

# Evidence Briefing for Public Health Action

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This table identifies research evidence and guidance in support of the statements derived from Staying Healthy. The hierarchy of evidence is as follows: NICE guidance; systematic reviews; non-systematic review research evidence; identified research gap. The existence of higher level evidence precludes the identification of lower levels. NICE programme and intervention guidance reference numbers are cited, as are examples of systematic reviews. Sources of evidence included NICE website; National Guidance Clearing House; Cochrane Library; and academic databases.

	NICE guidance	Systematic review	Research evidence	Research gap
<b>Service delivery</b>				
1. Using social marketing techniques to develop and deliver public health services is an effective means of increasing population health		✓	e.g. Stead et al., 2006 <sup>1</sup>	
2. Including personalised health promotion components in health care interventions makes them more effective.	✓			
				PH006
<b>Smoking prevention</b>				
3. Targeting smoking cessation services at patients with Chronic Obstructive Pulmonary Disease is an effective means of reducing smoking prevalence in this population.	✓			
				PH010; CG12
4. Reducing the (legal/illegal) importation of tobacco products is an effective means of reducing smoking prevalence.			✓	
5. Increasing the provision and availability of nicotine replacement interventions is an effective means of	✓			
				PH010 <sup>2</sup>

<sup>1</sup> Stead M, McDermott L, Angus K, Hastings G (2006) Marketing review final report. Stirling, ISM. Includes systematic reviews conducted on behalf of NICE to support Behaviour Change Programme Guidance

<sup>2</sup> NICE Public Health Guidance covers effective services and interventions. It does not make judgements on whether increasing the number of services/interventions available results in more people accessing them.

reducing population smoking prevalence.					
	NICE guidance		Systematic review	Research evidence	Research gap
6. Increasing the provision and availability of smoking cessation services is an effective means of reducing population smoking prevalence.	✓	PH010 <sup>2</sup>			
7. Brief interventions delivered in smoking cessation services are an effective means of reducing population smoking prevalence	✓	PHIG 1			
<b>Alcohol prevention</b>					
8. Brief interventions delivered in primary care services are an effective means of reducing alcohol related harms	Referred		✓	WHO guidance <sup>3</sup>	
9. Increasing taxation on alcohol is an effective means of reducing alcohol related harms			✓	e.g. NDRI, 2007 <sup>4</sup>	
10. Delivering responsible licensee programmes are an effective means of reducing alcohol related harms			✓	e.g. NDRI, 2007; Ker and Chinnock, 2006 <sup>5</sup>	

<sup>3</sup> Babor TF, Higgins-Biddle JC (2001) Brief Intervention for Hazardous and Harmful Drinking. Geneva: WHO

<sup>4</sup> National Drug Research Institute (2007). Restrictions on the Sale and Supply of Alcohol: Evidence and Outcomes. Perth: National Drug Research Institute, Curtin University of Technology.

<sup>5</sup> Ker K, Chinnock P. Interventions in the alcohol server setting for preventing injuries. *Cochrane Database of Systematic Reviews* 2006, Issue 2. Art. No.: CD005244. DOI: 10.1002/14651858.CD005244.pub2.

	NICE guidance	Systematic review	Research evidence	Research gap
11. Preventing or limiting discounted alcohol sales is an effective means of reducing alcohol related harms		✓	Currently being reviewed by HO	
12. Screening for alcohol problems in high risk populations is an effective means of increasing service participation			✓	
13. Providing daily alcohol unit advice is effective at preventing alcohol related harms			✓	
<b>Physical activity/obesity</b>				
14. Cognitive behavioural therapy, delivered as a structured behavioural intervention, is an effective means of weight management for the overweight and obese	✓	CG43		
15. Providing universal free school meals that meet national nutritional standards improves the diet of school children	✓	CG43		
16. Increasing participation in Extended Schools exercise programmes increases physical activity in young people				✓
17. Clear traffic light (and/or guideline daily amount (GDA)) labelling on foods is an effective means of reducing overweight and obesity				✓

	NICE guidance	Systematic review	Research evidence	Research gap
18. Increasing taxes on unhealthy foods is an effective means of reducing overweight and obesity			✓	
19. Achieving Healthy School status reduces overweight and obesity in school pupils				✓
20. Achieving Healthy School status increases physical activity in school pupils				✓
21. Environmental and transport interventions such as the introduction of 20mph zones increases physical activity in children	✓	PH008		
<b>Sexual health</b>				
22. Improving the provision of sexual health services is effective at increasing sexual health of the population, including outcomes such as teenage and unwanted pregnancies, and transmission of STI	✓	PHI003		
23. Increasing the use of long acting contraceptives is effective at reducing teenage and unwanted pregnancy	✓	PHI003; CG30		

	NICE guidance	Systematic review	Research evidence	Research gap
24. A standardised Personal Social and Health Education (PSHE) curriculum focusing on sex and relationships is effective at increasing sexual health in young people, including outcomes such as teenage and unwanted pregnancies, and transmission of STI	✓	Sep 2009		
<b>Mental health</b>				
25. Delivery of psychological therapies to the general population through local wellness centres is an effective means of improving mental health				✓
<b>Child health</b>				
26. Provision of free toothbrushes in schools is effective at increasing oral health				✓ <sup>6</sup>
27. Promotion of breastfeeding to new mothers increases healthy development of the child		✓	e.g. HAD publications; WHO guidance 2002 <sup>7</sup>	
28. Promotion of 'back to sleep' reduces the incidence of sudden infant death syndrome		✓	e.g. Gilbert et al., 2005 <sup>8</sup>	

<sup>6</sup> Primary studies have examined the provision of free toothbrushes as part of supervised brushing programmes, but not the effects of distribution in the absence of programming.

<sup>7</sup> WorldHealth Organization. Infant and young child nutrition; global strategy for infant and young child feeding. WHO: Geneva, Executive Board paper 2002. Report No.:EB 109/12 2002.

<sup>8</sup> Gilbert R, Salanti G, Harden M, See S (2005) Infant sleeping position and the sudden infant death syndrome: systematic review of observational studies and historical review of recommendations from 1940 to 2002. International Journal of Epidemiology 34:874-887

	NICE guidance	Systematic review	Research evidence	Research gap
<b>Other health priorities</b>				
29. Promoting awareness of transient ischaemic attack (TIA) is effective at increasing presentations to health services			✓	
30. Rapid assessment and treatment of TIA is effective in reducing the incidence of stroke	✓	(Stroke) July 2008		
31. Appropriate use of sunscreen of at least factor 15 is effective at reducing the incidence of melanoma		✓ <sup>9</sup>		
32. Provision of Hepatitis B immunisation is effective at preventing transmission in high risk groups	✓	(Needle Syringe Programmes only) Feb 2009	✓	

<sup>9</sup> Sunscreens alone may provide insufficient protection from UVR. Sunscreens function best to prevent sunburn from UV-B radiation. They provide more limited protection from UV-A radiation. Sole dependence on sunscreens can have the unwanted effect of increasing outdoor exposure times, particularly in those individuals who burn easily and tan poorly. Sun avoidance remains the most desirable form of sun protection