



Review

Voluntary agreements between government and business—A scoping review of the literature with specific reference to the Public Health Responsibility Deal



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ARTICLE INFO

Article history:

Received 21 September 2012

Received in revised form 18 February 2013

Accepted 23 February 2013

Keywords:

Literature review

Public health

Evaluation

Voluntary agreement

ABSTRACT

Objectives: A scoping review was conducted to synthesise the findings of evaluations of voluntary agreements between business and government. It aimed to summarise the types of agreements that exist, how they work in practice, the conditions for their success and how they had been evaluated.

Methods: Voluntary agreements were included if they involved a transparent signing-up process and where businesses agreed to carry out specific actions or to achieve specific outcomes. Studies of any design published in English were included.

Results: 47 studies were identified. Voluntary agreements may help to improve relationships between government and business, and can help both parties agree on target-setting and data-sharing. Governments may also use the experience to help develop subsequent legislation. For voluntary agreements to be successful, targets should be ambitious and clearly defined, with robust independent monitoring. Public knowledge of agreements can help encourage participation and ensure compliance.

Conclusions: If properly implemented and monitored, voluntary agreements can be an effective policy approach, though there is little evidence on whether they are more effective than compulsory approaches. Some of the most effective voluntary agreements include substantial disincentives for non-participation and sanctions for non-compliance. Many countries are moving towards these more formal approaches to voluntary agreements.

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1. Introduction

The Public Health Responsibility Deal (RD), launched in England in March 2011, aims to bring together public sector, academic, commercial and voluntary organisations in five networks (covering food, alcohol, physical activity, health at work and behaviour change) to help meet public

health goals. Central to the approach is the development of collaborative relationships between business, the voluntary sector and government. The RD was described as follows by the Department of Health [1]:

“The Public Health Responsibility Deal tap[s] into the potential for businesses and other organisations to improve public health and tackle health inequalities through their influence over food, alcohol, physical activity and health in the workplace... Partners signing up... have committed to take action to improve public health. This action is expressed as a series of pledges covering food, alcohol,

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physical activity and health at work. These pledges are not intended to replace Government action."

In his foreword to the launch report [2], the Secretary of State for Health also stated that:

"By working in partnership, public health, commercial and voluntary organisations can agree practical actions to secure more progress, more quickly, with less cost than legislation".

The RD acts as a mechanism which aims to bring about voluntary partnerships to produce specific pledges and is one among several national [3] and international [4] voluntary agreements designed to contribute to public health objectives. Some previous voluntary agreements have reported positive results. For example the EU Pledge Programme, a voluntary agreement by food and drink companies to change their advertising strategies targeted at children has been independently monitored on an annual basis and reports a positive record of compliance [4]. However, drawing on the long-standing experience of tobacco control [5,6], the public health community has been sceptical of the long-term effectiveness of such voluntary initiatives. Investigations into the public health effectiveness of previous voluntary agreements by the food and drinks industries to self-regulate have found the agreements to be inadequate [7], with discrepancies between promised and actual changes made, [8,9] and little sign that they have been effective in reducing consumption and reducing harm [10,11].

One of the main criticisms which has been levelled at voluntary agreements like the Public Health RD is that industry's views and interests are prioritised, and that organisations with financial and commercial interests that may be at variance with public health goals are put in a position to set the agenda for health improvement [12]. Critics also point to evidence that government regulation is more effective in bringing about public health benefits, as supported by studies of the positive health impact of alcohol control policies [11,13–15], and have suggested that voluntarism means that governments have largely renounced their responsibility to implement a comprehensive, evidence-based and cross-sectoral strategy to improve the public's health [16].

Since there is experience of similar agreements outside public health, there is a strong case for exploring the conditions and the degree to which these voluntary agreements are effective, and whether there are lessons for public health and the development of the RD to be learned about the conditions affecting the success, or lack of success, of previous voluntary agreements. This paper reports on the findings of a scoping review on the operation and evaluation of such voluntary agreements between government and business. The review was undertaken as part of a wider project sponsored by the Department of Health in England to help plan evaluation of the RD in England. Its objectives were to identify the rationales for voluntary agreements in public health and other sectors, and to identify their impacts and the conditions that appeared to be associated with more and less successful agreements in terms of public policy goals. It also aimed to obtain pointers to ways in

which the RD could be changed or implemented differently to enable it to operate more effectively. The review therefore sought to answer the following specific questions:

1. What are the different types of voluntary agreements?
2. Why do governments develop voluntary agreements?
3. Why do businesses join voluntary agreements, and which businesses join?
4. How are voluntary agreements received by those who do or do not participate?
5. What are the potential problems and enabling factors? Are voluntary agreements effective in achieving their goals?
6. Are voluntary agreements worthwhile (do benefits exceed costs)? and,
7. How have voluntary agreements been evaluated and what can be learned for future evaluations of voluntary agreements?

2. Methods

Scoping reviews aim "to map rapidly the key concepts underpinning a research area and the main sources and types of evidence available... where an area is complex or has not been reviewed comprehensively before" [17]. Thus they are suitable for preliminary examination of a field of research, sometimes as a precursor to a full systematic review [18]. They differ from full systematic reviews in that they are conducted to identify the range and type of evidence within a field, without conducting an in-depth appraisal of each study. Briefly the process of conducting the scoping review was similar to that of a systematic review: we conducted extensive searches to identify any previous evaluations, and extracted data in a standard format. The relevant studies were identified by two reviewers applying explicit inclusion criteria and agreed definitions. We adopted the following definition of a voluntary agreement for the purposes of the review – "a contract between the government and industry, or negotiated targets with commitments and time schedules on the part of all participating parties" [19]. The focus was on identifying evidence from previous studies of voluntary agreements between governments and businesses, within any sector, that were structurally or operationally similar to the RD.

2.1. Inclusion criteria

Voluntary agreements between governments or government bodies and individual businesses or industry groups were included, where there was a transparent signing-up process and where businesses agreed to carry out specific actions or to achieve specific outcomes. Industry sectors were classified using an amended version of the Office for National Statistics' Standard Industrial Classification of Economic Activities [20].

Studies evaluating processes or outcomes were included, and these could be either primary or secondary analyses. Studies of any design were eligible. Only English language studies from any country were included. Eleven databases were searched: ASSIA, Business Source Premier, Econlit, Greenfile, HMIC, MEDLINE, NHS Economic

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