Reviewer’s report

Title: Contextually tailored interventions can increase evidence-informed policymaking on health-enhancing physical activity: The experiences of two Danish municipalities

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Reviewer: Annika Frahsa

Reviewer’s report:

Dear authors,

thank you very much for the manuscript "Contextually tailored interventions can increase evidence-informed policymaking on health-enhancing physical activity: The experiences of two Danish municipalities".

It refers to the very relevant field on the use of scientific evidence in health-enhancing physical activity policymaking. The manuscript presents results from experiments in natural settings aimed at increasing the use of knowledge in policymaking regarding HEPA, primarily via strengthening intersectoral collaboration. The intervention outcome was measured via pre, post and 12-month follow up questionnaires as well as qualitative interviews.

I would really like your paper to be published and therefore I would recommend some points for revision/ to be commented and explained prior to a potential publication with Health Research Policy and Systems.

a) The term "evidence": In the very beginning of the manuscript you use evidence as being equal with scientific or research evidence and more detailed with scientific evidence on health outcomes/risk factors. Later on, however, you nicely distinguish between the use of 1) knowledge from research, 2) knowledge from stakeholders, and 3) knowledge of target groups to promote evidence-informed policy making. Thus, it might be worthwhile to be very differentiated in the introductory part on your understanding of evidence. Rütten et al. 2016 in Int J Public Health e.g. published a comparative scoping review on three types of scientific evidence to inform physical activity policy.

b) Data: you refer to the drop-outs in the follow-up questionnaires due to position or institution change. Concerning the 14 qualitative interviews you do not comment on this issue. Please describe the interviews and interviewees in more details. At which point during the project had the interviews been conducted? What had been the involvement of the interviewees (partipant from the beginning, still in the position during the interview? Change in position/organisation? Interviewee= responsible person after the end of the project?link to the project processes?)

c) Results and interpretation of findings: On p. 9, l.30ff you write "Using knowledge was not always doable in the municipal working culture, mainly due to time limits and
cultural factors. The informants mentioned that it is not natural for them to work with knowledge from research, and it can be hard to find what they need." This reads very interesting and would ask for more details: what kind of knowledge use was not doable in the working culture? All three kinds of knowledge mentioned or only research knowledge? And: what does „hard to find what they need” mean? Do you think it refers to a very instrumental use of research knowledge to support a decision already in favour by other drivers? I think it might be really promising to explore a bit the significance or concrete role of research knowledge in those specific administrations.

On p. 9 you also write "It is also indicated that newly educated academics are often the best at this" and "the health departments were understood to be more trained and experienced in searching for knowledge compared with other departments". Very interesting points! Do you see a pattern in your data that might allow to create a e.g. typology of the also mentioned "individuals on which is very dependent what level of knowledge is used in a policy”? You might want to relate those kinds of findings to a certainly existent body of literature that discusses who integrates what kind of knowledge under which circumstances and how to identify and integrate public administrators who might be responsive to that.

You mention the limitations regarding statistically analyses because of the small numbers. I agree with that and would recommend to strengthen the qualitative analysis parts instead. The statements listed in the table as well as your summarizing sentences in the results section indicate a potential rich data set that might strengthen our insights on how to tailor interventions in a context-specific way to eventually increase evidence-informed policymaking on health-enhancing physical activity promotion.

I look forward to reading your revision.

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