**Trauma matters: Development of trauma informed care framework for allied health professionals working with children and youth**

Review and Summary Comments

I have reviewed your ISF proposal and made some detailed comments/suggestions. I have also made a small number of track-changes minor edits to tighten up the language.

The background section is excellent and provides a clear overview of the issues facing allied health professionals when dealing with traumatized children and youth.

There are a few places where I think additional detail will strengthen your proposal:

1. **Emphasis on basic research.** As discussed previously, it needs to be clear that your proposal is for basic, rather than applied, research. I think this is clearer now, but I have provided an additional suggestion in one of the comments.
2. **Hypotheses.** At present, you do not have specific hypotheses. The items listed under the heading “Working Hypotheses” are not presented as actual hypotheses, but rather as exploratory ideas.

Can you provide more specific predictions, particularly for phase 2?

Which variables do you expect to be correlated?

Do you predict that resilience, self-compassion, and empathy will each moderate or mediate each of the outcome variables?

Do you predict group differences in any of the measured variables (I mention this because your data analysis sections refer to using statistical tests to analyse group differences).

Having provided more specific hypotheses, you can then add even more detail to the data analysis sections, aligning specific statistical analyses with specific hypotheses.

f you are not able to go into specific details for each variable, simply because you do not yet know what you will find, try to provide as much detail as possible, and be explicit about which aspects of the study are exploratory (which is why you are not able to make specific directional hypotheses)

1. **Data analytic plan.**

For phase 2, if you have provided specific predictions about correlations, group differences, and mediating/moderating variables (see point 2 above), you can then refer back to those predictions here.

For example, you could say that MANOVA will be used to test the prediction that the different types of health professional (occupational therapists, physiotherapists, speech therapists, and dietitians) will vary in their knowledge and attitudes towards trauma (this is just an example, of course!)

My more general point is that a symmetry between hypotheses and statistical tests makes for a more compelling proposal.

I hope my feedback is useful – please let me know if you need any clarification on any of my comments or suggestions for changes.