Reviewer's report

Title: Advancing pandemic influenza control in the general population: qualitative research perspectives from Australia and the UK

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Reviewer: Afrodita Marcu

Reviewer's report:

I am thankful to the editors for giving me the opportunity to review this interesting manuscript on the topic of public reactions to pandemic influenza. The manuscript is overall well-written, but there are some sections which need further improvement, which I am detailing below:

Major Compulsory Revisions

1. Abstract: the research question should be clearly formulated in the Background. In the Conclusions, the word ‘questionable’ (line 23) is inappropriate in this context – perhaps rephrase as ‘inadequate’.

2. Background: This section needs to include a more detailed and nuanced discussion of documented public reactions to the H1N1 pandemic outbreak of 2009-2010, including qualitative studies.

3. Background: The rationale for the study could be formulated more clearly – it does not naturally follow from the reviewed evidence, nor does it point to any evidence gap it tries to address. There is a plethora of studies, including qualitative ones, on public reactions to pandemic influenza precautionary measures, so the authors need to highlight what is novel in their approach to this topic.

4. Background: Furthermore, the emphasis on ‘complacency’, ‘resistance’ and ‘fatigue’ as a-priori potential explanations for public reactions are not compatible with an inductive thematic analysis – it seems that a deductive approach was used instead, as the authors tried to map pre-established categories of response onto the qualitative data they gathered.

5. Methods: The interview schedule / focus group topic guide could have been included as an appendix, or more details should be included on the questions that guided the interviews/focus groups. Was any stimulus material used? Were the participants asked to respond to public health measures advocated back in 2009-2010 during the H1N1 pandemic?

6. Methods: Line 25, p.5: The statement on analysis ‘according to the list of themes agreed by the team’ is rather incompatible with the nature of inductive analysis as stated in the Background. The authors should make more explicit their analytic strategy, and explain why their analysis followed a list of ‘agreed’ themes.

7. Results: Overall, the themes not interpretative enough, and their titles should
reflect more closely the data elicited, e.g. ‘Beliefs about preventing and moderating infection’.

8. Results: Quotes from the interviews and focus groups should be included in the Results section under each theme to support the analysis, as other qualitative papers in BMC Public Health have done, e.g. Wang et al. (2014, 14:1138, doi:10.1186/1471-2458-14-1138). More quotes should be included so as to support the arguments better.

9. Results: Lines 6-7, p.7: The authors should revise their interpretation that the lay public made ‘flawed risk calculations’, as this is at odds with the nature of qualitative studies which usually focus on people’s subjective interpretations of events or life experiences. The lay public are not experts therefore their responses should not be judged as ‘flawed’.

10. Discussion: This is overall well-written but it could include a section on ‘Strengths and limitations’ of the current study. The discussion should emphasise what this particular study brings new to the field. It should include more reflection on the implications of the present findings, as well as suggestions for future interventions regarding public uptake of precautionary measures.

Minor Essential Revisions

11. Methods: Interviews and focus groups were ‘conducted’, not ‘recruited’ — line 15, p.4.

12. Methods: More background information on the number of swine flu casualties in Scotland and Australia could be included to provide a context to the participants’ reactions.

13. Methods: Lines 8-9, p.5: interviews explored personal experience rather than ‘disclosure’; and do the authors mean personal experience of H1N1 influenza?

14. Methods: Line 9, p.5: the authors mean social norms concerning precautionary behaviours against pandemic influenza.

15. Results: the analysis of the participants’ responses does not go into enough depth in some place, e.g. Lines 19-22, p.6: what did the focus on social units like family serve in the participants’ responses? did it motivate them to adopt precautionary measures?

16. Results: Line 13, p.10: 64 ‘they had ever had an influenza vaccination’ or ‘never had’?

17. References: These need to be double-checked, as some are incorrect, e.g. paper by Davis et al. in Sociology of Health and Illness is from 2014, not 2013.

Discretionary Revisions

18. Lines 22-23, p.3 are ambiguous: the public insufficient uptake of precautionary measures, not the portrayals of the general public, should be addressed.

Overall comments:
One of the premises of this study was to explore whether current explanations for the public responses to pandemic influenza such as complacency, resistance, and fatigue are sufficient for our understanding of public behaviour regarding pandemic influenza prevention. However, these explanations are not addressed in the Results – was there no evidence of these? If so, this should be made more obvious, and the analysis should be constructed in a way that shows evidence of this. Currently, the themes do not make a case for the absence of complacency, resistance, or fatigue.

In some places in the Results, there are reflections on different studies and comparisons between surveys and qualitative measures – these should be reserved for the Discussion. The authors should discuss whether there any differences in responses between Scotland and Australia and what might account for them. On a minor note, do not use ‘UK’, but ‘Scotland’, as the study was conducted in Scotland only. The same applies for the title.

Overall, while this paper deals with an important issue in public health, it somewhat fails to highlight what it brings new in terms of method, perspective, or findings. As it is, it does not offer new insights into how the public make sense of pandemic influenza and what should inform future health campaigns during new influenza pandemics. Nevertheless, the editors might want to consider this paper for publication once the authors have made all the necessary revisions.

Level of interest: An article of limited interest

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.