# **ABSTRACT SUBMISSION AIC 2016: #36**

#### 1. Title:

Cross-country factors influencing evidence-based chronic disease prevention

#### 2. Authors:

Elizabeth L Budd, Xiangji Ying, Anna J DeRuyter, Tahna Pettman, Rebecca Armstrong, Rodrigo S Reis, Leonardo Becker, Pauline Sung-Chan, Zhaoxin Wang, Long Sum Tabitha Mui, Jianwei Shi, Tahnee Saunders, and Ross C Brownson

#### 3. Key words:

cross-sectional, chronic disease practitioners, chronic disease prevention, evidence-based interventions, implementation.

#### 4. Abstract text:

## a. Background and aims

The growing global burden of chronic disease can be addressed with improved implementation of evidence-based chronic disease prevention (EBCDP) interventions. Little is known about the contextual factors hindering EBCDP intervention implementation across diverse countries. This study aimed to identify and compare the multi-level factors affecting implementation of EBCDP interventions in Australia, Brazil, China, and the United States.

#### b. Methods

A 27 question electronic survey, translated to the appropriate language, was sent to chronic disease prevention practitioners in each country using purposive sampling based on the participants' work roles. The survey was informed by qualitative interviews, extant instruments in EBCDP, and expert review. Factors affecting EBCDP implementation were assessed on personal, organizational, community, sociocultural, and political/economic levels.

## c. Results

Practitioners from Australia (N=121), Brazil (N=76), China (N=102), and the United States (N=100) completed the survey. There were more similarities than differences across countries in common barriers (e.g., limited decision-making authority, staff, and funding; lack of community partners; serving disadvantaged populations with many needs; funding changes occurring with political leadership changes) (Table 1). Practitioners in China cited organizational and community-level barriers distinct from the other countries (e.g., lack of policies to support evidence-based approaches; limited access to repositories of evidence-based interventions).

### d. Conclusion

These findings highlight a need for organizational resources and processes to support EBCDP implementation. Cross-country sociocultural barriers point toward a widespread need for research on how to improve implementation of EBCDP interventions in highly disadvantaged communities, while ensuring cultural appropriateness.