There is a glossary and a bibliography. At the end of the document there is an evaluation form provided as a mechanism for getting feedback and improving the document.

In thinking critically about the publication, there are some areas where it could be clearer about defining relevant research and evaluation questions and making decisions from them about the mix of methods, but this is more of a quibble on an issue of concern to the reviewers, than a major problem.

The range and scope of the literature canvassed is good. While there could perhaps have been a wider discussion of qualitative methods, this would have made the book longer, to its detriment.

The use of Patton as the base for qualitative research is a good choice because he does not get caught up in the sniping so often seen when qualitative and quantitative meet. Patton has an excellent description of the role of sampling in qualitative research.

Another small area of weakness is the lack of a discussion of the difference between statistical significance and practical significance. If the numbers are large enough (that is, if the power is high enough) even very small changes will reach the threshold of significance. Where mass data are being used this means that changes that seem to be small and meaningless in terms of output efficiency will be statistically significant and the findings publishable. On the other hand when dealing with small or minority groups even quite large differences will be seen as not reaching the threshold of statistical significance. The changes, however, may be of great practical significance even though they can't be published. Some discussion of the level at which the threshold of significance should be set for different types of decisions would have been of value. This has been extensively canvassed in the journal *Evaluation* over the years.

That said, we return to the starting point of the review, that the guide is an excellent tool to improve evidenced based decision making in injury prevention.

J Moller
New Directions in Health and Safety, Adelaide; jmoller@senet.com.au

I Scott
Melbourne; ianscott@virtual.net.au

A Schema for Evaluating Evidence on Public Health Interventions. Version 4.

Lucie Rychetnik, Michael Frommer. National Public Health Partnership*, Melbourne, June 2002 (free as pdf file from www.nphp.gov.au).

The work leading to this publication arose out of discussion in the leading Australian committee for allocating health related research funds†. The committee considered the difficulties that can arise when established methods for evaluating evidence based medicine are used to evaluate research on public health interventions. When workshops of experts considered these issues they concluded that established methods of evidence appraisal provide a useful starting point for evaluating evidence of all types of health interventions but recommended that the methods should be expanded or adapted to take account of the specific issues in public health.

From this came the development of a draft schema (stage one), resulting in a discussion document in May 2000, based on literature reviews and consultation with senior public health researchers and practitioners. Then came a series of trials (stage two), resulting in the development of the document under review.

The schema covers two stages of appraisal—firstly the appraisal of individual papers or reports to determine whether they provide credible and useful information about an intervention(s) and, secondly, the formulation of conclusions about the value of the available evidence. The process of reviewing published and other literature on public health interventions and of using these findings is seen to involve at least six steps. These are: identifying the purpose of the literature review and formulating the review question(s); finding and collating the studies to be reviewed; appraisal of each article or report; formulation of a statement on the body of evidence; publication of the review findings; and, application of the review findings to policy and practice.

Section 1 of the document deals with setting the scope of any review; section 2 considers the papers in any review; section 3 with describing the results from the papers; section 4 with interpretation of each article; section 5 with summarising the body of evidence. Appendix 1 discusses the hierarchy of study design and the levels of evidence. Appendix 2 has a series of supplementary guides on reviews, random control trials, observation studies, economic evaluation, and qualitative studies. Appendix 3 has a sample table for summarising all the papers reviewed. There is a short list of references, primarily of Australian work.

The critical issue in public health and in injury prevention is that Cochrane style methods of assessing evidence do not work well for population based interventions or in dealing with evidence developed outside the framework of the medical model‡. This leads to certain classes of literature and methods being excluded from the development of an overview of the evidence. This in turn leads to limitations on the interventions that are funded and evaluated, further diminishing the evidence base for the future. The document is seen as a "work in progress" intended to facilitate critical appraisal of evidence and the role of evidence in public health policy and practice. It will be interesting to see the degree to which this process addresses these problems.

I Scott
Melbourne; ianscott@virtual.net.au

*The NPHP is a formal Australian structure for officers of the Commonwealth, States, and Territory governments to come together to develop a joint Australian intergovernmental agenda for public health.

The National Public Health Partnership Group (NPHPG) is a subcommittee of the Australian Health Ministers' Advisory Council (AHMAC). The council's role is to support the Australian Health Ministers' Conference (AHMC), by providing strategic advice on health issues and by acting as a forum for planning, information sharing, and innovation.

†National Health and Medical Research Council (NHMRC).

‡This formulation of the issue is from Jerry Moller.

CALENDAR

Lifesavers Conference: National Conference on Highway Safety Priorities

28–30 March 2004, San Diego, California. Details: www.lifesaversconference.org.

7th World Conference on Injury Prevention and Safety Promotion

6–9 June 2004, Vienna. The major objectives of the conference are strengthening violence and injury prevention as an aspect of national public health policy and programs; producing synergy of the combined efforts of various violence and injury prevention disciplines; exchanging the most recent experiences in research and practice; and facilitating participation of experts from low income countries. Further information from www.safety2004.info. Details of the nine associated meetings can be found at www.safety2004.info/associated_meetings.php.