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An Evidence-Based Approach to Disease Promotion and Prevention Efforts to Improve Public Health

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Abstract

Disease promotion and prevention are central to improving population health and ensuring the sustainability of public health systems amid increasing global disease burdens. This study aims to examine an evidence-based approach to disease promotion and prevention efforts and its contribution to improved public health outcomes. Using a structured synthesis of peer-reviewed literature, this study integrates epidemiological evidence, intervention effectiveness, and implementation science perspectives to assess how evidence-based strategies are designed, implemented, and sustained in real-world public health settings. The findings indicate that evidence-based interventions consistently demonstrate superior effectiveness in improving health behaviors, reducing disease risk factors, and achieving population-level health gains compared to non-systematic approaches. Policy and environmental interventions emerge as particularly impactful, producing broad and sustained effects by addressing upstream determinants of health. However, the results also reveal persistent challenges related to implementation, scalability, sustainability, and equity, highlighting the critical role of organizational capacity, contextual adaptation, and stakeholder engagement. This study further demonstrates that the application of comprehensive evaluation frameworks enhances understanding of intervention performance beyond efficacy alone. Overall, the findings underscore that effective disease promotion and prevention require not only strong scientific evidence but also integrated implementation strategies that bridge the gap between research and practice. This study contributes to public health scholarship by providing an integrative evidence-based perspective and offers practical insights to inform policy development, program design, and future research aimed at strengthening prevention-oriented public health systems.

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Introduction

Public health systems worldwide continue to face complex and evolving challenges driven by demographic transitions, epidemiological shifts, globalization, and rapid technological change. The increasing burden of both communicable and non-communicable diseases (NCDs) has placed substantial pressure on health systems, particularly in low- and middle-income countries but also in high-income settings (World Health Organization [WHO], 2023). NCDs such as cardiovascular diseases, diabetes, cancer, and chronic respiratory conditions now account for the majority of global mortality, while infectious diseases remain persistent threats through outbreaks, antimicrobial resistance, and emerging pathogens (Murray et al., 2020). In this context, disease promotion and prevention have become central pillars of public health strategies aimed at improving population health outcomes, reducing health disparities, and ensuring sustainability of health systems.

Evidence-based approaches have increasingly been recognized as essential to the design, implementation, and evaluation of disease promotion and prevention efforts. Evidence-based public health integrates the best available scientific evidence with community needs, practitioner expertise, and contextual factors to inform decision-making (Brownson, Baker, Deshpande, & Gillespie, 2018). A growing body of literature demonstrates that interventions grounded in empirical evidence are more likely to produce measurable improvements in health behaviors, disease incidence, and overall population health compared to ad hoc or tradition-based approaches (Glasgow, Vogt, & Boles, 1999; Milat, Bauman, & Redman, 2015). Consequently, international health organizations and national governments increasingly emphasize the use of research evidence in policy formulation and program planning to enhance the effectiveness of public health interventions.

Despite these advancements, significant challenges remain in translating scientific evidence into effective disease promotion and prevention practices. One of the central problems lies in the persistent gap between research findings and real-world public health implementation, often referred to as the “know–do gap” (WHO, 2014). Although numerous studies have identified effective preventive interventions—ranging from behavioral change programs to environmental and policy-level strategies—many of these interventions are not systematically adopted or sustained in practice (Greenhalgh et al., 2014). Barriers such as limited resources, contextual constraints, insufficient capacity among practitioners, and fragmented health systems hinder the consistent application of evidence-based strategies across diverse settings.

In addition, public health promotion and prevention efforts frequently struggle with heterogeneity in population needs and social determinants of health. Socioeconomic status, education, cultural norms, and environmental conditions significantly influence disease risk and health behaviors, complicating the design of universally effective interventions (Solar & Irwin, 2010). Traditional one-size-fits-all approaches to disease prevention often fail to address these contextual factors, resulting in limited impact or unintended consequences. As a result, there is growing recognition that evidence-based approaches must not only rely on rigorous research but also incorporate contextual adaptation and stakeholder engagement to ensure relevance and effectiveness (Riley et al., 2017).

In response to these challenges, the literature broadly suggests that strengthening evidence-based disease promotion and prevention requires systematic integration of epidemiological data, intervention research, and implementation science. Population-level surveillance systems provide critical data on disease patterns and risk factors, enabling the prioritization of public health issues and targeted intervention design (Thacker, Qualters, & Lee, 2012). At the same time, intervention research—particularly randomized controlled trials and quasi-experimental studies—offers insights into what works, for whom, and under what conditions. However, without effective mechanisms to translate this knowledge into practice, the potential benefits of evidence-based interventions remain underutilized.

Previous studies have proposed several specific strategies to enhance evidence-based disease promotion and prevention. One prominent approach involves the application of evidence-based behavioral interventions, such as structured health education programs, community-based lifestyle interventions, and policy-driven behavior change initiatives. For example, systematic reviews have shown that evidence-based tobacco control policies, including taxation, smoke-free environments, and mass media campaigns, significantly reduce smoking prevalence and related morbidity (WHO, 2019). Similarly, evidence-based interventions targeting physical activity and nutrition have demonstrated effectiveness in reducing obesity and associated NCD risks when appropriately implemented (Sallis et al., 2015).

Another strand of literature emphasizes the role of evidence-based policy and environmental interventions in shaping health outcomes. Policy-level actions—such as urban planning that promotes active transportation, regulations on food labeling, and access to preventive healthcare services—have been shown to exert broad and sustained impacts on population health (Bambra, Smith, Garthwaite, Joyce, & Hunter, 2011). These approaches move beyond individual-level behavior change and address upstream determinants of health, aligning with contemporary public health frameworks that prioritize prevention and health promotion across the life course (Marmot et al., 2020).

Implementation science has further contributed to understanding how evidence-based interventions can be effectively adopted and scaled in real-world settings. Frameworks such as the RE-AIM model and the Consolidated Framework for Implementation Research (CFIR) provide structured approaches to evaluating reach, effectiveness, adoption, implementation, and maintenance of public health interventions (Damschroder et al., 2009; Glasgow et al., 1999). Empirical studies using these frameworks highlight the importance of organizational readiness, leadership support, and continuous evaluation in sustaining evidence-based disease promotion and prevention programs. Nevertheless, many existing studies focus on isolated interventions or specific contexts, limiting the generalizability of their findings.

Although the existing literature provides substantial insights into evidence-based approaches for disease promotion and prevention, gaps remain in integrating these approaches into a coherent and comprehensive public health strategy. Many studies examine individual components—such as behavioral interventions, policy measures, or implementation frameworks—without adequately addressing how these elements interact within complex health systems. Furthermore, there is limited empirical work that systematically synthesizes

epidemiological evidence, intervention effectiveness, and implementation considerations to inform holistic public health practice. This gap underscores the need for research that bridges disciplinary boundaries and offers practical guidance for improving public health outcomes through integrated evidence-based approaches.

Against this backdrop, the present study aims to examine an evidence-based approach to disease promotion and prevention efforts with the objective of improving public health outcomes. This study seeks to synthesize and analyze existing scientific evidence to identify key principles and strategies that enhance the effectiveness of preventive interventions. The novelty of this study lies in its integrative perspective, which combines epidemiological insights, intervention evidence, and implementation considerations to address the persistent gap between research and practice. By clarifying how evidence-based approaches can be systematically applied in disease promotion and prevention, this study contributes to the advancement of public health knowledge and practice. The scope of the study focuses on population-level interventions and policies relevant to contemporary public health challenges, providing a foundation for future research and informed decision-making in public health systems.

Methods

This study employed an evidence-based research design grounded in a structured review and synthesis of peer-reviewed literature to examine disease promotion and prevention efforts in public health. The methodological approach was informed by established principles of evidence-based public health, which emphasize the systematic use of the best available scientific evidence to guide health interventions and policy decisions (Brownson et al., 2018). A comprehensive review design was selected to allow for the integration of epidemiological evidence, intervention effectiveness, and implementation considerations, as recommended in prior public health research (Glasgow et al., 1999; Milat et al., 2015). This approach is appropriate for addressing complex public health problems that span multiple levels of influence, including individual, community, and policy contexts.

Data sources consisted of scholarly articles published in internationally indexed databases such as PubMed, Scopus, and Web of Science, focusing on studies related to disease promotion, prevention strategies, and evidence-based public health interventions. The literature selection process prioritized recent publications to ensure contemporary relevance, while also including seminal works frequently cited in the field to maintain theoretical continuity (WHO, 2014; Marmot et al., 2020). Inclusion criteria were defined to capture empirical studies, systematic reviews, and policy analyses that explicitly reported outcomes related to population health improvement. The methodological rigor of the selected studies was assessed based on clarity of research design, appropriateness of analytical methods, and relevance to public health practice, consistent with recommendations in implementation science literature (Damschroder et al., 2009).

The analytical procedure involved qualitative synthesis and thematic analysis to identify recurring patterns, effective strategies, and contextual factors influencing the success of disease promotion and prevention efforts. Findings from the reviewed studies were systematically compared to highlight converging evidence and areas of divergence, enabling the identification of core principles underlying effective evidence-based interventions. This synthesis process was guided by established public health evaluation frameworks, such as RE-AIM, which emphasize reach, effectiveness, adoption, implementation, and maintenance of interventions (Glasgow et al., 1999). By integrating insights across diverse study designs and settings, this methodology supports a comprehensive understanding of how evidence-based approaches can be applied to improve public health outcomes.

Results and Discussion

The results of this study are organized to reflect the synthesis of evidence derived from the reviewed literature on disease promotion and prevention efforts in public health. Consistent with the methodological approach, the findings emphasize epidemiological relevance, effectiveness of evidence-based interventions, and implementation-related outcomes. Overall, the results demonstrate that evidence-based approaches contribute significantly to improved public health outcomes when interventions are systematically designed, contextually adapted, and supported by robust implementation mechanisms.

Epidemiological Evidence and Public Health Priorities

The synthesis of epidemiological evidence revealed consistent patterns indicating that disease promotion and prevention efforts must prioritize both communicable and non-communicable diseases within contemporary public health systems. Across the reviewed studies, non-communicable diseases were identified as the leading contributors to global morbidity and mortality, driven largely by modifiable behavioral and environmental risk factors (Murray et al., 2020; WHO, 2023). Population-based surveillance data demonstrated that cardiovascular diseases, diabetes, cancer, and chronic respiratory conditions disproportionately affected populations with lower socioeconomic status, reinforcing the need for targeted prevention strategies informed by epidemiological evidence.

In addition, infectious diseases remained a persistent public health concern, particularly in regions with limited healthcare access and weak surveillance systems. Evidence from outbreak investigations and longitudinal surveillance studies highlighted the critical role of early detection, health promotion, and preventive interventions in mitigating disease transmission (Thacker et al., 2012). These findings collectively underscore the importance of using epidemiological data as a foundational element in prioritizing disease promotion and prevention efforts and allocating public health resources effectively.

Effectiveness of Evidence-Based Disease Promotion Interventions

The reviewed literature consistently demonstrated that evidence-based disease promotion interventions produced significant improvements in health behaviors and intermediate health outcomes. Behavioral interventions grounded in empirical research, such as structured health education, lifestyle modification programs, and community-based initiatives, were associated with increased physical activity, improved dietary behaviors, and reduced tobacco use (Sallis

et al., 2015; Glasgow et al., 1999). Studies employing experimental and quasi-experimental designs reported statistically significant differences between intervention and control groups, indicating the superiority of evidence-based approaches over non-systematic interventions.

Moreover, interventions that incorporated theory-driven frameworks and clearly defined outcome measures showed greater consistency in effectiveness across different population groups. Health promotion programs that integrated individual-level behavior change strategies with social support mechanisms demonstrated sustained improvements over time. These findings highlight that the effectiveness of disease promotion initiatives is enhanced when interventions are explicitly informed by scientific evidence and aligned with established public health theories.

Policy and Environmental Prevention Strategies

Evidence from policy-oriented studies revealed that environmental and regulatory interventions exerted substantial influence on population health outcomes. Policy measures such as tobacco taxation, smoke-free legislation, and restrictions on unhealthy food marketing were consistently associated with reductions in disease incidence and risk behaviors at the population level (WHO, 2019; Bambra et al., 2011). Unlike individual-focused interventions, these policy-driven strategies produced broad and sustained effects by altering the structural conditions that shape health behaviors.

Environmental interventions, including urban design that promotes active transportation and access to healthy food environments, were also found to contribute significantly to disease prevention. Studies examining built environment modifications reported increased physical activity levels and improved cardiovascular health outcomes among exposed populations. These results suggest that prevention strategies addressing upstream determinants of health play a critical role in complementing individual-level disease promotion efforts.

Integration of Epidemiological Data and Intervention Design

The synthesis further demonstrated that disease promotion and prevention initiatives were more effective when epidemiological evidence was explicitly integrated into intervention planning and design. Studies that linked surveillance data to program development reported improved alignment between intervention objectives and population health needs (Thacker et al., 2012). This integration enabled public health practitioners to identify priority risk factors and vulnerable populations, resulting in more targeted and efficient interventions.

Data-driven approaches also facilitated ongoing monitoring and evaluation, allowing interventions to be refined based on emerging evidence. The results indicate that epidemiological data serve not only as a diagnostic tool but also as a strategic resource for optimizing disease promotion and prevention efforts across diverse contexts.

Implementation Outcomes and Organizational Factors

Implementation-related findings highlighted that the success of evidence-based interventions depended heavily on organizational and contextual factors. Studies grounded in implementation science consistently reported that leadership support, organizational readiness, and availability of resources were critical determinants of successful adoption and sustainability (Damschroder et al., 2009). Interventions implemented within supportive institutional environments demonstrated higher fidelity and greater long-term maintenance.

Conversely, evidence indicated that interventions with strong empirical support often failed to achieve expected outcomes when implementation processes were inadequately addressed. Common barriers included limited practitioner capacity, insufficient training, and fragmented health system structures. These findings reinforce the importance of embedding implementation considerations within disease promotion and prevention strategies from the outset.

Evaluation Frameworks and Intervention Performance

Framework-based evaluations provided systematic insights into the multidimensional performance of disease promotion and prevention interventions. Studies utilizing the RE-AIM framework highlighted that while many interventions achieved high levels of effectiveness, their reach and sustainability were frequently limited (Glasgow et al., 1999). Evaluation results indicated that interventions with narrower reach tended to benefit already advantaged populations, potentially exacerbating health disparities.

Figure 1 illustrates the interaction between intervention effectiveness and implementation dimensions reported across the reviewed studies, emphasizing the need for balanced attention to both outcomes and processes.



Figure 1. Interaction between intervention effectiveness and implementation dimensions in evidence-based disease promotion and prevention.

These findings suggest that comprehensive evaluation frameworks are essential for understanding the real-world impact of evidence-based interventions beyond controlled research settings.

Contextual Adaptation and Health Equity Considerations

The synthesis revealed that contextual adaptation significantly influenced the outcomes of disease promotion and prevention efforts. Interventions adapted to local cultural, social, and economic contexts consistently demonstrated higher acceptability and effectiveness compared to standardized implementations (Riley et al., 2017). Community engagement and participatory approaches were particularly effective in enhancing adherence and sustainability among underserved populations.

Evidence also indicated that equity-focused interventions had the potential to reduce health disparities when explicitly designed to address social determinants of health. Studies incorporating targeted outreach, culturally appropriate messaging, and barrier reduction strategies reported greater improvements among disadvantaged groups (Marmot et al., 2020).

However, many interventions did not systematically assess equity outcomes, highlighting a critical gap in current public health practice.

Economic Outcomes of Evidence-Based Prevention

Economic evaluations across the reviewed literature consistently demonstrated that evidence-based disease promotion and prevention strategies were cost-effective compared to treatment-oriented approaches. Preventive interventions targeting modifiable risk factors yielded favorable cost–benefit ratios by reducing long-term healthcare expenditures and productivity losses (Brownson et al., 2018). These findings provide strong economic justification for prioritizing prevention within public health systems.

Table 1 summarizes key evidence-based disease promotion and prevention strategies and their reported health and economic outcomes.

Table 1. Summary of evidence-based disease promotion and prevention interventions and reported public health outcomes

Intervention Type	Target Population	Key Evidence-Based Components	Reported Public Health Outcomes	Supporting Literature
Behavioral health promotion programs	Adults and adolescents in community settings	Structured health education, lifestyle modification, theory-based behavior change strategies	Improved health literacy, increased physical activity, reduced tobacco use and unhealthy dietary behaviors	Glasgow et al. (1999); Sallis et al. (2015)
Community-based prevention interventions	Urban and rural populations	Community engagement, peer support, culturally adapted intervention design	Sustained behavior change, improved program adherence, reduced risk factor prevalence	Riley et al. (2017); Milat et al. (2015)
Policy-level disease prevention strategies	General population	Tobacco taxation, smoke-free legislation, food marketing regulation	Reduced disease incidence, population-wide risk reduction,	WHO (2019); Bambra et al. (2011)

			long-term health gains	
Environmental and built environment interventions	Urban populations	Active transport infrastructure, access to healthy food environments	Increased physical activity, improved cardiovascular health indicators	Sallis et al. (2015); Marmot et al. (2020)
Data-driven prevention programs	High-risk and vulnerable populations	Epidemiological surveillance, risk stratification, targeted intervention planning	Improved intervention targeting, efficient resource allocation, reduced health disparities	Thacker et al. (2012); Murray et al. (2020)
Equity-focused promotion and prevention initiatives	Socioeconomically disadvantaged groups	Targeted outreach, barrier reduction strategies, culturally appropriate messaging	Improved access to prevention services, reduced health inequities	Marmot et al. (2020); Brownson et al. (2018)
Integrated multi-level interventions	Population-wide	Combination of behavioral, environmental, and policy approaches	Greater and more sustainable public health impact across multiple outcomes	WHO (2023); Brownson et al. (2018)

This study provides a comprehensive synthesis of evidence-based approaches to disease promotion and prevention and demonstrates their critical role in improving public health outcomes. The findings reinforce the central argument that interventions grounded in robust scientific evidence are more effective, sustainable, and equitable than non-systematic approaches. By integrating epidemiological data, intervention effectiveness, and implementation considerations, this study contributes to a more holistic understanding of how evidence-based public health can be operationalized in complex health systems.

The results highlight that epidemiological evidence remains fundamental in guiding disease promotion and prevention priorities. Consistent with previous studies, the dominance of non-communicable diseases driven by modifiable risk factors underscores the urgency of prevention-focused public health strategies (Murray et al., 2020; WHO, 2023). The findings

support the argument advanced in the Introduction that population-level surveillance data are not merely descriptive tools but strategic resources that enable targeted and efficient intervention planning (Thacker et al., 2012). This alignment between epidemiological evidence and intervention design strengthens the potential impact of disease promotion and prevention initiatives.

The effectiveness of evidence-based behavioral interventions observed in this study aligns with existing literature emphasizing the value of theory-driven and empirically tested health promotion strategies. The consistent improvements in health behaviors reported across diverse settings corroborate earlier findings by Glasgow et al. (1999) and Sallis et al. (2015), who demonstrated that structured, evidence-informed interventions yield superior outcomes compared to ad hoc programs. Importantly, this study extends prior work by illustrating that behavioral interventions are most effective when embedded within broader systems that support implementation and sustainability, rather than being implemented as isolated initiatives.

Policy and environmental interventions emerged as particularly powerful mechanisms for disease prevention, supporting upstream approaches that address structural determinants of health. The sustained population-level effects associated with regulatory and environmental strategies are consistent with social determinants of health frameworks and prior empirical evidence (Bambra et al., 2011; Marmot et al., 2020). These findings reinforce the notion that disease promotion and prevention efforts should move beyond individual responsibility and incorporate policy actions that create health-enabling environments. Such approaches are especially relevant in addressing health inequities, as they benefit entire populations while reducing reliance on individual agency.

A key contribution of this study lies in its emphasis on implementation science as a determinant of intervention success. The results demonstrate that even highly effective interventions may fail to achieve meaningful public health impact if implementation factors are inadequately addressed. This finding echoes the work of Damschroder et al. (2009), which highlighted the influence of organizational readiness, leadership engagement, and contextual fit on intervention adoption and sustainability. By synthesizing evidence across multiple studies, this research reinforces the importance of integrating implementation considerations into the early stages of intervention design.

The application of evaluation frameworks such as RE-AIM further underscores the multidimensional nature of public health intervention success. While many interventions demonstrated high effectiveness, limitations in reach and maintenance were frequently observed, suggesting that efficacy alone is insufficient as a measure of public health impact (Glasgow et al., 1999). This finding highlights a critical tension between internal validity and real-world applicability, emphasizing the need for evaluation approaches that capture both outcomes and processes. Addressing this gap is essential for scaling evidence-based disease promotion and prevention efforts.

Contextual adaptation emerged as a recurring theme influencing intervention outcomes, reinforcing arguments for flexible, context-sensitive application of evidence-based strategies. The improved effectiveness of culturally and socially adapted interventions aligns with prior research emphasizing the importance of community engagement and participatory approaches (Riley et al., 2017). These findings suggest that fidelity to evidence-based principles must be

balanced with responsiveness to local contexts to maximize acceptability and effectiveness, particularly in diverse and underserved populations.

From an economic perspective, the demonstrated cost-effectiveness of evidence-based prevention strategies strengthens the case for prioritizing prevention within public health systems. Consistent with previous analyses, preventive interventions targeting modifiable risk factors offer substantial long-term savings by reducing healthcare utilization and productivity losses (Brownson et al., 2018). These economic findings are particularly relevant for policymakers operating under constrained budgets, as they provide a compelling rationale for reallocating resources toward prevention-oriented strategies.

Despite its contributions, this study has several limitations that warrant consideration. As a synthesis-based analysis, the findings are dependent on the quality and scope of the included literature, which may vary across contexts and study designs. Additionally, while the study integrates multiple dimensions of evidence-based public health, it does not provide primary empirical data, limiting causal inference. Future research should aim to empirically test integrated frameworks that combine epidemiological evidence, intervention effectiveness, and implementation strategies across diverse settings.

Conclusion

In conclusion, this study demonstrates that evidence-based approaches to disease promotion and prevention play a pivotal role in improving public health outcomes by aligning epidemiological evidence, effective interventions, and implementation strategies within complex health systems. The synthesis highlights that interventions grounded in scientific evidence, supported by robust organizational capacity, and adapted to local contexts are more likely to achieve sustainable and equitable health improvements. By emphasizing the integration of behavioral, policy, and environmental strategies, this study reinforces the importance of prevention-oriented public health systems and provides a conceptual foundation for bridging the persistent gap between research and practice. These findings underscore the need for continued investment in evidence-based public health to address current and emerging population health challenges effectively.

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