



Dental Health Foundation
Ireland

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Submission from the Dental Health Foundation to the Consultation for Successor to Strategy for Science, Technology and Innovation

March 2015.

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The Dental Health Foundation, Ireland, is appreciative of the opportunity to respond to The Consultation for Successor to Strategy for Science, Technology and Innovation.

Since its establishment in 1977 the Dental Health Foundation (DHF) has played an important role in facilitating and supporting the promotion of oral health in Ireland. The Foundation works closely with the Department of Health and the Health Service Executive, providing a focus for oral health within the wider context of health promotion in Ireland. It also provides a complimentary role to public health bodies on a national basis. It has acted as Secretariat to the Irish Expert Body on Fluorides and Health since 2004 and as Secretariat to the National Oral Health Policy since 2014.

DHF is committed to addressing the oral health needs of all groups in society most particularly those at high risk and those who are vulnerable and suffer the most. The Foundation is a valued resource within the healthcare sector for advice and tools to promote best oral health practices, and increasing awareness amongst the public empowering them to make healthier oral and general health lifestyle choices. Best-available evidence indicates the importance of the continued promotion of oral health messages.

Many of the people who are most at risk of poor health outcomes are members of underserved populations, populations that are generally made up of individuals who are of low socioeconomic status, possess low levels of health literacy, are elderly, are members of marginalized ethnic and minority groups, or have limited formal education.



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These underserved and vulnerable populations often have limited access to relevant health information, especially information widely available over the Internet. These same vulnerable populations are also subject to serious disparities in health care and generally have much higher rates of morbidity and mortality due to serious health threats, especially from cancers, than the rest of the public.

New strategies and policies need to be developed to help underserved and vulnerable populations access relevant health information. These strategies and policies should help them use such information to make informed health-related decisions about seeking appropriate health care and support, resisting avoidable and significant health risks, and promoting their own health
(Dental Health Foundation 2012).

The Nairobi Call to Action ‘Closing the implementation gap in health promotion’ (2009) outlines actions that make a difference to strengthening health systems including:

‘Build and apply the evidence base

... by investing in research and evaluation, and its dissemination, to increase the adoption of better practices in health promotion;

... by setting up databases including clearing-houses on research evidence and rapid response mechanisms to meet policymakers and practitioners’ needs for evidence-informed policy formulation and decision making’.

The Dental Health Foundation has outlined how this can be done in its ‘White Paper on the Implementation of Oral Health Promotion’ (Dental Health Foundation 2012), while drawing on robust scientific evidence.

The DHF has previously made recommendations in its ‘White Paper ‘The Importance of Oral Health Promotion’ which will require multi-professional and multi-disciplinary work,



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collaborative working and commitment at senior level, inclusion of all stakeholders and the sharing of information and resources (Dental Health Foundation, 2011).

The Dental Health Foundation supports the practice of open access publication so that the output of publicly funded research in Ireland can be made freely and openly available. Open Access Ireland was set up in 2012 to advocate for open access publication in Ireland.

Under the National Principles for Open Access Policy Statement, Open Access is defined as

“...free availability on the public internet, permitting any users to read, download, copy, distribute, print, search, or link to the full texts of these articles, crawl them for indexing, pass them as data to software, or use them for any other lawful purpose, without financial, legal, or technical barriers other than those inseparable from gaining access to the internet itself. The only constraint on reproduction and distribution, and the only role for copyright in this domain, should be to give authors control over the integrity of their work and the right to be properly acknowledged and cited”

The Dental Health Foundation in its role of health advocacy, stresses that it is also important that this information is available in a non-scientific format which is easily and readably understood by the general public.

Science communication should therefore be an essential part of the Science strategy and considered in the process ‘For Successor to Strategy for Science, Technology and Innovation’. Good science communication is not a public relations exercise. Its purpose is not – or should not be – to boost the profile and self-interest of those who do, or pay for, the research. Scientists are recognising the need not only to communicate more freely among themselves – hence the growth of the open access movement – but also to communicate the significance of their work to both policy-makers and to the general



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public. This means ensuring that all stakeholders have access to well-communicated science.

At a recent briefing on Science Communication at the Focus Research Institute, DIT, March 2015, Professor Hugh Byrne, Head of the Institute, commented that accountability came to the fore after the 'Celtic Tiger' and therefore communication between the scientist and public is becoming more and more important. Professor Byrne further stated that there has been a huge shift regarding the dissemination of information, that it is not just about presenting papers at conferences, it is about what is relevant to the public, and engagement with the public is one of the pillars.

Communication skills are something that can be learned and developed over time. Prof. Byrne mentioned that Scientists spend years becoming experts in science but not in communications and that Science Communication is a professional skill. He also pointed out that the type of level of complexity of financial issues is not dissimilar to science and that it has been possible to break these financial issues down into language which is understood by the public.

Mr Sean Duke, presenter of 'Life Matters', RTE Radio 1 agreed with Prof Byrne and stated that Scientists should think of themselves in terms of being a listener (radio), and that they should explain science by reference to everyday life, for e.g. explain plate tectonics by reference to a half boiled egg. He further stated that Scientists have to find a way to explain the concepts in a way that everyone understands and it is not about 'dumbing down'.

In other words, an effective science communicator should be interesting to experts while being understandable to a novice (without oversimplifying). No matter how good science is, it is not useful unless the message is conveyed to a broader audience outside of a small subset of academic peers. Therefore the role of the journalist is also important in Science Communication. Journalists and scientists must work together so that the science is reported correctly.



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In the USA, in response to reports from dentists and dental associations nationwide of the escalating anti-fluoridation messages reaching their communities, the American Dental Association (ADA) House of Delegates approved a resolution calling for the ADA to implement a proactive social media campaign to promote the safe and positive effects of optimal water fluoridation. Dentists had noticed that anti-fluoridation groups were very media savvy and the threat of negative social media regarding fluoride, and it was apparent that it was a national issue. The ADA agreed that via the Internet, it is simple to spread misinformation, but difficult to correct it. The House agreed that being proactive was a necessity to clear up misinformation that local policymakers, citizens and health care providers may be getting from other sources.

Another recent initiative, The Knowledge to Policy Center (K2P), based with the Faculty of Health Sciences at the American University of Beirut was officially launched in March 2015. K2P aims to couple evidence from scientific studies with context specific expertise. Products include policy briefs, media bites and evidence summaries, all designed to translate evidence into an easily digestible format for policy makers and those working in media. Fadi al-Jardali, Director, K2P, stated that K2P can help governmental actors make decisions that will positively benefit the public, “by making sure that high quality evidence and tacit knowledge are becoming an integral input into the policymaking process.”

He explained that tacit knowledge is the combination of experience and expertise of those working on the ground.

While such information may not reach the pages of a published scientific article, Jardali said that tapping into tacit knowledge is just as essential for informed policymaking, which is why K2P aims to leverage information from both scientific studies and context-specific expertise to improve decision-making in Lebanon.

Currently, products on the K2P website cover issues relating to mental health, Syrian refugee health access, water fluoridation, universal health coverage and food safety.



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Failures of communication in science not only limit the utility of science and its progress, but can have consequences as outlined above. Therefore the Dental Health Foundation reaffirms its support for the Consultation for Successor to Strategy for Science, Technology and Innovation.

Ms. Etain Kett, Public Affairs and Communications Manager.



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