

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	A pilot study of an online universal school-based intervention to prevent alcohol and cannabis use in the United Kingdom.
AUTHORS	Newton, Nicola; Conrod, Patricia; Rodriguez, Daniel; Teesson, Maree

VERSION 1 - REVIEW

REVIEWER	Richard Midford Charles Darwin University and the Menzies School of Health Research
REVIEW RETURNED	10-Mar-2014

GENERAL COMMENTS	The research reported in this paper seeks to investigate the feasibility of implementing an Australian school drug education program, Climate Schools, in the United Kingdom. To this end, the researchers conducted a pilot study with 222 Year 9 students and 11 teachers from two schools in East London. Following implementation of the Climate Schools program, the participating students and teachers were asked to evaluate it according to a number of criteria. Students were asked to rate the program in terms it being enjoyable, interesting, relevant, easy to understand, memorable and applicable to their lives. Teachers were asked to rate how their students found the program, how easy it was to implement and how it stood up as drug education. The topic of this research is important, namely the transferability of a successful school drug education program from one setting to another. The paper is a well written, and clearly outlines the research undertaken and some limitations that should be considered when interpreting the findings. However, I have reservations that the design allows the research to answer the question posed in the title of the paper, namely the feasibility of conducting this Australian developed program in the UK. I consider that the authors have shown that the students in two London schools considered the program engaging and useful, and that the teachers rated the program highly because it was easy to teach, held the students' attention and compared favourably with other such programs. I do not consider this is sufficient evidence to support a conclusion that the program is a feasible means of delivering drug education in the UK school system. This research has other limitations in terms of data analysis, and the utility and generalisability of its findings. Analysis of teacher data is described as thematic, which implies a qualitative analysis process that seeks to identify, and report in rich detail, patterns, relationships and themes in data from a small sample. In actuality, the authors have undertaken a descriptive quantitative analysis, by reporting category response percentages for their sample of 11 teachers. The
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	research does not investigate whether the program made a difference to student knowledge, attitudes or behaviour in relation to the two drugs it addressed, namely alcohol and cannabis. I suggest these are important measures to consider in assessing a school drug education program. The paper does not report the percentage of the Year 9 school populations, who agreed to participate in the study, so the reader does not have an idea as to the representativeness of the study sample. In addition, the consent process is not clear, in that parallel passive and active consent processes are reported. I would also point out a couple of typos which could confuse the reader. In the third paragraph of the Introduction the statement is made "...and to date there have been positive evaluations of effective universal interventions to prevent substance use in the UK." I presume this should read "...no positive evaluations...". In Table 2 the description at the extreme disagree end of the Likert scale actually reads "strongly agree". This needs to be corrected.
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REVIEWER	Ina, Koning Universiteit Utrecht , Department of Interdisciplinary Social Science
REVIEW RETURNED	02-Apr-2014

GENERAL COMMENTS	This study is of great scientific and practical interest. Feasibility studies of evidence-based interventions are crucial before effectiveness and implementation is evaluated. Having said this, I think that some aspects should be described more explicitly. Apart from this, this study is of great importance. Major compulsory revisions The introduction nicely describes the intervention of interest and its results of an RCT conducted in Australia. However, information about the reason why this intervention is particularly of interest for the UK context is lacking. Why do the authors believe that this intervention may work in the UK? There are important differences regarding alcohol use and policy between these countries, so information about the reasons for this specific information would be very informative. In addition, in order to underline the importance of conducting feasibility studies, literature from previous feasibility studies may be included in the Introduction and Discussion. As the intervention is extensively evaluated by students and teachers for all modules and lessons, it would be interesting to have information about differences regarding the evaluations across the modules/lessons. Last, could the authors elaborate on how the suggestions from this study will be considered in the effectiveness trial (Discussion)? Information about the potential adjustment is missing.
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	Minor essential revisions More specific information may be included throughout the manuscript. For example, the number of classes in the abstract (page 2, 16), secondary schools (page 5, 45), parents/guardians (page 5, 55), students who received parental consent (page 5, 57). Do the authors have information about whether or not the students think that due to the intervention he/she will use less drugs? What is the meaning of 'participation' (page 6, line 4/5)? Is the sentence on page 4, line 36 correct (part after the reference to 10-12)? A dot is missing between UK and Table 1 (page 6, line 52).
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VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

The research reported in this paper seeks to investigate the feasibility of implementing an Australian school drug education program, Climate Schools, in the United Kingdom. To this end, the researchers conducted a pilot study with 222 Year 9 students and 11 teachers from two schools in East London. Following implementation of the Climate Schools program, the participating students and teachers were asked to evaluate it according to a number of criteria. Students were asked to rate the program in terms of it being enjoyable, interesting, relevant, easy to understand, memorable and applicable to their lives. Teachers were asked to rate how their students found the program, how easy it was to implement and how it stood up as drug education.

The topic of this research is important, namely the transferability of a successful school drug education program from one setting to another. The paper is well written, and clearly outlines the research undertaken and some limitations that should be considered when interpreting the findings.

However, I have reservations that the design allows the research to answer the question posed in the title of the paper, namely the feasibility of conducting this Australian developed program in the UK. I consider that the authors have shown that the students in two London schools considered the program engaging and useful, and that the teachers rated the program highly because it was easy to teach, held the students' attention and compared favourably with other such programs. I do not consider this is sufficient evidence to support a conclusion that the program is a feasible means of delivering drug education in the UK school system.

Response: The title of the paper has been changed to better reflect the study design and no longer includes the term feasibility. We have also made it clearer in both the Conclusions section of the Abstract and Discussion that before implementation of the programme into the UK school system, a full scale RCT is required to examine the programme's effectiveness (pg 2 & 14).

This research has other limitations in terms of data analysis, and the utility and generalisability of its findings. Analysis of teacher data is described as thematic, which implies a qualitative analysis process that seeks to identify, and report in rich detail, patterns, relationships and themes in data from

a small sample. In actuality, the authors have undertaken a descriptive quantitative analysis, by reporting category response percentages for their sample of 11 teachers.

Response: As suggested, to avoid misleading the reader we have replaced the term thematic analysis with descriptive quantitative analysis in the Analyses section of the Results (pg 9).

The research does not investigate whether the program made a difference to student knowledge, attitudes or behaviour in relation to the two drugs it addressed, namely alcohol and cannabis. I suggest these are important measures to consider in assessing a school drug education program.

Response: We have noted in the limitations sections of the Discussion on page 14 that an RCT including measures of knowledge, attitudes and behaviour are required before any conclusions can be drawn about the programme's effectiveness. We also note that such trial should be conducted before implementation of the programme into UK schools.

The paper does not report the percentage of the Year 9 school populations, who agreed to participate in the study, so the reader does not have an idea as to the representativeness of the study sample. In addition, the consent process is not clear, in that parallel passive and active consent processes are reported.

Response: This information on has now been included in the Participants section on page 5 and noted in the limitations of the Discussion on page 14. The consent process has also been clarified on page 5.

I would also point out a couple of typos which could confuse the reader. In the third paragraph of the Introduction the statement is made "...and to date there have been positive evaluations of effective universal interventions to prevent substance use in the UK." I presume this should read "...no positive evaluations...". In Table 2 the description at the extreme disagree end of the Likert scale actually reads "strongly agree". This needs to be corrected.

Response: We thank the reviewer for picking these up and apologise for any confusion. The sentence in the introduction has been changed to read "... there have been no positive evaluations..." and Table 2 has been amended as suggested.

Reviewer: 2

This study is of great scientific and practical interest. Feasibility studies of evidence-based interventions are crucial before effectiveness and implementation is evaluated. Having said this, I think that some aspects should be described more explicitly. Apart from this, this study is of great importance.

Major compulsory revisions:

The introduction nicely describes the intervention of interest and its results of an RCT conducted in Australia. However, information about the reason why this intervention is particularly of interest for the UK context is lacking. Why do the authors believe that this intervention may work in the UK? There are important differences regarding alcohol use and policy between these countries, so information about the reasons for this specific information would be very informative.

Response: Information about why the Climate Schools intervention was particularly appropriate for adaptation to the UK has been included in the Introduction on page 5.

In addition, in order to underline the importance of conducting feasibility studies, literature from

previous feasibility studies may be included in the Introduction and Discussion.

Response: References highlighting the importance of feasibility studies as well as references to specific pilot studies in prevention science have been included in the Introduction on page 5 and the Discussion on page 13.

As the intervention is extensively evaluated by students and teachers for all modules and lessons, it would be interesting to have information about differences regarding the evaluations across the modules/lessons.

Response: Unfortunately this information is not available in the current study, but this idea has been noted in the Discussion on page 14 as future research.

Last, could the authors elaborate on how the suggestions from this study will be considered in the effectiveness trial (Discussion)? Information about the potential adjustment is missing.

Response: This has been described in the Discussion on pages 13 & 14.

Minor essential revisions:

More specific information may be included throughout the manuscript. For example, the number of classes in the abstract (page 2, 16), secondary schools (page 5, 45), parents/guardians (page 5, 55), students who received parental consent (page 5, 57).

Response: As suggested above, more specific information has been included in the manuscript where available on pages 2 and 5.

Do the authors have information about whether or not the students think that due to the intervention he/she will use less drugs?

Response: Unfortunately this information was not obtained as part of the pilot study. We have noted this as a limitation in the Discussion section and suggest to examine such measures in a larger RCT of the programme's effectiveness.

What is the meaning of 'participation' (page 6, line 4/5)?

Response: Participating schools were those who agreed to be involved in the study and participating students were those whose received parental consent and gave consent themselves. This is outlined in the Methods.

Is the sentence on page 4, line 36 correct (part after the reference to 10-12)?

Response: We apologise for this error and have corrected this sentence to state "... there have been no positive evaluations..."

A dot is missing between UK and Table 1 (page 6, line 52).

Response: This has been corrected in the manuscript.