Reviewer's report

Title: Definition and improvement of the concept and tools of a psychosocial intervention program for parents in pediatric oncology: A mixed-methods feasibility study conducted with parents and healthcare professionals

Version: 0 Date: 06 Nov 2018

Reviewer: Juliana Diniz

Reviewer's report:

The manuscript entitled "A mixed-methods study conducted with parents and healthcare professionals to improve the concept and tools of a psychosocial intervention program for parents in pediatric oncology" describes the results of the initial assessment of a new treatment manual that improved and integrated previously available manualized intervention programs for parents of children with a cancer diagnosis. Some modifications might be helpful to clarify the study purposes and rationale. A critical point of this study is that the authors failed to explain what is the novelty and advantage of the protocol tested here when compared with already available options. In addition, the small number of observations makes it very hard to draw any conclusions in the quantitative standpoint. Unless extensively reformulated, I do not advise for the publication of this study in its current format.

First, I was a little bit confused about the phase in the intervention development that this study referred to. I guess this manuscript describes the feasibility phase for a new manualized protocol. If so, I suggest authors make it clear in the title and abstract.

In the Background section, the rationale for developing a new manualized protocol given that many were already available is not clear. Why did the authors consider the protocols available to that point required improvement and integration with a new manual?

The paragraph on the ORBIT model is confusing. Does this study concerns the phase II of the ORBIT model? If so, which aspects preconceived in this model were followed in the current study? What advantages this model has in comparison with feasibility trials?

The paragraph concerning the study's objective (transcribed bellow) is too generic. How do the authors intend to refine their program? Which information will be extracted from the current study and how is it going to be used to refine the existing protocol?

If possible, please update situation of references 11 and 13 that at the time of this submission had been submitted for other journals but had not been yet accepted for publication.

When describing the intervention, the authors describe their protocol is based on the Problem-Solving Skills Training (PSST). Indeed, according to figure 1, PSST comprises most of their
treatment program. Given that PSST is already a manualized treatment for the same target population what is the novelty in the current study intervention? Does it even make sense to name the protocol differently than PSST?

When describing the participants, please provide the rationale for including parents of children who were in remission for at least six months. In addition, please describe how the information of disease status was obtained.

The choice of invited parents through social media is curious. Please justify.

Please provide rationale for the low number of invitations. Please justify the small number of individuals included in the study and why the authors believe such a small number of observations is sufficient for this phase of the study.

Given the small number of observations (6 professionals and 4 family units), the use of percentages±SD to illustrate the results seems highly inadequate. In a universe of 10 observations, absolute numbers are sufficiently illustrative. In addition, given the small number of observations any comparison between groups seems completely out of the scope for this study.

Level of interest
Please indicate how interesting you found the manuscript:

An article of importance in its field

Quality of written English
Please indicate the quality of language in the manuscript:

Not suitable for publication unless extensively edited

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