Reviewer's report

Title: Design and Validation of the Health Professionals' Attitudes Toward the Homeless Inventory (HPATHI)

Version: 1 Date: 23 September 2004

Reviewer: David Buchanan

Reviewer's report:

General

This study describes the creation and preliminary validation of a new survey assessing health professionals’ attitudes toward homeless patients. A survey of this kind does not currently exist in the United States and it represents a contribution to those who study and teach about this topic. The process for creating the survey is sound and appropriate steps were made to eliminate redundant items and those which do not correlate with the overall scale.

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

Abstract:
- Under “Conclusions:”, the statement, “Inter-item and inter-scale correlations supported the overall construct of the HPATHI and its hypothesized subscales” appears to contradict the manuscript’s Discussion. The Discussion states, “the confidence sub-scale … failed to show a satisfactory Cronbach’s alpha coefficient in either of the two separate administrations of the instrument.”

- In the final sentence of the abstract, “Extreme group comparisons, which suggest that experience with the homeless rather than medical training affects health-care professionals’ attitudes toward the homeless…”, the word affects suggests a causal link between the experience and attitudes. Since this data is cross-sectional the competing hypothesis that people with better attitudes seek out this clinical work can not be excluded, the sentence should be re-worded to reflect this. A prospective study showing that exposure changed attitudes would be needed to confirm the authors hypothesis and would be useful direction for future study with this instrument.

Background:
3rd paragraph, final sentence: the words, “that can only” should be changed to “may” or a similar word unless a reference can be provided.

Methods:

Although the ATHI and ATHQ are both described in the Background section as prior instruments used for similar purposes, there is no discussion of why the authors chose to compare their new instrument to the ATHI and not to the ATHQ. This decision should be clarified.

Phase 2: first paragraph
Describe the response rate for the pilot administration and for the second administration two weeks later. For instance, were all third year students (n?) asked to complete the survey and 72 completed it? Or, are there only 72 students in the class? Or, if only 72 students were asked to complete it, how were the 72 selected? Similarly, for the second administration, a brief description of how the 34
students were “randomly selected” and what the response rate was among those selected would improve this section. These questions relate to the generalizability of the sample used.

Second paragraph: The authors present in the paper two ways of separating the overall scale into sub-scales. One is based on the hypothetical subscales (attitudes, interest, and confidence) and the other is based on the results of the factor analysis. If the hypothetical subscales are to be discussed in the paper, the specific items included in each sub-scale should be included in the text of the paper to assist future work with the HPATHI by other groups. On the other hand, if the authors feel that after the factor analysis, the hypothetical sub-scales are less important, the sub-scales could be eliminated from the paper to reduce confusion. If both are included, the independent contributions of each should be stated in the Discussion section.

Discussion:

2nd paragraph: final sentence: “…the HPATHI could be used to evaluate the impact of training experiences on students and residents…” This statement should be qualified because the current instrument has not been shown to be responsive to change. Use of this instrument in this way should be framed as a next step in the instruments further validation.

Conclusions

1st paragraph: “The validation process for the instrument has shown promising results that could offer guidance in the design and implementation of educational activities aimed at fostering improved medical care to the homeless.” This is interesting and suggests that the authors learned lessons from the validation process which gave them insight into the learners or curriculum they teach. If this is true, the lessons should be included in the Discussion section of the paper.

3rd paragraph: The authors say, “The instrument may also be used to determine attitudinal changes affected by training experiences occurring among the homeless.” This has not been demonstrated by the current study and should be framed as a future direction.

“Over the next year, medical students, residents, and practicing physicians will be asked to respond simultaneously to the ATHI and the HPATHI.” This implies to me that in the study presented, the ATHI and HPATHI were not responded to simultaneously. If that is true, the interval should be described in the Methods section.”

“Additionally, we intend to include participants from other medical schools in the United States and to expand our sample to other health care professionals to improve the instrument’s overall validity.” Minor point: Consider changing the concept of “improving” to “further testing”. The validity would only be improved if it was tested and further revised (and this is not implied currently). If there are no further plans to revise it, the validity would be further tested or demonstrated by using it with other populations, but it would not be improved.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Conclusions

1st paragraph: “The scales identified b the factor…” Change “b” to “by”.

3rd paragraph: “over…” changed to “Over…”

Table 1: Remove the line drawn after item #23, or explain it in a note at the bottom of the table.
There are two tables labeled “Table 5” and none labeled “Table 4”

Discretionary Revisions (which the author can choose to ignore)

Methods, 3rd paragraph: Consider changing “all experts in homeless care” to a description of their experience in this area or a description of how the panel was convened.

Tables: Consider removing the 4 items from the final two tables which you do not recommend including in the final instrument. If you choose to continue to include them in the tables, add a note to the final table which lists the deleted items (as you did in the next to last table.

What next?: Accept after minor essential revisions

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

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

None