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Information systems designed to monitor population health at the individual or societal level are useful resources to improve the quality of decision-making processes. They might allow assessing the state, performance, and results (efficiency) of the options and investments in healthcare. Therefore, information systems can be a leading part of accomplishing public health goals.

Population Health Monitoring: Climbing the Information Pyramid provides insight into the state of the art, broadening the knowledge on the best methodologies to choose, connect, and analyze the most suitable indicators for monitoring population health. This volume mainly aims to provide a clear, comprehensible understanding of population health monitoring. It is a multidisciplinary effort that gathers and combines diverse scientific expertise (social sciences, communication, economy, modeling, communication technology, and IT) to explain how monitoring can and should support evidence-informed health policymaking.

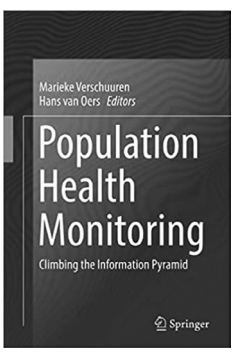
The volume's broad scope underlines its didactic nature, making it an employable instrument for some of its readers (scholars, students, technicians, political decision-makers) who aspire to an integrated view of this emerging field. This study follows a structure that ends up in a SWOT analysis, whose significant finding allows understanding which are the most developed areas and those needing further research. However, the authors struggle to incorporate the populations' expectations and positions in the methodologies to support decision-making, which is one of the work's weaknesses. Furthermore, the indicators used by international entities lack standardization and compatibility, which is another area requiring in-depth research.

Considering that this volume's structure is simple and educational, different step-by-step data collection and treatment processes are analyzed to gather information and deepen the knowledge basis, which will contribute to better policy and decision-making to improve population health. Thus, this publication defines the limits of health information systems, stabilizes their structure, debating the rationale behind them, the models and the indicators' relevance, the best practices to gather data, the analytical methods and results (considering the interests of different readers) and the strategies to transfer knowledge. It also allows its readers to have insight into some practical applications used to monitor health inequalities.

As similar works on this domain, the volume develops or builds several ideas easily tuned to the reader's interest. Without providing an exhaustive list, here are some core issues that are further underscored:

1. An information system endows every resource, stakeholder, action, and output with coordination and functionality by "enabling [the] evidence-informed health policy-making"[1] needed in every phase of progress or setback monitoring in public health. Ultimately, monitoring systems are (and should be designed to be) an essential resource to improve healthcare in communities.

2. It is essential to understand the goal and purpose of monitoring (depending on different assessment types/phases) and identify the models that better respond to the underlying needs of ongoing public health assessment. The authors suggest that special attention should be given to two proposals: i) the Lalonde model[2]; and ii) the Dahlgren and Whitehead model[3]. Both models highlight the importance of relating population health, well-being, lifestyle, social conditions, economic accessibility, political factors, ease of access to essential services, and the mechanisms that guide political interventions.



3. It is useful to know and understand different conceptual approaches so that the criteria used to select indicators are robust, allowing the simultaneously improvement of mechanisms for data gathering and information structuring and verifying their applicability and the results achieved through monitoring models.

4. Monitoring methodologies should assemble the two cycles' requirements: the monitoring one (data collection, modeling, interpretation, reporting, knowledge translation, and policy implementation) and the informative one. They should also consider each indicator's quality as a data-gathering device that is likely to produce specific and general knowledge. Comparison and stability are essential to facilitate the cumulative and commutative combinations of temporal, multi-level, multi-sectoral, spatial analysis.

5. This volume outlines the numerous advantages of standardizing the terminology used to catalog data and weighing the advantages and constraints associated with the use (and protection) of different information sources (registers and surveys).

6. The monitoring models' quality is inseparable from the data's reliability and the information retrieved from it. Knowledge transfer efficiency, whether this is done through reports (especially for decision-makers who prepare and implement evidence-informed policies) or through transfer mechanisms (relevant in conceiving bridges between knowledge, policies, and practices), mirrors the credibility of this interaction.

Healthcare quality and equity have become critical matters in political agendas all over the world. While the efforts made by international organizations and specialized research centers have been acknowledged, it is still fundamental to expand the work done in systematization and simplification, which will increase the applicability of models that measure, monitor, and assess health outcomes.

Monitoring models allow us to identify key-indicators and develop dashboards that (intuitively) present policymakers with the magnitude of the obstacles to access equal healthcare[4]. The fact that avoidable and unfair healthcare access disparities remain increases community exposure and risk, which, in turn, also increases systemic vulnerabilities (social, economic, environmental). The monitoring of these disparities in healthcare access is a means for societies to track real progress and assess policies that strengthen or weaken their resilience. This research line allows us to compare results in different healthcare systems and assess how they are linked to policymaking [5]. Whether this means monitoring the quality of the English healthcare services[4], the disparities identified in the U.S. and Israel[5], or the challenges of monitoring and assessing primary care in Brazil[6], the core issue is still how monitoring systems are conceived. As a result, *Population Health Monitoring: Climbing the Information Pyramid* makes a relevant contribution to this field of study as it offers its readers a comprehensive knowledge approach that will improve health monitoring systems.

Edited by Hans van Oers (chief science officer at the Dutch National Institute for Public Health and the Environment and professor in public health at Tilburg University) and Marieke Verschuuren (senior scientist at the Centre for Health Knowledge Integration at the Dutch National Institute for Public Health and the Environment), this collection of essays is a platform for disciplinary integration on healthcare monitoring. With 22 authors of very distinct backgrounds who research and inform healthcare policies in essential research centers in countries like Germany, Holland, Denmark, England, Finland, Scotland, and Canada, all essays aim to deepen the research made about different parts of the policy-making and information cycles. Each essay underscores the importance of stakeholders' involvement to qualify the policymakers' choices, assessed according to outcomes, that is, more and better healthcare.

Introduced as a manual, this volume presents a logical sequence of 10 chapters. With a straightforward structure, every essay extensively uses text boxes wherein key ideas are systematized and organization charts increase the chapters' readability. This editorial decision responds to its target audience's needs because it facilitates public health students' learning and allows technicians and policymakers to apply critical concepts in real-life scenarios.

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