Author’s response to reviews

Title: Stressors and resources related to academic studies and improvements suggested by medical students: a qualitative study

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Author’s response to reviews:

Dear Dr. Choi-Lundberg,

thank you very much for the reassessment of our manuscript “Stressors and resources related to academic studies and improvements suggested by medical students: a qualitative study” and the opportunity to submit a revised version.

We have adopted your suggestions in our manuscript and provide a detailed response to the reviewer's comments. All new changes are tracked in the text.

Yours sincerely,

Peter Angerer, Jeannette Weber, Thomas Muth, Stefanie Skodda and Adrian Loerbroks
Reviewer reports:

Authors: We would like to thank the reviewers for their reevaluation of our manuscript and the constructive and helpful comments on it. We have revised our manuscript accordingly as outlined below.

Jan C. Frich (Reviewer 1):

1. I think the authors have improved the manuscript significantly. I will still argue that the description of the sample (placed at the beginning of the result section) should be placed in the methods section (as it is in the abstract). Parts of the methods section (analysis) is difficult to understand when you do not know the total number of focus groups interviews. Recruiting until "saturation" (though the whole concept has been contested) is one out of many sample methods in qualitative research, and there is no reason that studies that use this sample strategy should be reported in a different way than other qualitative studies. Please see the EQUATOR network website: [http://www.equator-network.org/reporting-guidelines/](http://www.equator-network.org/reporting-guidelines/) that cites two established standards for reporting qualitative research: 1) O’Brien BC, Harris IB, Beckman TJ, Reed DA, Cook DA. Standards for reporting qualitative research: a synthesis of recommendations. Acad Med. 2014;89(9):1245-1251. (see table 1, standard 12), 2) Tong A, Sainsbury P, Craig J. Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. Int J Qual Health Care. 2007;19(6):349-357. (see table 1, 32-item checklist).

Authors: Thank you very much for your comment. Accordingly, we have now placed the description of study sample in the method section (page 6, lines 1-10). Please also note that we have provided the completed COREQ-checklist as supplemental material.

2. I think the result section is easier to read with illustrating quotes. I did not fint the additional file #2. I question if additional quotes are necessary. I want to stress that quotes are not proofs, they simply illustrate generalisations the researchers make. When citiing quotes, I think it would be more apporiate to place the "tag" after the quote: " ...." (Focus group (FG) 4 - Study year (Y) 1). Try to ground quotes even better in the text. Be explicit on what you want to illustrate.

Authors: A tag has now been placed after each quote. However in keeping with the editor’s recommendation, we would still like to present additional quotes in the supplementary file. We agree with the reviewer, that this file is not supposed to provide “proofs”, but more illustrative material to facilitate understanding among the readership. Furthermore, we checked that our quotes are directly related to the preceding text.
3. I think the discussion of methods should focus on criteria associated with qualitative research. It would be somewhat strange in the methods section of an epidemiological study to write: "Epidemiological studies do not aim to explore human experiences and stories ... " (cf. "Qualitative research cannot necessarily claim to yield representative or generalizable findings. does not aim to be representative or generalizable, but Instead, the aim is to explore the full breadth of diverse potential opinions and experiences". I will advise the authors to focus on criteria such as validity (to what extent the study was able to generate representative data of relevance for the aim) and transferability (rather than generalizability). I think the discussions of methods will be better if they discuss the study in relation to these criteria. What possible implications does limiting the recruitment to one medical school have for the validity of the study? (more in-depth understanding of one setting, but vulnerable to special characteristics with this particular school). How does the study design (recruiting from one site) influence the transferability of the findings? Etc.

Authors: Thank you for this very good point. The statement on exploring the full breadth of diverse opinions and experiences instead of aiming for representative and generalizable findings in qualitative research has now been deleted. Instead we have now explicitly focused on the criteria you mentioned (page 24, lines 3-16): “Furthermore, participants of different academic years, age and sex were included to ensure that a broad range of potential opinions and experiences are taken into account. … Some themes might therefore relate to conditions specifically linked to our university (e.g. stressors like commuting and organizational factors), whereas others might have been overlooked. However, findings from previous qualitative research and from our study are similar (e.g. stressors like exams and time and performance pressure) and are consistent with established stress models (e.g. effort-reward imbalance model), which may suggest partial transferability of our study results to students at other medical schools. In addition, our study allows for a local view on the study conditions and may thereby help to identify setting-specific intervention needs and means for effective improvement.”

4. I like the figure, but some factors could be more explicit - in which ways do administrative staff, teaching staff and fellow students acts as stressors?

Authors: Thank you very much for your suggestion. We have added “interactions with administrative staff, teaching staff and fellow students” to the figure. Furthermore the following adjustments were made: “insufficient information flow” instead of “information flow”; “reducing group size” instead of “group size”; “Single online portal comprising all important information” instead of “single online portal”; “exam content” instead of “exams”; “guidelines (e.g. about learning objectives)” instead of “guidelines”; “flexibility (e.g. optional attendance of lectures”) instead of “flexibility”; “possibility to repeat exams” instead of “repeat exam”. However, please note that space limitations restrict a more elaborate explanation of codes.
Thomas Kötter, MPH (Reviewer 2):

I thank the authors for their thorough rework of their manuscript. It has improved significantly and I have no further content-related remarks. But, unfortunately, the reference list still does not meet the journals’ requirements completely. Please check again (e.g., month and day of publication, format of page-numbers, format of some open access papers).

Authors: Thank you very much for your comment. We have checked the reference list again and changed it accordingly.