Reviewer’s report

Title: Barriers and facilitators to taking on diabetes self-management tasks in pre-adolescent children with type 1 diabetes: a qualitative study

Version: 0 Date: 03 Jul 2018

Reviewer: Margaret Grey

Reviewer’s report:

In this manuscript, the authors present the results of a qualitative study of 24 children between the ages of 9 and 12 with type 1 diabetes. This topic is important as more and more aspects of self-management need to be shared between parents/caregivers and the children. Importantly, the results of the study highlight the need to address the concern about whether these children are capable of making complex mathematical calculations to determine bolus doses.

That said, there are a number of areas that are not included or are unclear. For example, previous reports have suggested that children diagnosed in early childhood have more difficulty with the transition to self-management. As presented, it is difficult to discern whether age at diagnosis influenced some of their care decisions. It might be useful to add a table with descriptions of each of the participants (e.g., age, pubertal status, time since diagnosis). Such a table will help the reader to understand these relationships. Similarly, children in this age group vary a great deal in their developmental and pubertal status. Again, it would be important to understand if some of these characteristics influence their decisions.

The description of the qualitative approach is confusing. The authors say that an 'inductive, descriptive' approach was used, but the reference supporting this statement is for grounded theory. The purpose of grounded theory approaches is to develop theory about a phenomenon. No theory was determined here. This appears to be more of a 'qualitative descriptive' study, per Sandelowski. The approach to data collection is appropriate, but it is unclear how the play tasks were conducted and use to achieve the aims of the study. More clarity is necessary.

It is curious that the Standards for Diabetes Care referenced were from 2006. These standards have changed a great deal since then, and the ADA as well as ISPAD have issued standards for the care of children and adolescents with type 1 diabetes. These findings should be informed by the current standards for children.

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