Author's response to reviews

Title: Perceptions of young Jordanian adults to proposed anti-tobacco pictorial warning labels

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To the Editor:

Please find enclosed below our response to the comments on our submission to BMC Public Health (MS 1013641144475992 , “Perceptions of young Jordanian adults to proposed anti-tobacco pictorial warning labels”) provided by the reviewers.

We would like to thank you and the reviewers for your time and effort, and the opportunity to further improve our submission. We hope the changes address all concerns sufficiently.

Thank you,

Feras Hawari, M.B.B.S
Response to reviewers’ comments, Ms. No. 1013641144475992 (Perceptions of young Jordanian adults to proposed anti-tobacco pictorial warning labels)

We thank the reviewers for their time and efforts in providing their constructive comments. Their comments are addressed below. Please note that the page and line numbers we refer to correspond to the clean (track changes accepted) manuscript after the changes. The manuscript has been modified according to the comments received, and general edits also have been made to improve the writing quality.

Reviewer 1 (Dr. David Hammond):

This study seeks to examine the effectiveness of four pictorial health warnings on cigarette packages among young Jordanians. The issue of health warnings is a timely and important topic. Very little, if any, published evidence from Middle Eastern countries. The study presents findings from a cross-sectional study conducted among youth using convenience sampling methods. The general quality of the writing is reasonable, but could be improved. Additional statistical and methodological detail also needs to be added. Overall, this paper provides data that is urgently needed on the topic of health warnings in an important region. However, the quality of the paper needs to be improved and the paper may be better suited to a brief report than a full research article.

Thank you for your comments. The statistical and methodological content of the manuscript have been edited as per further comments provided below. With regards to the type of submission (brief report or research article), BMC Public Health does not provide this particular option (brief report), but should the editor see that our submission can fall under another category, we would be happy to reformat the submission accordingly.

Abstract

1. It would be preferable to refer to daily/non-daily smoker rather than “regular/social” smoker.

Respondents in the questionnaire we used were asked if they were “regular” smokers or if they smoked “only on occasions”. To maintain this terminology in the text, we now use “regular” or “occasional” smokers.

2. Unclear: “In smokers, only one proposed pictorial had significantly more smoker perception as salient or adding to information.”

The sentence needs grammatical correction. We have edited the sentence to now read “In smokers, only one proposed pictorial had significantly more smokers perceiving it as salient or adding to information when compared to the current pictorial”.
Response to reviewers’ comments, Ms. No. 1013641144475992 (Perceptions of young Jordanian adults to proposed anti-tobacco pictorial warning labels)

Background

3. Second page of the Background should note that Egypt has rotating pictorial warnings.

This piece of information has been added to the background (page 5, line 23: “Jordan ratified the FCTC.....making it the first country in the region to display warnings on cigarette packs (followed in 2008 by Egypt, which now enforces the use of four rotating warning labels).”).

4. It would be helpful to have some basic tobacco information on Jordan, such as the prevalence rate.

We have added a statement regarding prevalence of tobacco use in Jordan in the background. The background now reads (page 6, line 8): “The move towards more visually prominent anti-tobacco messages is important, given the magnitude of the smoking problem in the country. The overall prevalence of smoking in Jordan is approximately 28% among adults, but is particularly high among males. For example, among younger adult males aged 18 to 24, the prevalence of smoking has been estimated at 42.2%. [25] Thus, plans to enhance pictorial warnings is a substantial and positive move in Jordan’s tobacco control efforts, and establishes it as one of the first countries in the Middle East to use a selection of pictorial health warnings...”.

Methods

5. Original wording should be provided for all key outcome measures, including perceptions of salience, fear elicited and gained information after viewing each pictorial and motivation to not initiate smoking (if a non-smoker) or to quit smoking (if a smoker).

We will be providing a copy of the tool used (Arabic tool and its English translations) online, in order to display the original wording used with the respondents. We also have included terms within the Methods section to reflect the [translated] terms used as follows (please see line 9, page 8): “For each pictorial, perceptions of salience (ranging from “not noticeable to “noticeable and attracts attention”), extent of fear elicited (ranging from “not scary” to “very scary”), and degree of information added (ranging from “not informative” to “informative and adds to my knowledge”) were assessed through a five-point Likert scale, with ‘1’ indicating the weakest perception, and ‘5’ indicating the strongest perception. Motivation to quit smoking (“based on this warning, I am motivated to try to quit smoking”) or remain nonsmokers (“based on this warning, I am motivated to remain a non smoker”) was also measured using a five-point Likert scale ranging from strong disagreement to strong agreement to engage in a positive behavior.”.

6. Methods – It appears as if no information was collected on response rates, such as the number of participants who refused to participate. Please note this.

We now include this information in the results section (page 10, line 9): “Out of 564 subjects approached by surveyors, a total of 478 subjects agreed to participate in the survey. Due to poor
quality of data entry in a small selection of returned surveys, a final number of 450 completed surveys were used in the final analysis, representing an approximate response rate of 80%”.

7. Methods – Need to define criteria for “regular” and “social” smokers.

Smoking was self-reported as “regular” or “smoke on occasions”.

8. The last sentence of the Results appears to summarize qualitative data. This section is too brief to present this type of data in a comprehensive way. I would recommend removing this section.

We have removed this section.

Results

9. The nature of statistical tests (i.e., the type of test) and the actual results need to be presented. At the moment, the only statistical information provided is an asterisk indicating p<.05. This is inadequate. Where possible, provide exact p values and provide the test statistic, such as the chi square value.

All results were based on Chi-square tests (page 10, line 5). We will also provide exact p-values. The figures have been edited accordingly, and some values have been specified within text (we did not list all values in text to avoid cluttering the text itself). However, all values are now clearly displayed in the figures and footnotes.

10. The figures need to have a footnote indicate what the asterisk refers to.

Please note that the footnotes are displayed separately rather than below the figures (page 17 in the text), as per the submission requirements.

Reviewer 2 (Dr. Linda Pederson):

This manuscript adds to the growing body of knowledge concerning the potential impact of graphic warning labels on cigarette packs. The information is clearly presented and the limitations of the data are discussed. However, some information could be added to the methods.

Thank you for your comments. To the extent that data are available, we have addressed the questions below regarding our methods.

1. I could not locate information on how many individuals who were approached refused to be interviewed.
Response to reviewers' comments, Ms. No. 1013641144475992 (Perceptions of young Jordanian adults to proposed anti-tobacco pictorial warning labels)

We have now provided this information in the results section (page 10, line 9).

2. How many individuals were used as surveyors - what were their age, gender and smoking status.

Thirty two surveyors were involved (this has been specified in the Methods section, page 9, line 5). We have limited data describing them, but we have included what we have of information in our Methods section: “The surveyors group for the study was composed of 32 volunteer medical students from three Jordanian universities (18 were female; and three of the 32 smoked). Surveyors were split....”

All surveyors were medical students in the International Federation of Medical Students' Associations in Jordan, University of Jordan Chapter (please also see “Acknowledgements”). Most surveyors fell between the ages of 18 and 23 but we did not record specific ages. Should the reviewer need more specific information to be included in the manuscript, we will need more time to collect this information.

3. What information was provided to the surveyors about who to approach and how to approach them?

We have described the approach used in page 9 (beginning from line 5). Surveyors were trained and given specific instruction sheets so that the approach used was standardized across surveyors.

4. Where were the interviews carried out and how long were they?

We did not record the location of the interview. However, interviews took place largely in community settings, largely in college campuses or in other public settings (the sample was a convenience sample). We have mentioned this in our Methods section (page 9, line 9). The interview process took approximately half an hour per respondent.

5. What are the demographics of smokers? Do the distributions in the present sample reflect the population of smokers?

The demographics of smokers are presented in table 1. It is difficult to state definitively to what extent our [convenience] sample is comparable to the population of smokers given the limited demographic information available both within our sample, as well as within population statistics on this age group.

Further requirements:
Response to reviewers’ comments, Ms. No. 1013641144475992 (Perceptions of young Jordanian adults to proposed anti-tobacco pictorial warning labels)

1. Copy of questionnaire - Please upload a copy of your questionnaire as an additional file. If it is not in English, please translate it and also upload an additional copy of the translated version.

Copies of the Arabic and English tools will be uploaded.

2. Abstract - Please rename the 'Objective' section of abstract as 'Background' instead.

This change has been made.

3. Abstract - Include information about the context and aims of your study your abstract.

The background has been edited to read as follows in the abstract: “In commitment to the Framework Convention on Tobacco Control (FCTC), four new pictorial warnings are now being proposed for display on cigarette packages sold in Jordan. The aim of this study was to gauge the immediate perceptions of young Jordanian adults towards these new pictorials and compare these perceptions to those of the pictorial currently being used in the country.”