



# OECD PROJECT ON THE IMPACT OF BEST PRACTICE IMPLEMENTATION

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# OECD Work Improves the Rigour and Reliability of Selecting, Implementing and Evaluating Best Practices



Guidebook to help countries select, implement and evaluate best practice interventions in public health



In-depth analysis of candidate best practices in public health from both EU Member States and OECD Member Countries



Provision of advice to the EC, SGPP and Joint Actions testing new candidate best practices for future assessment



# The Guidebook for Best Practices in Public Health Will Be Released Soon

- The Guidebook is developed based on the literature, expert feedback as well as outputs produced by European projects such as JANPA, CHRODIS-PLUS and SCIROCCO;
- The Guidebook is applicable to all types of public health interventions such as those tackling risk factors, NCDs and mental ill-health as well as to interventions tackling infectious diseases;
- The Guidebook is a tool to help national and local level policy makers select best practices in public health and lays out the frameworks used to assess the candidate best practices;
- The guidebook will be released in the coming weeks: stay tuned!

## Structure of OECD's Guidebook to select, implement and evaluate best practices in public health





# Candidate Best Practices Are Evaluated Using a Standard Approach Co-developed with Countries

## An assessment is produced for each evaluated candidate best practice

### Intervention description

### Assessment against 5 criteria

Effectiveness,  
Efficiency  
Equity  
Evidence-base  
Extent of coverage

### Economic evaluation

The OECD microsimulation model is used whenever data allows  
Otherwise, evidence from studies on similar interventions is used for a high-level assessment

### Enhancement options

Uses the same 5 criteria of the assessment  
Enhancement options are evidence-based and drawn from the literature

### Transferability

Indicator-based transferability assessment  
Grouping of countries based on objective and standard approaches, identifying potential challenges

**ToyBox: case study overview**

**Description:** ToyBox is an intervention delivered in schools to children aged 3-4 years of age (i.e. in Kindergarten) with the aim of promoting health lifestyles to prevent obesity. It is a 24-week, multi-component intervention targeting four key behaviours namely: drinking water when thirsty, consuming healthy snacks, increasing physical activity, and prolong periods of sedentary behaviour.

**Selected kindergartens in European countries including Belgium, Bulgaria, Greece, Germany, Malta, Poland and Spain have implemented ToyBox.**

**Best practice assessment**

**OECD Best Practice assessment of ToyBox**

Criteria	Assessment
Effectiveness	ToyBox has been shown to reduce sedentary behaviour, increase physical activity and improve eating behaviours, however, evaluation results are not conclusive.
Efficiency	Available economic evaluations indicate ToyBox is cost-effective, however, results are limited in scope.
Equity	ToyBox aims to address inequalities by addressing a health issue that disproportionately affects children with a low socioeconomic status (SES). Evidence on impact indicates ToyBox is more effective for children attending high-SES kindergartens.
Evidence-base	Evidence to evaluate ToyBox is strong in many areas including study design and the data collection methods used. However, as in many public health studies, neither researchers nor participants were blinded.
Extent of coverage	In kindergartens offering ToyBox, between 63-74% of children participate.

**Enhancement options:** To enhance effectiveness, ToyBox administrators could enhance interactive engagement with parents and the community, as well as extend the duration of the intervention beyond 24 weeks. To ensure staff have the appropriate skills to deliver the intervention, additional support for teachers as well as integrating obesity prevention topics into formal qualifications required to become a kindergarten teacher could prove beneficial. To enhance the evidence-base, reporting the impact of ToyBox on BMI in addition to secondary outcome measures (e.g. physical activity) is needed. To the extent possible, authors are encouraged to report results by different population groups with a particular focus on those who are disadvantaged. To enhance the extent of coverage, a multi-pronged approach to recruit parents (and therefore their children) may prove beneficial in boosting participation rates, for example, by promoting ToyBox with support from government organisations to enhance trust.

**Transferability:** ToyBox operates in several European and non-European countries indicating it is a transferable intervention. In countries where it does not operate, publicly available data indicate that ToyBox is likely to receive political support, a key pillar of transferability, as it targets a prominent public health issue – childhood obesity.

**Conclusion:** a review of ToyBox across several European countries found the intervention performed well against most criteria within the OECD Best Practices Framework and is transferable. For example, ToyBox reduces sedentary behaviour and improves eating habits, and has been shown to be cost-effective. However, results indicate it is more effective among high socioeconomic status kindergartens, which is a key limitation. To improve the performance of ToyBox, policymakers could increase parental and community engagement as well as extend the duration of the program beyond 24 weeks.

Participating countries include Belgium, Bulgaria, Germany, Greece, Malta, Spain and Poland.  
The intervention concentrates on each EERBs for four weeks (16 weeks) which is then repeated, however, for only two weeks (eight weeks).  
In addition, the importance of good oral health is also being emphasised in Malta.  
Participants were not blinded.  
Participation by children ranges between 63-74% amongst eligible kindergartens in European sites.  
Data on dropout rates is not available, however, this is expected to be low to none given the intervention is delivered within schools.

Pinkel et al. (2018) found across six European countries studied that children in the intervention group experienced a statistically significant reduction in pre-packed fruit juice when compared to the control group. Specifically, consumption of pre-packaged juice fell by -33ml.

An evaluation of the ToyBox (Malta) was planned for year 2020, however, due to unforeseen barriers caused by Covid-19, the evaluation was put on hold indefinitely.



# Groups of Homogeneous Candidate Best Practices Are Published in Booklets

A first booklet on healthy lifestyles will be presented to the December meeting of the Health Committee, for publication planned in Q1-2022. A second booklet on integrated care is in preparation. Others will be released at a later stage

## Healthy lifestyles



- Nutrition and physical activity programs

## Integrated care



- Coordination between different levels of care and professionals

## Healthy environments



- Bike and walking paths
- Mass media campaigns
- Reformulation policies
- Food procurement

## Digital approaches



- mHealth apps targeting risk factors such as diabetes, physical inactivity and obesity

In addition to the analyses of the case studies, each booklet contains an assessment and recommendation chapter, bringing together the main high-level findings and a background chapter describing the context relevant to the assessed interventions

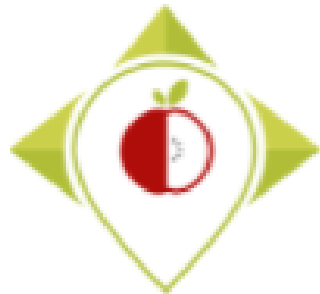


OECD is working with several European Joint Actions

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**JADECARE**



**Best-ReMaP**

Healthy Food for a Healthy Future



**CHRODIS+**

IMPLEMENTING GOOD PRACTICES FOR CHRONIC DISEASES



## Delegates to SGPP are invited to:

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- Note the study and lessons it has already generated;
- Consider how **SGPP can be further involved** in the project, for example by:
  - **proposing candidate** best practice interventions in public health;
  - **requesting support to OECD** for relevant Joint Actions, from design to implementation; and
  - requesting and **supporting the development of country-specific modelling modules** to increase precision and tailor outputs to EU Member States' needs.



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