

because of the low priority given to oral health, and because water is as an emotive topic. Furthermore, in focus-group discussions Lowry *et al*⁶ found that the general public wishes to be informed of plans to fluoridate water, but that members of the public did not perceive themselves as the appropriate people to judge the effectiveness of such interventions. These findings provide an insight into the general public's view of water fluoridation – those interested in advocating water fluoridation to the public should recognise that lack of information is less important than the perception that the public is not well-placed to make such choices.

An exploration of the subjective meaning of health-related phenomena need not be restricted to understanding patients' health-related behaviours. Health care professionals also use inferential techniques to make sense of objective data. For example, clinicians will weight evidence from various sources and use heuristic techniques to summarise data. These processes will have implications for their understanding of research findings and therefore diffusion into practice.^{7,8}

Process

Qualitative methods have been used to identify the social processes that underlie health care. An excellent example of such research is provided by Kay and Blinkhorn.⁷ Content-analysis of in-depth interviews with 20 general dental practitioners revealed that an understanding of disease processes and of available treatment options was an insufficient basis for treatment decision-making. Many considerations outside concepts of health were brought to bear on the decisions made by the dental practitioner and patient, such as the impact of disease and treatment upon work and social interactions.

Interaction

Qualitative studies often take interactions as their focus. For example, in medicine, the encounter between physician and patient has been viewed as bringing together potentially conflict-

ing views of health and illness which require negotiation in order to achieve desired outcomes.⁹ Adopting such a framework allowed Britten *et al*¹⁰ to identify misunderstandings between the doctor and patient which led to errors in drug prescription. There have been no published qualitative studies of the dentist/patient interaction to date.

Relativism

Qualitative research is relativist. It focuses on different explanatory frameworks without making judgements about the value of the different systems. For example, research examining the oral health-related behaviour of minority ethnic communities seeks to identify the place of this behaviour in its social and cultural context: for an excellent example of such an approach see Kwan and Williams.¹¹ Such an approach adopts the viewpoint that social and cultural beliefs are of equal validity as beliefs about health. Neither is given precedence.

The implementation of evidence-based practice in dentistry will depend critically upon an understanding of the process of the diffusion of knowledge from centres of research to general dental practice. It will be important to understand the context of general dental practice and the influence of factors other than evidence upon treatment-choice, eg. the interaction of dental practitioner and patient. Inherent in such an approach is the assumption that an understanding of the context of general practice is as important as an understanding of the evidence in determining the process of diffusion. Qualitative methods provide a rigorous approach to understanding this process. The adoption of qualitative methodologies does not imply the rejection of the quantitative methods appropriate to evidence-based practice, but instead acknowledges that different research questions call for the adoption of different research methodologies.

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Commentary

This article makes the very important point that the process of translating evidence-based recommendations into clinical practice requires research. This need is receiving recognition from diverse fields within health care, such as primary care,¹ health management² and acute care.³ The massive response to evidence-based health care can be attributed to the fact that health is a biomedical science, and the evidence-based approach provides a framework for using science to improve the quality of care. Health care is also a social science, which means that clinical encounters, doctor/patient relationships, relationships with colleagues and the patient's daily life are all factors that

greatly influence whether practitioners and patients adopt evidence.⁴

The framework used by the author is helpful for explaining the principles of qualitative research, but it now needs to be applied to the field of dentistry. The concept of naturalism, for example, can be applied to issues such as dental hygiene. Dental health is influenced by the patient's socio-economic situation and social networks. Qualitative research could be used to explore this broader 'natural' context, producing findings useful for creating prevention strategies that are more relevant and feasible to people in their daily lives. Interactions between dentist and patient provide another potentially fruitful area for qualitative research. The author points out that there are no publications exploring the interaction between patient and dentist, to date. There is, however, a large literature on the quality of doctor/patient communication and implications for decision-making in other health care settings,

with methods that could be easily carried over into dental research.^{5,6} If dentist/patient communication was explored qualitatively, the findings could illuminate the epidemiology of dentistry, providing explanations for such phenomena as the uptake of dental services and the ability to follow dental advice.

The article alludes to the challenges of implementing evidence from clinical trials in real life, an issue increasingly being researched in other settings.⁷ There is mounting recognition that evidence from trials is only one piece of the clinical picture, which must be balanced by social, political and economic considerations. Qualitative research is uniquely placed to provide knowledge of these other spheres, and can be used in conjunction with clinical evidence to link research to practice.

Janet Harris

*Director, Health Sciences,
University of Oxford, Oxford, UK*

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