

Author's response to reviews

Title: Healthcare professionals' intentions and behaviours: A systematic review of studies based on social cognitive theories

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Responses to reviewers

Healthcare professionals' intentions and behaviours: A systematic review of studies based on social cognitive theories
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We thank the reviewers and the editor for their careful reading and constructive criticism of the original submission. We have addressed all the reviewers' comments and make necessary adjustments in the manuscript. Our responses (plain text) to each of the specific comments of the reviewers (italicized text) are described below.

Reviewer 1

1. I do understand that the data have been systematically reviewed but calling it a systematic review could cause confusion for some – particularly those in the beginning of their research career who may then not realize the value of the article. The methods are similar to those required for systematic reviews, e.g., Cochrane; however, not all studies were randomized controlled trials. This is acknowledged and reasons for inclusion and exclusion clear. To assist novice/student readers a statement as to why would be useful to ensure they understand and value the article and do not simply dismiss.

Response 1:

We thank the reviewer for its solicitude regarding the probabilities that novice/students readers could dismiss the manuscript. However, given that the objective of the study was not to evaluate the effect of interventions, but simply to document the best predictors of health professionals' behaviour and intention, we considered that the use of "systematic review" remains an appropriate term to describe the study.

Reviewer 2

1. In fact, my one reservation ("Discretionary Revision") concerns the inclusion of cross-sectional studies predicting intention only – particularly in light of the fact that one goal is to develop behavior change interventions. Given that these data show that intention is not necessarily the best predictor of behavior, a stronger rationale for analysing intention as a dependent variable (as opposed to other variables) would strengthen the Introduction.

Response 1:

We appreciate the comment. However, given the strong emphasis in the scientific literature about the role of intention (also given that most theories place intention at the heart of their models), the focus on intention is justified.

2. *In a similar vein, Figure 2 maps more closely onto an extended theory of planned behavior, rather than the model that emerges from these data.*

Response 2:

We agreed with the reviewer and revised Figure 2 to better reflect the present findings.

Reviewer 3

1. *The choice of theories is “social cognitive” but in fact it is also “theories of the problem” (determinants) in stead of “theories of the action” (change). That could be added.*

Response 1:

Thanks for the suggestion, this has been added (see page 6, “Inclusion and exclusion criteria” section).

2. *In the method section, the issue of internal consistency. The alpha .60 criterion is OK, but what happens when there are more scales then one and some are OK and others are not?*

Response 2:

In this case, the psychometric quality was considered as poor.

3. *Results: I do not like p-values lower than .001. P-values are not supposed to be used as an indicator. [discretionary]*

Response 3:

We appreciate the comment, but we think that all p-values reported in the manuscript respected standard procedures of reporting.

4. *The issue of self-reported behaviour versus observation. I agree with the comments but I would like to see a bit more on the difficulties of valid observations. Not just lack of correspondence but also lack of ecological validity in observations.*

Response 4:

We agree with this comment, but most of the publications did not present sufficient information to permit the analysis of this aspect.

5. *I would like to see the applied theory listed in the description of the studies, additional file 3.*

Response 5:

The theories applied in the studies are listed in the additional file 3 (3rd column).