Business and health: A research agenda post-Covid-19

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Abstract
Despite some work dealing with occupational health and marketing unhealthy products, the business and society largely ignores the impacts of business on health. Focusing on employees and consumers, the literature does not take into account the impacts of business on the health of community members in general. Given work in such fields as public health, geography, and history, there is an ample basis upon which to construct a new line of research for business and society scholars—business and health. This essay develops ideas on how such a line of inquiry might proceed.

KEYWORDS
business and society, public health

Although the origin of the pandemic is uncertain, whether it is a result of transmission from animal to human populations (zoonosis) or through some sort of lab accident at the Wuhan Institute of Virology (Maxmen & Mallapaty, 2021), one can agree that the coronavirus has focused our attention on the field of emerging infectious diseases (EIDs). In the first few weeks after the lock down, many scholars were obsessed with coronavirus and its impact on society. Numerous opinion pieces were published within a few months of the initial lockdowns around the world, all trying to make sense of this unprecedented (for our generation) set of circumstances.

Similarly, my colleagues and I proposed several literature reviews based on the theme of business and health. Our proposals were either rejected or accepted with significant modifications. One of the common concerns was that such a literature does not yet exist, or is so incipient, that it cannot be reviewed. Amazingly, we found that incipient literatures did exist, but in...
allied fields like public health, rather than in management in general or business and society in particular.

Yes, there was an occupational health literature, and colleagues in operations management had long made contributions to this literature. There are literatures on the healthcare and pharmaceutical industries. But the pandemic drew our attention to the impact of ordinary business on health outside the walls of the business firm or its value chains. So we began an exploration of available sources and came upon three bodies of literature: EIDs, commercial determinants of health (CDOH), and trade and health. The first two are mostly derived from public health, while the third is interdisciplinary, drawing deeply from history!

The immediate connection of Covid-19 to health was through the public health literature on EIDs. This literature examines the causes under which new diseases enter the human population. Although the definition of an EID varies, the definitions generally look at the number of years from the entrance of the disease to the human population, even though it may have existed for many years, even centuries in animal populations. So EIDs might be those that entered the human population with the last 20 years or some other number of years. Recent EIDs include the swine flu of 2008 and the SARS virus that emerged in Hong Kong. It includes dengue, zika, chikungunya, and HIV-AIDS. Even Lyme disease, which emerged in the US Northeast, falls in this group. What does business have to do with these diseases? In many, if not all, cases, the transmission between animal and human populations occurred as a result of increasing encroachment of humans on areas formerly the domain of wildlife. This pressure most commonly occurs through urbanization. Clearly, industry is leading the way resulting in deforestation and stressing wildlife habitats. Stressed wildlife have lower defenses making them susceptible to infection from all sorts of viruses, which then are likely to be transmitted to humans within close range. In addition to urbanization, businesses also facilitate the spread of EIDs through travel and tourism.

The CDOH is a new field within public health that has broken off from the social determinants of health. It deals with non-communicable diseases like obesity, diabetes, and cardiovascular diseases that are often the result of lifestyle choices. Here, business takes an even more direct role as it engages in marketing and other practices that encourage the consumption of products unhealthy products, especially those laden with salt, sugar, and fat. Furthermore, business actively lobbies government for lax regulation which permits access to tobacco, alcohol, and firearms.

The final stream of literature relating to business and health draws much less from public health and much more from history and geography. The links between trade and health began to be noticed with the journeys of Marco Polo along the Silk Road, which brought the bubonic plague from China to Europe (Harrison, 2012). The slave trade enabled the spread of yellow fever from Africa to America (Harrison, 2012). Hernan Cortes may have unwittingly conquered Mexico with the smallpox (Diamond, 1998). The relationship between trade and health is also highlighted in how many infectious and non-communicable diseases have traveled around the world through trade (Labonté et al., 2009). In the case of trade, governments have more actively intervened to stop trade through quarantines, lockdowns, and border controls (Piret & Boivin, 2020).

My conclusion is that business and society scholars do not need to reinvent the wheel. Considerable relevant work has already begun. Unfortunately, as a field, our voice has been noticeably absent. As a result of this absence, business has almost always been portrayed as the bad guy. The well-known story of Merck’s role in finding and providing the cure to river blindness is largely unknown beyond business school casebooks (see Collins, 2004 for one notable
exception). Even in the current coronavirus pandemic, yet unwritten cases will undoubtedly tell not only of the neglect of business, but also of the role of private business developing not one, but numerous vaccines in record time.

I am not advocating that we as a field act as the cheerleaders for business, far from that. The cases of business heroism often hide a much more complex, misunderstood relationship between business and health. However, there are unique questions related to business strategy, organization, and responsibility that need to be explored in a far more nuanced way than what is occurring in the public health and allied literatures, where business is generally treated as a black box. Business and society scholars need to extend the focus of their research to business and health. Although the now besmirched Bill Gates may not be the role model he was often held out to be, he was calling for all of us to pay attention to the risk of pandemics and do something about them well before the Sars-Cov-19 virus became an unwelcome entrant into our vocabulary. For some reason, business and society as a field was just as surprised by the pandemic as the rest of society.

The pandemic calls for researchers to be concerned about impacts and causal chains. It calls for researchers to pay attention to new risks. It calls for us to make health a central theme of our field. Indeed, some time ago, Ward (1988) suggested that health and life expectancy are the best criteria for comparing the efficacy of public policy, and I would suggest these criteria would also be useful in evaluating business policy. Not only should firm-level impacts be studied, but also the impacts of specific initiatives, moving the level of analysis from the company to the specific project. The inclusion of health into business and society studies offers an opportunity to breathe fresh air into an already dynamic and burgeoning field.

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