Author's response to reviews

Title: HIV related risk behaviours among taxi drivers and their assistants in Addis Ababa, Ethiopia

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Author's response to reviews: see over
Dear Editor-in-Chief

BMC Public Health Journal

Re: MS ID:

November 7, 2013

Dear Editors:

Thank you very much for taking the time to review our manuscript “HIV risk preventive behaviours among taxi drivers and their assistants in Addis Ababa, Ethiopia”. We found the reviewers’ comments to be very helpful and feel that the manuscript has been significantly improved by responding to each of them. Please review the following sheets which detail both the reviewers’ suggestions and our responses. In addition, appropriate changes are made and highlighted in the main text. If you have any additional concerns or questions, please feel free to contact me at any time. I look forward to working with the BMC Public Health Journal on this process.

Thanks again.

Sincerely,

Yihunie Lakew
**Point by point Response to reviewers' comments**

**Reviewer 1: Arpaporn Powwattana**

**Major Compulsory Revisions**

1. The target population is interesting. However, it might be better if the authors explained clearly about the magnitude of the problem in this target population.

**Response:** This sub-population has not been studied before and there is no information to inform more on the magnitude of the problem on the study population. However, we have tried to include all relevant available information that depicts magnitude of the problem. In addition, it did not clear about studied variables. Whether it derived from previous research studies or theoretical basis.

**Response:** The variables were from previous behavioral surveillance and survey studies of related target populations.

2. It did not well identify for risk taking behavior in this study. The title focused on risk behavior related to HIV. In the table 1, variables mostly referred to sexual risk behavior. Many issues related to HIV did not included (exe. drug injection)

**Response:** The risk factors including drug injection, alcohol, khat etc were included in the study. However, regarding to drug injection no reported cases were found by the group during the survey. That was because unlike to experiences in other countries the prevalence of drug injection users in Ethiopia is insignificant, which was indicated by other studies as well.

3. Methodology for sample selection did not well clarification. The second stage as present interviewed everyone or selected in random. The sample size did not well defined. The instrument had not been addressed.

**Response:** Now we clarified the sampling issue at the second stage in the main document. Random sampling method was used in the second stage. The sample calculation is also clarified.

4. Data analysis should not need to explain in details.

**Response:** The analysis is now modified and possible to see in detail in the main document based on different reviewers comment.

5. The discussion was supported by out of date previous studies. In addition, it should be provided more information about the reasons support findings.
**Response:** The discussion section is now revised and used available recent study references. However, as some of the variables were studied many years back and there is no recent study that measures same variables, we are compelled to use the old data as reference.

6. The recommendations did not relate to findings.

**Responses:** The recommendation considered the nature of work and level of risk behaviors for this study population.

**Reviewer 2:** Lisa Johnston

2.1 This manuscript attempts to describe sexual behaviors and associations of lifetime abstinence, condom use efficacy and faithfulness with some socio-demographic and other variables.

**Response:** Thank you for clearly understanding the issue and need of this manuscript.

2.2 The paper is not well written and needs some editing to make it easier to understand.

**Response:** The manuscript is edited by native professional language editor for easy understanding.

2.3 Overall, I did not find the selection of variables used in the regression to be very informative.

**Response:** Variables are now clearly, defined and mentioned in the document.

2.4 The discussion is somewhat repetitive and does not provide much insight into the findings.

**Response:** The discussion section is revised based on reviewers comments.

**INTRODUCTION**

1) All but the last sentence in the first paragraph obvious and should be taken out. It does not add anything and is a given for anyone reading this journal. The paper should start with the last sentence in this paragraph and then give some information specific to this statement and specific to Ethiopia. Re. HIV prevalence, PLWHA, etc.

**Response:** Revised as per the reviewers comment.

2) First sentence, second paragraph needs a citation and more information about HIV prevalence in the country and in the city where to study was conducted.

**Response:** Revised as per the reviewers comment.

3) First sentence in third paragraph needs a citation. Where does it say that risk taking behaviors among mobile populations is a growing public health concern? Second
sentence needs a citation as well—where does it say that taxi drivers are at risk because they are young and unmarried?

4) **Response:** Revised as per the reviewers comment. In the third paragraph the authors state several factors that make taxi drivers “vulnerable to infection” and provide a citation which I cannot find. Please provide the entire citation including the link for where to find it. Also, does this citation actually say the encountering many different people, receiving money (for transporting people I assume) and traveling in a city during their work makes them vulnerable? If presenting such both causalities, there must be additional citations to make these statements.

**Response:** Revised as per the reviewers comment.

5) Need better citations to show that chat use has been associated with HIV.

**Response:** Citations modified and added

6) Take out social networks, you are not talking about social networks in this sentence. Also, needs citations which show that having frequent contact with institutions like schools, hotels, market areas…etc., somehow puts someone at risk for HIV.

**Response:** Revised as per the reviewers comment.

**OBJECTIVE**

1) Make the objective sentence a full sentence.

**Response:** The objective is modified as to describe risk preventive behaviors and to identify associations of lifetime abstinence, condom use efficacy and faithfulness with some socio-economic, demographic and other psychosocial variables

**METHODS**

1) What does this sentence mean? The overall process of the sampling techniques was governed by the very nature of the study subjects. This does not make sense. How was is governed by nature of study subjects? Actually, I would take out this sentence and just describe the sampling method.

**Response:** We accepted this comment and deleted

2) Second paragraph. Sample size calculation was based on 2002 BSS. On which populations was this BSS conducted?
Response: The reference population and related issues for sample calculation was transport workers (Intercity bus workers) of the 2002 BSS study. Thank you, now we clarified in the document.

3) Please take out the description of a regression analysis and include how you measured the variables used in the regression analysis. Also describe why you selected these variables. How are they useful as factors associated with HIV?

Response: The description of regression analysis is deleted; all measurement variables are defined and addressed.

4) Did the authors weight the data for different cluster sizes? If not, why not? Were the clusters assumed to be self-weighting?

Response: We didn't weight clusters, as there was no big difference on the size of taxi drivers across the clusters in the city limits of Addis Ababa.

5) What were your eligibility criteria?

Response: Taxi drivers and assistants who worked at least six months duration on taxi services were eligible for interview

RESULTS

1) In the results section, only state the results without making inferences. Do not state the obvious (i.e., the sentence: ….”suggesting that taxi drivers were largely comprised of youth and young adult” is obvious to anyone who reads the first part of the sentence.

Response: This sentences is corrected based on the comment

2) Give a range of age since we cannot see that the age range include youth.

Response: The range of age 15-45 years with mean difference 26.6(SD=6.1) is included in the text

3) There seems to be a mistake in the sentence on educational status.

Response: it was a mistake and now corrected and ever rather never.

4) Second paragraph. You say “About 11.2%.....” This is not about, this is 11.2%. If you want to have the percentage at the beginning of the sentence, then spell it out and take out “about”.

Response: corrected based on the comment
5) The term commercial sex worker is redundant. Commercial and worker are the same thing. So just say sex worker as this is the term now used.

Response: The term female sex worker is used based on the comments.

6) In your analysis of number of sex partners, take out the zeros and then make the calculations. It will be clearer to only include those who had sex partners.

Response: The Zero is taken out for calculation

FACTORS ASSOCIATED WITH RISKY SEXUAL BEHAVIORS

1) First of all, change your title to this section since your dependent variables are NOT risky sexual behaviors (i.e., abstinence, faithfulness). In the literature, these are often protective behaviors.

Response: The topic and tables are changed as risk preventive behaviours in text document

2) Your associations are comparing abstinent to non-abstinent not comparisons between the independent variable. Your results for this section are hard to follow and could be written more clearly.

Response: The analysis section is now re-analyzed based on comments from reviewers

Also, there should be a presentation of more variables and/or information about why these specific variables were selected.

Responses: As I mentioned above variables were adopted and selected from previous behavioural surveillance studies with related target population.

3) Consider reversing the dependent variable to make it about risky behavior. Non-abstinence, low condom use and lack of faithfulness.

Response: Reanalyzed for each preventive behaviours as observed in the main text

DISCUSSION

1) Describe the efforts for safe sex promoted in Ethiopia. Provide citations for those who want to know more. Also, state which of the findings in the paper demonstrate the statement in the first sentence of the discussion.

Response: Efforts related to safe sex practices described at discussion section with proper citations
2) Last sentence in the first paragraph does not belong in the discussion.  
   **Response:** This sentence removed and overall the discussion section revised based on other reviewers comments.

3) Some of the citations in the discussion are outdated. One of them is over 10 years old. 
   There are better and more recent citations on these issues.  
   **Response:** Relatively recent references used while we revised the discussion section.

4) The plural of Taxi is Taxis, not Taxies.  
   **Response:** This comment is considered

5) The discussion needs more focus and a thorough editing.  
   **Response:** The discussion section is revised with focus and proper editing as indicated in the main text

**Reviewer 3: Damen Haile-Mariam**

1. **General Comment (major compulsory)**  
The authors do not present adequate evidence for the problem statement, and whatever evidence they present is not well organized.  
   **Response:** We presented evidence for the problem and reorganized  
   In addition, the data somewhat old and I am not sure if some of the research problems have not been addressed since then.  
   **Response:** Though the data seems old, we believe that this study is very relevant in the field, particularly, in the era of HIV epidemiological shift from general to some target populations.  
The analyses also seem to lack rigor with possibility of confounded results. Therefore, the authors need to produce or re-write their evidence in a manner that justifies that the articulated research problem is still valid. Parts of the results also seem to need either reanalysis or proper explanations in view of prevailing evidence on some of the issues.  
   **Response:** Based on the comments we reanalyzed and we tried to manage confounders. We also wrote again the presentations in a clear manner.

2. **Specific Comments (major compulsory)**  
   **Introduction:** Most of the paragraphs do not seem to be supported by evidence (references).
References, when cited are also rather outdated (probably related to the oldness of the data), repetitive and misplaced. For instance, I am not sure if the second sentence in the second paragraph is supported by the cited reference.

**Response:** As per the reviewers comment we made huge revision on the introduction part however, some of the references are still old since there is no recent study on risk behaviors of drivers to HIV/AIDS.

**Methods and Materials:** Do not the data seem somewhat old? With all the dynamics in HIV/AIDS control in the country, do the authors claim the problems they outlined (specifically their claim that “the responses to the epidemic did not make significant impact on the spread of HIV and its impact, especially in certain target populations”) still persist with the same degree to date?

Response: We tried to address this issue above

**Results:** Are the results on table 2 (pages 8 and 9) from a multivariate regression (as distinct from a simple bivariate (two variable special case) of multivariate analysis? If the authors are claiming this is a result of a multivariate regression, they should also say something on how the effects of the variables compare with those of the bivariate results. If it is the latter that the authors are presenting, one cannot rule out the possibility that some of their results might be suffering from lack of control of confounding.

**Response:** Since we did re-analysis we accommodated these very relevant issues. It is possible to see the revised analysis and presentation section

**Discussion:** The discussion section seems rather scanty and simplistic. I would have liked to see the authors discuss issues such as:

The applicability of the findings to all taxi drivers in Addis Ababa. I think there are two categories of taxi drivers in Addis Ababa (one group driving mini-buses and the other driving small taxis) and the nature of risk as well as the expected HIV related risk behavior varies to some extent between these two groups. I assume the study participants have been drawn from the second category; and 2. The findings that: “chat chewers were more likely to report abstinence, to report faithfulness and less likely to report efficient condom use” with particular reference to earlier studies on the issue as well as the implications of these findings.

**Response:** The discussion section is revised based on reviewers comments. The categories of taxi drivers is now considered and examined
3. Minor comments (Minor essential revisions)

Objectives: I suggest the authors take out that part of the objective which says: “in order to successfully implement HIV/AIDS preventive measures and reduce risky sexual behavior”, as this is particularly not relevant when they use data that are too old.

Response: We fully agree with this comment and taken out

Results: Page 5 - I am not clear about the implication of the sentence: “Educational status is nearly universal in this group with 96.1% having never attended formal education”. Does this mean they are illiterate? I suggest the authors use educational status categories that are considered standard in the country. Page 9 (table 2) – The authors need to clarify the significance of the variable: “Taxi working route”

Response: Regarding to educational status it was an editorial error and we corrected it. All variables defined in the main text.

Discussion: Page 9 (first paragraph) - I am not sure if the claim: “our knowledge of how to prevent new infections remains limited” is correct, especially its relevance to the present study.

Response: Discussion section is now revised based on comments from reviewers