Author's response to reviews

Title: Evidence-informed policy formulation and implementation: Comparative case study of two national policies for improving health and social care in Sweden

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Author's response to reviews: see over
Authors’ responses to the referees’ comments

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Referee 2: Alec Fraser

Discretionary revisions

Comment 1: Results section, case 1, agenda setting paragraph 1, sentence 2 might be better rephrased as it is written in rather vague English.

Response: We have now replaced “preventive practices” with “health promoting practices” for more clarity.

Comment 2: Results section, case 1, Policy implementation section, implementation paragraph 1, sentence 2 change ‘was’ for ‘were’

Response: We have made the correction as suggested by the reviewer.

Comment 3: Results section, case 2, Agenda setting paragraph 1, sentence 2 change ‘conservative’ for ‘Conservative’

Response: This part of the sentence was omitted in the revised version of the manuscript.

Comment 4: Results section, case 2, Policy implementation section, implementation paragraph 1, sentence 4 ‘to inform about the policy’ might be better rephrased

Response: We have rephrased the sentence and it now reads “to disseminate the policy”.

Referee 3: Kaelan Moat

Comment 1: I realize in reviewing the paper, however, that an issue raised by both myself and other reviewers that has yet to be adequately addressed in the methods section is the rational for selecting each case at the outset of the study (i.e. the sampling logic). While the authors have provided some additional detail, it isn’t clear, from an analytical standpoint, why comparing these two cases in particular is ideal in this case. Are there variables that are ‘constant’ across both that can be seen as contextual controls, and variation among other variables that can help understand how these factors may or may not have lead to different policy processes and use of evidence? This still isn’t clear (note: I have noticed that in the discussion on page 30 the authors mention variation in cases, so they’ve obviously considered this, but haven’t written it as an element of their methods).

Response: The two cases were selected since they both involved the same sector (health and social care), had a broad scope, multidisciplinary target audiences, focus on prevention and were conducted during the same period in time. Also, these cases are the most recent examples of broad scope policy implementations within this area in Sweden.
The cases differed mainly regarding what actors were involved, which is now explained in the Study design section in the revised version of the manuscript.

**Discretionary revisions**

**Comment 1:** It may be helpful if the authors could provide, in a clearer and explicit way, some of the key findings from Table 1 in the text. These results are clearly important, but are currently lost in the narrative (so readers are forced to go to the table to get the whole story--whereas this table should serve as a complement).

Response: *We agree with the reviewer that a more explicit description of the key findings from Table 1 in the text would be useful. However, since the main aim of this revision has been to trim the text and make the manuscript shorter we have not added such a description.*