Reviewer's report

Title: Knowledge and risk behaviors related to HIV/AIDS, and their associations with information sources among men who have sex with men in China

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Reviewer: Han Menghie

Reviewer's report:

In general, the study fairly address the questions regarding the HIV prevalence and Knowledge and risk behaviours related to HIV/AIDS, and their association with information source among Men who have sex with men in Heilongjiang province, China.

There is an urgent need address the emerging and re-emerging epidemics of HIV and other STIs among MSM and transgender people. In the developing world, we have seen the emerging trends of HIV epidemic among MSM and transgender population. However, we know little about MSM and it's sexual behaviour and sexual network, and it's legal, social and cultural milieu related to HIV/AIDS as opposed to developed world.

The study conducted in one province in China has provided valuable empirical data on HIV prevalence, knowledge and behaviours among MSM population those who previously ignored in response of HIV epidemic in Low middle income counties, including China.

Considering the study conducted only in one of more than 30 provinces in China, it would be more appropriate to indicate straightforwardly where the study been conducted, instead of generalize its study to China as a whole. Title of study could be revised as "Knowledge and risk behaviours related to HIV/AIDS, and their association with information source among Men who have sex with men in Heilongjiang province, China "

Specific comments:

Abstract:

1. In methods, Please be noted that the sample(1353) is not randomized.

Discretionary Revisions

Background information:

2. Reference(1) seems does not match with sentences/contents quoted in first paragraph on concrete data on HIV/AIDS in China. Please double check it.

Discretionary Revisions

3. As suggested above, aim of the study need to define in Heilongjiang province.
Actually Heilongjiang province has very low HIV relevance in China, barely represent the HIV prevalence, and knowledge and behaviour among MSM in China. For this reason, should give more information on HIV epidemic in Heilongjiang in the background.

**Minor Essential Revisions**

**Method:**

4. It’s not clear about the operational definition of MSM for this study. No information on inclusion criteria, screening of the MSM who meet your criteria, recruits did not agreed to participate in the study after interview provided necessary information on this study.

**Minor Essential Revisions**

5. Need to elucidate briefly on sample strategies used in the study. What is the population size and location sample? "mean Time and Location Sample(TLS)"? or give more detailed. How did proceed to internet recruitment? sample strategies been used in four cities? Why only select these four cities? What’s the rationale for this selection, how sample size in each cities been determined?

**Minor Essential Revisions**

**Results**

6. In HIV infection, the result shows that only 2 of 23 HIV infected MSM had unprotected anal intercourse in the past 6 months( does mean use condom every time?), what's about the behaviours for unprotected anal intercourse among MSM who were tested HIV negative? seems it ‘s valuable for analysis.

**Discretionary Revisions**

**Discussion:**

7. It is not clear enough for the discussion on "the lower education level, the less mean knowledge score. Does imply the people who only had primary education would be difficult for them to understand the basic knowledge on AIDS( 8 question asked) ?

**Minor Essential Revisions**

8. Regarding "The study revealed that Harbin, the capital of Heilongjiang province, had the highest risk behaviour with more than one male sex partner, and that Qiqihar had the most frequent sex behaviour with a male sex partner in the past 6 months, better to show the P value.

**Minor Essential Revisions**

**Conclusion**

9. Rethink the conclusion, the recommendation on reduction in stigma, it's obvious very importance, but it seems less related to results of the study. the conclusion should derive from the study itself . The suggestion on promotion of
frequent testing may need to think about role and quality of counselling as opposed to the results regarding more testing the more risk behaviour.

**Level of interest:** An article of importance in its field

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**

No, I declare that I have no competing interests