Reviewer's report

Title: Using intervention mapping (IM) to develop a self-management program for employees with a chronic disease in the Netherlands

Version: 6 Date: 27 January 2010

Reviewer: Marie José Durand

Reviewer's report:

Major compulsory revisions:

General comments
The objective of this study was to present the development and content of a self-management program for employees with chronic somatic disease. This paper presents an interesting topic using the well-documented approach of intervention mapping. However, as explained below, the background should be more concise, the method and results should be more detailed, and the discussion and conclusion should be based on the objective of the study. A linguistic revision is also required.

Background
The background is too long and should be more concise. The background should start with the importance of chronic somatic diseases, their impact of work disability, the CDSMP program, and conclude with the objective of the study. Currently, the objective is found on page 5 before the definition of self-management. Also, information on risk factors (e.g. last paragraph on page 4) could be cut to the bare minimum.

Method
More details are needed on the method to help the readers understand how the program was developed. In step 2, it is not clear who and how the program was defined. The second paragraph on step 2 (page 7) would be more appropriate in the results section. In step 3, the authors wrote “the planner”. To whom it refers to? In step 4, we questioned if the previous steps were useful since the original CDSMP seemed to be used in full without adaptation, besides from the addition of 2 chapters on work disability (“the facilitator manual of the participants was translated in Dutch and two chapters with work-related information were added”, page 8). In step 5, although we understand that a large scale implementation plan was not developed, the authors should add some information on how the program was implemented for the purpose of their study (in-house implementation). For example, besides from training of the master trainer and the recruitment of two moderators, the authors could add information on how the personnel were mobilized, the marketing strategies used to recruit subjects (information on page 18), etc. Also, were there agreements needed with employers to offer the training during work hours? Finally, in step 6, more
information of how the evaluation plan was developed is needed.

Results

In step 1 (page 10), the results should include more information on the participants recruited. For example, how many subjects participated in each focus group? How were they recruited? Did they come from a same workplace? What type of work did they do? Which health professionals participated (i.e. physicians, occupational therapists, nurses, physiotherapists, ...)? Why have they chosen employees with RA, diabetes and hearing loss to explore prerequisites for employees? Also, they obtained different results for each patient group. How were the results combined in this study?

In step 5 (page 18), the authors should focus more on what was done to implement their program in the setting. Information on the participants' selection (2nd paragraph of step 5, page 18 and 4th paragraph of step 5, page 19) would be more appropriate in step 6.

As proposed by the previous evaluator, more information is needed in step 6 (page 19) to include details of the methods of the RCT and the process evaluation. Who were recruited (information from step 5)?, what were the sample sizes?, how were the outcomes measured?, were subjects followed up after the program?, what was offered in the control group?, etc.

Discussion

The objectives of this paper were to present the development and content of a programme. Currently, the discussion focuses more on the intervention mapping approach and the methods used. It should also discuss the impact of their program on work disability and what is innovative about their program (besides having used a rigorous method). Another point of discussion is the definition of work disability used by the authors (“misfit between work-related demands and the individual capability”, page 3). This is a limited view of work disability. In the work disability literature, the evidence goes beyond the misfit between demands and capacity. It suggests adopting a person-environment model and a work disability paradigm that recognized that work disability results from a complex interaction of biological, psychological and social factors and involves various actors (i.e. employer, employee, health care providers and insurers).

Conclusion

Again, the objectives of this paper were to present the development and content of a programme, not to test the feasibility of the intervention mapping approach. The authors cannot conclude that they have proven that intervention mapping is feasible, since they did not study this issue. The conclusion should be reviewed.

Minor essential revisions

In the background, all sentences related with reference #1 (by Dupré and Karjalainen 2003) seem to include health problems and disability other than chronic diseases. Its relevance this with the topic of this paper is questionable.
On page 5 (1st paragraph starting with “In this study, the method of intervention mapping...”), the sentence of intervention mapping should be moved in the method section.

English should be edited. For example, on page 3 (1st paragraph), some sentence should be checked (e.g. “Prognostic studies preview an increase in the next twenty years...”), the authors might have meant “predict” instead of “preview”; “Unhealthy lifestyles causing e.g. obesitas add to... ”, might use “such as obesity” instead of “e.g. obesitas”). On page 4 (1st paragraph, last sentence, “to learn them how to it”), did the authors meant “to teach them how to do it”? Workplace (not work place) should be written in one word (pages 5 and 6).

Some citations should be in the same parenthesis: “(25) (47)” --> (25, 47) (page 7); “(42-44) (48-50)” --> (42-44, 48-50) (page 10); “(25) (57-58)” -->(25, 57-58) (page 15).

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.