The 5 Most Important Cause Marketing Trends Of 2015.” *Forbes.com*. 16 December, 2015, <https://www.forbes.com/sites/davidhessekiel/2015/12/16/the-5-most-important-cause-marketing-trends-of-2015/#6c8f412f4269>.

¹²⁹ Tom Idle, “Our Use of Eco-Labels Is Set to Soar – For Products, Brands ... and People?” 21 September, 2016. http://www.sustainablebrands.com/news_and_views/marketing_comms/tom_idle/our_use_eco-labels_set_soar_%E2%80%93_products_brands_people.

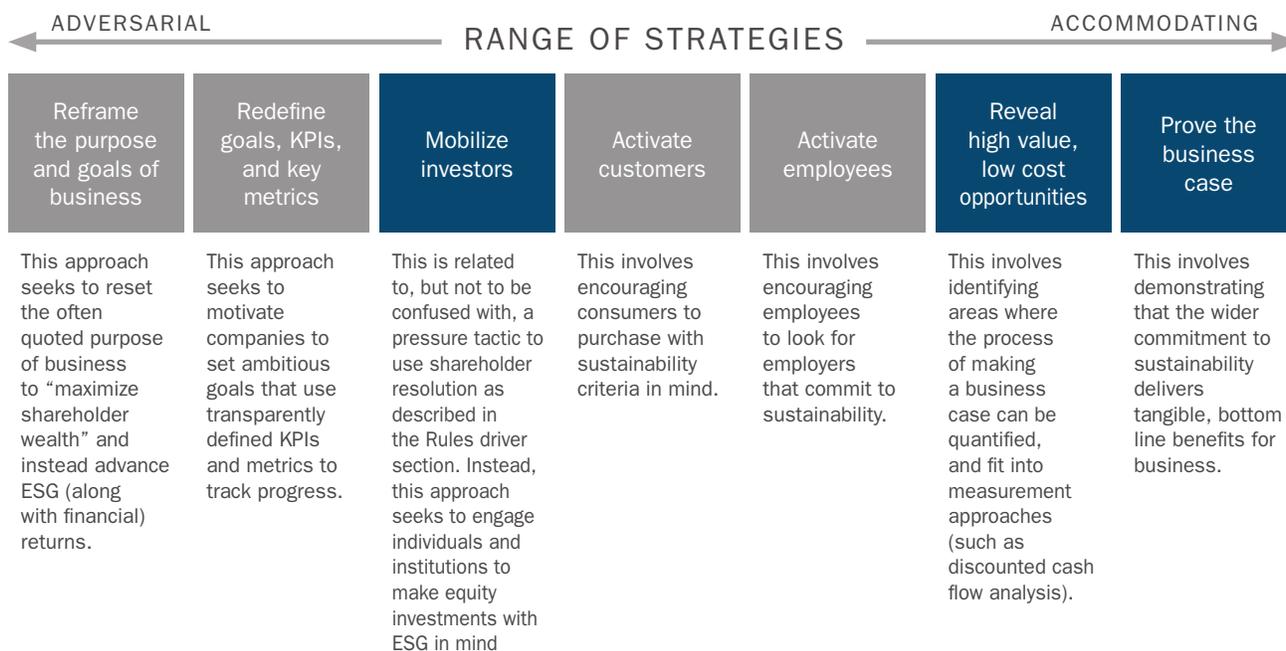
¹³⁰ Mike Hower, “Could sustainability ‘survey fatigue’ launch a \$1 billion industry?” *GreenBiz*, April 2, 2015. <https://www.greenbiz.com/article/gisr-program-cuts-core-esg-research-and-ratings>

¹³¹ David A. Kindig, George J. Isham, and Kirstin Q. Siemering, “The Business Role in Improving Health: Beyond Social Responsibility.” *National Academy of Sciences Institute of Medicine*, 2013, p. 1.

- Encouraging catalytic projects, disruptive business models, and other breakthroughs that use market forces to achieve desired social ends
- Encouraging managers to apply entrepreneurial thinking to solve community H&WB challenges in a way that benefits both society and the bottom line

Figure 16 summarizes the kinds of ROI strategies the sustainability movement has used.

Figure 16: Typology of ROI strategies to influence reputation



ROI as a driver for community H&WB: Considerations for action

“Incentives to invest in community health are less direct and salient to business leaders than incentives to invest in workforce health. Nevertheless, a compelling business case can and should be made for business leaders to look beyond the worksite to the communities where their organizations do business and their employees reside.”¹³²

Senior executives identify the lack of a business case as a significant barrier inhibiting corporate involvement in community H&WB. These executives see both the need and the real potential for such a case to be made.¹³³

¹³² Andrew Webber, Suzanne Mercure, “Improving Population Health: The Business Community Imperative” Preventing Chronic Disease Dialogue, October 15th, 2010 Volume 7: No. 6, November 2010, <https://blogs.cdc.gov/pcd/2010/10/15/improving-population-health-the-business-community-imperative/>

¹³³ Sources: BACH meeting; Nicolaas P. Pronk, PhD, Catherine Baase, MD, Jerry Noyce, MBA, and Denise E. Stevens, PhD, “Corporate America and Community Health. Exploring the Business Case for Investment”, JOEM, Volume 00, Number 00, 2015, p. 1-8

Certain ROI-related strategies may have advantages in advancing corporate involvement in community H&WB.

Key strategies for consideration include the following.

- **Mobilize investors.** Socially responsible investment (SRI) funds tend to concentrate in equity markets as opposed to bonds or other capital markets. A common SRI fund strategy is to invest in companies whose practices demonstrate commitments to limit negative or enhance positive impacts on specific ESG issues. The modern SRI movement began to pick up speed in the 1960s and 1970s.¹³⁴ During this time, SRI evolved with the political climate. Initially, socially responsible investors sought to address equality for women, civil rights, peace, and labor issues.¹³⁵ In the 1980s, SRI proponents focused on investing in ways to pressure the South African government to end apartheid.¹³⁶ Today, an increasing number of SRI investors use screens that assess the overall sustainability performance of companies rather than single issues. At the start of 2016, the SRI market was worth \$8.72 trillion, a 33% increase since 2014. These assets account for one out of every five dollars under professional management in the United States.¹³⁷ Research forecasts that socially responsible investors will take increasing interest in H&WB. They are expected to screen for companies that promote happiness, physical activity, nutrition and health prevention activities, as well as provide support for treating illness.¹³⁸ These trends will correlate with an increase in mainstream investment opportunities in H&WB. Currently, there are two large thematic ETF's (exchange-traded funds) that focus on fitness and wellness, Global X Health and Wellness Thematic ETF (BFIT) and The Health and Fitness ETF (FITS).^{139, 140} Both of these funds are relatively new and are expected to pick up interest and investments as interest in health and wellness continues to grow.

In addition, Wall Street tends to reward companies that manage and reduce costs effectively. Experts contend that as much as “25 percent of current health care spending is ineffective, improving neither outcomes nor quality. Capturing these dollars for reinvestment in more effective programs and policies within and outside of health care...should be a high priority for both public and private sector leaders.”¹⁴¹ Continuing to document and inform Wall Street of the growing evidence that the social determinants of health play a role in cost reduction will align well with investors' traditional focus on cost control and their growing interest in health.. A multi-stakeholder convening held by the National Academies of Sciences, Engineering, and Medicine finds that investors will likely be further moved to prioritize corporate involvement in community H&WB if robust data demonstrates the impact of the social determinants on:

- **Reduced profits.** A greater percentage of total generated funds has to be allocated toward health care, resulting in a reduction of profits.
- **Eroded foundation for business.** Education and infrastructure are essential foundation elements for the success of business, but they are being undermined by the diversion of GDP toward health care. Business also needs healthy people in order to be successful.
- **Diminished purchasing power.** The cumulative impact of the current scenario is a diminished market because there is less take-home pay and less disposable income.¹⁴²
- **Reveal high value, low cost opportunities.** There is a perception that the business case for community H&WB is more challenging to make than that for workplace health and wellness. However, there may be specific aspects of the community H&WB business that are easier to make.

¹³⁴ Donovan, W. (2016, October 14). A Short History of Socially Responsible Investing. Retrieved from <https://www.thebalance.com/a-short-history-of-socially-responsible-investing-3025578>

¹³⁵ Redins, L. (2006, September 11). The Evolution of Socially Responsible Investing. Retrieved from http://www.enn.com/top_stories/article/4540

¹³⁶ Berry, M. D. (2013, August 9). History of socially responsible investing in the U.S. Retrieved from <http://sustainability.thomsonreuters.com/2013/08/09/history-of-socially-responsible-investing-in-the-u-s/>

¹³⁷ REPORT ON US Sustainable, Responsible and Impact Investing Trends 2016 (Rep.). (2016). Retrieved [http://www.ussif.org/files/SIF_Trends_16_Executive_Summary\(1\).pdf](http://www.ussif.org/files/SIF_Trends_16_Executive_Summary(1).pdf)

¹³⁸ Jacobs, J. (2016, May 10). An Infographic on the Health & Wellness Economy. Retrieved from <https://www.globalxfunds.com/exploring-the-health-wellness-economy/>

¹³⁹ BFIT, Health and Wellness Thematic ETF. Global X Funds.

¹⁴⁰ FITS, Health and Fitness ETF. Janus Capital Group.

¹⁴¹ Magnan, S., E. Fisher, D. Kindig, G. Isham, D. Wood, M. Eustis, C. Backstrom, and S. Leitz. 2012. Achieving accountability for health and health care. *Minnesota Medicine* 97(11):37-39.

¹⁴² National Academies of Sciences, Engineering, Medicine, “Business Engagement in Building Healthy Communities: Workshop Summary”, (2015) p. 20.

Research suggests that corporate executives may possess an intuitive sense of the business case for community H&WB in a few particularly high potential areas.¹⁴³

- o Cost Analysis and Strategic Adaptation: 22% of corporate health costs come from 10 risk factors strongly affected by the social determinants of health. Given that the social determinants of H&WB may drive up to 50% of health outcomes, it's possible that they may drive a similar level of health costs.
- o Employees and the War for Talent: It is possible that community H&WB initiatives may substantially enhance HR-related benefits when paired with workplace health initiatives. For example, research suggests:
 - Employers that address the social determinants of health may gain the competitive advantage they need in recruitment efforts. They stand to build labor market reputations as employers of choice.¹⁴⁴
 - Outside of the workplace, employers can obtain an even greater return on their wellness investment by partnering with other stakeholders to tackle prevention at the community level.¹⁴⁵
- **Activating customers leading to sales revenue.** Project ROI research finds that customers will evaluate corporate citizenship by:
 - Seeing how well the company aligns its commitment to sustainability with the customer's own priorities
 - Assessing whether a company communicates clear and simple messages regarding its sustainability priorities and commitments
 - Evaluating how well the company appears to treat its employees¹⁴⁶

The growing market for companies to serve H&WB further underscores the opportunity for companies to pursue strategies that:

- Structure business-related and sustainability initiatives that focus on improving community H&WB
- Develop simple, powerful messaging promoting the company's commitment to a Culture of Health
- **Prove the business case for community H&WB.** Currently, the overall business case for community H&WB is based more on perception than rigorous research. Given the links between the social determinants of health and ESG indicators, it may be possible to relate business case research for sustainability to community H&WB. However, given the barriers inhibiting corporate involvement (Figure 3), continuing to pursue dedicated research that addresses the question is advisable.
- **Mobilize entrepreneurs by investing in existing (or creating new) business case competitions, incubators, and accelerators.** This involves developing an entrepreneurial eco-system to support the cultivation and development of viable businesses that address community H&WB challenges. For example, business case competitions help train students to think about community H&WB issues from a business perspective, and to learn to identify potential customers and the products and services that meet their needs. Incubators and accelerators help take entrepreneurs to the next level by providing them with support services, mentoring, encouragement, and potential access to additional capital.

There are multiple existing business case competitions for health care. Similarly, there are at least 12 health incubators across the country.¹⁴⁷

In order to disseminate and diffuse Culture of Health benefits throughout the United States, it might be worth considering developing health incubators and accelerators in states that particularly need more health service provision. States like Mississippi and West Virginia would benefit significantly from homegrown entrepreneurial activity in this space.

¹⁴³ Nicolaas P. Pronk, PhD, Catherine Baase, MD, Jerry Noyce, MBA, and Denise E. Stevens, PhD, "Corporate America and Community Health. Exploring the Business Case for Investment", JOEM, Volume 00, Number 00, 2015, p. 7

¹⁴⁴ The Conference Board of Canada. "Health People, Healthy Performance, Healthy Profits: The Case for Business Action on the Socio-Economic Determinants of Health." December 2008.

¹⁴⁵ NBCH Action Brief, April, 2013, p. 1.

¹⁴⁶ See Rochlin, et al (2015).

¹⁴⁷ Dyrda, Laura 12 health care startup incubators and accelerators to know. Becker's Health IT and CIO Review. November 29, 2016

Relationship driver

The relationship with and engagement of stakeholders — sometimes supportive, sometimes adversarial, and often demanding — has been a key driver for the sustainability movement.¹⁴⁸ Four key strategies (Figure 17) in particular possess applicability to the community H&WB movement, and have the potential to amplify the effect of other key drivers.

Figure 17: Typology of relationship drivers for sustainability



Relationships as a driver for community H&WB: Considerations for action

“No single sector is solely responsible for health improvement. Businesses can lead or play strong supporting roles in community multisectoral partnerships....Real and meaningful improvement will require active participation and resources from multiple sectors of society, including health care, public health, schools, businesses, foundations, and government at all levels. In some communities, because of their prestige, political clout, and financial resources, businesses can be the superintegrator across the stakeholders. Businesses must partner with others to achieve health improvement in communities and thereby reap the advantages for their workforces and overall well-being of business activity....Businesses must reconnect company success with social progress.”¹⁴⁹

Certain relationship-related strategies may have advantages in advancing corporate involvement in community H&WB. Consider the following actions:

¹⁴⁸ Bansal, Pratina and Kendall Roth (2000). Why Companies Go Green: A Model of Ecologic Responsiveness. *The Academy of Management*, 43(4), 717-736.; Berry, Michael A. and Rondinelli, Dennis A. (1998). Proactive corporate environmental management: a new industrial revolution. *Academy of Management Executive*, 12(2), 38-50.

¹⁴⁹ David A. Kindig, George J. Isham, and Kirstin Q. Siemering, “The Business Role in Improving Health: Beyond Social Responsibility.” *National Academy of Sciences Institute of Medicine*, 2013, p. 4.

Key relationship strategies for consideration include the following.

- **Stakeholder accountability.** The Corporate Sustainability Movement (via a number of voluntary standards and reporting requirements) encourages companies to go through a series of steps to:
 - o Map and prioritize key stakeholders
 - o Identify the priority issues that stakeholders expect the company to advance
 - o Conduct ongoing consultations with stakeholders
 - o Follow up with specific activities to respond to stakeholder expectations
 - o Ideally, create structures for stakeholders to engage in corporate governance with the Board of Directors and senior executives

Nestlé is an example of a corporate leader in this regard, adopting each of the steps above. It is one of the few global companies to create a senior-level advisory body, the Nestlé-in-Society Board. This Board is chaired by the CEO and composed of respected leaders working on sustainability issues the company has prioritized, including aspects related to community H&WB (nutrition, rural development, and water). The Nestlé-in-Society Board leads the strategic development and implementation of the company’s sustainability approach, called Creating Shared Value, across the business, including for all societal commitments, objectives, and strategies. The Nestlé-in-Society Board reports to the corporate Executive Board for input and confirmation.¹⁵⁰

Advocates of community H&WB should encourage and support companies in developing similar processes for stakeholder consultation, focused on ways to address the social determinants, with the objective of improving health and reducing costs. Consultations with community health experts on the social determinants can provide companies with valuable intelligence that will enhance both workplace and community H&WB programs. In addition, these consultations can help companies understand where business policies, strategies, products, spending, or other activities may be negatively impacting the social determinants. Dialogue can lead to constructive solutions before they escalate into potential risks such as lawsuits, PR crises, or costly regulation and related penalties and fines.

It may be useful for companies that engage in stakeholder consultations related to ESG to change the frame of the discussion to address impacts on health and the social determinants. A persistent challenge in stakeholder conversations is that no agreed definition (and related metrics) of sustainability exists. Companies and stakeholders may find it more productive to focus on how ESG practices can contribute to greater community H&WB.

- **Supplier accountability.** Companies spend billions on suppliers annually, raising concerns that companies are outsourcing their sustainability impacts to their suppliers. For example, it is estimated that 70% of a Fortune 1000 company’s environmental impact comes from its supply chain.¹⁵¹ The Supplier Accountability strategy engages suppliers and gives them a series of both “carrots and sticks” to improve their performance.

Regarding community H&WB, advocates would likely see greater progress using “carrots” to positively encourage companies and their suppliers to enhance their involvement. There is great potential to link efforts to improve the economic performance of suppliers with training that enhances their Culture of Health practices.

Developing the capability of small businesses — particularly minority owned, women owned, and those located in low-income zip codes — is a tool to promote sustainable and inclusive economic development. These small businesses grow, add jobs, purchase from other local businesses themselves, and strengthen local communities. This, in turn, should have positive implications for the social determinants of health. Over time, companies have grown to value diversity in their supply chains as a way to take advantage of benefits such as proximity, stability, quality, reliability, and stability of supply. Notable examples include the Billion Dollar Roundtable¹⁵² of companies

¹⁵⁰ <http://www.nestle.com/csv/what-is-csv/governance>

¹⁵¹ Hanifan, G. L., Sharma, A. E., & Mehta, P. (2012). Why a sustainable supply chain is good business. Outlook, (3). Retrieved from https://www.accenture.com/t20150522T061611__w_/us-en/_acnmedia/Accenture/Conversion-Assets/Outlook/Documents/1/Accenture-Outlook-Why-Sustainable-Supply-Chain-is-Good-Business.pdf#zoom=50

¹⁵² <http://www.billiondollarroundtable.org/>

committing to allocate at least \$1 billion annually to diverse purchasing, and the National Minority Supplier Development Council.¹⁵³ Furthermore, health costs affect small, medium, and large enterprises alike. Supporting small and medium suppliers to adopt effective Culture of Health strategies should deliver a virtuous cycle of benefits. As workers, their families, and their communities become healthier, they will become more productive, health costs will decline, they will be able to charge more competitive rates, corporate purchasers will see a profitable ROI, and communities will see overall health improve.

- **Competitive rivalry.** A core driver of any kind of organizational change is the need for companies to keep pace with competitors and peers. This applies to sustainability as well.¹⁵⁴ A number of programs use Competitive Rivalry strategies to promote corporate commitment to workplace health and wellness. These can also apply to community H&WB. For example:
 - o Provide awards and recognition for community H&WB corporate heroes and/or innovative companies using Culture of Health to drive business ROI
 - o Create opportunities to participate in prestigious policy and partnership forums
 - o Develop PR campaigns that feature positive stories of business involvement
- **Partnerships.** Partnerships connect companies together with some combination of NGOs, government agencies, and/or companies to address a community H&WB challenge. Partnerships can take a variety of forms. Strategies to encourage the formation of strategic partnerships include:
 - Sharing good practice resources (discussed further in the Resources Driver section below)
 - Engaging funding partners to provide capital support. This includes companies and nonprofit partners, and would seek to engage health care system partners, government funders, private and nonprofit donors, and the financial services community

Resources driver

Every step of the sustainability movement has been accompanied by a network of service providers sharing:

- Information on best practice, emerging trends, and issues
- Benchmarking that enables companies and stakeholders to identify leaders and laggards across a variety of ESG issues
- Guidance on the strategic management, implementation, and measurement of sustainability
- Translators and intermediaries that facilitate stakeholder dialogue and the creation of multi-stakeholder partnerships
- And in education (for executives to students at all levels of instruction) to understand sustainability
- Professional associations for staff (from the CEO to the sustainability professional) to have “safe spaces” to learn from peers
- Networking and convening opportunities to keep up with new developments and build connectivity with those in the field
- Data providers for investors and others interested in analyzing sustainability progress

The providers of these resources cut across a panoply of for-profit companies, non-profit service organizations, industry associations, networks and partnerships, educational institutions, NGO activists, and data and media organizations.

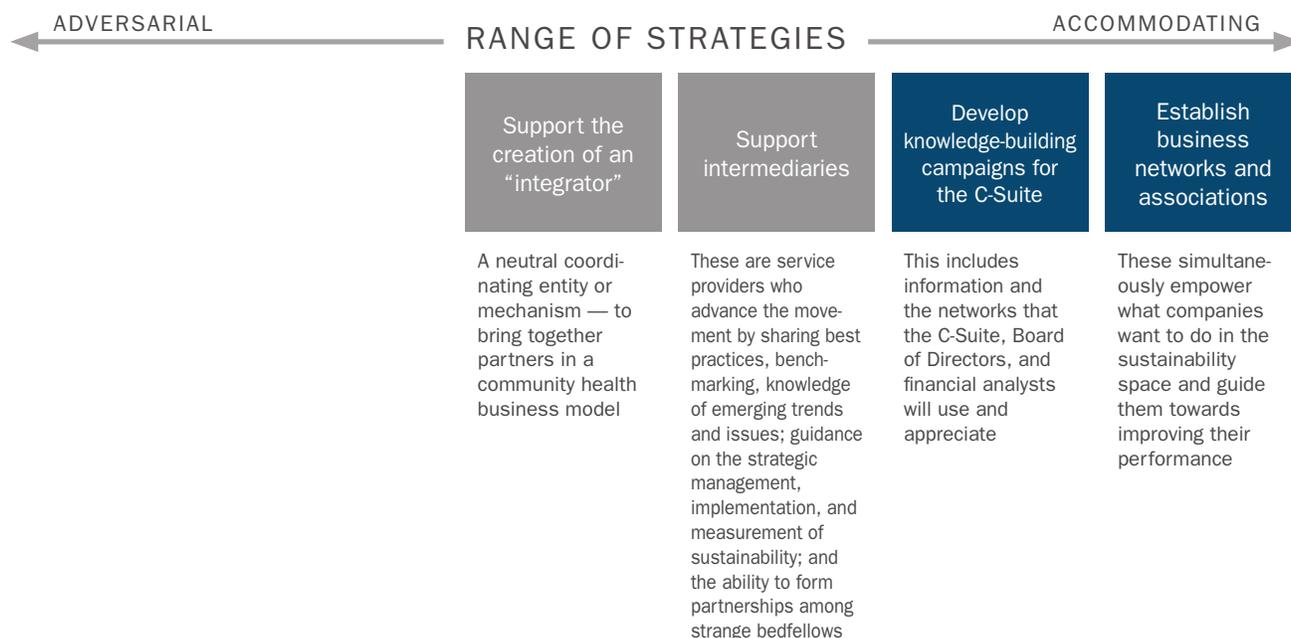
Research suggests these resource providers have been a driver encouraging companies to embrace sustainability (Figure 18).¹⁵⁵

¹⁵³ <http://www.nmsdc.org/>

¹⁵⁴ Marquis, Christopher, Mary Ann Glynn, and Gerald F. Davis. “Community isomorphism and corporate social action.” *Academy of management review* 32.3 (2007): 925-945.

¹⁵⁵ Eccles, R. G., Perkins, K. M., & Serafeim, G. (2012). How to become a sustainable company. *MITSloan Management Review*, 53(4), 43-50. Retrieved from http://www.hbs.edu/faculty/Publication%20Files/SMR_Article_EcclesMillerSerafeim_77d4247b-d715-447d-8e79-74a6ec893f40.pdf

Figure 18: Typology of resource drivers for sustainability



Consider the following actions.

Resources as a driver for community H&WB: Considerations for action

The US corporate workplace health and wellness sector — a mix of consultants, service providers, and program managers — is estimated to be a \$6 billion industry employing over 77,000 individuals.¹⁵⁶ This does not include the range of nonprofit organizations that provide resources for workplace health.

Comparable data for community H&WB is not readily available. It is reasonable to assume that the aggregate size of these resource providers do not come close to approaching that of the workplace sector, despite the fact that social determinants are the root driver of approximately half of health outcomes. Key actions for consideration include:

- Support the creation of an “integrator.” An integrator is a neutral coordinating entity or mechanism that brings together partners in a community health program, partnership, or business model.¹⁵⁷
- Support intermediaries. The corporate involvement movement will benefit from the support of intermediary organizations that will:
 - Advance the business case
 - Identify and disseminate best practices and promising innovative approaches to community H&WB
 - Help define and establish standards for leading practice
 - Create reputation building mechanisms
 - Broker relationships and partnerships

¹⁵⁶ <https://www.ibisworld.com/industry/corporate-wellness-services.html>

¹⁵⁷ Institute of Medicine. Business Engagement in Building Healthy Communities: Workshop Summary. December 2014. Available at <http://www.iom.edu/Reports/2014/BusinessEngagement-Building-Healthy-Communities.aspx>.

-
- Develop knowledge-building campaigns targeted for the C-Suite. Senior executives are typically influenced by information sources and networks that are distinct from those used by their staff. The information they receive may be largely the same as that obtained by staff. However, the style by which it is communicated, and the status of the experts and networks sharing it is designed to appeal to the sensibilities of C-Suite leaders.¹⁵⁸
 - Establish business networks, and associations. Over the years, multiple coalitions, networks and associations have been formed that simultaneously empower what companies want to do in the sustainability space and guide them towards improving their performance. There are multiple ways that such tools could be used in the context of contributing to business support for community H&WB. These include:
 - Developing a clearinghouse of information, resources, and research
 - Tools to benchmark effective practices
 - Advocacy
 - Shared services
 - Agenda setting, policy development, and prioritization
 - Training and technical assistance
 - Convening and networking

¹⁵⁸ David A. Kindig, George J. Isham, and Kirstin Q. Siemering, "The Business Role in Improving Health: Beyond Social Responsibility." National Academy of Sciences Institute of Medicine, 2013, p. 5.

VI. Next Steps

While no single organization can do everything, a movement where different organizations take ownership of different drivers of corporate behavior can. This is why a few catalytic organizations can have an enormous impact if they are able to mobilize other organizations, stakeholders, and individuals to take action. By creating a support system and empowering others, organizations that are committed to promoting a Culture of Health can leverage resources along with other people's skills and expertise far in excess of what they could accomplish on their own.

These are some of the lessons of the sustainability movement. In addition, there are areas where the Culture of Health movement may be able to influence — if not outpace — the sustainability movement. Reflecting on the key findings and recommendations of the previous sections, one can identify five strategic themes that should inspire the efforts of those that care about corporate involvement.

Leverage the emerging health and well-being movement

The 1990s ushered in the information age, which established the prominence of digital and information technology. It has become commonplace to see companies from all varieties of industries — such as finance, retail, and transportation — proclaim that they are now “technology companies.”

The accelerating interest in health, fitness, prevention, exercise, and longevity suggests a potential “Culture of Health” era emerging. As noted, some estimate that the US H&WB industry will grow beyond \$1 trillion.¹⁵⁹ Certain industries are providing solutions to improve H&WB. Other industries are developing programs for workplace health. Yet H&WB touches all industries. We may well see a time when businesses from all sectors proclaim themselves “health and well-being companies” and follow the entrepreneurial strategies defined in Figures 9 and 10.

Reframe sustainability around health and well-being

H&WB is a more intuitive and understandable than sustainability. H&WB is also (relatively speaking) more measurable than sustainability. There is an opportunity to reframe the sustainability conversation on the effect companies have on the H&WB of individuals, communities, and the environment.

Certain companies are beginning to experiment with this approach. For example, Humana (with the guidance of RWJF) proposes that companies and non-profits use the metric of Healthy Days, a health-related quality of life measure developed by the CDC. Humana is using the Healthy Days metric to measure progress toward its bold goal of working with communities to improve H&WB 20% by 2020.¹⁶⁰

¹⁵⁹ Kerri Krom, “Health and Wellness is the Next Trillion Dollar Industry,” 19 December, 2016, <http://www.womensmarketing.com/blog/2014/11/health-and-wellness-market/>

¹⁶⁰ <https://www.humana.com/provider/support/publications/your-practice-newsletter/healthy-days>

Use health and well-being as a driver to connect silos within companies

There are examples of companies working to integrate commitments to health and well-being in ways that require a total, coordinated commitment of all functions, executives, and employees. The history of corporate adoption of employee safety shows that disparate corporate functions and business lines can align to pursue a common health-related goal. H&WB has a more immediate and intuitive connection to the lives of executives, employees, shareholders, customers, suppliers, and communities than sustainability. H&WB is everyone's job versus making that same argument for a more abstract concept like sustainability.

Health and well-being is one of the core attributes of a highly functioning society, and increasingly, an important goal for businesses to support. Addressing and improving the social determinants of health at the community level and beyond will have a beneficial impact on business, driving down insurance and health care costs, presenteeism and absenteeism, and other drags on business performance. This means that businesses need to expand their strategic thinking and health and well-being agenda to encompass not just their own internal operations, but their stakeholders, communities, and networks. In this regard, the sustainability movement has a lot to teach, and businesses would be well-advised to learn from the experience of this movement as they shape their H&WB strategies and deploy resources across a range of drivers of business behavior.

Activate the entrepreneurial mindset inside and outside the corporation

Babson's methodology of Entrepreneurial Thought & Action® (ETA™) is being taught inside and outside corporations all over the world. In an unprecedented time of growing uncertainty and ambiguity, this method is used to create economic and social value simultaneously.

The book, *Creating Social Value: A Guide for Leaders and Change Makers*, focuses on the motivations of entrepreneurial leaders as they look at activate change within their companies, industries, communities, and value chains, sometimes even through partnerships with their competitors. Such change requires fundamentally new styles of leadership to innovate and to generate profits and social value simultaneously.

Many corporate leaders (such as those engaged as advisors for this research) want to move from talking about how to generate value and impact for community H&WB to co-creating their way forward in ways that are not happening now.

There are three fundamental concerns of every CEO in corporations today. How to grow the business beyond mergers and acquisitions; how to innovate; and how to authentically engage their employees who are increasingly demanding a higher premium on purpose and social value creation.

As noted in his 2011 book, *The Coming Jobs War*, Jim Clifton, CEO of Gallup International states that work is the number one source of happiness. "What the world wants is a good job. That is the single biggest discovery Gallup has ever made."

This is relevant because, as this report indicates, there are so many factors that influence a robust Culture of Health eco-system, and someone's ultimate well-being and vitality. Millennials will be, if not already, the leaders within business. Millennials also have friends and colleagues inside incubators and start-ups. A next step might be to engage the corporate sector, sustainability/CSR teams, corporate innovation teams, and policy makers in a Culture of Health/Community Vitality "Collaboratory" to co-create and experiment to build the future of community H&WB.

The entrepreneurial approach is a win-win because everyone leaves with a new expanded mindset for action, possibilities, networks, and relationships. This is not business as usual and gives everyone agency in the process as equal participants and drivers of a robust community H&WB pathway for success.

This model takes ideas from thinking to action, experimentation and the prototyping. An action learning model might better generate new ways of addressing the challenges that this report and many others address.

Allowing millennials, in particular, to be an active part of this process is a vibrant and powerful employee engagement strategy for real social and economic returns. It unleashes more than a department in solving these dilemmas. It engages those with the desire to have their hearts and minds tapped for the betterment of their community.

Learn from social entrepreneurs and innovators

A community of for-profit and nonprofit startups, social entrepreneurs, and social innovators are leading the way in integrating community H&WB and Culture of Health into the design of business models. These organizations need to be understood and studied. Opportunities to engage them and connect them to wider corporate networks will create inspiration and lessons learned that will show the wider business community what is possible.

This report describes **The What** and **The So What**. It describes learnings from the sustainability movement. It outlines suggestions for **The Now What** that focuses around a new mindset for action.

The benefits are growing increasingly clear. It's possible to build a road map based on the experiences of others who have gone before, but with a clear vision of the unique challenges and opportunities of community H&WB. If successful, those advancing corporate involvement will set in motion a powerful engine that will drive future prosperity for the businesses that embrace this vision and enhanced quality of life for the people in the communities that they serve.

Appendix I & II

Appendix I

Organizations that participated in the Business Advisory Council on Health convenings

Abbott	Campbell Soup Company	glendonTodd Capital LLC	PepsiCo
ACCP	Centene	Haley & Aldrich	Reebok
Aetna	DSM	John Hancock	RWJ Barnabas Health
Athena Health	EY	Mars	Sodexo
Amtrak	FitBit	Microsoft	Target
Blue Cross Blue Shield of Massachusetts	Google	National Park Service	TripAdvisor
	GSK	Nestlé	

Appendix II

Examples of corporate involvement in community health and well-being

ABBOTT — Abbott, through its Women’s Heart Health Initiative is working to help women – and their doctors – understand the dangers of cardiovascular disease (CVD), starting with the doctors many women often trust the most: their OB-GYNs. The Women’s Heart Health Initiative helps these key health care providers identify people at risk, so that CVD can be treated earlier – and more lives saved. Abbott, in collaboration with the Society for Cardiovascular Angiography and Interventions developed a convenient, one-page screening tool to help OB-GYNs screen their patients for heart disease risk factors. OB-GYNs are often in the best position to identify women at risk for heart disease, make sure they are aware of their risk factors, and encourage them to monitor their heart health actively. Interestingly, complications during a woman’s childbearing history can reveal important clues about her heart health, even in later life.¹⁶¹

¹⁶¹ <http://www.abbott.com/about-abbott/abbott-citizenship/upside-in-action/womens-heart-health.html>

AETNA — The company’s approach to corporate involvement builds from the finding that quality health care often isn’t available in low-income and minority communities, and people in these communities are often at higher risk for certain chronic health conditions. Some examples of activities and initiatives include:

- Helping to fight heart disease. The Million Hearts® initiative seeks to prevent 1 million heart attacks and strokes by 2017. Aetna is supporting this effort, including with programs to: Control blood pressure among seniors and Help smokers quit tobacco with coaching and online resources
- Healthiest Cities and Counties Challenge. Cities, counties, and federally recognized tribes that show measurable improvements in health indicators and social determinants of health will be awarded \$1.5 million in prizes.¹⁶²
 - o The challenge is offered by the Aetna Foundation, the American Public Health Association (APHA), and the National Association of Counties (NACo), in partnership with CEOs for Cities.
 - o Participating cities, counties, and tribes will focus on at least one of five domains: healthy behaviors, community safety, built environment, social/economic factors, and environmental exposures. Within those domains, participants will be judged based on a variety of metrics already in use within the public health field. Challenge participants will also be evaluated on their ability to form cross-sector partnerships — a key ingredient and a critical foundation for sustainable and lasting change. An expert advisory board has been selected to judge the finalists of the Healthiest Cities and Counties Challenge, including the Centers for Disease Control and Prevention (CDC), AARP, and the Urban Land Institute
 - o Challenge participants will be able to share experiences and best practices throughout the process via a learning network

AMTRAK — Amtrak has created the “Bring Your Bicycle Onboard” program to enable passengers a variety of ways to transport their bike onboard.

BD — BD’s Helping Build Healthy Communities program builds from the finding that nearly 24 million Americans live in medically underserved areas with limited access to health care — and of the few centers available to people, services are limited due to lack of medical supplies and personnel. To close the health equity gap in the United States, BD, Direct Relief, and the National Association of Community Health Centers partner on the Helping Build Healthy Communities initiative. Helping Build Healthy Communities helps local community clinics deliver primary and preventative health care services related to the prevention and treatment of diabetes, cervical cancer, and HIV. The partnership also helps clinics tailor programs for specific local patient populations and their cultural needs. To date, the partnership has awarded 26 health care centers more than \$2.6 million in funding through the Helping Build Healthy Communities initiative.¹⁶³ In 2017, four awards of \$200,000 each were provided to eligible community health centers in support of innovative programs in Medication Therapy Management. The funding is to support programs that operate over a two-year period.

BLUE CROSS BLUE SHIELD — Blue Cross and Blue Shield (BCBS) companies around the country increased their support for community programs that promote healthier behaviors and address social determinants of health — the social factors that can negatively impact health — such as homelessness and food insecurity. Underscoring BCBS companies’ commitment to helping all Americans live healthier lives, programs that focused on increasing healthy eating behaviors and physical activity in schools, mentorship programs for at-risk youth, health clinics for underserved populations, and programs that connect low-income patients with hard-to-reach health specialists rose to the forefront of the investments made by BCBS companies last year. Additionally, the number of community programs related to behavioral health, including efforts to reduce opioid use disorder, increased by 25% as BCBS companies around the country work to address America’s opioid epidemic. In 2016, they invested more than \$250 million in community health initiatives, and BCBS employees volunteered more than 400,000 hours and provided more than \$11 million dollars in personal donations.

¹⁶² <https://news.aetna.com/2016/04/healthiest-cities-and-counties-challenge-1-5-million-to-communities-that-make-strides/>

¹⁶³ <https://www.uschamberfoundation.org/modal-content/46351>

“The Health of America Community Investment Report” showcases community investments by BCBS companies in three key areas:

- **Enabling Healthier Living:** In 2016, BCBS companies provided people with the tools and resources necessary to adopt healthy behaviors and prevent and manage health conditions, such as obesity and diabetes. Programs focused on teaching people how to make healthier food choices, increase their physical activity, and manage chronic diseases.
- **Improving Health care Access:** Improving Americans’ access to health care was a priority for BCBS companies in 2016. The report highlights investments in safety net and mobile clinics along with programs dedicated to increasing health literacy.
- **Improving Health care Quality and Affordability:** The report showed BCBS companies working alongside hospitals and doctors to improve how care is delivered — all with the goal of better health. One local effort integrated primary and behavioral health services for low-income patients living in rural areas, while other initiatives include educational opportunities for patients and doctors and support for medical research.¹⁶⁴

CAMPBELL SOUP COMPANY — The company, which is headquartered in Camden, NJ, launched a 10-year, \$10 million initiative to halve childhood obesity in the city over the next decade. Recognizing that the complexity and magnitude of the problem was too big for the company to take on alone, Campbell has partnered with different organizations to tackle the different aspects of the problem — with schools, to ensure that children have opportunities for physical activity; with nonprofits, to address issues like playground access; with the local government, to outline nutrition guidelines for children who attend Head Start; and many others.¹⁶⁵

CENTENE — Over 13.6 million Americans live with a mental illness, with only 40% receiving treatment. In 2013, IlliniCare Health Plan and Cenpatico teamed up with Thresholds, a community-based mental health provider. Together they developed a pilot program to take on the challenge of serving the most complex and highest-risk members. The pilot program has seen a 63% reduction in behavioral health inpatient costs for pilot members engaged for 12 months.¹⁶⁶

DSM — As a leading micronutrient provider, DSM develops innovative solutions to fight hidden hunger, defined as the micronutrient (vitamin and mineral) deficiency in a person’s diet. The company is committed to improving the nutrition of those two billion people suffering from hidden hunger by using its know-how. DSM’s Nutrition Improvement Program leads the innovative product development aimed at serving those at the bottom of the pyramid, as well as supporting the implementation of DSM’s nutrition-focused partnerships and looking for new social business models to reach those in need.¹⁶⁷

DUKE ENERGY — Poor air quality leads to chronic diseases that severely impact the health, well-being, and quality of life for low-income families. Duke Energy and The North Carolina Community Action Association developed the Duke Energy Helping Home Fund to improve the health, safety, and energy efficiency of low-income households. The Duke Energy Home Fund provides families with energy efficiency measures and upgrades like H-VAC systems, new refrigerators, and appliance replacement of washers and dryers and room air conditioners. Families participating in the partnership are also educated on the value and benefit of energy efficiency and how it leads to a healthier indoor living environment. Since launch, this partnership has helped nearly 3,000 families have safer, healthier homes.¹⁶⁸

¹⁶⁴ http://www.csrwire.com/press_releases/40113-Local-Investments-by-Blue-Cross-and-Blue-Shield-Companies-and-Foundations-Advance-Community-Health?tracking_source=rss

¹⁶⁵ <http://www.fsg.org/blog/healthy-communities-healthy-companies-engaging-private-sector-collective-impact>

¹⁶⁶ <https://www.centene.com/social-respons/changing-lives-behavioral-health.html>

¹⁶⁷ <http://www.dsm.com/corporate/sustainability/nutrition.html>

¹⁶⁸ <https://www.uschamberfoundation.org/modal-content/46361>

GSK — A growing number of Philadelphia’s students live in poverty and without access to healthy foods, recreational spaces, and employment opportunities. Children growing up in the city’s northern neighborhoods live 10 years less than their peers. “Get HYPE Philly!” is a collaborative initiative lead by GSK, The Food Trust, the Philadelphia Youth Network, and more local stakeholders. The program empowers youth to become leaders for healthy change through physical fitness, nutrition education, entrepreneurship, and civic involvement. Get HYPE Philly’s transformative youth-driven approach provides unique perspectives about the health barriers and resources needed to create sustainable solutions to better health in their neighborhoods. To date, nearly 20,000 youth have participated in healthy programming, including 347 activities designed and led by Get HYPE Philly’s young people.¹⁶⁹ The partnership has four focus areas: urban agriculture, physical activity, food education, and work readiness. Overall, 10 partners are empowering 50,000 kids in 100 middle and high schools. Youth councils in schools work through the program to improve access to healthy foods, decrease access to unhealthy foods, and increase opportunities for physical activity (including fitness clubs, movement breaks, healthy fundraisers, school gardens, and healthy pledge events). Youth councils assess their school food and fitness environments to create and implement healthy action plans. The partnership utilizes hip hop, social marketing, and special events to convey the importance of health in a relevant way. Get HYPE Philly hosts annual Leadership Summits for youth in Philadelphia to collaborate.

JOHN HANCOCK — John Hancock is committed to fostering a culture of health, stating, “By developing products and supporting initiatives that reaffirm this goal, we strive to improve the quality of life for present and future generations.” John Hancock is partnering with The Urban Farming Institute of Boston (UFI) a social innovation organization that supports the development of urban farming (the growing of agricultural products for income). One of its programs is the Urban Farmer Training Program, which gives residents the opportunity to engage in direct, hands-on learning on small quarter-acre plots. UFI sees it as a springboard for individuals for whom traditional job models don’t work, thereby fostering innovation and entrepreneurship.¹⁷⁰

KAISER PERMANENTE — More than 200,000 of Washington, DC’s residents live in food deserts. Thirty-six percent of those residents live in poverty and 42% receive nutrition assistance. In collaboration with Kaiser Permanente of the Mid-Atlantic States, DC Central Kitchen established the Healthy Corners Program to bring healthy food into these communities. By working with convenience stores, schools, afterschool programs, summer camps, and health care providers, Healthy Corners has become a sustainable healthy food distribution system. The program also promotes lasting behavior and attitude changes by empowering children and families with the resources they need to shop, cook, and eat in healthier ways. The initiative has also been good for local business, as the program drives \$69,000 in retail sales for corner stores and 96% of store owners report that Healthy Corners has increased the number of customers for their store.¹⁷¹

MEMPHIS BUSINESS GROUP ON HEALTH (MBGH) — The Memphis Business Group on Health, an employer-led action collaborative, plays a significant and vital role in promoting and supporting health in Memphis, Tennessee. Their CEO Culture of Health Initiative promotes healthy company policies, programs, benefits, and cultures. While many initiatives engage the individual, workplace, and community, CEO Culture of Health focuses on empowering CEOs to become health champions. By driving health initiatives from the C-Suite, the program is helping transform the well-being of Memphis communities. Today, there are 64 participating employers, representing approximately 70,000 employees and about 12% of Memphis’s county workforce. Participating employers have indicated that the greatest benefits they receive from creating Cultures of Health in their organizations are recruitment, retention, and productivity.¹⁷²

¹⁶⁹ <https://www.uschamberfoundation.org/modal-content/46358>

¹⁷⁰ <https://www.johnhancock.com/citizenship/healthy-living.html>

¹⁷¹ <https://www.uschamberfoundation.org/modal-content/46360>

¹⁷² <https://www.uschamberfoundation.org/health-means-business/healthy10-awards>

NOVO NORDISK — Novo Nordisk is making a multi-year investment in the health of Trenton’s children and families. Through a program called the Community Health Collaborative™, which is overseen by the NJ Partnership for Healthy Kids, Novo Nordisk is helping to cultivate healthy lifestyles among grade school children, including healthy food choices and physical activity, along with educational programming for their parents. The Collaborative supports the work of its member organizations in two areas: preventing early onset of type 2 diabetes and increasing the proportion of children at a healthy weight. Funding supports programs within four main pillars: empowering parents and caregivers; providing healthy food in schools; improving access to healthy, affordable foods; and increasing physical activity. Novo Nordisk’s Community Health Collaborative™ brings together Isles, Inc., The Boys & Girls Club of Mercer County, the YMCA of Trenton, the YMCA State Alliance, George Street Playhouse, GoNoodle, Wellness in the Schools (WITS), The College of New Jersey, and the Trenton Health Team. The collaboration works jointly on in-school and afterschool programming plus district-wide wellness policies and their implementation. In a city where 39% of the adults are deemed obese and 16% suffer from diabetes, the focus is on fostering a culture of health for students and their families through education, opportunities to be physically active, and support for great decisions about food and nutrition. Through dramatic presentations, school gardening, cooking demonstrations, taste tests, interactive technology, and targeted physical play activities and exercises, students, teachers, families, and school staff explore the physical, emotional, and academic benefits of a Culture of Health.¹⁷³

TARGET — Target expanded upon its long-standing partnership with Feeding America (FA) by supporting its Regional Produce Cooperatives (RPCs). The seven strategically-located RPCs are improving food banks’ efficiency and planning by helping to build the network’s capability to aggregate demand, expand the variety of produce available, and improve distribution of this healthy but highly-perishable food. Most importantly, they are increasing the amount of produce available to families and communities served by the FA network. Since the Southwest location launched in summer 2016, 14 million pounds of produce have shipped through the facility and distributed to the 21 food banks serving Texas. The other RPCs, which are in earlier phases of operation, have shipped 4.5 million pounds since May 2017.¹⁷⁴

UNILEVER — Unilever has set the following goals:

- By 2020, help more than a billion people take action to improve their health and well-being. By 2016 approximately 538 million people had been reached
- By 2020, use oral health improvement programs to encourage children and parents to brush day and night, aiming to change behavior of 50 million people. Between 2010 and 2016, 75 million people had been reached with oral health programs.
- By 2020, motivate 100 million people to take the Heart Age test
- Help to end hunger, achieve food security, and improve nutrition central to attaining the UN Sustainable Development Goal #2 related to Zero Hunger
- By 2020, double the proportion of its portfolio that meets the highest nutritional standards, based on globally recognized dietary guidelines. By 2016, 35% of their foods met the highest nutritional standards¹⁷⁵

¹⁷³ <https://trentonhealthteam.org/news-announcements/announcements/novo-nordisk-community-health-collaborative-focuses-healthy-lifestyles-trenton-youth/>

¹⁷⁴ Source: interviews between the authors and Target staff, November, 2017.

¹⁷⁵ <https://www.unilever.com/sustainable-living/>

Bibliography

Abebe, N. (2016). Companies Have the Opportunity and Responsibility to Improve Employee and Community Health and Wellbeing. *Diplomatic Courier*. Retrieved from <http://www.diplomaticcourier.com/companies-opportunity-responsibility-improve-employee-community-health-wellbeing/>; and interviews with Nebeyou Abebe over 2016 and 2017.

Accenture. Retrieved from <https://www.accenture.com/us-en/insight-consumer-healthcare-market-high-performance-business-research-2013>.

Aguilera & Ruth, V. et al. (2007). Putting the S Back in Corporate Social Responsibility: A Multilevel Theory of Social Change in Organizations. *Academy of Management Review*, 32.3, p. 836-863.

ALDI. Less is More with SimplyNature. Retrieved from <https://www.aldi.us/en/grocery-home/aldi-brands/simplynature/made-without-adding-over-125-ingredients>.

American Society for Healthcare Human Resources Administration. *The Impact of Depression on the Workplace*.

Babson College. Entrepreneurial Thought and Action. Retrieved from <http://www.babson.edu/about-babson/at-a-glance/Pages/entrepreneurial-thought-and-action.aspx>.

Bachrach, D., Pfister, H., Wallis, K. & Lipson, M. (2014). Addressing Patients' Social Needs: An Emerging Business Case for Provider Investment. *Manatt Health Solutions*.

Barnett, A., Birnbaum, H., Cremieux, P., Fredrick, A. & Slavin, M. (2000). The Costs of Cancer to a Major Employer in the United States: a case-control analysis. *American Journal of Managed Care*, 6(11), 1243-1251.

Bartels, W. & Fogelberg, T. (2016). Carrots & Sticks: Global Trends in Sustainability Reporting, Regulation, and Policy. KPMG, GRI, UNEP, *Centre for Corporate Governance in Africa*, p.9. Retrieved from www.carrotsandsticks.net.

Berns, M. et al. (2009). Sustainability and Competitive Advantage. *MIT Sloan Management Review*, 51(1), p. 19-26.

Berry, M. A. & Rondinelli, D. A. (1998). Proactive Corporate Environmental Management: a New Industrial Revolution. *Academy of Management Executive*, 12(2), p. 39-50.

Berry, M. D. (2013). History of Socially Responsible Investing in the U.S. Retrieved from <http://sustainability.thomsonreuters.com/2013/08/09/history-of-socially-responsible-investing-in-the-u-s/>.

BFIT. Health and Wellness Thematic ETF. Global X Funds.

Billion Dollar Roundtable. Retrieved from <http://www.billiondollarroundtable.org/>.

Blue Cross Blue Shield Association. (2017). Local Investments by Blue Cross and Blue Shield Companies and Foundations Advance Community Health. *The Corporate Responsibility Newswire*. Retrieved from http://www.csrwire.com/press_releases/40113-Local-Investments-by-Blue-Cross-and-Blue-Shield-Companies-and-Foundations-Advance-Community-Health?tracking_source=rss.

Brazelton, B. MD. (2016). Economic Medicine for Lifelong Health. *The Huffington Post*. Retrieved from http://www.huffingtonpost.com/t-berry-brazelton-md/economic-medicine-For-lif_b_10795490.html.

Brookings Institution. (2015). An in-Depth Look at the Lifetime Economic Costs of Obesity. Retrieved from <https://www.brookings.edu/events/an-in-depth-look-at-the-lifetime-economic-costs-of-obesity/>

Brower, J. & Mahajan, V. (2012). Driven to be Good: A Stakeholder Theory Perspective on the Drivers of Corporate Social Performance. *Journal of Business Ethics*, 117(2), 313-331.

Build Our Kids' Success. We Can't Sit Still. Retrieved from <https://www.bokskids.org/About-boks>.

Business for Social Responsibility. (2013). *A New CSR Frontier: Business and Population Health*. Retrieved from http://www.bsr.org/reports/BSR_A_New_CSR_Frontier_Business_and_Population_Health.pdf.

- Calvill-King, L., Arnold, D. & Eubank, K. J. et al. (2013). Impact of Social Factors on Risk of Readmission or Mortality in Pneumonia and Heart Failure: Systematic Review. *Journal of General Internal Medicine*, 28(2), p. 269-282.
- Cause Good. Proven Cause Marketing Examples. Retrieved from <https://causegood.com/blog/cause-marketing-examples/>.
- CDC Foundation. Reducing the Risk of Heart Disease and Stroke: A Six-Step Guide for Employers. Retrieved from https://www.cdc.gov/dhdSP/pubs/docs/six_step_guide.pdf.
- CDC. Social Determinants of Health. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>.
- Centene Corporation. Changing Lives in Behavioral Health – Illinois. Retrieved from <https://www.centene.com/social-respons/changing-lives-behavioral-health.html>.
- Center for Climate and Energy Solutions. Climate Solutions. Retrieved from <https://www.c2es.org/energy/use/industrial>.
- Center for Disease Control and Prevention. (2015). Worker Illness and Injury Costs U.S. Employers \$225.8 Billion Annually. Retrieved from <http://www.cdcfoundation.org/pr/2015/worker-illness-and-injury-costs-us-employers-225-billion-annually>.
- Centers for Medicare & Medicaid Services. National Health Expenditures 2015 Highlights. Retrieved from <https://www.cms.gov/research-statistics-data-and-systems/statistics-trends-and-reports/nationalhealthexpenddata/downloads/highlights.pdf>.
- Ceres. Press Releases. Retrieved from <https://www.ceres.org/press/press-releases/New-report-u.s.-power-sector-continues-to-reduce-air-pollution-emissions-in-advance-of-epa2019s-clean-power-plan>.
- Chetty, R., et al. (2014). Where is the Land of Opportunity? The Geography of Intergenerational Mobility in the United States. *The Quarterly Journal of Economics* 129, no. 4, p. 1553-1623, doi: 10.1093/qje/qju022.
- The Conference Board of Canada. (2008). Healthy People, Healthy Performance, Healthy Profits: The Case for Business Action on the Socio-Economic Determinants of Health.
- County Health Rankings. (2012). County Health Rankings Model. Retrieved from <http://www.countyhealthrankings.org/resources/county-health-rankings-model>.
- CVS. (2016). 2016 CSR Report Summary. Retrieved from <https://cvshhealth.com/sites/default/files/2016-csr-report-summary.pdf>.
- Davis, M., Davis, C., Davis, G. F. & Glynn, M. A. (2007). Community Isomorphism and Corporate Social Action. *Academy of Management Review*, 32.3, p. 925-945.
- Delmas, M. A. & Toffel, M. W. (2008). Organizational Responsiveness to Environmental Demands: Opening the Black Box. *Strategic Management Journal*, 29(10), 1027-1055.
- Densolow, Diane, Hooker, Robert, E. & Guinipero, L. C. (2012). Purchasing and Supply Management Sustainability: Drivers and Barriers. *Journal of Purchasing & Supply Management*, 18, p. 258-269.
- Donovan, W. (2016). A Short History of Socially Responsible Investing. Retrieved from <https://www.thebalance.com/a-short-history-of-socially-responsible-investing-302557>.
- DSM. Healthy Diets for All Within Planetary Boundaries. Retrieved from <http://www.dsm.com/corporate/sustainability/nutrition.html>.
- Dyrda, L. (2016). 12 Healthcare Startup Incubators and Accelerators to Know. *Becker's Health IT and CIO Review*.
- Eccles, R. G., Perkins, K. M. & Serafeim, G. (2012). How to Become a Sustainable Company. *MIT Sloan Management Review*, 53(4), p. 43-50. Retrieved from http://www.hbs.edu/faculty/Publication%20Files/SMR_Article_EcclesMillerSerafeim_77d4247b-d715-447d-8e79-74a6ec893f40.pdf.
- Economic Costs of Diabetes in the U.S. in 2012. (2012). *Diabetes Care* 2013; 36:1033-1046. *Diabetes Care* 36(6), 1797-1797.
- EIA. (2016). U.S. Energy-Related Carbon Dioxide Emissions in 2015 are 12% Below Their 2005 Levels. Retrieved from <https://www.eia.gov/todayinenergy/detail.php?id=26152>.
- Energy Star. About Energy Star. Retrieved from <https://www.energystar.gov/about>.
- Exploring the Business Case for Investment. (2015). *JOEM*, volume 00, number 00, p. 7./15/improving-population-health-the-business-community-imperative/.
- Felitti, V. J. et al. (1998). Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine* 14, no. 4, p. 245-458.

- Finkelstein, E. A., Fiebelkorn, I. C. & Wang, G. (2005). The Cost of Obesity Among Full-Time Employees. *American Journal of Health Promotion*, 20(1): p. 45-51.
- FITS. Health and Fitness ETF. *Janus Capital Group*.
- Fombrun, C. J. (2007). Essentials of Corporate communication. *Abingdon & New York: Routledge*.
- Ford, E. S. & Murphy, L. B. et al. (2015). Total and State-Specific Medical and Absenteeism Costs of COPD Among Adults Aged 18 Years in the United States for 2010 and Projections Through 2020. *Chest*, 147(1), p. 31-41.
- The Forum for Sustainable and Responsible Investment. (2016). Report on U.S. Sustainable, Responsible and Impact Investing Trends. Retrieved from [http://www.ussif.org/files/SIF_Trends_16_Executive_Summary\(1\).pdf](http://www.ussif.org/files/SIF_Trends_16_Executive_Summary(1).pdf).
- FSC. (2015). The Global Volume and Market Share of FSC-Certified Timber. Retrieved from <https://ic.fsc.org/en/news/id/1234>.
- Galea, S., Tracy, M. & Hoggatt, K. J. et al. (2011). Estimated Deaths Attributable to Social Factors in the United States. *American Journal of Public Health* 101(8), pg. 1456-1465.
- Gallup-Healthways. (2013). Well-Being Index. Retrieved from http://populationhealth.humana.com/documents/Humana_BoldGoal_2017_ProgressReport-v2.pdf.
- Garfunkel, D. (2015). Healthy Communities, Healthy Companies: Engaging the Private Sector in Collective Impact. *FSG*. Retrieved from <http://www.fsg.org/blog/healthy-communities-Healthy-companies-engaging-private-sector-collective-impact>.
- Goetzel, R. Z., Gibson, T. & Short, M. E. et al. (2010). A Multi-Worksite Analysis of the Relationships Among Body Mass Index, Medical Utilization, and Worker Productivity. *Journal of Occupational and Environmental Medicine*, 51(1): S52-8.
- Goh, J., Pfeffer, J. & Zenios, S. A. (2016). The Relationship Between Workplace Stressors and Mortality and Health Costs in the United States. *Management Science*, 62(2), p. 608-628.
- Green Biz. Corporate Sustainability Practices – Waste Reduction Report. Retrieved from http://greenbiz.com/rs/info.greenbizgroup/images/Corporate_Sustainability_Practices_-_Waste_ReductionReport.pdf?mkt_tok=3RkMMJWWf9wsRojUajOZKXonjHpfSx86uuvvUKeylMI%2FOER3fOvrPUfGjI4FSsdkl%2BSDLwEYgJlv6SgFSLHEMa5qw7gMXRQ%3D.
- GRI. (2018). G4 Sustainability Reporting Guidelines. Retrieved from <https://www.globalreporting.org/information/g4/Pages/default.aspx>.
- Grotzel, R. Z., Pei, X. & Tabrizi, M. J. et al. (2012). Ten Modifiable Risk Factors are Linked to More Than One-Fifth Employer-Employee Health Care Spending. *Health Affairs*, 31(11): p. 2474-2484.
- Hagenstein, P. R. et al. (2003). *Air emissions from animal feeding operations: Current knowledge, future needs*. National Academies Press.
- Hanifan, G. L., Sharma, A. E. & Mehta, P. (2012). Why a Sustainable Supply Chain is Good Business. *Outlook*, (3). Retrieved from https://www.accenture.com/t20150522T061611_w_/us-en/_acnmedia/Accenture/Conversion-Assets/Outlook/Documents/1/Accenture-Outlook-Why-Sustainable-Supply-Chain-is-Good-Business.pdf#zoom=50.
- Harvard School of Public Health & World Economic Forum. (2011). The Global Economic Burden of Non-Communicable Diseases.
- Healthy Weight Commitment Foundation. About HWCF. Retrieved from <http://www.healthyweightcommit.org/about/>.
- Heiman, H. J. & Artiga, S. (2015). Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity. Retrieved from <http://kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/>.
- Hendricks, J. (2012). When People and Industry Live Side-by-Side: Health Impacts of PM Pollution. *Physicians for Social Responsibility*. Retrieved from <http://www.psr.org/environment-and-health/environmental-health-policy-institute/responses/when-people-industry-live-side-by-side.html?referrer>.
- Heneghan, C. (2016). Mars to Reduce Salt and Sugar, Use 'Occasional' Food Labels in \$20M Program. *Food Dive*. Retrieved from <http://www.fooddive.com/news/mars-to-reduce-salt-and-sugar-use-occasional-food-labels-in-20m-program/417509/>.
- HERO (2014). Environmental Scan: Role of Corporate America in Community Health and Wellness. *Hero Employer*, Community Collaboration Committee.
- Hessekiel, D. (2015). The 5 Most Important Cause Marketing Trends of 2015. *Forbes*. Retrieved from <https://www.forbes.com/sites/davidhessekiel/2015/12/16/the-5-most-important-cause-marketing-trends-of-2015/#6c8f412f426>.

- Hower, M. (2015). Could Sustainability 'Survey Fatigue' Launch a \$1 billion Industry? *Green Biz*. Retrieved from <https://www.greenbiz.com/article/gisr-program-cuts-core-esg-research-and-ratings>.
- Humana. (2015). Humana Celebrates Health Benefits of National Parks. Retrieved from <http://www.multivu.com/players/English/7606451-humana-health-national-parks/>.
- Humana. (2015). Humana CSR Report. Retrieved from <http://www.humanacsrreport.com/progress/pdfs/Humana%202015%20Progress%20Report-FINAL-web.pdf>.
- Humana. Your Practice Newsletter: Healthy Days. Retrieved from <https://www.humana.com/provider/support/publications/your-practice-newsletter/healthy-days>
- IBIS World. (2017). Corporate Wellness Services – U.S. Market Research Report. Retrieved from <https://www.ibisworld.com/industry/corporate-wellness-services.html>.
- Idle, T. (2016). Our Use of Eco-Labels is Set to Soar – For Products, Brands... and People? Retrieved from http://www.sustainablebrands.com/news_and_views/marketing_comms/tom_idle/our_use_eco-labels_set_soar_%E2%80%93_products_brands_people.
- Institute of Medicine and National Research Council. (2013). U.S. Health in International Perspective: Shorter Lives, Poorer Health. Washington, DC.
- Institute of Medicine. (2014). Business Engagement in Building Healthy Communities: Workshop Summary. Retrieved from <http://www.iom.edu/Reports/2014/BusinessEngagement-Building-Healthy-Communities.aspx>.
- Ioannou, I. & Serafeim, G. (2016). The Consequences of Mandatory Corporate Sustainability Reporting: Evidence from Four Countries.
- Jacobs, J. (2016). An Infographic on the Health & Wellness Economy. Retrieved from <http://www.iom.edu/Reports/2014/BusinessEngagement-Building-Healthy-Communities.aspx>.
- Jargowsky, P. A. (2015). The Architecture of Segregation: Civil Unrest, the Concentration of Poverty, and Public Policy. *The Century Foundation*. Retrieved from http://www.tcf.org/assets/downloads/Jargowsky_ArchitectureofSegregation.pdf.
- Jordan, H. (2015). Dow Chemical Director: Health Affects 'Every Aspect' of Business Success. Retrieved from http://www.mlive.com/business/mid-michigan/index.ssf/2015/01/health_experts_talk_about_why.html.
- Kellogg's. (2016). Corporate Responsibility Update. Retrieved from http://www.kelloggcompany.com/content/dam/kelloggcompanyus/corporate_responsibility/pdf/2016/Kelloggs_CRR_2015%20FINAL.pdf.
- Kellogg's. (2017). *We're Cutting Down on Sugar*. Retrieved from https://www.kelloggsnutrition.com/en_UK/knowledge/featured/reducing_sugar.html.
- Kindig, D. A., Isham, G. J. & Siemering, K. Q. (2013). The Business Role in Improving Health: Beyond Social Responsibility. *National Academy of the Sciences Institute of Medicine*.
- Kindig, D., & Cheng, E. (2013). Even as Mortality Fell in Most US Counties, Female Mortality Nevertheless Rose in 42.8 Percent of Counties From 1992 to 2006. The National Academies Press, *Health Affairs* 32(3): p. 451-458.
- Kowlessar, N. M., Goetzel, R. Z., Carls, G. S., Tabrizi, M. J. & Guindon, A. (2011). The Relationship Between 11 Health Risks and Medical And Productivity Costs for a Large Employer. *Journal of Occupational and Environmental Medicine*, 53(5), p. 468-477.
- Krieger, J. & Higgins, D. L. (2002). Housing and Health: Time Again for Public Health Action. *American Journal of Public Health*, 92(5), p. 758-768.
- Krom, K. (2016). Health and Wellness is the Next Trillion Dollar Industry. Retrieved from <http://www.iom.edu/Reports/2014/BusinessEngagement-Building-Healthy-Communities.aspx>.
- Lebrun-Harris, L. A., Baggett, T. P. & Jenkins, D. M. et al. (2013). Health Status and Health Care Experiences Among Homeless Patients in Federally Supported Health Centers: Findings from the 2009 Patient Survey. *Health Services Research*, 48(3), p. 992-1017.
- Magnan, S., Fisher, E., Kindig, D., Isham, G., Wood, D., Eustis, C., Backstrom, C. & Leitz, S. (2012). Achieving Accountability for Health and Health Care. *Minnesota Medicine*, 97(11).
- Makower, J. (2014). Why the World's Biggest Companies are Investing in Recycling. *Green Biz*. Retrieved from <https://www.greenbiz.com/blog/2014/08/18/why-worlds-biggest-companies-are-investing-recycling>.
- Mansfield, C. & Novick, L. F. (2012). Poverty and Health: Focus on North Carolina. *North Carolina Medical Journal*, 73(5), p. 366-373.

- Marmot, M. et al. (2008) Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health. *The Lancet* 372, no. 9650, p. 1661-1669.
- Mars. Cocoa: Caring for the Future of Cocoa. Retrieved from <http://www.mars.com/global/sustainability/raw-materials/cocoa>.
- Matthews, T. J. & MacDorman, M. F. (2012). Infant Mortality Statistics from the 2008 Period Linked Birth/Infant Death Data Set. *National Vital Statistics Reports*, 60(5).
- McKinsey Global Energy and Materials. Unlocking Energy Efficiency in the U.S. Economy. *Green Building Law Blog*. Retrieved from http://www.greenbuildinglawblog.com/uploads/file/mckinseyUS_energy_efficiency_full_report.pdf.
- Metler, Z. (2015). Hearst Health Blog: Lowering Blood Pressure Can Save Employers Millions. *Hello Heart*. Retrieved from <https://helloheart.com/corporate-wellness-and-benefits-manager-stats/>.
- National Academies of Sciences, Engineering, and Medicine. (2015). Business Engagement in Building Healthy Communities: Workshop & Summary.
- National Center for Health Statistics. (2011). Special Feature on Socioeconomic Status and Health. *NCHS*.
- National Minority Supplier Development Council. Retrieved from <http://www.nmsdc.org/>.
- National Partnership for Action to End Health Disparities. Glossary of Terms. *U.S. Department of Health and Human Services, Office of Minority Health*. Retrieved from <http://minorityhealth.hhs.gov/npa/templates/browse.aspx?lvl=1&lvlid=34>.
- NBCH & Drive4COPD. (2012). Action Brief: COPD, A Major Driver of Avoidable Health Care Costs. Retrieved from <https://www.greenbiz.com/article/gisr-program-cuts-core-esg-research-and-ratings.NBCH>. Action Brief: Breast Cancer. Retrieved from http://www.nbch.org/nbch/files/ccLibraryFiles/Filename/000000003417/NBCH_BREAST%20CANCER_FNL.pdf.
- Nestlé. (2013). Nestlé in Society. Retrieved from http://www.nestle.com/asset-library/Documents/Library/Documents/Corporate_Social_Responsibility/Nestle-CSV-Summary-Report-2013-EN.pdf.
- Nestlé. Home Page. Retrieved from Nestlé.com.
- Nestlé. Inclusive and Accountable Governance. Retrieved from <http://www.nestle.com/csv/what-is-csv/governance>.
- P&G. (2013). 2013 Sustainability Report. Retrieved from http://www.pg.com/en_US/downloads/sustainability/reports/Pg_2013_Sustainability_Report.pdf
- Partnership for a Healthier America. Our Partners. Retrieved from <http://ahealthieramerica.org/our-partners/>.
- PepsiCo. (2013). Performance with a Purpose: Sustainability Report 2013. Retrieved from http://www.pepsico.com/docs/album/sustainability-reporting/pep_2013_sustainability_report.pdf?sfvrsn=2.
- PricewaterhouseCoopers LLP. (2016). Health and Well-being Touchstone Survey Results. Retrieved from <https://www.pwc.com/us/en/hr-management/publications/assets/pwc-touchstone-survey-2016.pdf>.
- Pronk, N. P. (2015). Fitness of the U.S. workforce. *Annual Review of Public Health*, 36, p. 131-149.
- Pronk, N. P., Baase, C., Noyce, J., & Stevens, D. E. (2015). Corporate America and community health: exploring the business case for investment. *J Occup Environ Med*. 2015 May; 57(5): p. 493-500.
- Public Health is ROI. (2013). National Public Health Week. *American Public Health Association*.
- Quelch, J. & Bourdeau, E. (2016). Building a Culture of Health: A New Imperative for Business. *Springer Briefs in Public Health*.
- Ramirez, B., Laura, K., Baker, Elizabeth, A. & Metzler, M. (2008). Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health (PDF). *United States Center for Disease Control and Prevention*.
- Rand, National Business Group on Health & Fidelity Investments. Corporate Spending on Wellness Incentives Per Employee in the United States from 2010 to 2015 (in U.S. Dollars). *Statista*. Retrieved from <http://www.statista.com/statistics/420999/corporate-spending-on-wellness-incentives-per-employee-us/>.
- Raphael, D. (2014). Beyond policy analysis: The Raw Politics Behind Opposition to Healthy Public Policy. *Health Promotion International*, 30: p. 380-396, doi:10.1093/heapro/dau044. PMID 24870808.
- Rasmussen, B., Sweeny, K. & Sheehan, P. (2016). Health and the Economy: The Impact of Wellness on Workforce Productivity in Global Markets. *U.S. Chamber of Commerce*.
- Redins, L. (2006). The Evolution of Socially Responsible Investing. Retrieved from http://www.enn.com/top_stories/article/4540.

- Reynolds, G. (2018). A Before-School Exercise Program May Help Children Thrive. *New York Times*. Retrieved from <https://www.nytimes.com/2018/02/14/well/move/a-before-school-exercise-program-may-help-children-thrive.html?smid=pl-share>.
- Robert Wood Johnson Foundation. (2016). Issue Brief: Why Healthy Communities Matter to Businesses. Retrieved from <https://www.rwjf.org/en/library/research/2016/05/why-healthy-communities-matter-to-business.html>
- Robert Wood Johnson Foundation. Building a Culture of Health. Retrieved from <http://www.rwjf.org/en/how-we-work/building-a-culture-of-health.html>.
- Rochlin, S., Bliss, R., Jordan, S. & Kiser, C. (2015). Project ROI: Defining the Competitive and Financial Advantages of Corporate Responsibility and Sustainability. *IO Sustainability*.
- Roth, B., Roth, P. & Roth, K. (2000). Why Companies Go Green: A Model of Ecologic Responsiveness. *The Academy of Management*, 43(4), 171-736.
- RWJF. (2016). Using Social Determinants of Health Data to Improve Health Care and Health: A Learning Report. Retrieved from <https://healthleadsusa.org/wp-content/uploads/2016/06/RWJF-SDOH-Learning-Report.pdf>, p. 21-22.
- Seligman, H. K., Bolger, A. F. & Guzman, D. et al. (2014). Exhaustion of Food Budgets at Month's End and Hospital Admissions for Hypoglycemia. *Health Affairs*, 33(1), p. 116-123.
- Seligman, H. K., Laraia, B. A. & Kushel, M. B. (2010). Food Insecurity is Associated with Chronic Disease Among Low-Income NHANES Participants. *Journal of Nutrition*, 140(2), p. 304-10.
- Seligman, Laraia, Kushel. (2010). Food Insecurity is Associated with Chronic Disease. *Journal of Nutrition*, 2010 Feb; 140(2): 304-310.
- Singh, G. K., Siahpush, M. & Kogan, M. D. (2010). Neighborhood Socioeconomic Conditions, Built Environments, and Childhood Obesity. *Health Affairs* 29, no. 3, p. 503-512, doi: 10.1377/hlthaff.2009.0730.
- Strully, K. W. (2009). Job Loss and Health in the U.S. Labor Market. *Demography*, 46(2), p. 221-246.
- Stuff, J. E., Case, P.H. & Szeto, K. L. et al. (2004). Household Food Insecurity is Associated with Adult Health Status. *Journal of Nutrition*, 134(9), p. 2330-2335.
- Sustainability Accounting Standards Board. (2018). SASB Industry Briefs. Retrieved from <https://library.sasb.org/sasb-industry-briefs/>.
- Target. (2015). 2015 Target Corporate Social Responsibility Report. Retrieved from https://corporate.target.com/_media/TargetCorp/csr/pdf/2015-Corporate-Social-Responsibility-Report.pdf.
- Target. Wellness. Retrieved from <https://corporate.target.com/corporate-responsibility/Wellness>.
- Tilton, C. (2016). Novo Nordisk Community Health Collaborative Focuses on Healthy Lifestyles for Trenton Youth. *Trenton Health Team*. Retrieved from <https://trentonhealthteam.org/news-announcements/announcements/novo-nordisk-community-health-collaborative-focuses-healthy-lifestyles-trenton-youth>.
- Trust For America's Health. (2008). Report: Prevention for a Healthier America. Retrieved from <http://healthyamericans.org/reports/prevention08/>
- U.S. Chamber of Commerce Foundation. BD Helping Build Healthy Communities. Retrieved from <https://www.uschamberfoundation.org/modal-content/46351>.
- U.S. Chamber of Commerce Foundation. Duke Energy Helping Home Fund. Retrieved from <https://www.uschamberfoundation.org/modal-content/46360>.
- U.S. Chamber of Commerce Foundation. Get HYPE Philly! Retrieved from <https://www.uschamberfoundation.org/modal-content/46358>.
- U.S. Chamber of Commerce Foundation. Healthy 10 Awards. Retrieved from <https://www.uschamberfoundation.org/health-means-business/healthy10-awards>.
- U.S. Chamber of Commerce Foundation. Healthy Corners. Retrieved from <https://www.uschamberfoundation.org/modal-content/46360>.
- U.S. Chamber of Commerce Foundation. Los Angeles Fruit and Vegetable Prescription Program. Retrieved from <https://www.uschamberfoundation.org/modal-content/46363>.
- U.S. Energy Information Administration. FAQ's. Retrieved from <http://www.eia.gov/tools/faqs/faq.cfm?id=92&t=4>.

- U.S. Energy Information Administration. Projections. Retrieved from <http://www.eia.gov/outlooks/aeo/supplement/renewable/pdf/projections.pdf>.
- U.S. Energy Information Administration. Today in Energy. Retrieved from <http://www.eia.gov/todayinenergy/detail.php?id=26212>.
- U.S. Environmental Protection Agency. Clean Air Act Overview: Progress Cleaning the Air and Improving People's Health. Retrieved from <https://www.epa.gov/clean-air-act-overview/progress-cleaning-air-and-improving-peoples-health>.
- Unilever. Sustainable Living. Retrieved from <https://www.unilever.com/sustainable-living/>.
- United States Department of Agriculture. BioPreferred. Retrieved from <https://www.biopreferred.gov/BioPreferred/>.
- United States Geological Survey. (2010). Industrial Water Use. Retrieved from <https://water.usgs.gov/watuse/wuin.html>.
- Virgin Pulse. (2016). Clocking in and Checking Out: Why Your Employees May Not Be Working at Optimal Levels and What you Can Do about It. Retrieved from http://community.virginpulse.com/en/workplacepresenteeism?utm_source=resourcespage&utm_medium=website&utm_campaign=CAM-2016-04-gc-presenteeism.
- Volkov, M. Trust and Integrity: The Value of a Company's Reputation. Retrieved from <http://www.corporatecomplianceinsights.com/trust-integrity-value-companys-reputation/>.
- Volvo. Sustainability Reports. Retrieved from <http://www.volvogroup.com/en-en/investors/reports-and-presentations/sustainability-reports.html/>.
- Walmart. (2014). Corporate Responsibility Report. Retrieved from <http://cdn.corporate.walmart.com/db/e1/b551a9db42fd99ea24141f76065f/2014-global-responsibility-report.pdf>.
- Webber, A. & Mercure, S. (2010). Improving Population Health: The Business Community Imperative. *Preventing Chronic Disease Dialogue*, Volume 7: No. 6. Retrieved from <https://blogs.cdc.gov/pcd/2010/10/15/improving-population-health-the-business-community-imperative/>.
- Webber, A. & Mercure, S., (2010). Improving Population Health: The Business Community Imperative. *Centers for Disease Control and Prevention Preventing Chronic Disease Dialogue Volume 7* : No. 6. Retrieved from <https://blogs.cdc.gov/pcd/2010/10>
- Wernick, A. (2016). Can Coffee Become the World's First 100 Percent Sustainable Agricultural Product? *Public Radio International*. Retrieved from <https://www.pri.org/stories/2016-03-20/can-coffee-become-world-s-first-100-percent-sustainable-agricultural-product>.
- Wilkinson, R. & Marmot, M. (2003). The Social Determinants of Health: The Solid Facts (PDF), Second Edition. *World Health Organization Europe*. ISBN 978-92-890-1371-0.
- Winston, A. Pivot Goals. The Sustainability Goals of the World's Largest and Leading Companies: An Initiative of Winston Eco-Strategies. Retrieved from <http://www.pivotgoals.com/>.
- Wolf, S. H. & Braveman, P. (2011). Where Health Disparities Begin: The Role of Social and Economic Determinants—And Why Current Policies May Make Matters Worse. *Health Affairs*, 30(10), p. 1852-1859.
- World Health Organization. (2011). Rio Political Declaration on Social Determinants of Health. P. 3.
- Zurich Financial Services. Share Price is Always Vulnerable. Retrieved at https://web.archive.org/web/20080503043118/http://www.zurich.com/main/productsandsolutions/industryinsight/2004/june2004/industryinsight20040603_003.html