Reviewer's report

Title: Psychiatric stigma and discrimination in South Africa: perspectives from key stakeholders

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Reviewer: Sean Lynch

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BMC Psychiatry

'Psychiatric stigma and discrimination in South Africa: perspectives from key stakeholders'

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This is a potentially important article for the journal, as it examines factors favouring stigma in a lower and middle income country and a different culture to much of the body of recently published literature, which has been in more Westernised cultures. The narrative accounts are powerful and interesting and the cultural aspects of stigma studied in this article are original. I feel it would be well placed in the journal and will stimulate interest and debate.

Minor Essential Revisions

I have listed below some minor revisions which are essential in my view.

Overall this is a generally well-written and detailed paper. It is well-structured and the style and referencing is appropriate and tables clear. I think there are a few minor grammatical errors, e.g. line 89 “…psychiatric stigma tends.. and line 229 “interviews conducted in Setswana were translated…” Could the authors carefully recheck and correct? I would favour a slight shortening of paper (10%) to make it more succinct.

Background

The background is generally well justified and well described and the concepts of stigma and their implications for people using services. As there is an established body of research on the types of stigma, I did wonder if this could be shortened more in the background and referenced to key papers. I would have liked to see more of a lead in to what the unique health care challenges are in South Africa and how this informed the choice of methods used. I would have liked more discussion of the SASH study and any research findings / or explanations for health inequalities in South Africa.

Methods

The method is generally well described, but there is not a great deal of information provided on how these areas studied in KKD District compare in socio-economic terms, health needs and health care provision to other areas in
South Africa.
The context of the study in the PRIME initiative is well described. If there is data, it would be helpful to summarise the numbers not eligible or excluded from the study and any characteristics of eligible participants who refused to participate. The choice of HIV positive patients in the study may be important in terms of demands on the local health care system and national priorities, but could possibly be a factor affecting stigma and attitudes. More discussion of this is needed in my view.

There is little information given on the level of training or experience of the health care workers studied and how representative they are of the current mental health system.

The qualitative methods used are conventional and described in great detail. Again, I wondered if these could be summarised more and referenced to some key papers?

DISCUSSION

I think that the authors should acknowledge potential bias in the areas studied (urban mainly, possibly with more resources) and be more explicit on how this may differ from other parts of South Africa. Also, if more traditional health care and help seeking models (such as sangomas) are available in other areas, with less developed health care systems, does this have a positive or negative effect on stigma? Are aspects of community identity and cohesion also important in other words?

Although the authors are to be congratulated on completing the study and the difficulty of the study should not be under-estimated, the numbers studied are modest. I think that more discussion of how these results will drive future research on stigma in South Africa would be helpful. I

Education and training is mentioned as an effective intervention for health workers to combat stigmatising attitudes and issues of knowledge. While I have no issue with this suggestion, I wonder if the authors have views on the use of clinical supervision and continuing professional development as longer term agents of change?

I have no further comments on the discussion and conclusion which are well-written.

Sean Lynch
29/4/14

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests:

Declaration of Competing Interests
I declare that I have no competing interests