Reviewer’s report

Title: Physiotherapy interventions in scientific physiotherapy publications focusing on interventions for children with cerebral palsy: A qualitative phenomenographic approach.

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Reviewer: Lesley Wiart

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'Physiotherapy interventions in scientific physiotherapy publications focusing on interventions for children with cerebral palsy: A qualitative phenomenographic approach

This manuscript is an interesting phenomenographic study of research reports evaluating physical therapy intervention strategies for children with cerebral palsy. The intent of the analysis is to determine variation in the underlying philosophical assumptions and resulting practices of physical therapy interventions reported in the literature. The paper is of relevance to pediatric rehabilitation. Despite the fact that philosophical assumptions in physical therapy can influence many aspects of approaches to intervention, beliefs of therapists are often not made explicit. All suggestions are for discretionary revisions.

The background information is relevant and interesting. I would suggest that a sentence be added to the first paragraph to describe the various sections in the background section and why they were included (i.e., FCS, motor learning, conceptualization of disability and health) to provide readers with a framework for the background section before the paragraph on FCS.

In the last sentence in the 1st paragraph of the background section, there is a reference made to ensuring family and child participation in clinical decision-making. I would suggest that FCS ensures that families have opportunities to participate and that their desire and/or ability to participate may fluctuate.

2nd paragraph in background section, last sentence. In regards to the ICF, I would suggest that the ICF doesn’t determine cause and effect relationships but rather provides a conceptual framework for recognizing the effects of personal and environmental contextual factors on the components of health.

Last sentence, 4th paragraph, introduction section- I believe that readers may benefit from additional clarification (i.e., develops autonomy and responsibility by reasoning).

Last paragraph, background section- In regards to ‘voices being heard’ I think it may be helpful to be more specific (i.e., goals, values and ideas are considered to be central to intervention planning)

Clarification would be helpful in regards to the statement made in the last sentence of the 1st paragraph in the methods section (i.e. and with other goals...
It would be helpful to have additional information on how the authors selected the articles. The articles were strategically selected but what criteria were used? (e.g. variation in journals, intervention strategies, location of research etc.) and, conversely, what rationale were used to exclude the others?

It may help the reader to describe the analysis process before the current first paragraph in the analysis section. The first paragraph makes reference to interpretation of quotes but the process has not yet been outlined. In addition, additional clarification is needed for the 1st sentence in the analysis section.

It would be helpful to have some additional information on what the authors looked for in the condensation process. How were significant quotes identified?

In the results section, it would be helpful if there was a brief explanation of how the 'hierarchy' of intervention approaches was established (i.e. brief explanation of why one approach is preferable over the other).

Results section- it would be helpful to include a brief definition of the 'mixed-health paradigm'

7th sentence 2nd paragraph in the discussion- clarification is required. It is unclear how focussing on the child's potential is related to activity and participation components of the ICF (i.e. a therapist could work from an approach focussed on deficits but still target goals at the activity level).

‘This can be recognized as an ability to follow the demands...' in the discussion section. I believe clarification of the meaning of this sentence is needed.

I think it would be helpful to explain how the focus on impairment implies a deductive, positivistic approach (discussion, making it normal section).

Discussion, making it normal section, 4th sentence- I would suggest deleting 'in the long term perspective' because there is a lack of evidence to support the effectiveness of many impairment focussed physical therapy interventions at the level of activity or participation (not just in the long-term).

Methodological aspects, 1st paragraph, 5th sentence- Would it be more accurate to state that the experience of physiotherapy interventions can be inferred from the descriptions of the interventions?

Methodological aspects, 2nd last paragraph, 1st sentence- How do the findings of this study confirm the findings of previous studies?

Although the authors mention that environmental context influences approach to intervention, I think that this point may need to be explored further. Physical therapy interventions that are motivating to children and that encourage motor learning will likely need to take place in a child's natural setting. However, therapists who work in rehabilitation centres often do not observe children in their everyday environments. Perhaps the authors could note that it may be challenging for therapists who do not work with children in their natural environments to embrace all aspects of the 'making it possible' approach. Given this challenge, how can therapists who work in these environments work towards doing so?

I enjoyed reading this paper. Thank you for the opportunity to review it.
Minor comments (not for publication)

There are several sentences in the manuscript that seemed awkward or were grammatically incorrect - they are:

- The 1st and 3rd sentences in the background section
- 2nd paragraph in background section, last sentence
- 4th sentence, 3rd paragraph, background section (perhaps delete - The definition of)
- Last two sentences in the 4th paragraph, introduction section
- Last paragraph, background section - add comma after ‘From the FCS perspective’
- Last paragraph, last sentence - separate these two points (i.e., More specifically, the objective was to identify variations...)
- Last sentence, 1st paragraph of the methods section.
- Second sentence in results section - making it work.
- 2nd last sentence, discussion section, making it normal paragraph.
- Last paragraph in discussion, 3rd and 4th sentences
- Last sentence in the discussion section (i.e. child made to feel competent as a parent)

First sentence, second paragraph in the background section - it may be helpful to the reader to specify ‘family environment’.

First sentence methods section - should conceiving be conceptualizing? (same comment for second paragraph in the discussion)

Second sentence under A: Making it possible in results section - suggestion to change contextual environment to context in which the child functions on a daily basis (or something similar).

Discussion - Making it normal section, first sentence - this approach is embedded in a biomedical paradigm or originates from a biomedical paradigm (i.e., instead of ‘has a biomedical paradigm’)?

**Level of interest:** An article of importance in its field

**Quality of written English:** Needs some language corrections before being published

**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.