Community Dentistry and Oral Epidemiology

Book Review

Oral health promotion evaluation toolkit

Watt RG, Harnett R, Daly B, Fuller SS, Kay E, Morgan A, Munday P, Nowjack-Raymer R, Treasure ET. London: Stephen Hancocks Ltd 2004.

This spiral-bound text is an innovative approach for providing health promotion personnel with a schema for evaluating oral health promotion interventions. It comprises three main sections: (i) First, a short contextual section, describing the principles of health promotion evaluation, their approach to consolidating an evidence-based method to evaluation, and an explanation of how the 'toolkit' could best be used; (ii) Secondly, the bulk of the text, which is devoted to an analysis of specific tools (questions/statements) which are useful in assessing oral health promotion outcomes or actions. The model used for classifying evaluation outcomes was derived from Nutbeam (1); (iii) The third section provides a detailed overview of the rigorous research and consultative processes involved in constructing the instruments and the toolkit.

Oral health evaluation measures focus on three age groups: (i) pre-school children; (ii) 12-year-old school children; and (iii) 'older people' (those above 65 years). Eight components of the original Nutbeam model – health literacy, social influence/ action, healthy public policy, healthy lifestyles, effective health services, healthy environments, morbidity, and quality of life form the matrix for the classification of oral health outcomes. For example, within the 'health literacy' component for pre-school children, three specific areas of outcomes: (i) parents/carers knowledge, (ii) parents/ carers attitudes, and (iii) parents/carers perceived control are identified. These areas of outcome further cascade into groups of specific behaviour/activity/element which in turn cascade into the specific outcome measure under evaluation; i.e. in evaluating parents'/carers' knowledge about the causes and prevention of dental disease regarding 'bottle use', five specific questions are identified as outcome measures. Each of these specific questions has been derived from an exhaustive review and analytical process to provide the reader with measures of quality, validity, reliability and discrimination.

The toolkit itself is therefore a series of questions/statements. These provide an evaluator with varying degrees of confidence in the way she or he may be estimating a programme or procedure for improving an oral health outcome. The varying degrees of confidence are expressed in terms of qualitative (a star system) and quantitative (the use of statistical testing) measures presented in a table format for each question/statement under investigation. For example, which of four questions/statements is most reliable, valid and discriminatory in measuring parents'/carers' understanding of the relationship between 'bottle use' and the causes/prevention of dental disease? The answer is found by comparing the values presented through derivative research.

The authors are to be commended for conducting such an exhaustive review and process for developing the toolkit. It has clearly involved thoughtful, time-consuming, and broad research and community consultative processes, and it provides an excellent start to a systematic and scholastic set of instruments that can be used to estimate how well oral health promotion activities are performing.

There are a few downside issues, however, that must be pointed out. In its present format, the toolkit is not an easily used resource by the average oral health educator. It would be most useful in the context of training and education of health promotion workers where it could be used as part of a formal education process. It is not something which an average oral health educator could take off the shelf and easily apply to day-to-day activities. Further, the binding of the text is flimsy and

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would not stand up well to normal wear and tear in a busy office.

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Reference

 Nutbeam D. Evaluating health promotion – progress, problems and solutions. Health Promotion Int 1998;13:27–44. This document is a scanned copy of a printed document. No warranty is given about the accuracy of the copy. Users should refer to the original published version of the material.