Reviewer's report

Title: It's all about relationships: A qualitative study to explore researcher's perspective of conducting interdisciplinary health research

Version: 1 Date: 8 January 2008

Reviewer: Sara Shaw

Reviewer's report:

GENERAL
This paper explores researchers' perceptions and experiences of interdisciplinary health research. It is an important and topical area as both interdisciplinarity and health research are under-researched. However, the paper needs substantial changes.

MAJOR REVISIONS
1) P2, abstract / results -- this needs rewriting. The suggestion that the choice to conduct interdisciplinary research is highly influenced by funder and organisational factors does not resonate with findings/discussion in the main text.

2) P4 -- the opening paragraph works well. However the phrase has further reinforced the value needs qualifying. Is this about the value placed on interdisciplinarity by funders or national institutions? with the subsequent sentence then affirming that we know little about researchers experience (or their perceived value?) of interdisciplinary health research. This needs to be made clearer.

3) P4/5 -- authors should problematise interdisciplinarity more in their background section. The initial statement that it has been clearly defined and operationalised does not appear to be the case. For instance the systematic review they cite was unable to find a clear definition and the descriptions provided on page 5 from CAHS, from Aboelela et al.'s study and their own description vary. Are these presented simply to show varied definitions or do authors intend their own description is a reworking of these definitions? This becomes more problematic later in the paper as authors refer to their analytic strategy to determine whether participants' experiences were congruent with commonly held definitions of interdisciplinary research. This suggests that the definitions that they provide are common and accessible and thereby provide the basis against which interviewees' knowledge might be judged. If they believe this to be the case then they need to explicitly state this. If not, then they need to rework the section on data analysis (p9) and subsequent reporting of findings.

4) P4 References to multidisciplinarity and transdisciplinarity are useful but might work better if interdisciplinarity were first described and then how these differ from it.
5) **P5 -** Authors should provide a more detailed account of current literature in their background section. They currently refer to **notable commentaries** rather than published empirical studies. Whilst they refer to **the considerable amount of scholarly writing relating to interdisciplinarity** (p12) an introduction to this literature would be valuable to readers up-front. For instance, they refer to **commentaries** as being **instrumental in laying the foundations for documenting some of the difficulties of interdisciplinary research** but then fail to either document these or to cite the relevant literature.

6) **P7, design / sampling** authors should provide further justification for their sampling decisions. The study question focuses on interdisciplinary health research and so why did the study focus on academic research centres / health researchers and not other settings where interdisciplinary health research takes place (e.g. NGOs, government bodies, industry)?

7) **The sampling section is rather confused:** a number of questions remain unanswered (e.g. How many research centres were included and how were these selected? Did they have a culture of interdisciplinary research? How were researchers **known** to have experience or expertise in interdisciplinary research? What is classed as expertise? Had the researchers interviewed worked together in the past?) and in the space of five lines authors refer to snowball, purposive, critical case and maximum variety sampling. This section needs rewriting, providing readers with a clear and concise description of what they did and why they did it.

8) **P8, final para** needs tightening up (e.g. A semi-structured interview guide was used to explore participants’ perceptions and experiences of conducting interdisciplinary health research, potential barriers and facilitators, and knowledge of literature in the field. Detailed questions on evaluation were also asked and will be reported as part of the wider study. All interviews were digitally recorded and transcribed with consent with any identifying information removed from transcripts to ensure confidentiality). The sentence relating to analysis should go into the subsequent section on page 9.

9) **P9** the suggestion that authors are measuring awareness of participants against **commonly held definitions** and **commonly cited standards** for interdisciplinary research seems undue as, by its very nature, interdisciplinary research, means many things to many people (see 3 & 4 above). If authors have specifically described what they consider as the **common standards** as part of each interview and asked participants to comment or reflect on these then this needs to be made explicit in the background and methods sections (and if not, it probably needs rethinking). This also needs addressing on p11 under **defining interdisciplinarity**, which currently reads that participants were specifically asked about this.

10) **P10** the first section under results needs rewriting. Several points need to be addressed. Does the descriptions of interviews **from 17 to 66 minutes** refer to the first section of interviews relevant to this particular paper or to the whole interview including the second section on evaluation? The length of (at least) one interview at 17 minutes is concerning and raises questions about
the quality of qualitative data collected in study limitations authors should reflect on how much they can interpret from the data collected? The use of means and percentages is inappropriate. Readers need a clear and concise description of interviewees and authors might consider including a table providing readers with an overview of e.g. positions in academia, disciplinary representation, years of experience in academic health research, experience on interdisciplinary studies.

11) Remaining findings come across as somewhat confused. Firstly the section on Defining interdisciplinarity is confusing is this really about defining it or about saying how difficult it is to pin down and how varied participants descriptions were? At the moment illustrative quotes relate solely to the possible distinction between multi-, inter- and trans-disciplinary research and not on broad conceptualisations or definitions of interdisciplinarity (the focus of the section). It might be useful to return to the data and explore if and how those who have been extensively involved in interdisciplinary research and/or are very familiar with the literature differ in any way from those less familiar? Secondly, findings give a sense of the variability of experiences and understandings of interdisciplinary research and yet authors seem to want to offer a picture of how interdisciplinarity was conceptualised by the interviewees as a group. This appears contradictory and needs addressing. Thirdly, the identification of a key theme all about relationships suggests that this is predominantly how participants conceptualised interdisciplinary research but this is not then explored, only the four sub-themes. One way of addressing these points might be to simply start by describing (with illustrative examples) varied conceptualisations of interdisciplinary research (inc relationships); explore the data further to see if and how these variations might be explained; and then focus in on key themes being explicit that these capture the broad similarities and differences across conceptualisations?

12) Throughout findings, direct quotations need to include a short descriptor of each interviewee and not the ID number/code: perhaps their disciplinary background? Or their level of experience? If participants were sampled from more than one site then this might be worth making clear. Developing the table under point 10 might assist with this.

13) Table 1 is inadequate. It refers to three key challenges but it is unclear where these have emerged from, if there was consensus across all participants that these were the only three (authors mention some of the challenges in the text on p12 but we don’t know what these are, were there more challenges, why are only these cited?). Strategies are uninformative and need rethinking: for instance what kind of leadership, in what circumstances and to achieve what ends? What is meant by power dynamics between whom? Is this just about people or about institutions, systems?

14) Authors do not adequately tease out similarities and differences amongst participants across the different findings sections. This needs to be addressed throughout. For instance, on page 14, first para it would be helpful to know in which disciplines was this evident? And what do interviewees refer to about tenure and promotion that indicates these need to be revisited? On the same
page, authors refer to four factors noted by participants as contributing to the pursuit of ID research but it is unclear if there was agreement across all participants about this or not?

15) The discussion section reads well and provides some much-needed clarity (e.g. it is only here that readers find out that there was a uniformity of experiences and perceptions across disciplines â## though this contrasts with p14 where authors suggested that interdisciplinarity was not valued by some disciplines!) A few points need clarifying. P21, para 2 needs clarifying â## e.g. what is interdisciplinary research as â##second natureâ##? what is the relevance of interdisciplinary graduate programs to the field of study? Is it really â##evident that there is an emerging breed of researchersâ##,â## or does some of the existing literature simply suggest this? Para 2 â## the sentence that â##researchersâ## focused primarily on the practicalities of conducting interdisciplinary researchâ## might be better in findings.

16) Authors might consider incorporating study limitations within the main discussion and should reflect on how the inclusion of academic health researchers (and not other researchers or institutions) impacted on their findings, as well as the potential transferability of these findings.

17) The paper is somewhat wordy and, in places, repetitive. It would benefit from close attention to language and a thorough edit (akin to some of the suggestions above and below).

MINOR REVISIONS

18) P1 - The title needs revision â## it should either read â##â##A qualitative study to explore the researcherâ##s perspective ofâ## or â##â##A qualitative study of researchersâ## perspectives ofâ##

19) P2, abstract / methods â## drop â##individualâ## as key informant interviews are, by their nature, individual.

20) P2, abstract/results â## Replace â##As wellâ## (e.g. â##In additionâ##)

21) P5 â## is this study about â##the researcherâ##s perspectiveâ## or about â##the health researcherâ##s perspectiveâ##?

22) P7 â## perhaps omit the reference to focus groups? It seems a little out of place. Also tighten up the opening sentence (e.g. â##This was a descriptive study utilizing qualitative interviews to allow for exploration of the experiences and perceptions of health researchersâ##).

23) P7, para 2 â## with known experience of, or expertise in, interdisciplinary researchâ##

24) P8, top of the page â## perhaps â## when no new information was gainedâ##. This sentence also refers to data collection and should be moved to the subsequent section. Similarly the first paragraph of the section on data collection should be moved into sampling. Alternatively, authors might merge these together into one section on â##Sampling and data collectionâ##.

25) Authors refer to both â##respondentsâ## and â##participantsâ## and should
pick one of these to use throughout.

26) P9, end of first para on â##Data analysisâ## - shorten sentence to â##Illustrative quotes are included within findings.â##

27) P9, final sentence of â##Study rigourâ## section â## this might be better at the start of the section and simply stating that the study proceeded once ethics approval had been gained from the appropriate body.

28) P11. first section of â##Defining interdisciplinarityâ## â## it would be useful to read more about the kind of interdisciplinary research that participants were involved in. Authors also refer to defining â##interdisciplinarityâ## and â##interdisciplinary researchâ## though it is unclear if they see these as the same?

29) P12, last sentence â## optimizing might be the wrong word here as it implies thereâ##s a fixed optimal level of interdisciplinarity. Something about maximising the benefits from interdisciplinarity might be more appropriate?

30) P13, last para â## the phrase â##There was a concerted recognitionâ## needs changing (perhaps widespread recognition?)

31) P15 final para â## should be â##incentivesâ##

32) P20, 1st para, line 10 â## insert â##asâ##

What next?: Reject because scientifically unsound

Level of interest: An article of limited interest

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