Author’s response to reviews

Title: Contextually tailored interventions can increase evidence-informed policymaking on health-enhancing physical activity: The experiences of two Danish municipalities

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Author’s response to reviews:

Feedback to reviewer comments

First of all we would like to thank the reviewers for finding our manuscript relevant and interesting. We would also like to thank the reviewers for providing useful feedback that will improve the quality of the paper.

Below, we have listed the reviewer comments and provided our feedback and explanation of the changes made in the manuscript.

Reviewer #1:

General Comments

The REPOPA project is very important and deserves recognition as a mover in the area of applied policymaking research. The article loses touch with this foundation in many sections. Much information about REPOPA is not adequately brought forward from previously published work, which describes important details. Throughout the text, there is a sense of needing more explanation about what things mean and why they are done. The concept of knowledge use deserves a deeper explanation. The article should stand on its own in this regard and not be so dependent on its predecessor.
By principle, we agree that this manuscript should stand on its own and not be dependent on previous published articles related to the work. However, REPOPA was a large and programmatic research project, which makes it impossible to include all background aspects in this manuscript due to the word limit. Hence, the manuscript needs to refer to and stand on e.g. Aro et al 2016 and Bertram et al 2016. However, we have included more information on the overall principles of REPOPA and the pre-intervention study connected to the work package that is central in this manuscript. We have also added more references.

In relation to qualitative data, there is a lack of description about how the qualitative interviews, conducted during the needs assessment, informed the results of research in terms of the main hypothesis and change over time. From my count, more than half of the qualitative evidence used in Table 4 comes from these interviews. Can you clarify if Table 4 information was used to support conclusions about mean Likert scores and changes in those scores in addition to being analyzed separately? How was the use of qualitative interviews different from the use of qualitative responses on the questionnaires?

We have provided more information on the use of the qualitative interview data and the qualitative responses in the questionnaires.

The flow of logic in the article would benefit from drawing a clearer line between results in the Results section and the exact data that was used to get to those results. As each result is discussed connect it to the exact place in Table 3 or Table 4 that it came from. Possibly number items in the tables to help this process along.

We have added numbers in the tables and referred to these in the discussion.

Comments by Section

Abstract

The phrase "seemed to facilitate the use of knowledge in the municipalities" is more ambiguous than it needs to be. Consider speaking directly to changes that can confidently be reported on (e.g. respondents reported that use of knowledge changed in three ways…)

We have changed this to be more directly to the specific changes.

The phrase "back to baseline at 12 months," contradicts findings in the Results: "even if an increase was seen after the interventions, there was a minor drop during the 12-month follow up, though mostly not to the pre-intervention level."

We have corrected this and stated that most of the changes were diminished at the 12-month follow up.

Background
Paragraph 2 - I strongly suggest including reference to historical context and/or trauma as a necessary driver of public health interventions.

This comment we do not understand.

Methods

Paragraph 2 - The Stewardship approach is referenced. It would help to list the specific elements of the approach that theoretically guided the interventions.

We have specified which parts of the Stewardship approach, we have used.

Paragraph 3 - It is mentioned that the pre-intervention study is explained elsewhere, but to make it clear how it is relevant to this article, it really needs to be explained how the results from the pre-intervention study informed the development of the intervention that is being assessed in this article. Without this explanation, it is unclear why the intervention was used and how it is connected to the hypothesis that "a combination of approaches could enhance close interaction between the main stakeholders..." It is also unclear why the two communities that were studied were selected.

We have added information on the outcome of the pre-intervention study and how this influenced the design of the interventions. We have also added information on how the two municipalities were selected.

In Bertram et al. (2016) terms like "transparency" are used. That article also states that the interventions aimed to secure close interaction between policy makers and target groups. These are extremely important details that this article would really benefit from including (see my comment below about your finding that one respondent questioned the need to include citizens).

We have added information on transparency, which primarily links to the concepts used from the Stewardship approach. The aim of facilitating interaction between policymakers and target groups (and other types of stakeholders) had the aim of increasing use of knowledge from target groups. This is also specified.

Settings, policies and participants

Explain that Kolding and Varde are two of six interventions from the original study. What were their specific needs that led to the tailoring of the interventions?

We have added explanation on Kolding and Varde being two out of originally six interventions. We have also specified the needs detected in the two municipalities and the logic in using these needs in designing the interventions.

It is stated that policy interventions were used to help "facilitate the use of knowledge in the policy processes." This suggests that the researchers did control the process. This section states
that the researchers did not control the process. It would help to clarify exactly what the researchers did and did not control.

The researchers did not control the process but influenced it via the interventions. This means that the municipalities fully controlled the work and the researchers contributed in relation to facilitation of knowledge use and intersectoral collaboration. We have specified this.

Implementation process

Please explain why there are only two of the six original REPOPA (Bertram et al, 2016) organizations selected for this particular study.

We have added an explanation for this.

Please state which specific model for change was used.

Logical models were used as model for change.

Data and Questionnaires

It would be helpful if the phrase "the questionnaire was designed for an international project" included direct reference to REPOPA. This would orient the reader.

We have added a reference.

"in the needs assessment" would better read "in the original REPOPA needs assessment," … if I understand it correctly.

Here we refer to the needs assessment in the pre-intervention study (Bertram, 2016). We have specified this.

How many of the original questions from the questionnaire were used in this paper? Is it possible to attach a list of the exact questions that were analyzed for this study? Table 3 does not adequately explain which responses were related to barriers or successes, for example. The short description in Table 3 does not help me fully understand the questions that were asked.

We have uploaded the questionnaire as a supplementary file and marked the questions included in this paper.

Data- Qualitative Interviews

It would be good to articulate how data from the qualitative interviews explains research results. What is the connection between qualitative interview data and the results? How many interviews were conducted in Kolding and how many in Varde? Only a total number is given.
We have added the numbers for each municipality.

Include a reference for content analysis.

We have added a reference.

Attach a list of the qualitative interview questions and/or describe how they were different from questionnaire questions.

We have added more information on the interview questions, but since the interviews were semi-structured, we only have them as themes guiding the interviews.

Results

A heading that addresses pre, post and follow-up questionnaires might be helpful to include.

Since we have not reported the three-measurement points separately but instead related them to each other in sections divided into the areas measured, this is not possible. We believe that the applied structure is most suitable to clearly explain the changes.

Inclusion of a statement that "all of the following descriptions reference changes in means" would help, if I understand it correctly.

We have added a statement.

Conceptual Knowledge Use

Instead of using the phrase "seemed to", consider describing what happened. For example: In Kolding, mean scores for collection of internal and external knowledge from stakeholders increased between pre-assessment and 12-month follow-up.

We have changed this to report the actual changes.

I believe a new heading for the Qualitative Data Results is needed here?

We have added a new heading

Qualitative Data Results

The results from the qualitative data are very interesting, but it is difficult to make the leap between them and what was learned in terms of how the intervention might have affected knowledge use. A good portion of this data was collected only prior to the intervention, during the needs assessment, so how does it explain any changes in mean scores that were observed, or does it simply suggest what personal experiences were like at the project outset? It would help to clarify this.
We have added explanation on how the qualitative interviews can be used.

Also, this section says some very important things, like, "one informant questioned whether including citizens in policy development would contribute anything." It would be good to reference such important findings in the Discussion section, to highlight where the research could move the field forward.

We have included this interesting point in the discussion.

Assertions made in this section should be accompanied by a citation of the interview (s) or questionnaire (s) from Table 4 that led to the assertions. For example: "the health departments were understood to be more trained and experienced in searching for knowledge" should be followed by (K,pre). It should also state if this was just one person who felt this way or several. Which specific interview number or questionnaire in the community under study did it come from?

We have referred more specific to the qualitative data using numbers.

The Discussion section mentions differences in results between Kolding and Varde. It would help to clarify this in the Results section as well.

We have clarified the differences between the municipalities in the result section.

Discussion

It is suggested that there was improvement in organizational procedures for the use of research knowledge. It would help to clarify which data was used to reach this conclusion - was it tied to any of the qualitative results, or just the Likert scale results? Examples would really help. What exact procedures were improved?

We have clarified the data source for this.

The phrase "even if an increase was seen after the interventions, there was a minor drop during the 12- month follow up, though mostly not to the pre-intervention level" is not consistent with the statement in the Abstract that says, "most of the changes were back to baseline."

We have corrected this.

This section could be strengthened by replacing the word "seemed" with reference to actual results (e.g. "respondents reported that the contextually tailored interventions enhanced EIPM in X number of ways)." 

We have corrected this to be more specific.
Reviewer #2:

a) The term "evidence": In the very beginning of the manuscript you use evidence as being equal with scientific or research evidence and more detailed with scientific evidence on health outcomes/risk factors. Later on, however, you nicely distinguish between the use of 1) knowledge from research, 2) knowledge from stakeholders, and 3) knowledge of target groups to promote evidence-informed policy making. Thus, it might be worthwhile to be very differentiated in the introductory part on your understanding of evidence. Rütten et al. 2016 in Int J Public Health e.g. published a comparative scoping review on three types of scientific evidence to inform physical activity policy.

We have added a text elaboration on the three types of research evidence in the beginning of the manuscript and added the suggested reference.

b) Data: you refer to the drop-outs in the follow-up questionnaires due to position or institution change. Concerning the 14 qualitative interviews you do not comment on this issue. Please describe the interviews and interviewees in more details. At which point during the project had the interviews been conducted? What had been the involvement of the interviewees (participant from the beginning, still in the position during the interview? Change in position/organisation? Interviewee= responsible person after the end of the project?link to the project processes?)

We have added information on the informants.

c) Results and interpretation of findings: On p. 9, l.30ff you write "Using knowledge was not always doable in the municipal working culture, mainly due to time limits and cultural factors. The informants mentioned that it is not natural for them to work with knowledge from research, and it can be hard to find what they need." This reads very interesting and would ask for more details: what kind of knowledge use was not doable in the working culture? All three kinds of knowledge mentioned or only research knowledge? And: what does „hard to find what they need“ mean? Do you think it refers to a very instrumental use of research knowledge to support a decision already in favour by other drivers? I think it might be really promising to explore a bit the significance or concrete role of research knowledge in those specific administrations.

We agree that this is very interesting. Unfortunately, our data does not allow deeper analysis as suggested and we will keep this in mind for the future work.

On p. 9 you also write "It is also indicated that newly educated academics are often the best at this" and "the health departments were understood to be more trained and experienced in searching for knowledge compared with other departments". Very interesting points! Do you see a pattern in your data that might allow to create a e.g. typology of the also mentioned "individuals on which is very dependent what level of knowledge is used in a policy"? You might want to relate those kinds of findings to a certainly existent body of literature that discusses who integrates what kind of knowledge under which circumstances and how to identify and integrate public administrators who might be responsive to that.
We agree that this is very interesting. However, we do not think that our data allow us to develop a typology. Instead we have written about the idea. This is indeed an important area for future research.

You mention the limitations regarding statistically analyses because of the small numbers. I agree with that and would recommend to strengthen the qualitative analysis parts instead. The statements listed in the table as well as your summarizing sentences in the results section indicate a potential rich data set that might strengthen our insights on how to tailor interventions in a context-specific way to eventually increase evidence-informed policymaking on health-enhancing physical activity promotion.

Based on some of the previous comments and suggestions, we have elaborated on the qualitative part of the data. However, due to the word limit it is not possible to add much more and we will consider to do a additional publication only based on the qualitative data.