Author’s response to reviews

Title: Prevalence and Factors Determining Psychoactive Substance (PAS) use among Hawassa University (HU) Undergraduate Students, Hawassa Ethiopia

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Author's response to reviews: see over
PART II: Answer to Referee two’s comment

Major Compulsory Revisions:

Overall, the measurement section of the manuscript is not explicit enough and the authors did not address their limitations appropriately.

Answer: Comment accepted. Limitation of the study is further explained (see ref no 262-271)

Furthermore the quality of written English is not good enough and therefore many parts are not easy to understand.

Comment accepted and the finalized manuscript is given to a volunteer language editor. Thus, the language edition of the manuscript is already performed by a native English language editor by Nancy R. Katz, Ph.D (President & Principal Medical writing Consultant) (see ref no 290-291)

Overall, there is a lot of information that not necessarily contains in the abstract, such as the use of SPSS. Please replace this with more appropriate information like the conducted analyses.

Comment accepted
Abstract: abstract revised (see ref no 27-31)

P.1, 1st paragraph: What do you mean by ‘studied about’?
Language problem already removed

P.1, 3rd paragraph: What is PASU?

PASU is psychoactive substance but Corrected with “PAS” all over the document

P.2, 1st paragraph: As alcohol is included the discussion should sound a little bit less dramatic.
Comment accepted language edited

Introduction:
5) P. 2, 3rd paragraph: Replace abused by used.

Abused replaced by used

Methods:
6) Overall, the emphasis of the methods chapter is placed on the sample calculation. This does not appear to play a major role for the manuscript. In contrast it seems to be
important to describe the recruitment of students in more detail as students’ substance use is a very sensitive topic. Where do you distribute the questionnaire? Did the students fill out the questionnaire in front of a teacher? Whether data were not collected anonymously then they students may have perceived that they could be identified. This is an important limitation, given that the subject matter is about illicit drug use and students may be hesitant to report illegal behavior where they can be potentially identified.

Comment accepted: further explanation of the method data collection ways discussed (see ref 87-102)

7) Furthermore, it is of interest how the question and the possible response categories were verbalized. Did you combine categories? Please provide more details on this issues and restructure the methods chapter.

As it appeared on the table four, except all categorical variables (religion, ethnicity) the remaining all were dichotomized. And all those factors found qualified (<0.2) all were taken to multivariate logistic analysis model to be included in the (see ref no 131-135)

8) P. 3, 5th paragraph: What do you mean by ‘partly adopted’? Please clarify.

This part totally removed (see ref no 113-116)

9) P. 4, 3rd paragraph: Please describe the performed analyses in more detail, i.e. which kind of bivariate analysis was done? How was the dependent variable of the multiple logistic regression coded? Did you include categorical and /or continuous independent variables?

Comment accepted and further explanation and briefing made to detail the type of analysis done (See Ref no 132-135)

**Results:**
The number of male participants is remarkably higher than the number of female participants. Can you explain this? Table 1 provides demographic sample characteristics but no comparison is provided for demographic data from the university population as a whole from which the data are drawn or similar universities in Ethiopia. If the data differs from general student population this might be worth to be mentioned.

Number of male students is higher in Hawassa University as it is also same in all other Ethiopian universities. But we took the sample for female student’s proportional to the sampled students and as well the whole University female students. That’s why we used multistage stratified sampling technique (See ref no 95-102)

11) P. 4, last paragraph: Students start to drink comparably late in their life (17 years old). How it is thus possible that 60% of students reported that alcohol was their gateway drug?
Comment accepted
Restatement given to make the paragraph more clear (see ref no 198-202)

12) P. 5, 1st paragraph: replace ‘gait way drug’ by ‘gateway drug’.
Comment accepted
Correction given throughout the (see ref no 202)

13) P. 5, 3rd paragraph: Please add that you are just referring to consequences that were mentioned in the questionnaire.
Comment accepted (see ref no 167-168)

14) P. 5, 5th paragraph: The whole paragraph is very difficult to read. Please rewrite and restructure this section.
Comment accepted
the whole paragraph revised to make it clear(172 – 181)

15) P. 5, 5th paragraph: OR = 2.37 - please add the missing decimal place or, the other way around, delete one decimal place in case of all Ors
Comment accepted
All the OR s readjusted to uniform decimal arrangement. (See ref no 172-1810

Discussion:

16) P. 6, 1st paragraph: What does ‘higher’ mean here?
Answer
it is to mean high risk to be exposed to HIV infection as a result of taking risky sexual behavior (causal and unprotected sex) (ref no 219-220)

17) P. 6, 3rd paragraph: The section about alcohol use of HU students compared to other students alcohol use behavior is difficult to read. Please restructure. For instance, first is mentioned that the current prevalence is higher among students of Axum university and afterwards the prevalence is lower. Please clarify.
This paragraph totally removed to be more specific as a comment is also given with its table

18) P. 6, 4th paragraph: ‘alarmingly increasing’: The word increasing is misleading in this case. Cross-sectional analyses were performed and no longitudinal or time-trend analysis have been conducted.
Comment accepted and the phrase ‘alarmingly increasing’ erased

19) The limitation chapter is too short. It is very important to address all possible limitation in studies on alcohol and drugs. Please discuss the reliance of
self-reported data and possibilities of under- and over-reporting. How do you try to mitigate these inherent problems?

Comment Accepted and further explanation about the limitation of the study given (Ref no 264-273)

Conclusions:

20) The conclusion contains no additional information, in this section the results are mentioned again. Please add additional information or shorten the conclusion Section.

Comment accepted,
The conclusion part is reduced and we tried to summarize our main finding and also recommend (see ref no 275-281)

21) It seems that with some restructuring, tables 1 and 2 as well as 5 and 6 could be combined into a single table.

Based on the comment given we removed Table 5, 6, and also all the figures since we wanted to focus on only overall PAS. We limited our table to address our specific objectives only (See table 1, 2, 3, 4)

22) Figures 1 & 2: Both figures do not seem necessary to the body of the article. I suggest to delete the figures.

Comment Accepted figures deleted

General:

23) There were many grammatical mistakes throughout the manuscript. I pointed out a few, but the manuscript would benefit from an extensive revise.

Comment accepted and the finalized manuscript is given to a volunteer language editor. Thus, the language edition of the manuscript is already performed by a native English language editor by Nancy R.Katz,Ph.D (President & Principal Medical writing Consultant) (see ref no 290-291)

24) Basic terms are written in different styles such as psycho-active and psychoactive or lifetime and life time. Please unify these terms.

Comment accepted we use the unified one throughout (psychoactive)

25) Furthermore, it is very important that statistical and epidemiological measurements are named consistent (i.e. annual prevalence and current prevalence).

Comment accepted. Definition of operational definition was also considered (see ref no 124-130)

26) Used abbreviations should be spelled out (i.e. PSAU).
Comment accepted PASU changed to PAS and for many substances we used consistently PASs throughout the document.

27) Please decide if PAS or PASs is used throughout the manuscript (i.e. p. 2, Paragraph 4).
Comment accepted PASU changed to PAS and for many substances we used consistently PASs throughout the document.

28) In part, the linguistic usage is a bit too sensational such as ‘killer communicable diseases’ or ‘young adults, the hope of tomorrow’.
Comment accepted. Such explanation deleted, further language edition done by native English speaker.

29) Please be consistent in decimal places (X.X% or X.XX%).
Comment accepted and we have tried to make X.X % throughout the document

Minor Essential Revisions:
Introduction:
1) A structure of the introduction according to the structure of the analysis may improve readability.
Structural modification was tried to the introductory part

Methods:
2) The abbreviation SNNPR is not used again throughout the manuscript.
Therefore, the abbreviation could be deleted.

Comment accepted and the abbreviation SNNPR deleted

Results:
3) The heading is written in capital letters. Please uniform.

Comment accepted
The Result title with small letter in uniform way with the other (See ref no 1430)

Tables:
4) In addition to the description in the results section tables 2,3 and 4 are not absolutely relevant.
We removed all tables which are not in line with the purpose of the study. Since table to is the one which shows the magnitude of PAS use by the students, which is one of our objective. We selectively modified the table to have only information about over all PAS use. We hope that the remaining tables are important to display our finding