## COMMENTARY ON AYALA AND ELDER

# Even the most sophisticated oral health interventions and technologies are of no help unless people accept and use them

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Sharpening the focus on qualitative methods, Ayala and Elder (1) provide a helpful introduction to one set of approaches to assess the acceptability of behavioral and social interventions. While this article provides an overview of methods, the authors ground acceptability research in a broader program planning context. Offering some very specific, practical tips, Ayala and Elder (1) pose one of the key questions in qualitative work: "What have I not asked that is important?" Additionally, providing possible interview or focus group questions to respondents ahead of time, and asking them to pose additional questions, can help to prompt thoughtful, reasoned, and comprehensive replies. Requesting that respondents review transcripts post hoc, and to provide reactions and corrections to them, also may produce the greatest accuracy.

Insuring that interviewees, focus groups members, key informants, and others are given "voice" (2) is a unique and critical feature of qualitative approaches. Inviting respondents to provide at least some of the structure in determining what is considered, what issues are discussed, and what decisions are made allows the casting of a broad net in qualitative work.

Transcribing interviews or group sessions, which itself is demanding of effort and precision, and reading them, only serve as a starting point for the analysis of qualitative data. The process of identifying themes and clusters of themes in transcripts perhaps most properly is grounded in established methods, such as interpretative phenomenological analysis (3). Moreover, traditional psychometric concepts such as reliability need not be foreign to qualitative data analysis.

The authors allude to combining qualitative and quantitative approaches in mentioning collecting survey data after a focus group session. Including both methods of data acquisition may be quite powerful in many circumstances in oral health and elsewhere. A sequential approach in first using qualitative approaches and then quantitative ones with different segments of the target population may allow a thoroughgoing way of assessing acceptability.

Emerging and innovative qualitative approaches such as Photovoice are helpfully introduced in this article, speaking to the evolving nature of the field. The importance of the inductive approach is emphasized, as it allows for the data to "speak for itself." Qualitative approaches invite perspectives and ideas that researchers, with their own personal and cultural backgrounds, may not have considered, or about which they may not even be aware. It does not impose an *a priori* structure of preconceived ideas that limit the realm of construct validity (4).

In spite of the tremendous importance of community acceptance of interventions, acceptability of an approach in and of itself does not alone imply that it will be utilized. To be potentially efficacious, there must be ready access to interventions and acceptability of them, and they must be utilized. Just as health knowledge does not equate to behavior change or behavior maintenance, so too acceptability does not necessarily imply utilization. Neither adoptability nor acceptability is sufficient for behavioral engagement, but they likely are necessary.

Acceptability must be broadly conceived; it applies not only to behavioral and social interventions in oral health but to dental and pharmacological ones as well. It is an important concept in the oral health field generally. Whether a target population finds endodontic therapy and its associated costs, for example, as acceptable, or instead generally prefers extraction, is likely an important determinant of their treatment choices. Qualitative approaches heralded by Ayala and Elder (1) offer great promise in the oral health arena, both for behavioral/social interventions and across the broad range of preventive, assessment, and treatment approaches. The author declares no conflict of interest.

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