Author’s response to reviews

Title: Attendance barriers experienced by female health care workers voluntarily participating in a multi-component health promotion programme at the workplace

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Author’s response to reviews:

Dear Editor,

All changes have been made according to the reviews suggestions.

REQUESTED REVISIONS:

Methodology

1. It is understood that semi-structured interviews may yield rich insights. However, it is unfortunate that a tenth participant was not pursued. The authors only mention the lack of diversity as a limitation and should perhaps mention the low sample size – or better justify the sample size.

Answer:

We agree and have added the following in the discussion of limitations.

Change in the strength and limitations:
Despite a smaller sample size data saturation seemed to be reached with no new themes emerging in the last interviews.

2. Clarification regarding the recruitment of interviewees is required - e.g., were all participants asked? Were incentives offered? Were specific individuals selected and if so, why? Is there any concern that those that volunteered to participate in the interviews represented only those with extreme views? The authors do not provide this information, nor discuss the potential implications.

Answer:

The recruitment of interviewees was random and systematic according to the participants’ attendance rate, age, sex, BMI, education, workplace, and work shift thereby securing validating the results. We have added the following in Participants and procedures and in the Strength and limitations.

Change in Participants and procedures:

To explore any potential differences in organizational barriers, all participants from two different workplaces were asked to be part in the present study, and 92% accepted to be interviewed if randomly selected. Because of the high acceptance rate to be interviewed we had no concern that the interviewed participants were presenting specific views. No incentives for agreeing to participate were offered. These two workplaces were chosen to avoid biased answers, as the person who carried out the interviews hadn’t had any former contact with these particular workplaces. Next in the recruitment process, the participants who agreed to be interviewed were divided in two groups, those who were working at a retirement home and those who were providing homecare at the citizens’ private homes. This division was important because of the difference in their working conditions and working shifts (Table 1). Five in each groups were drawn to be interviewed.

Change in strength and limitation:

The recruitment systematically selected all participants from two specific workplaces, and divided those who were working at a retirement home and those who were providing homecare at the citizens’ private homes, thus interviewing five participants from each group. After the 10 participants were drawn, it was discovered that one participant had changed working place, giving six in one group and four in the other. After this selection, the participants were randomly recruited, but we hoped that our sample would include participants with different characteristics in ages, BMI and attendance rate. Luckily this was obtained. If our sample hadn’t shown a
variety, the plan was to continue pulling one participant at a time until a certain variation was achieved.

3. Did the authors use any software for the qualitative analysis? E.g., NVivo?

Answer:

We used Microsoft Word for the transcription of the audiotaped interviews, which is now added in the manuscript. We did not use any other software.

Change in Participants and procedures:

The interviews were audio recorded and transcribed in Microsoft Word, with participants’ identifiable information deleted from the transcripts. We did not use any specific software to carry out the analysis.

Discussion

4. It may be important for the authors to reiterate findings do not necessarily inform strategies to increase overall reach and participation in the programme as it only represents those who did participate. The authors may wish to discuss the scope for future work that collects both reasons for a) not enrolling and; b) poor attendance, to identify any overlap.

Answer:

The study includes participants with both low and high attendance and this has been added in the manuscript (please see the answer the requested revision no. 2). We see your point by adding the scope for future research, and have added the following.

Change in strength and limitations:

This study only identified barriers identified by participants who volunteered to participate in a WHPP, as we were interested in finding reasons for low attendance rates despite that the participants stated that they really wanted to attend. Although more than 85% volunteered to participate in the FRIDOM project, future research may also explore the barriers for not enrolling in a WHPP, which may overlap with the findings of participants with low attendance rates in the present study.
5. The discussion could be improved by providing a statement at the end of each paragraph (e.g., organizational, intervention, and individual factors), to suggest methods to avoid/account for these factors. This may better prepare the reader for the conclusions.

Answer:

We absolutely agree and thank you for the comment as a statement collecting the content may better prepare the reader for conclusion.

Change within the organizational factor:

This clarifies the importance of securing the support from the team leaders when implementing a WHPP.

Change within the intervention factor:

To reduce the interventions barriers it is important to state clear information to the participants about the intensity and content of the training, and when the intervention takes place.

Change within the individual factor:

Finding the most perfect time for the intervention to take place may facilitate a higher attendance rate. The employee-working shifts have to be planned thoroughly to enable participation in training sessions.

Conclusion

6. Why only organizational and intervention factors? The results suggest that personal factors were identified by 7 participants. Authors should better justify this statement and/or rework the conclusion section.

Answer:

We agree and the following have been added to the conclusion.

Change in conclusion:

By carefully planning the time of the training sessions, some individual barriers can thereby be reduced, when participants do not have to select training instead of their family.
7. Page 17, Line 52-57. This concluding sentence does not serve as a good, summative statement. The conclusions section may be improved by replicating the flow of the discussion (once more summary statements have been added to the discussion) to guide the reader.

Answer:

We completely agree and have thus altered the final statement in the conclusion.

Change in the conclusion:

To summarize, in order to increase attendance rates when offering a WHPP it is important to carefully considerate relevant organizational, intervention, and individual factors.

Grammatical

8. Page 11, Line 49. Change 'planed' to 'planned'.


Answer:

Thank you for your grammatical advice. 'Planed' has been changed to 'planned' in line 49. The following lines have been revised.

Change:

9. Nöhammer and colleagues identified training organized outside working hours as an attendance barrier, like found in the present study.

10. A whole new section has replaced the former section - see comment 2.
11. Furthermore, if participants experience physical injuries or sickness in may be difficult to optimize the attendance rate.

Kind regards,

Jeanette Reffstrup Christensen