

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Easier Said Than Done: A Qualitative Study Conducted in the U.S. Exploring Latino Family Child Care Home Providers as Role Models for Healthy Eating and Physical Activity Behaviors
AUTHORS	Lindsay, AC; Greaney, Mary; Wallington, Sherrie; Wright, Julie A.

VERSION 1 – REVIEW

REVIEWER	Dr. Leigh Vanderloo Canada
REVIEW RETURNED	29-Jun-2017

GENERAL COMMENTS	<p>GENERAL COMMENTS</p> <p>Thank you for the opportunity to review. Overall, this paper presented some interesting findings from a sub-group of home-based childcare providers. That said, there are some high-level issues (particularly in the introduction, methods, and discussion) that require some attention.</p> <p>For international readers, can you clarify what is meant by “healthful” vs. “healthy” behaviours?</p> <p>Similarly, why “purposive” instead of “purposeful”?</p> <p>Purpose statement in the body of the manuscript does not match what you have in the abstract. Please revise.</p> <p>In the conclusion section of the abstract, you make no mention of the childcare providers’ own health. I think this should be included here given that it seemed to be a major take-away from your paper?</p> <p>Keywords – should it be “preschooler” rather than “preschool”?</p> <p>In the section outlining the strengths and limitations of the study (prior to the start of the manuscript), no mention of limitations is made. Please include.</p> <p>The inclusion of the social cognitive theory seems like a bit of an add-on. It doesn’t come across as something that is well-integrated into this paper. Was SCT used to inform the work that you were doing?</p> <p>Given that this paper was qualitative in nature, could the ontological and epistemological perspectives from which the authors approached this work be identified?</p>
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Why were only eating and physical activity explored and not sedentary behaviours? Seems like a missed opportunity and would have enriched the findings of this work. Unless sedentary behaviours are presented elsewhere?

The discussion is quite “bare-bones”. I am missing what the findings of this work adds to the greater body of literature. What are the implications? What gaps does this work address? What are the key take-home messages? Please elaborate on next steps and future directions as they pertain to the findings of this work, specifically. Additional comparisons to other published work would help strengthen this section (Similar findings published elsewhere? Different from other work?).

Watch for run-on-sentences throughout.

Avoid using 1st-person language in the manuscript.

Be consistent with your use of the oxford comma throughout.

The presentation of your citations in the reference list are not consistent – sometimes you provide the abbreviated journal name, and other times you write it out. Please revise.

SPECIFIC COMMENTS

- Line 69 – insert “the” after “at”
 - Line 85 – should be “providers’ “
 - Line 85-87 – revise this sentence
 - Line 103 – should be “weight statuses” (plural)
 - Line 116 and 118 – is there a way you can avoid using “public health” twice here?
 - Line 123 – replace “ECE settings” with “these environments”
 - Line 126 – replace “the providers” with “their”
 - Line 126 – replace “pre-school” with “preschool”
 - Line 147 – revise to “...fosters healthy behaviours.”
 - Line 138-142 – this sentence is not very clear and would benefit from some revision
 - Line 139-140 – all of the behaviours mentioned here are related to diet (no physical activity)
 - Line 145 – delete “behaviours” after “physical activity”
 - Line 147 – revise to “...the caregiver may be a particularly influential role model for healthful behaviors.”
 - Line 149 – “intervention” should be plural; remove “targets”
 - Line 162 – what were the ages of children? Please specify the age range.
 - Line 194 – replace “used with “employed”
 - Line 202 – replace “below” with in “the following section”
 - Line 205 – insert a comma after “active”
 - Line 231 – revise to “...to improve various health issues”
 - Line 306 – delete “early” and “and prevention of child obesity”
 - Line 307-308 – delete “these health behaviours”
 - Line 308 – replace “none” with “no studies”
 - Line 312 – delete comma after “persist”
 - Line 314 – inset comma after “activity” and insert “as” after “and”
 - Line 321 – use acronym SCT
 - Line 328-330 – this sentence would benefit from some revising (not very clear as is)
- Respectfully submitted.

REVIEWER	<p>Sara Benjamin-Neelon and Sarah Gonzalez-Nahm Sara Benjamin-Neelon, PhD, MPH, RD Associate Professor Department of Health, Behavior and Society Johns Hopkins Bloomberg School of Public Health Baltimore, MD, USA Sarah Gonzalez-Nahm, PhD, MPH, RD Postdoctoral Fellow Department of Health, Behavior and Society Johns Hopkins Bloomberg School of Public Health Baltimore, MD, USA</p>
REVIEW RETURNED	16-Jul-2017

GENERAL COMMENTS	<p>Specific comments:</p> <ol style="list-style-type: none"> 1. The main point of the manuscript appears to get somewhat lost among the potentially less novel themes. This manuscript would benefit from restructuring of results to ensure the main results are presented more clearly. 2. The authors should consider referencing a relevant article: Tovar A, Mena NZ, Risica P, Gorham G, Gans KM. Nutrition and Physical Activity Environments of Home-Based Child Care: What Hispanic Providers Have to Say. Child Obes. 2015 Oct;11(5):521-9. 3. Please provide additional information on how the sample size was determined? Were focus groups conducted until saturation was reached? 4. It would be helpful to have some sort of identifier with each quote to ensure a variety of respondents are represented. 5. It would be helpful to view the sociodemographic data you collected in a table. 6. The authors mention in the methods that they collected data on length of time in the US. It would be very helpful to report this finding, as it would provide readers with a better understanding of the respondents. 7. Under theme 1, the authors mention that providers believe it is important for children to eat healthy. Is there any information available on what the respondents view as healthy for children? This would be interesting to report if the authors have this information, as it may inform future interventions. It could also help explain the disconnect between what respondents report that they believe and their actions. 8. The way the paper is written, themes 4 and 5 get a bit lost, even though they are the more novel findings in this paper. There seems to be a greater focus on providers' own perceptions of their weight and diet than on their views on being role models. It would be helpful to 1) add more quotes on themes about being a role model (themes 4 and 5), and 2) restructure the results so they flow consistently from the findings of the study. 9. Line 257-261: This sentence could benefit from revision, as it is a bit difficult to understand as written.
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REVIEWER	Laura Lessard, PhD, MPH University of Delaware
REVIEW RETURNED	17-Jul-2017

GENERAL COMMENTS	<p>This was a very well written paper on a very understudied topic and population. The background and methods, in particular, clearly outlined the scope and rationale for the study. I found the discussion and conclusion sections to be less strong. The authors may want to think about revising those sections slightly to provide some suggestions that better fit the realities of the FCCH community.</p> <p>A few revisions or additions to consider:</p> <ul style="list-style-type: none"> - Consider providing some information on the number of FCCH providers who were invited to participate. While response rate is not directly applicable to qualitative research, given that you started with a random sample it would be helpful to understand the proportion of the sample that responded to your invitation to better understand whether and how your results might apply to the broader FCCH provider community. - Your conclusion that providers need, "time, resources and support" to improve their own health may have limited impact on the field - I suggest tailoring your intervention suggestions to strategies and avenues that better reflect the busy lives and limited resource setting of FCCHs. - I suggest adding the translation process to the limitations in some way. Despite your very rigorous translation/back-translation procedures, there will always be limitations and loss of meaning involved in the translation process.
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VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Reviewer Name
Dr. Leigh Vanderloo

Institution and Country
Canada

Please state any competing interests or state 'None declared': None declared

Please leave your comments for the authors below

GENERAL COMMENTS

Thank you for the opportunity to review. Overall, this paper presented some interesting findings from a sub-group of home-based childcare providers. That said, there are some high-level issues (particularly in the introduction, methods, and discussion) that require some attention.

Comment: For international readers, can you clarify what is meant by “healthful” vs. “healthy” behaviours?

Response: We have revised the text and replaced “healthful” with “healthy” throughout the manuscript.

Comment: Similarly, why “purposive” instead of “purposeful”?

Response: We have revised the text and replaced “purposive” with “purposeful”. Please see pages 5 and 18.

Comment: Purpose statement in the body of the manuscript does not match what you have in the abstract. Please revise.

Response: We have revised the purpose statement in the abstract and in the body of the manuscript.

Comment: In the conclusion section of the abstract, you make no mention of the childcare providers’ own health. I think this should be included here given that it seemed to be a major take-away from your paper?

Response: We agree with the reviewer’s comment and have revised the abstract to include mention of childcare providers’ own health. Please see pages 3 and 4 of the revised manuscript.

Comment: Keywords – should it be “preschooler” rather than “preschool”?

Response: We have replaced the keyword “preschool” with “preschoolers”. Please see page 4.

Comment: In the section outlining the strengths and limitations of the study (prior to the start of the manuscript), no mention of limitations is made. Please include.

Response: We have revised the section outlining the strengths and limitations of the study to explicitly mention the limitations of the study. Please see page 5.

Comment: The inclusion of the social cognitive theory seems like a bit of an add-on. It doesn’t come across as something that is well-integrated into this paper. Was SCT used to inform the work that you were doing?

Response: The socio-ecological model, described in previous publication (Lindsay et al., 2017), guided the design of the Latino FCCH research project. We developed questions on providers’ views of their influence as role models for healthy behaviors focusing on the SCT construct of modeling. In addition, we believe the SCT is appropriate to contextualize the current paper and inform readers of a theoretical model that supports our findings. The SCT is also mentioned to inform readers who may be currently working in this area or may be planning future research.

Response: Given that this paper was qualitative in nature, could the ontological and epistemological perspectives from which the authors approached this work be identified?

Response: We revised the text in the methods section and identified the ontological and epistemological perspectives from which we approached our work. Please see page 8, lines 174-178.

Comment: Why were only eating and physical activity explored and not sedentary behaviours? Seems like a missed opportunity and would have enriched the findings of this work. Unless sedentary behaviours are presented elsewhere?

Response: We expanded on the information we present on sedentary behaviors on the results section. Please see pages 11 and 12, lines 252-266. In addition, we also added information to the limitations of the study mentioning that providers participating in this study focused on physical activity and did not discuss sedentary behaviors as much. This may have been due to the construction of the FGD guide, but could also indicate the need for further education on the distinction between physical activity and sedentary behaviors." Please see pages 18 and 19, lines 413-416.

Comment: The discussion is quite "bare-bones". I am missing what the findings of this work adds to the greater body of literature. What are the implications? What gaps does this work address? What are the key take-home messages? Please elaborate on next steps and future directions as they pertain to the findings of this work, specifically. Additional comparisons to other published work would help strengthen this section (Similar findings published elsewhere? Different from other work?).

Response: We have revised and greatly expanded the discussion section to address the question asked by the reviewers. Please see pages 16-18.

Comment: Watch for run-on-sentences throughout.

Response: We have edited the paper, and believe that all run-on-sentences have been edited throughout the main text of the manuscript.

Comment: Avoid using 1st-person language in the manuscript.

Response: We have made revisions throughout the main text of the manuscript.

Comment: Be consistent with your use of the oxford comma throughout.

Response: We have made revisions throughout the main text of the manuscript.

Comment: The presentation of your citations in the reference list are not consistent – sometimes you provide the abbreviated journal name, and other times you write it out. Please revise.

Response: We have revised the citations.

SPECIFIC COMMENTS

Line 69 – insert "the" after "at"

Response: We have inserted "the"

Line 85 – should be "providers"

Response: We have revised to "providers"

Line 85-87 – revise this sentence.

Response: We have revised the sentence.

Line 103 – should be “weight statuses” (plural)

Response: We have revised the word to “weight statuses”

Line 116 and 118 – is there a way you can avoid using “public health” twice here?

Response: We have revised the sentence.

Line 123 – replace “ECE settings” with “these environments”

Response: We have replaced “ECE settings” with “these environments”

Line 126 – replace “the providers” with “their”

Response: We have replaced “the providers” with “their”

Line 126 – replace “pre-school” with “preschool”

Response: We have replaced “pre-school” with “preschool”

Line 137 – revise to “...fosters healthy behaviours.”

Response: We have revised to “fosters healthy behaviours”

Line 138-142 – this sentence is not very clear and would benefit from some revision

Response: We have revised the sentence. Please see page #, lines ## - ##.

Line 139-140 – all of the behaviours mentioned here are related to diet (no physical activity)

Response: We have added behaviors related to physical activity.

Line 145 – delete “behaviours” after “physical activity”

Response: We deleted the word “behavior” after physical activity.

Line 147 – revise to “,...the caregiver may be a particularly influential role model for healthful behaviors.”

Response: We have revised this sentence.

Line 149 – “intervention” should be plural; remove “targets”

Response: We revised the text to read “interventions”. We deleted the word “targets”.

Line 162 – what were the ages of children? Please specify the age range.

Response: We added the children’s age range (2-5 years).

Line 194 – replace “used with “employed”

Response: We replaced the word “used” with “employed”.

Line 202 – replace “below” with in “the following section”

Response: We replaced the word “below” with “in the following section”.

Line 205 – insert a comma after “active”

Response: We inserted a comma after “active”.

Line 231 – revise to “...to improve various health issues”

Response: We revised the text to “...to improve various health issues”.

Line 306 – delete “early” and “and prevention of child obesity”

Response: We deleted “early” and “and prevention of child obesity”.

Line 307-308 – delete “these health behaviours”

Response: We deleted “these health behaviors”.

Line 308 – replace “none” with “no studies”

Response: We replaced the word “none” with “no studies”.

Line 312 – delete comma after “persist”

Response: We deleted the comma after “persist”.

Line 314 – insert comma after “activity” and insert “as” after “and”

Response: We inserted comma after “activity” and insert “as” after “and”.

Line 321 – use acronym SCT

Response: We revised the sentence and now use the acronym “SCT”.

Line 328-330 – this sentence would benefit from some revising (not very clear as is)

Respectfully submitted.

Reviewer: 2

Reviewer Name

Sara Benjamin-Neelon and Sarah Gonzalez-Nahm

Institution and Country

Sara Benjamin-Neelon, PhD, MPH, RD

Associate Professor

Department of Health, Behavior and Society

Johns Hopkins Bloomberg School of Public Health

Baltimore, MD, USA

Sarah Gonzalez-Nahm, PhD, MPH, RD

Postdoctoral Fellow

Department of Health, Behavior and Society

Johns Hopkins Bloomberg School of Public Health

Baltimore, MD, USA

Please state any competing interests or state 'None declared':

None declared.

Please leave your comments for the authors below

Please see attached file.

Reviewer #2:

Thank you for the opportunity to review the manuscript "Easier Said Than Done: Exploring Latino Family Child Care Home Providers as Role Models for Healthful Eating and Physical Activity Behaviors". The authors have examined an important research question – Latina/o child care provider beliefs and practices related to nutrition and physical activity and their capacity to serve as role models for children in care. This is an interesting and relevant article, which could have useful implications for future intervention development. This manuscript may be of interest to a wide variety of readers and public health professionals and makes an important contribution to the literature. The manuscript could be improved with some minor edits and adjustments. Additionally, some methodological information is missing from the manuscript that makes the findings difficult to interpret. Specific comments and suggested edits are detailed below.

Specific comments:

1. The main point of the manuscript appears to get somewhat lost among the potentially less novel themes. This manuscript would benefit from restructuring of results to ensure the main results are presented more clearly.

Response: We revised parts of the results section of the paper. Please see pages 11-15.

2. The authors should consider referencing a relevant article: Tovar A, Mena NZ, Risica P, Gorham G, Gans KM. Nutrition and Physical Activity Environments of Home-Based Child Care: What Hispanic Providers Have to Say. *Child Obes.* 2015 Oct;11(5):521-9.

Response: We have revised the manuscript and added the reference by Tovar et al. (2015). Please see reference #32.

3. Please provide additional information on how the sample size was determined? Were focus groups conducted until saturation was reached?

Response: We added information on how sample size was determined, with focus groups conducted until saturation was reached. Please see page 10, lines 230-232.

4. It would be helpful to have some sort of identifier with each quote to ensure a variety of respondents are represented.

Response: We added identifiers to the quotes. Please see result section, pages 11-15.

5. It would be helpful to view the socio-demographic data you collected in a table.

Response: We added a table with socio-demographic data as requested. Please see Table 1.

6. The authors mention in the methods that they collected data on length of time in the US. It would be very helpful to report this finding, as it would provide readers with a better understanding of the respondents.

Response: We added this information to the table with socio-demographic data. Please see page 10, lines 232-236 and Table 1.

7. Under theme 1, the authors mention that providers believe it is important for children to eat healthy. Is there any information available on what the respondents view as healthy for children? This would be interesting to report if the authors have this information, as it may inform future interventions. It could also help explain the disconnect between what respondents report that they believe and their actions.

Response: We expanded on our explanation of providers report under themes 1 using data from "language" from providers' quotes published in a previous manuscript (Lindsay et al., 2015; reference #11). Please see page 11, lines 240-242. In addition, we mentioned in the discussion that additional information on providers' views and definitions of healthy is presented in a previous publication. Please see page 16, lines 353-354.

8. The way the paper is written, themes 4 and 5 get a bit lost, even though they are the more novel findings in this paper. There seems to be a greater focus on providers' own perceptions of their weight and diet than on their views on being role models. It would be helpful to 1) add more quotes on themes about being a role model (themes 4 and 5), and 2) restructure the results so they flow consistently from the findings of the study.

Response: We revised the text on "themes 4 and 5" to include more information on providers' views on being role models and additional quotes. That said, we lack the data to provide any further detailed information on this topic. We recognize that this may be a shortcoming of our study, and suggest in the discussion that future qualitative studies should explore this topic in more depth. Please see pages 18 and 19, lines 418-421.

9. Line 257-261: This sentence could benefit from revision, as it is a bit difficult to understand as written

Response: We revised the sentence.

Reviewer: 3

Reviewer Name

Laura Lessard, PhD, MPH

Institution and Country

University of Delaware

Please state any competing interests or state 'None declared':

None declared

Please leave your comments for the authors below

Comment: This was a very well written paper on a very understudied topic and population. The background and methods, in particular, clearly outlined the scope and rationale for the study.

I found the discussion and conclusion sections to be less strong. The authors may want to think about revising those sections slightly to provide some suggestions that better fit the realities of the FCCH community.

Response: We have revised the discussion and conclusions sections and included suggestions that fit the realities of the FCCH community. Please see pages 16-19.

Comment: A few revisions or additions to consider

Consider providing some information on the number of FCCH providers who were invited to participate. While response rate is not directly applicable to qualitative research, given that you started with a random sample it would be helpful to understand the proportion of the sample that responded to your invitation to better understand whether and how your results might apply to the broader FCCH provider community.

Response: We have added the response rate to the methods and results sections. Please see page #8, lines 185-188, and page 10, lines 230-232.

Comment: Your conclusion that providers need, "time, resources and support" to improve their own health may have limited impact on the field - I suggest tailoring your intervention suggestions to strategies and avenues that better reflect the busy lives and limited resource setting of FCCHs.

Response: We agree with the point made by this reviewer and have revised the text to state that "effective interventions targeting FCCH providers should take into account the busy lives and limited resource setting of FCCHs." Please see page 17, lines 392-393.

Comment: I suggest adding the translation process to the limitations in some way. Despite your very rigorous translation/back-translation procedures, there will always be limitations and loss of meaning involved in the translation process.

Response: We added a sentence to the limitation describing that despite rigorous translation/back translation procedures, some loss of meaning may have occurred in the translation process. Please see page 18, lines 415-418.

VERSION 2 – REVIEW

REVIEWER	Dr. Leigh Vanderloo Adjunct Professor, University of Western Ontario, Canada
REVIEW RETURNED	14-Aug-2017

GENERAL COMMENTS	I believe the authors did a solid job at addressing all of my concerns and comments. As a result, the manuscript reads much stronger. A final suggestion would be to read the paper cover-to-cover to ensure all typos and grammatical errors are caught and addressed. Thank you again for the opportunity to review this interesting and timely article.
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REVIEWER	Sara Benjamin-Neelon and Sarah Gonzalez-Nahm Department of Health, Behavior and Society Johns Hopkins Bloomberg School of Public Health Baltimore, MD, USA
REVIEW RETURNED	28-Aug-2017

GENERAL COMMENTS	Thank you for the opportunity to review this revised manuscript. The authors have addressed the comments fully from the previous review and the manuscript has been improved as a result.
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VERSION 2 – AUTHOR RESPONSE

We appreciate the final review and consideration of our manuscript for publication in the BMJ Open Journal. As requested by the Editor we have revised the “Strengths and Limitations” section. Furthermore, in response to Reviewer #1 final request, we have read the paper cover-to-cover to ensure that all typos and grammatical errors are caught and addressed.

Although we believe that we have addressed, and made all the final requested revisions, we would be happy to clarify and address any further questions the Editorial Board of the BMJ Open Journal might have. We appreciate your consideration of our work. Thank you.