

Dear Dr. Dougherty:

We are resubmitting our manuscript 2005/136 entitled “Girls on the Move Program to Increase Physical Activity Participation” (see attachment Girls on the Move revised December 2005.doc). We revised the manuscript based upon four pages of detailed reviewer recommendations. It includes 4 tables and 1 figure. As a result, the number of pages and references goes beyond limits requested in the journal specifications. Advice was sought from Nursing Research via telephone on November 9, 2005. We were encouraged to submit the manuscript rather than continue to decrease the length and possibly omit important content (requested by the reviewers). The following information summarizes the revisions.

**The four paragraphs below address reviewer 1 comments:**

Since the total sample size was relatively small, we deleted any data analysis comparing physical activity (PA) participation or PA determinants among subgroups (created by dividing the intervention and control groups into high and low change with regard to PA). We simply indicated that PA among the intervention group did not differ from the control group.

Means, SDs, and ranges of scores for all instruments measuring PA variables and PA determinants were included in the tables.

Skewness was identified for the variables measuring number of minutes of PA. Logarithmic transformations were conducted for these variables.

The fact that Dr. Garcia’s sample was recruited from low SES areas was added to the manuscript. Since Garcia and colleagues summed rather than averaged questionnaire responses and we made minor modifications to the questionnaires (as a result of focus group discussions), comparisons between the results from this study and the one conducted by Garcia and colleagues were not possible.

**The following paragraphs focus on comments from reviewer 2:**

We provided greater detail regarding the HPM and revised the figure to reflect content integrating the TTM and HPM with the intervention. The intervention includes an individually tailored computerized program to guide counseling sessions and assist with goal setting. Limited funding precluded testing each component separately to disentangle their effects. Kreuter et al. (2000) also indicates that individually tailored programs should be used to complement, rather than replace, direct health professional counseling, which may include goal setting activities.

Although the term “anticipatory guidance” was used in the initial manuscript, it did not specifically relate to the theoretical framework and outcomes. As a result, we deleted it. Information concerning tailoring the intervention to the participants was added.

The 1<sup>st</sup> paragraph of the Procedures section was moved to the Instrumentation section. The enjoyment of PA instrument was not modified because Motl and colleagues had already validated it and published their findings regarding its use with adolescent girls.

We moved the exclusion criteria for participants to the section: Participants. The paragraph on page 8 lines 4-7 in the initial manuscript was integrated into the first paragraph of the methods section of the revised paper.

The procedure section was divided into 2 parts: 1) School Wellness Center (WC), PNP Characteristics, and PNP Training and 2) Data Collection. The first section addresses reviewer requests for more information about the training and includes how PNPs felt about the training. We agree that the evidence for identifying a training problem as a potential reason for study outcomes is weak and, therefore, content related to the topic was deleted from the discussion.

A researcher was available at each school at baseline and post-intervention to assist all girls in both the intervention and control groups with reporting number of minutes of PA since preliminary work indicated a tendency for over-reporting. The researcher at each school followed a written protocol to assist each girl only by informing her that PA involved time spent moving or being active enough so that she was breathing hard and sweating and her heart was beating fast. The researcher told each girl that time used for rest or snack breaks should not be included in her reported number of minutes of PA.

The aim of the study was changed to “determine feasibility” as opposed to “test efficacy of the intervention”.

Tailoring parent/guardian tip sheets to emphasize the daughter’s PA goals or unique needs as noted from certain responses to questionnaire items was added to the discussion section. We identified this approach as another fruitful strategy for engaging parents/guardians in supporting their daughters re: PA (provided that the adolescent agrees).

Examples of objective measures (accelerometer, physical fitness tests) were provided in the discussion.

Some issues related to the design could not be addressed because of the low power and small sample size associated with both intervention and control groups. We chose to avoid comparing subsets of each group regarding certain variables (e.g., PA efficacy, places to do PA, and having equipment, clothes or shoes).

Giving participants advance instructions for monitoring their PAs and a log for recording time and intensity was recommended to enhance the accuracy of future responses to questionnaires.

Research staff and the two PNPs completed tracking sheets to document that each intervention component was delivered as planned.

A statistician was consulted. The direction and strength of the relationship of the measurements at 1 week and at 12 weeks were tested for homogeneity of variance across groups. PA difference scores were not used in any analysis.

Strategies for boosting the intervention were added to the discussion section. More detailed information was provided concerning reasons underlying the lack of significant differences in PA between the intervention and control groups. Greater emphasis was placed on lessons learned.

References have been updated. Hagler et al. is still in press.

We agree with the reviewers that differences in PA determinants, such as efficacy, between intervention and control group participants having a high change in PA and those having a low change in PA during the study would be interesting to note in a larger future investigation with a greater number of participants.

We appreciate the positive and encouraging feedback, as well as the constructive and insightful comments, from the reviewers. We thank them for preparing a comprehensive review. Have a wonderful holiday and thank you again.

Sincerely,  
Lorraine Robbins and Kim Gretebeck

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