# The Effectiveness Of Public Health Interventions In Reducing The Burden Of Infectious Diseases

Abdullah Hamed Mohammed Almatrafi , Mater Miqad F Alotaibi , Abdulaziz Mohammad Yousef Alzeer , Dakheel Maashi D Alshammari , Abdullah Ali Abdulrahman Alhamoud , Saud Mohamed Saud Altamimi , Ziyad Alhumidi Almutairi , Fawaz Saud Alotaibi

#### **Abstract**

This study investigates the efficacy of several public health measures in mitigating the impact of infectious illnesses, including HIV/AIDS, viral hepatitis, sexually transmitted diseases (STDs), and tuberculosis (TB). The categorization system outlined in this document categorizes research in public health law and policy into many types, including studies on policymaking, mapping, implementation, intervention or assessment, and mechanisms. The study emphasizes the knowledge acquired from the analysis of research, studies on implementation, and evaluation research conducted in these fields. Mapping studies have shown deficiencies in laws and regulations, found legal provisions that do not adhere to optimal standards, and encouraged the spread of successful legal advancements. Implementation studies have evaluated the practicability, effectiveness, and possible negative outcomes of policy improvements, offering vital knowledge for state and municipal organizations. Assessment studies have used several approaches, such as retrospective evaluations and modeling tools, to analyze the effects of policy initiatives on the health of the community. The results provide direction for the development and implementation of health-promoting policies, assuring their feasibility, effectiveness, and avoidance of adverse outcomes.

**Keywords:** Public health initiatives, infectious illnesses, policy research, mapping studies, implementation studies, evaluation studies.

### 1. Introduction

The Centers for Disease Control and Prevention, also known as the CDC, strives to achieve a future devoid of HIV/AIDS, viral hepatitis, sexually transmitted illnesses (STDs), and tuberculosis (TB). Policy may have significant influence on the intricate, multifaceted aspects that impact the overall illness rates, death rates, and health inequalities of all of these illnesses. 1-4. Public health policy methods include a range of measures such as regulations, legislation, incentive systems,

and standardized processes. These measures are designed to influence both organizational and individual behavior with the goal of enhancing health and promoting health equality. 5,6.

Nonetheless, laws and regulations that were not specifically meant to promote health may nonetheless have significant, if unintentional, impacts on health. There is a need for a comprehensive investigation of the relationship between policies and the health of the population. This research will provide guidance for the creation and execution of policies that promote health, ensuring they are practical, successful, and avoid negative consequences.

The study presents policy interventions that have the potential to decrease the occurrence, severity, or death rate of HIV/AIDS, viral hepatitis, sexually transmitted diseases (STDs), and tuberculosis (TB). Moreover, the papers in this supplement illustrate a classification system of public health law and policy research that facilitates a crucial and thorough analysis of the data upon which policy interventions may be grounded. We provide a concise overview of the suggested research typology, analyze its application to the many papers featured in this supplement, and deliberate on potential future advancements in this significant research domain.

### 2. Classification of Research on Public Health Law and Policy

Burris et al have proposed a framework for doing research on public health legislation, which classifies the main kinds of this research into five distinct types: (1) Policymaking studies investigate the factors that impact the adoption of policies and the processes involved in their adoption. (2) Mapping studies collect empirical data on the prevalence, distribution, and characteristics of policies that have been adopted across different jurisdictions and levels of government. (3) Implementation studies analyze how adopted policies are put into practice and to what extent they are enforced. (4) Intervention or evaluation studies measure the effects of policies on health. (5) Mechanism studies explore the causal pathways and processes through which policies influence health.6 Every policy research area offers valuable views and evidence to inform the development, acceptance, and execution of policy strategies aimed at improving health. The papers in this supplement include instances of mapping, implementation, and evaluation studies, demonstrating the breadth of research that may inform and enhance the influence of policy on health.

#### 3. Mapping Research

Legal mapping studies provide a comprehensive analysis of the main characteristics of laws in different jurisdictions. They aim to present the wide range of state or municipal laws on significant health issues in a comparable manner. These investigations may uncover gaps in laws that influence health, whether they are related to geography or concepts. They can also help identify legal provisions that do not meet the standards of best practices or public health recommendations. Mapping studies may provide legal data for assessment research and facilitate the dissemination of effective legal developments.7

The analysis revealed that the number of states expressly allowing SSPs has doubled between 2014 and 2019. However, it also discovered that legal obstacles still exist in ensuring that those who inject drugs have access to fresh and clean needles.8 The project generated a dataset of SSP legislation that is available online for research and for public use. 9. In this addition, the US Surgeon General utilizes epidemiological information and his own experience as a state health officer to emphasize the significance of state and local policies that facilitate SSPs.10

A subsequent survey that evaluated the alignment between CDC HIV testing guidelines and state laws revealed that no states had legislation that would impede adherence to CDC's 2006 revised HIV testing recommendations. However, it was also observed that no state had enacted laws encompassing all the necessary elements for recommended HIV testing.11 In order to demonstrate the use of legal mapping in gathering information on institutional policies, Moraras et al12 obtained data on rules pertaining to the handling of students with hepatitis B virus (HBV) infection from 83 Pennsylvania institutions that have recognized health professions programs. This material may be used to facilitate a conversation on how the law can be employed as a means to prevent discrimination against students with HBV in authorized health professions programs.12

# 4. Study of the practical application and execution of plans or ideas

Implementation research may assess the feasibility, efficacy, and potential adverse consequences of policy innovations by documenting the first impacts of policy change. The implementation studies in this appendix mostly consist of case studies. While case studies may not have the same level of rigor as established implementation study designs, they may nevertheless be valuable for state and local agencies dealing with comparable difficulties in the field. Early indicators may provide insight into the effectiveness of a policy innovation and help identify interesting policy options for further assessment or implementation studies, which may involve significant costs.

An examination of the execution of a California state statute requiring the provision of condoms in state prisons

determined that the practice was secure, economical, and had high prisoner acceptance, making it an exemplary policy framework for other states.13 An investigation of the implementation of a syphilis screening program based on age in a county prison revealed a significant prevalence of cases necessitating medical intervention.14 Lederman et al15 devised and conducted a preliminary trial of a method that included opt-out testing for sexually transmitted illnesses among immigration prisoners. While the study does not address all the significant questions regarding the impact and cost-effectiveness of screening immigrant detainees for sexually transmitted infections, it does suggest that opt-out testing for these infections is beneficial. However, it is only cost-effective for HIV when combined with screening for other sexually transmitted infections. This supplement also contains enlightening case studies of intricate strategies for enhancing public health services and results.

In their study, Morne et al. (2016) examined the progress of the implementation of New York State's Ending the Epidemic (ETE) effort at the midpoint. Through the utilization of 13 indicators, the authors made estimation that the ETE program had accomplished 42% of the targeted advancement towards the objective of eradicating the HIV pandemic. 16. A case study conducted in Washington, DC, examines the first difficulties encountered when implementing a modification to a unit-cost payment system for HIV preventive and care services. This change was accompanied by the consolidation of prevention and care-planning organizations.17 A case study conducted in Massachusetts provides a detailed account of the implementation and outcomes of a comprehensive strategy to managing HIV, viral hepatitis, STD, and TB control services. This method involves the integration of provider, laboratory, and public health capacity over a period of four years. The paper elucidates the manner in which the synergistic effects resulted in a notable 106% surge in HIV testing between 2014 and 2018.18

#### 5. Assessment Research

The primary focus of public health law and policy study is on the impact of different policy approaches. The evaluation studies use several methodologies that differ in their level of rigor and the extent to which they may provide substantial evidence for establishing causal relationships. This addition contains many retrospective assessment studies and cuttingedge examples of modeling tools used to forecast the population health effects of policy improvements. Multiple researches have examined policy initiatives related to HIV.

A research examining the correlation between modifications in syringe access regulations and programs and syringe sharing among those who engage in drug injection in Denver, New Orleans, and Philadelphia offers more proof that facilitating syringe access results in a decrease in syringe sharing.19 Truman et al20 examine the issue of diminishing inequalities in HIV infection rates in the United States by analyzing the distribution of federal HIV funding and the rates of HIV-related deaths adjusted for age from 1999 to 2017. The analysis revealed that increased expenditure was linked to more rapid declines in age-adjusted HIV mortality rates among Hispanic and non-Hispanic black individuals compared to those from other racial/ethnic groups in the United States.20

A modeling research examined the impact of essential components of New York's ETE project on the occurrence of new HIV infections. The results indicate that achieving the ultimate ETE policy objectives will rely on decreasing the incidence of new HIV infections among men who engage in sexual activity with other males. Furthermore, improving the connection to and continuation of medical treatment, as well as implementing preexposure prophylaxis, will have the most significant impacts.21

The implementation of mandatory tuberculosis (TB) screening in homeless shelters and the expansion of efforts to reach out to those experiencing homelessness in Atlanta resulted in increased self-reported TB screening and more knowledge of TB among this demographic.22 Parriott et al23 utilized an individual-based Markov micro-simulation model to compare the effects of implementing US Preventive Services Task Force recommendations or a tool and user guide for TB risk assessment developed by the California Department of Health. The comparison was made against California's existing latent TB infection control measures. According to the model's prediction, following any of the new standards will probably reduce the total number of TB illness cases by 40% over a period of ten years.

In July 2014, the New York City Department of Health and Mental Hygiene made changes to its health code. These changes mandated that laboratories must include information about a person's pregnancy status in electronic laboratory reports for syphilis and HBV infections. The purpose of this requirement is to decrease the transmission of these infections from mothers to their children. A research conducted by Liao and colleagues24 shown that the percentage of computerized laboratory case reports for syphilis and HBV infection including pregnancy status information rose by about 33% during the four years after the introduction of the revised health code. A comprehensive analysis of evaluations on opioid policies at the systems level has shown that the existing research did not

adequately address key health outcomes related to opioids. Furthermore, only 18% of the studies examined the combined effects of interventions that are typical in the policy landscape.25

One commentary presents a conceptual framework that portrays law as a catalyst for the social elements that determine health. It also provides persuasive instances of research that shed light on how law's impact on structural, economic, healthcare, and social aspects ultimately determines the extent and distribution of infectious diseases. 26. A methodological commentary argues in favor of using mixed-methods and interdisciplinary approaches in policy evaluations to more effectively identify and analyze the impact of policies on populations with a high risk of sexually transmitted diseases (STDs).27 Another analysis emphasizes the importance of a thorough collaboration between the CDC and multiple university-based teams in order to create models for various aspects of tuberculosis (TB), such as the rate of TB cases, the prevalence of latent TB infection, strategies for diagnosing, treating, and preventing TB, the costs associated with these interventions, and the cost-effectiveness of these strategies. These models would then be used to inform policy decisions and their implementation.28 An examination of legal theory serves as a vital connection between scientific data and practical application. This issue includes an explanation of how the law might be used as a means to contest treatment limitations for hepatitis C virus infection.29

## 6. Summary

The papers in this study showcase various forms of public health legislation and policy research and commentary pertaining to HIV/AIDS, viral hepatitis, sexually transmitted diseases (STDs), or tuberculosis (TB). Policies may have a significant impact on infectious disease testing, morbidity (the rate of illness), mortality (the rate of death), and disparities (inequalities) in several ways. Illustrative instances encompass legislation that diminishes obstacles to HIV testing, the elimination of financial obstacles to curative therapy for hepatitis C virus infection, the mandate for syphilis screening and treatment for pregnant women to prevent congenital syphilis, and policy modifications permitting electronic directly observed therapy as a cost-effective strategy to mitigate TB transmission.33 Policy choices include making tradeoffs, and there are several research methods34,35 that may be used to provide a solid evidence foundation for formulating and choosing public health policy approaches.1

Studies focused on mapping, implementation, and evaluation, might offer additional data that bolsters policy action. Further research is required to examine the processes

involved in policymaking and the ways in which policies directly impact health. While the majority of studies in this supplement use relatively straightforward approaches, it is necessary to enhance the robustness of policy research designs for complex interventions that may be costly or challenging to implement on a larger scale. During the design of interventions, it is important to consider the provision of funds and procedures for monitoring and assessing the success of policy interventions in order to promote the creation and expansion of evidence-based policies.1

Furthermore, considering the difficulties of conducting research on public health policy in a timely manner that matches the quick spread of laws and policies across different areas, modeling is a cutting-edge and crucial tool for thoroughly testing policy concepts and for guiding the early implementation of effective interventions. Despite lacking scientific basis, doctrinal legal analysis plays a crucial role in the development of legal strategies, evaluation of the legality of policy changes, and enhancing the understanding of law as a means to enhance health and minimize health inequalities for public health practitioners and policy makers.

#### References

- Pollack Porter KM., Rutkow L., McGinty EE. The importance of policy change for addressing public health problems. Public Health Rep. 2018;133(suppl 1):9S-14S.
- Douglas MD., Josiah Willock R., Respress E et al. Applying a health equity lens to evaluate and inform policy. Ethn Dis. 2019;29(Suppl 2):329-342.
- Cooper LA., Purnell TS., Showell NN et al. Progress on major public health challenges: the importance of equity. Public Health Rep. 2018;133(suppl 1):15S-19S.
- 4. Brownson RC., Chriqui JF., Stamatakis KA. Understanding evidence-based public health policy. Am J Public Health. 2009;99(9):1576-1583.
- Centers for Disease Control and Prevention, Office of the Associate Director for Policy and Strategy. Definition of policy. 2015. Accessed April 17, 2020.
- Burris S., Wagenaar AC., Swanson J., Ibrahim JK., Wood J., Mello MM. Making the case for laws that improve health: a framework for public health law research. Milbank Q. 2010;88(2):169-210.
- Burris S., Hitchcock L., Ibrahim J., Penn M., Ramanathan T. Policy surveillance: a vital public health practice comes of age. J Health Polit Policy Law. 2016;41(6):1151-1173.
- 8. Fernández-Viña MH., Prood NE., Herpolsheimer A., Waimberg J., Burris S. State laws governing syringe services programs and participant syringe possession, 2014-2019. Public Health Rep. 2020;135(suppl 1):128S-137S.
- Policy Surveillance Program. Syringe service program laws. 2019. Accessed April 17, 2020.
- 10. Adams JM. Making the case for syringe services programs. Public Health Rep. 2020;135(suppl 1):10S-12S.

- 11. Salvant Valentine S., Caldwell J., Tailor A. Effect of CDC's 2006 revised HIV testing recommendations for adults, adolescents, pregnant women, and newborns on state laws. Public Health Rep. 2020;135(suppl 1):189S-196S.
- 12. Moraras K., Block J., Shiroma N., Cannizzo A., Cohen C. Protecting the rights of health care students living with hepatitis B under the Americans With Disabilities Act. Public Health Rep. 2020;135(suppl 1):13S-18S.
- 13. Lucas KD., Bick J., Mohle-Boetani JC. California's Prisoners Protections for Family and Community Health Act: implementing a mandated condom access program in state prisons, 2015-2016. Public Health Rep. 2020;135(suppl 1):50S-56S.
- 14. Harmon JL., Dhaliwal SK., Burghardt NO et al. Routine screening in a California jail: effect of local policy on identification of syphilis in a high incidence area, 2016-2017. Public Health Rep. 2020;135(suppl 1):57S-64S.
- Lederman E., Blackwell A., Tomkus G et al. Opt-out testing pilot for sexually transmitted infections among immigrant detainees at 2 Immigration and Customs Enforcement Health Service Corps—staffed detention facilities, 2018. Public Health Rep. 2020;135(suppl 1):82S-89S.
- 16. Morne JE., Tesoriero JM., Martin EG et al. Ending the HIV Epidemic: New York's quest to become the first state to reduce HIV prevalence. Public Health Rep. 2020;135(suppl 1):65S-74S.
- 17. Kharfen M., Barnes C., Lago L., Dwyer G., Horton K., Seiler N. New reimbursement and integrated planning: policy approaches to reduce the morbidity, mortality, and incidence of HIV in Washington, DC. Public Health Rep. 2020;135(suppl 1):19S-24S.
- 18. Fukuda HD., Randall LM., Meehan T., Cranston K. Leveraging health department capacities, partnerships, and health insurance for infectious disease response in Massachusetts, 2014-2018. Public Health Rep. 2020;135(suppl 1):75S-81S.
- Nassau T., Al-Tayyib A., Robinson WT., Shinefield J., Brady KA. The impact of syringe services program policy on risk behaviors among persons who inject drugs in 3 US cities, 2005-2015. Public Health Rep. 2020;135(suppl 1):138S-148S.
- Truman BI., Moonesinghe R., Brown YT., Chang MH., Mermin JH., Dean HD. Differential association of HIV funding with HIV mortality by race/ethnicity, United States, 1999-2017. Public Health Rep. 2020;135(suppl 1):149S-157S.
- Martin EG., MacDonald RH., Gordon DE et al. Simulating the end of AIDS in New York: using participatory dynamic modeling to improve implementation of the Ending the Epidemic policy initiative. Public Health Rep. 2020;135(suppl 1):158S-171S.
- 22. Kerr EM., Vonnahme LA., Goswami ND. Impact of targeted local interventions on tuberculosis awareness and screening among persons experiencing homelessness during a large tuberculosis outbreak in Atlanta, Georgia, 2015-2016. Public Health Rep. 2020;135(suppl 1):90S-99S.
- 23. Parriott A., Kahn JG., Ashki H et al. Modeling the impact of recommendations for primary care—based screening for latent tuberculosis infection in California. Public Health Rep. 2020;135(suppl 1):172S-181S.
- 24. Liao TS., Hashmi A., Lazaroff J et al. Effect of policy change to require laboratory reporting with pregnancy indicated for syphilis and hepatitis B virus infection, New York City, January

- 2013–June 2018. Public Health Rep. 2020;135(suppl 1):1825-1885.
- 25. Ansari B., Tote KM., Rosenberg ES., Martin EG. A rapid review of the impact of systems-level policies and interventions on population-level outcomes related to the opioid epidemic, United States and Canada, 2014-2018. Public Health Rep. 2020;135(suppl 1):100S-127S.
- 26. Siegler AJ., Komro KA., Wagenaar AC. Law everywhere: a causal framework for law and infectious disease. Public Health Rep. 2020;135(suppl 1):25S-31S.
- 27. Thompson K., Cramer R., Bodas LaPollo A., Hexem Hubbard S., Chesson HW., Leichliter JS. Using mixed-methods and multidisciplinary research to strengthen policy assessments focusing on populations at high risk for sexually transmitted diseases. Public Health Rep. 2020;135(suppl 1):32S-37S.
- 28. Marks SM., Dowdy DW., Menzies NA et al. Policy implications of mathematical modeling of latent tuberculosis infection testing and treatment strategies to accelerate tuberculosis elimination. Public Health Rep. 2020;135(suppl 1):38S-42S.
- Greenwald R., Waters P., Cayer S. Enforcement of legal remedies to secure hepatitis C virus treatment with direct-acting antiviral therapies in correctional facilities and Medicaid programs. Public Health Rep. 2020;135(suppl 1):44S-49S.
- Mahajan AP., Stemple L., Shapiro MF., King JB., Cunningham WE. Consistency of state statutes with the Centers for Disease Control and Prevention HIV testing recommendations for health care settings. Ann Intern Med. 2009;150(4):263-269.
- Saag MS. Editorial commentary: getting smart in how we pay for HCV drugs: KAOS vs CONTROL. Clin Infect Dis. 2015;61(2):169-170.
- 32. Warren HP., Cramer R., Kidd S., Leichliter JS. State requirements for prenatal syphilis screening in the United States, 2016. Matern Child Health J. 2018;22(9):1227-1232.
- 33. Macaraig M., Lobato MN., McGinnis Pilote K., Wegener D. A national survey on the use of electronic directly observed therapy for treatment of tuberculosis. J Public Health Manag Pract. 2018;24(6):567-570.
- 34. Eyler AA., Chriqui JF., Moreland-Russell S., Brownson RC, eds. Prevention, Policy, and Public Health. Oxford University Press; 2015.
- 35. Wagenaar AC., Burris S, eds. Public Health Law Research: Theory and Methods. Joseph Wiley and Sons; 2013.
- 36. Ibrahim JK., Sorensen AA., Grunwald H., Burris S. Supporting a culture of evidence-based policy: federal funding for public health law evaluation research, 1985-2014. J Public Health Manag Pract. 2017;23(6):658-666.
- 37. Bae JY., Anderson E., Silver D., Macinko J. Child passenger safety laws in the United States, 1978-2010: policy diffusion in the absence of strong federal intervention. Soc Sci Med. 2014;100:30-37.
- 38. Macinko J., Silver D. Diffusion of impaired driving laws among US states. Am J Public Health. 2015;105(9):1893-1900.