Reviewer’s report

Title: ‘Pregnancy comes accidentally - like it did with me’: Reproductive Decisions among Women on ART and their Partners in Rural Uganda: A Qualitative Study

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Reviewer: Jolly Beyeza-Kashesya

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‘Pregnancy Comes Accidentally - like it did with me’: Reproductive Decisions among Women on ART and their Partners in Rural Uganda

Date: 2nd April 2011

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Reviewer’s Comments

Reproduction and HIV infection continues to be a topical issue especially in low-resource settings. King’s findings are similar to findings by local (Ugandan) authors in the same subject area, that decision-making is a complex issue, which is influenced by age and no of living children (Kisakye et al 2009, partners (Kashesya et al 2010), patriarchal culture of wanting to have a male for an heir (Not a boy not a child: by Beyeza-Kashesya et al 2010). King’s work of “Pregnancy Comes Accidentally” adds the dimension of the influence of ART, but also exposes the system’s failure to support and offer appropriate fertility choices to the people living with HIV. This again echo’s what Homsy 2009 found in a cohort with low desire for children but with high pregnancy rates.

The methods seem adequately described except that there is no indication when the study was done. In addition, the authors describe well the purposive sampling and the maximum variation sampling technique described by (Patton MQ, 2002), but it is not clear whether saturation of information was reached before they stopped data collection (which is important in qualitative research).

The authors endeavored to answer the question they set out to do. Below are some additional clarifications that need to be addressed.

Major revisions

METHODS

The trustworthiness of qualitative research hinges on the description of the methods. This needs to be detailed more.

Abstract is not seen. I hope it will be included.
Minor important revisions

1. Introduction

Second paragraph lines 1-2 needs a citation for the source of the information.

“Reproductive decision-making for HIV-infected men and women encompasses a complex web of biomedical, cultural, and socio-economic factors.”

2. Second paragraph lines 4-6

The role of the health care provider is key in shaping and coloring access to reproductive health services [9]. The use of colouring is superfluous and journalistic. It may not be suitable for scholarly writing.

METHODS

3. Page 3 paragraph 1 line 1

We conducted a qualitative sub-study with participants enrolled in the Home-based AIDS Care project (HBAC) in rural Eastern Uganda [13].

When was this study conducted? How long had they been in general TASO care? How about in HBAC care?

4. Page 3, third paragraph lines 9-11

Research counsellors visited participants quarterly to collect behavioral data, and to provide ongoing support on adherence to ART and on sexual behavior risks though they didn’t particularly emphasize family planning

And

Page 4, first paragraph lines 8-11

In addition, study participants were counseled at enrolment about the potential effects of ART on restoring health, fertility and sexual activity, and were referred to the hospital family planning (FP) clinic adjacent to the study clinic if interested in using FP other than condoms.

These two statements are contradictory and should be sorted out. It is not clear whether they later started giving FP counseling (because fertility counseling includes FP) or how they chose who to refer to hospital for FP (since they were not counseling about FP).

5. Page 4, first paragraph lines 11-12

The FP clinic provided standard FP counseling and services including any number of clinic visits and contraceptive methods.

I have read this sentence several times and I seem to get no meaning. May be “including any number of clinic visits” is misplaced.

6. Page 4, second paragraph lines 1-2

A quantitative analysis of cohort data found high rates of unintended pregnancy among…. “THE” is missing between of and cohort.
7. Page 5, second paragraph lines 8-12
After reading two transcripts, the analysis team members collaboratively developed a codebook of themes based on the interview topics as well as those emerging from the data. Two more transcripts were then reviewed to include additional topic areas and themes. This process was repeated until the codebook reached a stage where no new themes or topic areas emerged. (Which process are you alluding to? Of taking two more scripts at a time for reviewing? How many scripts did you review to reach final version of the codebook, to start coding all transcripts?)

RESULTS
8. Page 6, second paragraph line 1
Eighty-five percent of the women who were pregnant, aborted or had delivered recently
It is difficult presenting qualitative research in figures and percentages. What seems to dominate qualitative research are rather the themes and concepts, experiences and etc.

9. Page 7, second paragraph lines 1-2
More women (11) than men (2) cited partner’s desire for children as an important factor associated with pregnancy.
Again in qualitative research, the numbers stop being important. After all, you counted them and got the percentages in the cohort study mentioned in the text before.

DISCUSSION
10. Page 13, first paragraph lines 1-4
Uganda, ART initiation counselling is packed with information focusing on adherence and assessing an individual’s readiness to start a life-long treatment. Individuals are often very sick and may be over-whelmed with the amount of information. This may not be the ideal time to address issues of changing fertility and family planning options.
True it is not ideal to initiate counseling for FP and options at the initiation of ART. However, these patients have been followed up for a long time, (Though the study does not tell us when recruitment into HBAC started). In addition, the patients have been in TASO care for sometime even before HBAC started. The authors should discuss this critical gap in patient care of this cohort as one of the reasons for high unmet need for contraception and especially the high rates of unintended pregnancies.

References:
11. The citation needs to be harmonized to one style.
Some authors cite one author and adds et al, in others, several authors are
listed.
Reference 2 is the same article as reference 15. One needs to be deleted. In addition, reference 2 has no year of publication.

12. Supplement file 2

Injection: good
She is using Depo injection and she has used it for almost one year now. Before she started using it, she was fat and now as she is using it, she has started loosing weight. (Man with 1 living child, 4 deceased, delivered)

This is a strange finding in African/Ugandan men. Besides the little appreciation for slim women, loosing weight when one has HIV infection is rarely regarded as good

This is otherwise a good article contributing to reproduction in the era of HIV infection and ART in low resource settings.

**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:**
I declare that I have no competing interests