Reviewer's report

Title: Conditions for sustainability of Academic Collaborative Centers for Public Health in the Netherlands: a mixed methods design

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Reviewer: Marja JH van Bon-Martens

Reviewer's report:

I really enjoyed reading the article, for it addresses an important issue in public health research: the collaboration between public health policy, practice and research on the regional and local level for socially robust knowledge. I think that the authors have made a nice attempt to understand the factors for the sustainability of a certain kind of collaboration: the ACC's for public health. This knowledge may be very helpful to further improve the sustainability.

Major Compulsory Revisions

1. Page 5. The characterization of an ACC - in public health - is quite simplified. The composition of ACC’s is more versatile than described by the authors. For example: in some cases local governments are represented by their PHS in the ACC, rather than being an active partner themselves. This notions might affect the interpretation of the results and should be addressed in the discussion.

2. Page 7. The authors used the theory of push and pull factors to answer their research question whether the ACCs are able to build and strengthen a sustainable integrated organizational network between public health policy, practice and research. However, the rationale for this choice of theory, deriving from economics, is lacking. Why, for example, didn't they take into consideration using an implementation theory, regarding collaboration between practice, policy and research as an innovation? Or theories deriving from sociology or organisational sciences? Underpinning the choice for the theory used, would do more justice to the conception that collaboration in itself is an multidisciplinary phenomenon.

3. Page 18. Discussion. In the discussion, no attention is paid to the methodological limitations of the study nor to their implications for the conclusions.

Minor Essential Revisions

4. Page 4. “So far, however, knowledge is being produced by scientists working within their own scientific institutes. The institutional research system traditionally has no natural links with the policy and practice systems.” These claims seem to me referring to the field of public health and especially to the link with the policy systems. After all, in academic hospitals, the research system is very closely linked to the practice system. Moreover ‘so far’ suggests that this is still the case,
whereas the first ACC for public health was founded even before the ZonMw programme, that is before 2005.

5. Page 9. Which were the selection criteria for respondents within the groups of board members of the Association of Dutch PHSs (n=3, code A), and civil servants using short-term research project results (n=5 civil servants, code C)

6. Pages 9-10. The quantitative methods and results are barely specified. For example: can the authors explain how they quantified the website information about the projects and network formation of each ACC? What are the indicators that were composed and what where the descriptive statistics? A table summarizing these results would be very helpful to understand what exactly has been studied.

Discretionary Revisions

7. Page 4. The authors refer to "the Human Papilloma Virus (HPV) campaign in the Netherlands" as a context-insensitive example of scientific research. It seems to me that this campaign is more an example of a context-insensitive intervention, though probably due to context-insensitive research (i.e. evidence from RCTs). This, however, seems an assumption for the authors state that "… this campaign may have been built on evidence from randomized controlled trials (RCT)…", which makes this a rather weak argument.

8. Page 5. Please note that he tasks of the PHS also include monitoring and protection public health.

9. Page 5. Research institutes not only evaluate processes and assess the effectiveness and cost-benefit ratios of practice-based interventions or policy measures, but may also study – factors of - population health.

10. Page 9. The results (codes) were ranked according to the relative degree of importance, i.e., the frequency of comments by 10 interviewees. The frequency of comments may be influenced by the interviewer. What did the researchers do to prevent this bias to occur? Or, for the discussion: how likely did this bias occur?

11. Page 20. The authors recommend putting more emphasis on strengthening the pull factors. In the paragraph that follows, recommendations focus on policy-makers whereas recommendations for practitioners are barely addressed. What is needed to make them more aware of the need for evidence-based and evidence-informed solutions to contemporary wicked public health problems? And what can they do to stimulate context-sensitive research?

12. While PHS are commissioned by their local governments, PHSs (and their directors) can act both as knowledge producers (for local governments) as well as knowledge users (for practitioners in their own staff). This is touched upon in the discussion, by labelling them both as push factor as well as pull factor. This raises the question whether they should also be regarded as an exchange agent. This issue might be addressed in the discussion.
Level of interest: An article of importance in its field

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.