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The Relationship Between Health Awareness, Demographic Characteristics, and Mass Media Use with the Attitude of Headquarters Staff of Ilam University of Medical Sciences Toward Organic Chicken Consumption

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1. Round 1

1.1 Reviewer 1

Reviewer:

In the Introduction paragraph discussing food consumption patterns, the authors appropriately frame organic chicken consumption within public health and sustainable food systems; however, the introduction would benefit from a clearer theoretical model. For example, the paragraph could explicitly identify whether the study is grounded in the theory of planned behavior, health belief model, consumer health consciousness framework, or a general attitude formation model. Without a theoretical framework, the selection of variables such as health awareness, demographic characteristics, and mass media use appears descriptive rather than conceptually integrated.

In the Introduction paragraph beginning “Health awareness is one of the most important constructs,” the authors should define “health awareness” more operationally and in alignment with the questionnaire items used in the study. The current explanation is conceptually broad, while the actual instrument seems to assess awareness of organic chicken characteristics, such as lack of additives, hormones, antibiotics, and genetic manipulation. The authors should clarify whether the construct refers to general health consciousness or specific awareness of organic chicken attributes.

In the Findings paragraph describing demographic characteristics, the sentence “the mean age of the studied staff members was 35.45 years… indicating that the participants were relatively young” requires either justification or removal. The term “relatively young” is interpretive and should be supported by an appropriate benchmark, such as the age distribution of university staff, national workforce norms, or occupational age categories. Otherwise, the authors should simply report the mean and standard deviation without subjective classification.

In Table 1, the combined presentation of health awareness, mass media use, and attitude items is useful for reducing table volume, but the table is very long and may reduce readability. The authors should consider grouping the rows visually under three bold category labels or presenting the table as “Item rankings by construct.” In addition, the column title “Rank” should be used consistently rather than alternating between “rank,” “priority,” or “prioritization.”

Authors revised the manuscript and uploaded the updated document.

1.2 Reviewer 2

Reviewer:

In the Method paragraph stating that “the sample size was determined to be 148 participants,” the later regression tables report df values of 1 and 123, implying that only 125 cases were included in regression analyses. This discrepancy is methodologically significant. The authors should explain whether there were missing data, excluded questionnaires, incomplete responses, or listwise deletion in SPSS, and they should report the final valid sample size for each analysis.

In the Method paragraph describing the questionnaire, the authors state that the instrument had four sections, but no information is provided about the origin of the items. The authors should clarify whether the questionnaire was researcher-made, adapted from previous validated instruments, or developed based on literature review and expert opinion. If researcher-made, the manuscript should explain item development, content domains, scoring procedure, possible score range, and interpretation of higher scores.

In the Method paragraph reporting reliability, the authors state that “Cronbach’s alpha coefficient was 0.75 for the entire questionnaire.” Reporting only the total alpha is insufficient because the questionnaire includes conceptually distinct sections: health awareness, mass media use, and attitude. The authors should report Cronbach’s alpha separately for each multi-item scale, particularly the 16-item attitude scale, because internal consistency should be assessed at the construct level rather than only for the entire instrument.

In the Method paragraph stating that content validity was confirmed by “five specialists in nutrition, animal science, consumer behavior, and public health,” the authors should provide more detail on the validation procedure. It is recommended to report whether content validity ratio, content validity index, qualitative expert review, or item-level relevance ratings were used. If only qualitative expert judgment was performed, this should be stated transparently, and the types of revisions made after expert review should be briefly described.

In the Method paragraph stating that “the Kolmogorov–Smirnov test indicated that the data distribution was not normal,” the authors should specify which variables were tested for normality. Since the study includes several variables with different measurement levels, applying normality testing globally may be inappropriate. The authors should report whether normality was assessed for the dependent variable, predictor variables, or regression residuals, because regression requires normality of residuals rather than normality of all observed variables.

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In the Method paragraph, the authors state that nonparametric tests were used because the data were not normally distributed, but they subsequently used simple linear regression. This requires clarification. Linear regression is a parametric procedure, and its assumptions differ from bivariate normality. The authors should explain why regression was considered appropriate despite the earlier decision to use nonparametric tests, and they should provide evidence that regression residuals met the required assumptions.

Authors revised the manuscript and uploaded the updated document.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.

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