Reviewer's report

Title: A framework for stakeholder identification in health research: A novel process and its application to older adult mobility and the built environment

Version: 1 Date: 16 January 2013

Reviewer: Shannon Sibbald

Reviewer's report:

This was an interesting paper and a well written manuscript. I was immediately drawn in by the title and thought there was a lot of potential to what the authors were proposing.

I was left at the end a little confused, and not sold on the idea of needing a identification framework – but I think this issue could be solved by having the authors spend a little more time on the justification for this sort of tool. Why do we need this tool, and why now? We have been ‘getting by’ without a tool like this – so what is the reasoning for why we need it (just because something else does not exist, does not necessarily mean we need something to be invented).

Major Compulsory Revisions

1. The Abstract is a little vague (I appreciate the word count issue), but would appreciate a short definition of stakeholder as well as a brief point on why just research contexts.

METHODS

2. Your Medline search seems very small and limited. I would expect a broader search using more key words and possibly other databases/search engines.

3. At the end of page 8 you say CS has little a priori knowledge of... Please justify why this is said in the way it is. Is it meant to be important part of the methods? Please justify. As is it is a little confusing and clouds the parag.

RESULTS

4. Stating you did a ‘detailed search’ is somewhat misleading. I encourage the authors to do a broader search so this statement is true – or modify the statement accordingly.

DISCUSSION

5. I am not sure you have “presented a process”, more you are presenting the framework and you explained the process.

6. I agree that (maybe) the framework is transferrable, but you need to justify this, and spend a little more time on this. Perhaps provide some examples of other contexts, and some considerations that would have to be made. You do not know for certain it would be transferrable until you test it out.

7. Pag 14, “omissions may go undetected”. Please add a line explaining how
your framework ensures omissions are detected.

8. The line about “these techniques broadly capture” is great, and I think it would be better suited up front in the background as a way to justify your work.

9. Figure 2, to me, does not read like a ‘map’, but more like a detailed list. It would be helpful if there were some ‘mapping’ or conceptual linking details. This may be beyond the scope of the research.

10. I am not convinced this work provides as much guidance as it purports. The resulting framework is a good description, but I am not sure it will help future researchers actually determine how to go about ‘getting’ stakeholders.

Minor Essential Revisions

GENERAL FORMATTING

11. Please be consistent with use of indenting throughout. Sometimes you do indent parag, other times you do not.

12. Please check with BMC formatting if the ethics/protocol # is required, if so, please include.

RESULTS

13. Pg 10 you use ampersand for Trochim & Kane – not consistent with other areas where you write ‘and’.

14. Pg 10 also there is a footnote or endnote ‘x’.... not sure what this is referring to.

Discretionary Revisions

BACKGROUND

15. References #1 and #2 are given to show the issue is being increasingly recognized, but these reference are a little old - - something more recent might show the increased trend toward this issue/challenge (does something more recent exist?).

16. 2nd sentence “groups and individuals affected by an issue” > such as? Please provide an example.

17. The 1st sentence of the 2nd parag is wordy and hard to digest. Please simplify or break apart.

18. In the 2nd parag (after ref#6) you say “factors at both ...” > please explain and/or give examples of factors.

19. I would expect another reference to go along with #7, since you are referring to multiple items/tasks.

20. For reference #8, you need a page # for a quote.

21. In the same parag you say ‘numerous stakeholder definitions exist’ > please provide some of these other definitions.

22. Is it possible to provide the Freeman figure you refer to on page 5 as
supplemental?

23. The 2nd parag on page 5 is unclear.

24. Please indent the 3rd para on page 5.

25. On page 6 you start talking more explicitly about stakeholder in health contexts, I wonder if you could provide a definination of stakeholder from the health literature?

26. Another role conceivably for stakeholders, which seems to be missing from the long para on page 6 is that of ‘expert opinion’.

27. The framework ‘accountability for reasonableness’ (Daniels and Sabin) just might have something to add about how to find “relevant people” - - at the very least they have acknowledged this as a challenge/problem. Might be nice to cite their work.

METHODS

28. You say in the 1st sentence “in previous work” > please cite.

29. Watch your tense Trochim and Kane identified (not identify); pg 7. I would also argue that from this sentence onward to about the end of the para on page 8 you are not presenting methods, but more results - - suggest moving to results.

30. If possible please provide some detail on your expert informants, what makes them expert in this area?

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

Quality of written English: Acceptable

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