

Should we welcome multinational companies' connection to projects to improve child health?

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Partnerships with multinational companies in child health programmes can work to help save lives, write the co-founders of charity ColaLife in *The BMJ* this week. But an academic argues that connections between multinational companies and child health projects present an ethical minefield.

ColaLife, a charity formed by British couple Simon and Jane Berry, worked with Coca-Cola to learn about the distribution channels the company uses in developing countries. With this knowledge, they devised a system to ensure life saving treatments reach children with diarrhoea in remote parts of Zambia.

Within a year, their programme sold to community retailers 26,000 Kit Yamoyos, which contain [oral rehydration salts](#) (ORS) and zinc treatment for diarrhoea. Treatment rates increased from less than 1% to 45%, a "prize for collaboration", write the authors. Mean distance to ORS access was reduced from 7.3 km to 2.4 km.

They say that connections with companies, such as theirs with Coca-Cola, can combine the "best of what each partner has to offer—knowledge, expertise, reach, and resources—and bring them together in pursuit of collective development objectives."

Kit Yamoyos are now manufactured in Zambia and cost about \$1 from

local retailers.

"With treatment rates still at less than 1%, diarrhoea is still the second biggest killer of children aged under 5. So, the question is, do we leave them without access to proved treatment? Or do we try something different and manage the risks of the ethical minefield?" they ask.

But companies are in business to sell products, not to promote [child health](#), and the connection with multinationals such as Coca-Cola presents an "ethical minefield", argues Nick Spencer, Professor of Child Health at the University of Warwick, UK.

Although Kit Yamoyo has no obvious connection to Coca-Cola at retail level, Spencer argues that the charity provides legitimacy to a company that sells some unhealthy products for huge profit while contributing to the rise of obesity and diabetes.

He notes Coca-Cola is ranked 11th in tax avoidance among the US multinational companies compared in a report by the US Senate published in 2012.

ColaLife also counts the alcoholic drinks giant SABMiller, Coke's bottlers in Zambia, as a partner. SABMiller has been accused of structuring its business to avoid paying tax in Africa, something it completely refutes.

If such tax avoidance were to occur in countries like Zambia, Spencer hypothesises, this could lead to a loss of tax revenue that could instead help the government's distribution of free ORS and zinc and fundamental public health measures such as infrastructure for water and sanitation.

What is really needed is the political will, he says, to improve these

public health measures to prevent recurrent episodes of [diarrhoea](#) among other health problems in children as well as improving free access to life saving medications.

He cites several successful examples of government funded health in poor countries without any need for the involvement of multinational companies.

He concludes: "The challenge, in my view, is to find ways of working with governments to tackle problems such as distribution channels and infrastructural improvement."

More information: Head to head: Should we welcome multinational companies' involvement in programmes to improve child health? The *BMJ*, www.bmj.com/cgi/doi/10.1136/bmj.h3046

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