Author's response to reviews

Title: An Integrated Individual, Community, and Structural Intervention to Reduce HIV/STI Risks among Female Sex Workers in China

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Author's response to reviews: see over
Dear Editors,

Thank you so much for offering us the second revision opportunity to improve the manuscript. We are grateful to the reviewer for their insightful comments. Following your guidance, we have provided point-by-point responses to all issues raised by the reviewers.

Reviewer #1

Point1.1 General comments: Revise language: Overall, the quality of the re-submitted paper has improved, but there limitations and shortcomings remain. The methodological limitations should be more extensively discussed. In addition, the language of the paper is sometimes difficult to follow and needs improvement and English editing.

Many thanks for the reviewer’s comments. We added the methodological limitations on the discussion section on page 22. Our native English-speaker has gone through the paper with a fine-tooth comb to ensure that all of the spellings and word idioms are correct.

Point1.2. Title: “An Integrated Individual, Community, and Structural Intervention to Reduce HIV/STI Risks among Female Sex Workers Making efforts to reduce the heterosexual transmission of HIV/STIs: The Global Fund AIDS Program in Shandong Province, China” is not specific enough. The title should be revised in order to indicate the setting (Shandong Province, China) and some hint of the study’s design.

The title was revised as “An Integrated Individual, Community, and Structural Intervention to Reduce HIV/STI Risks among Female Sex Workers in China.”

Point1.3. Background, general: It would be interesting as background information to mention the HIV and STI (syphilis) prevalence in the general population in Shandong province.

The HIV/syphilis prevalence in the general population in Shandong province was still at low level. Data from the sentinel surveillance in Shandong showed that the HIV and syphilis prevalence among the general population was 0.03% and 0.20% respectively in 2011. Revisions were made on the third paragraph in the Introduction section in lines 10 - 11 on page 5.
Point1.4. Methods, “The selection of these six intervention sites were based on the status of the HIV epidemic among total 140 counties...” What were exactly the selection criteria for the 6 pilot counties? Higher HIV/STI prevalence?

Thanks for the reviewer’s excellent suggestions. The selection of these six intervention sites were based on the number of HIV/AIDS case reporting among total 140 counties of Shandong. The revision was made in the “Study design” in the Method section in the lines 12 -13 on page 6.

Point1.5. A large description of the intervention is now given, however the information on numbers reached is absent. Can the authors add some numbers to the specific intervention components?

We added some information on numbers in the “Intervention components” in the lines 7-9 and lines 13-15 on page 8, lines 18-19 on page 10, lines 17-18, 20-21 on page 11, and lines 7-9 on page 13.

Point1.6. Methods, Recruitment of the participants: it is still not clear how exactly participants were recruited. How were peer referral recruiting techniques (which, I presume, are part of a convenience sample) used for “randomly selection of participants”?

Stratified sampling method was applied in this study. A detailed geographical map with roads, key streets, markets, shops, hotels, and bus depots was developed in each county. The numbers of FSWs in each establishment and street were numerated and/or estimated. All establishments and streets were listed and stratified within the sampling frame. Participants were recruited using a convenience sample strategy from randomly selected establishments or streets. A maximum of 25 participants were recruited from the large selected establishments; for smaller selected establishment with ≤15 FSWs. Revisions were made in the recruitments and participants part of Method section on page 13.

Point1.7. Results, paragraph before “HIV-related knowledge and service utilization”. Please revise the sentence: “After adjusted for age, marital status, ......than that in control sites”.

The sentence was revised to “Multiple logistic regression models suggested that the rates of condom use in the last episode with clients (AOR=2.7; 95%CI:1.9, 3.8), with regular sex partners (AOR=1.5; 95%CI:1.1, 1.9) and consistent condom use in the last month with clients (AOR=3.3; 95%CI: 2.6, 4.1) and regular sex partners (1.7; 95%CI: 1.3, 2.3) were significantly higher in intervention sites than that in control sites.” Revision was made on the second paragraph of the Results section on page 17.

Point1.8. Discussion: “Strengths of this study include its estimation of the size of the
targeted population and mapping strategy” The results of the size estimation is nowhere mentioned in the manuscript, although the authors say this is one of the strengths of the study.

We described more specifically how the recruitment was done in the revised Method section on page 13. A sociodemographic mapping strategy was applied in this study. A detailed geographical map with roads, key streets, markets, shops, hotels, and bus depots was developed in each county. The numbers of FSWs in each establishment and street were numerated and/or estimated. All establishments and streets were listed and stratified for sampling. Participants were selected from randomly selected establishments or streets. Efforts on investigating the venue and preliminary estimates in each establishment strengthen the mapping strategy and size estimation to reduce selection bias. Revision was made in the last paragraph of the Discussion section on page 22.

Again, we are grateful to the revision opportunity. We are looking forward to your reviewing our revised manuscript. If you have any questions, please feel free to contact Meizhen at liaomz161@126.com/ 011-86-186-1528-1775 (Beijing Time) or Yujiang at jiayj@aol.com/ 615-482-1512 (U.S. Eastern Time).

Sincerely,

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