

ICMJE DISCLOSURE FORM

Date: 7/26/2023

Your Name: Ruth Dundas

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

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4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		Wellcome Trust Population Health Advisory Board 2022-25	Member
		NIHR Population Health Career Scientist Committee	Member
		NIHR Advisory Board – Evaluation and co-creation to optimise use and benefits of the Healthy Start Scheme	Chair
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: Click or tap to enter a date.

Your Name: Frank de Vocht

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

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10	Leadership or fiduciary role in other board,	<input type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;"> </td><td></td></tr> <tr><td style="height: 20px;"> </td><td></td></tr> <tr><td style="height: 20px;"> </td><td></td></tr> </table>							

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	society, committee or advocacy group, paid or unpaid	United Nations · UNSCEAR Expert Group on the evaluation of diseases of the circulatory system from radiation exposure (CircuDis) Health Council of the Netherlands Future Hazards Committee Member Society for Radiological Protection EMF & Optical Radiation Committee Committee Member to the UK Independent Governmental Advisory Committee on Medical Aspects of Radiation in the Environment (COMARE)	
11	Stock or stock options	<input checked="" type="checkbox"/> None 	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None 	
13	Other financial or non-financial interests	<input type="checkbox"/> None NIHR Public Health Research (PHR) Funding Board Swedish Research Council Public Health Funding Committee 	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: Click or tap to enter a date.

Your Name: Jim Lewsey

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
		NIHR PHR Funding Board 2020-2025	

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ICMJE DISCLOSURE FORM

Date: 1/22/2024

Your Name: Mhairi Campbell

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

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ICMJE DISCLOSURE FORM

Date: 7/15/2023

Your Name: Manuela Deidda

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 7/16/2023

Your Name: Prof Martin White

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	
		NIHR PHR research funding panel (2009-2020)	
		Director of the NIHR PHR programme, Chair of the Prioritisation Board (2014-20)	
		NIHR Strategy Board (2014-20)	
		MRC Population Health Sciences Strategy Group (PHSG) (2014-20)	
		MRC Public Health Intervention Development (PHIND) panel (2014-18)	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 1/23/2024

Your Name: Peter Craig

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 1/25/2024

Your Name: Srinivasa Vittal Katikireddi

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 7/17/2023

Your Name: David Ogilvie

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

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10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 15px;"></td><td style="width: 50%;"></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> <tr><td style="height: 15px;"></td><td></td></tr> </table>									

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11	Stock or stock options	<input checked="" type="checkbox"/> None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

Please place an "X" next to the following statement to indicate your agreement:

I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 7/15/2023

Your Name: Judith Green

Manuscript Title: Using natural experiments to evaluate population health interventions: a framework for producers and users of evidence

Manuscript Number (if known): NIHR136100

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		6 th International Congress on Public Health	Support to me for attending & presenting at congress in Turkey
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		NIHR PRU Behavioural Science SAB	2019-2023
		O'Brien Institute for Public Health, Calgary, Canada, International SAB	2017-2022
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
		Foundation Sociology of Health & Illness	Trustee
		Critical Public Health	Journal co-editor, until July 2023

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