Reviewer’s report

Title: A systematic review of the efficacy of self-management programs for increasing physical activity in community-dwelling adults with acquired brain injury (ABI).

Version: 3
Date: 2 March 2015
Reviewer: Simon Driver

Reviewer’s report:

I’d like to thank the authors for carefully and clearly addressing the initial comments – they have addressed each revision thoroughly and with consideration. The introduction is great and now considerably different from the protocol manuscript. In my opinion the article is now acceptable for publication pending some minor edits/suggestions:

1. Consider keywords that are different from those listed in the title per MeSH term guidelines.

2. Revision 1 - We also just published a stroke epi paper which might be referenced along with the TBI manuscript http://www.maneyonline.com/doi/abs/10.1179/1074935714Z.0000000043

3. Revision 4 – is the description you provided in the feedback letter covered in your previous publications? If not, I’d suggest including it in the current paper. If it was, from a reader’s perspective, you might include more information than simply the references (e.g., The authors followed Cochrane review guidelines (see XXX for more information).

4. Revision 6 – did you follow the Cochrane systematic review guidelines? These are very stringent and other approaches (GRADE, Oxford) to completing systematic reviews may be more fruitful with ABI physical activity research (and PMR research in general), while also considering the bias involved with these studies. I understand the importance of bias but believe the authors could introduce the idea of pragmatic trials and alternative approaches to systematically reviewing the literature.

5. Revision 12 – I think I should have been clearer with my initial comment. The purpose of a physical activity self-management program is to increase physical activity behaviors – not health literacy (as a construct/outcome). Thus, when delivering a physical activity self-management program you would view healthy literacy as a trait (not the primary outcome) and modify the materials appropriately (e.g., readability, reading level, mode of delivery, presentation of materials, layout of handouts) to be at the appropriate literacy level (recommended 3-8th grade). While you do present information in a self-management program (e.g., benefits of activity, risks of inactivity, intensity, duration) it is to raise awareness to facilitate successful behavior change – not change health literacy (which is why it isn’t assessed as an outcome). In the
context of the current review – did the studies included discuss how they addressed health literacy in the context of creating the educational materials to be appropriate for people with ABI? I think this distinction could be made more clearly in the discussion section.

6. Nice job addressing the changes. Appreciate opportunity to read the revised manuscript.

**Level of interest:** An article of outstanding merit and interest 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'