Reviewer's report

Title: Can the disability assessment behaviour of insurance physicians be explained? Applying the ASE model

Version: 1  Date: 12 October 2010

Reviewer: France Legare

Reviewer's report:

Review

I thank you for inviting me to review this manuscript.

1. Is the question posed by the authors well defined? Yes: Our research question is how far the self-reported behaviour of insurance physicians is influenced by Attitude, Social norm, Self-efficacy and Intention while taking account of the intermediary roles played by Knowledge and Barriers.

2. Are the methods appropriate and well described? No. the authors refer to the theory of planned behaviour but the behaviours of interest are not well defined and the constructs are not in relationship with the behaviours of interest. This is in contrast with what the theory of planned behaviour posits.

3. Are the data sound? Not clear if the constructs were operationalized in accordance with the theory of planned behaviour.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition? The methods section needs to be revisited and its structure improved.

5. Are the discussion and conclusions well balanced and adequately supported by the data? See above.

6. Are limitations of the work clearly stated? Yes.

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished? Not clear. They cite work based on the theory of planned behaviour but its constructs are not defined nor operationalized in accordance with the theory.

8. Do the title and abstract accurately convey what has been found? Could be more informative.

9. Is the writing acceptable? Some editing would be welcome.

Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

Comments and suggestions to authors are as follow:

The abstract does not convey important information about the methods. Its background is too long in relationship with the methods section. The resultst
section of the abstract contains methods and should be strictly focused on the study results. For example, the following sentences “We estimated latent ASE constructs for most of the assigned scales and dimensions. All could be described and interpreted. We used these constructs to build a structural equation model that showed a good fit” belong to methods.

Overall, the intention of the authors is quite interesting: using SEM to operationalize a theory based approach to behaviour change. However, after a careful review of the manuscript, I have many questions that remain:

1) It is not clear why the authors did not operationalize the constructs based on the theory of planned behaviour since they used many of its constructs (attitude, social norm, intention to name a few). From the methods section, it is clear that these constructs were not operationalized as specified by the theory of planned behaviour. This is not clear why.

2) They refer to a number of behaviours of interest for this study but it is not clear what these behaviours are. In the introduction section, the authors state that: “This paper examines assessments of work limitation by insurance physicians in the Netherlands.” This is a very generic statement. However under the methods section, I could only assume that these behaviours were:

a. On p. 10, the authors present a first behaviour reflecting the assessment process but yet present 8 items that do not seem to fit under one single behaviour

b. On p. 11, the authors present a second behaviour. Again, there is a number of items that do not seem to fit a clearly define specific behaviour.

It would be much appreciated if the authors could define clearly the behaviours of interest.

3) In line with the above comment and question, why are the constructs of attitude and social norm not aligned with the behaviours of interest?

4) Under the methods section, I would suggest to remove the information about the response rate. This information should be provided under the results section.

5) The response rate of 51% appears to be overstated. It should be calculated using the 750 insurance physicians who were contacted.

6) The whole section on “measurements of observed variables” is confusing. Again, it would be helpful if the authors clearly defined the behaviours of interest and made clear that the constructs that were inspired by the theory of planned behaviour were operationalized accordingly.

7) On p. 9, the construct of “knowledge” does not represent knowledge per see but a perception of knowledge by the respondent. Would this be a salient belief of the perception of control? This could be so when reading p.13 where the authors state: “Knowledge alone, we estimated this together with the latent variable Barriers, because theoretically both play an intermediate role in the relationship between Intention and Knowledge alone, we estimated this together with the latent variable Barriers, because theoretically both play an intermediate role in the relationship between Intention and Behaviour in the ASE model.”
Again, why not use the theory of planned behaviour?

8) On p.9. the construct of intention is misleading since its items do not correspond to the behaviours or interest. Not clear if the authors were referring to behavioural intention here?

9) The section “Analysis” should be reviewed by a biostatistician. I hope there is a strategy the authors can use to write this section in a more accessible manner.

10) Under the results section, the authors should provide a Table 1 for participants’ characteristics.

11) Under the discussion, the authors cite similar studies which have used the theory of planned behaviour. However, this type of comparison is misleading if they have not operationalized the constructs according to the theory of planned behaviour.

12) The authors acknowledge the study limitations on p. 23 and acknowledge that they have not measured behavioural intention in accordance with the behaviours of interest. Therefore, it is possible that their results are not valid because of a mismatch between the theory of planned behaviour and the definition and measurement of its constructs.

Level of interest: An article of limited interest

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

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

'I declare that I have no competing interests'