The social determinants of health (SDOH) have become a mainstay in public health teaching and understanding but often neglect the role of commercial entities and practices that powerfully affect population health. The edited *The Commercial Determinants of Health* endeavours to fill this gap and represents a benchmark volume that provides a “conceptual and empiric state” (p. 5) of a term first coined by Kickbusch (2012) and Hastings (2012). Similar to the SDOH, the commercial determinants of health (CDOH) provide both an established research field and a conceptual framework that seeks to understand the underlying factors that shape population health. While defining the parameters of CDOH is a focus for this book, given the term’s recent emergence (see chapters Lacy-Nichols et al., 2023; Maani et al., 2023), the salient interdisciplinary underpinning of CDOH is often located in the influence of commercial actors and their strategies and practices. In this, for example, we can point to the political lobbying and influencing activities that corporations engage in to protect the design, sale, and promotion of health-harming consumer products such as sugar-sweetened beverages, ultra-processed foods, and alcohol. One also only needs to recount the tobacco industry’s successful marketing campaigns to expand and retain a cigarette-using consumer base and their efforts to divert attention away from the scientific links between their products and health as additional examples of how the CDOH show up.

The volume consists of six sections and 34 chapters, offering a comprehensive introductory overview of the policy and research implications and health impacts of CDOH. The interrelated range of topics the contributors cover will look familiar to those who have studied corporate political activities and how commercial entities attempt to reframe health issues with the ultimate aim of diverting attention away from the population health impacts of their actions. It has become a common strategy for commercial actors responsible for manufacturing, selling, and distributing health-harming products and commodities to engage in a multi-faceted set of actions that shape, influence, or delay the production and dissemination of science and research that may impede or damage the prospect of profits or market share (see chapters Bero, 2023; Fabbri & Gilmore, 2023). The book also takes on the topic of how commercial entities mitigate the efficacy of conflict-of-interest rules that govern the interactions between researchers, institutions,
and industry. This often results in positioning producers and manufacturers of these commodities and products as a necessary part of the solution to address noncommunicable disease incidences, despite their being, in part or wholly, the cause or source of this harm (see chapters Adam, 2023; Collin et al., 2023; Cullerton & White, 2023). Within this overall strategy, often referred to as "the corporate playbook," a key facet includes litigating potential threats—including governments—and influencing the policy-making environment and public discourse to protect and sustain the sale of health-harming products and practices (see chapters Gómez, 2023; Hilton, 2023), not only in affluent countries but in low- and middle-income jurisdictions globally (see chapter Abdalla et al., 2023).

While the term CDOH may have emerged only in the last 10 years, questions about the role of commercial actors' influence on public policy that negatively impacts health can be found going back to the 19th century, especially when viewed through the lens of the history of the corporation and its influence on culture and society (see chapter Tomes, 2023). The contributors build and reflect on this longstanding research and advocacy. The set of sector case studies profiled in the book provides a strong primer on the state of research and action, starting with the well-documented impact of tobacco industry strategies and tactics (see chapter Gilmore & Dance, 2023). A focus on the tobacco industry is often seen as a jumping-off point for understanding the blueprint of other commercial entities to delay, weaken, or prevent public health actions (Brownell & Warner, 2009). The contemporary history of tobacco industry interference in preventing effective public policy is also rich and well documented outside of this volume, and is worth consideration to understand today's current state of the commercial determinants of health and policy-making processes (Brandt, 2007; Cunningham, 1996; Proctor, 2012; Robinson, 2021). Despite the relative success and lessons learned from global efforts to counter tobacco industry strategies through national policy frameworks, including Canada's frameworks and the World Health Organization's Framework Convention on Tobacco Control, the corporate political activities first initiated or emboldened by the tobacco industry are now being re-enacted, modified, and innovated in various ways by the alcohol (see chapters Stockwell & Hobin, 2023), sugar-sweetened beverage (Crosbie et al., 2023), fossil fuel (van Schalkwyk et al., 2023), and gambling industries (van Schalkwyk & Cassidy, 2023). Together these sectors continue to represent a source of significant harm to population (and planetary) health.

Beyond the individual case studies, there are several cross-cutting industry mechanisms that each of these sectors deploys. One of these mechanisms includes marketing (see chapter Pettigrew & Jones, 2023) and is often characterized as utilizing a successful combination of the four "P"s: price, product, promotion, and place. Another cross-sector mechanism that is commonly used to reframe health issues and distract political and community focus from the impacts of unhealthy products is the integration of corporate social responsibility initiatives (see chapter Paichadze et al., 2023) into the company's public and government relations and marketing campaigns. A corporate social responsibility initiative (often simply referred to by its acronym, CSR) is aimed at showcasing the company's societal contributions through funding grants to community groups, sponsorship of amateur sports and physical activity, and cause marketing to show support for certain social issues—such as breast cancer awareness—focused on individual action rather than upstream healthy public policies (p. 157). In a Canadian context, we routinely see CSR manifested in sponsorship of youth sports, which is often used as a foil by the food industry to prevent, dilute, or delay restrictions on marketing to children. A typical food industry refrain in opposition to marketing restrictions will involve threats to remove these funding and sponsorship opportunities if advertising to youth and children is curtailed. The book also examines the ability of corporations to exercise power beyond lobbying and how this power has
become structurally embedded in various national and international policy-making mechanisms and environments (see chapter Foeks, 2023). In particular, cost-benefit analysis processes and regulatory oversight bodies are identified as key examples of how corporate power has the potential to become integrated into political decision-making.

The final two sections of the volume seek to shine a light on the way forward and allow us to think about the promise of future CDOH research and practice, including the role of policy process theories and teaching. While the contributors outline the necessary policy measures and the need for involvement of civil society and researchers to address the CDOH (see chapters Casswell, 2023; Mialon et al., 2023), the volume does not lay out or debate how change would occur in a systematic way. There is considerable space left open to explore and elaborate on how policy process theories, such as the advocacy coalition framework or punctuated equilibrium theory (among many others), play a role in helping to understand the underlying conditions and factors that result in altering the trajectory of the CDOH. A potential direction for future focus here could include a project like Weible and Cairney (2021) that translates and applies policy process theory to changing the CDOH. Equally, the book makes a compelling case to insert the CDOH into teaching within schools of public health, community epidemiology, and social science faculties, the subject deserving an appropriate level of attention to prepare scholars and practitioners to study and address the various forces that lie at the core of the CDOH (see chapter Freudenberg & Crosbie, 2023).

To end, a necessary preoccupation of the book is the focus on the marketing and sale of health-harming products and commodities—but what about those types of commercial practices that could be considered more health-promoting, such as employment that the private sector provides? How we come to terms with what could be considered health-promoting under the rubric of CDOH will be critical, not only conceptually but also in formulating how civil society actors and researchers frame their messaging during successful interactions with policy-makers and the broader public. Answers to the question of how to reconcile these potential contradictions and tensions of the positive and negative impacts of commercial activity will likely be found in the rich, nuanced experiences of community and advocacy coalitions both nationally and internationally, and our task will be to learn, document, and emulate what is successful in these attempts. *The Commercial Determinants of Health* provides the map to navigate and broaden the borders and scope of that conversation, as well as many other conversations related to population health.

**References**


