Author's response to reviews

Title: Smoking, Smoking Cessation and Tobacco Control in Rural China: A Qualitative Study in Shandong Province

Authors:

Jian Wang (jianw@sdu.edu.cn)
Chenghui Li (cli@uams.edu)
Chongqi Jia (jiachongqi@sdu.edu.cn)
Yanxun Liu (liu-yx@sdu.edu.cn)
Junjie Liu (haojienan.123@163.com)
Xiaona Yan (ynx963@126.com)
Yufeng Fang (feng724959901@qq.com)

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Author's response to reviews:

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RE: MS-4922055041332829 Titled, “Attitudes towards Smoking and Smoking Cessation, Smoking Cessation Services and Medication Utilization, and Barriers to Implementation of Tobacco Control Policies in Rural China: A Qualitative Study of Residents of Rural Villages in an Eastern Province of China”

Dear Editor:

We thank the reviewers for taking the time to review our revised manuscript and provide very insightful comments. We have carefully considered and responded to each comment/suggestion as detailed below. The revised manuscript is uploaded. The pages specified in the responses are those of the revised document. For your convenience, the changes are highlighted in yellow.

Our reporting of the study adheres to the RATS guidelines for reporting qualitative studies.

Attached please find the detailed description of our responses to each comment provided by the reviewers.

Thank you for your time and consideration. We are looking forward to hearing from you at your earliest convenience.

Chenghui Li, Ph.D.
Associate Professor
Division of Pharmaceutical Evaluation and Policy
University of Arkansas for Medical Sciences
4301 West Markham Street (Slot #522)
Detailed Responses to Editor’ and Reviewers’ Comments

Additional editorial request:

In accordance with BioMed Central editorial policies (http://www.biomedcentral.com/about/editorialpolicies#StandardsofReporting), could you please ensure that the qualitative component of your study adheres to the RATS guidelines for reporting qualitative studies (http://www.biomedcentral.com/authors/rats), and add a statement to that effect in the Methods section.

Response: Our reporting adheres to the RATS guidelines. We have added the following sentence to the Methods section, “Per the journal’s policy, our reporting adheres to the RATS guidelines for reporting qualitative studies”. (Please see page 9, highlighted)

Comments from Reviewer #1 (Dr. Alicja Sieminska)

1. The authors have responded to the comments I raised in the previous round and revised the manuscript according to suggestions of two other Reviewers as well. The article has been considerably improved. I found the present version of the article suitable for publication in BMC Public health and I have no further concerns.

Response: Thank you for reviewing of our revised manuscript. We are delighted that you found our responses satisfactory.

Comments from Reviewer #2 (Dr. Mi Hu)

Major compulsory revisions:

1. The title that “Attitudes towards Smoking and Smoking Cessation, Smoking Cessation Services and Medication Utilization, and Barriers to Implementation of Tobacco Control Policies in Rural China: A Qualitative Study of Residents of Rural Villages in an Eastern Province of China” is too long and too complicated. I would suggest the title as “Smoking, Smoking Cessation and Tobacco Control in Rural China: A Qualitative study in Shandong Province”

Response: Thank you for the suggestion. It has been changed accordingly.

2. In the ABSTRACT part, on page three and 13th line “Although doctor’s advice to quite is effective”. There is no evidence in this study support this point. In the first version of this article, there are even some citations from participants indicated that doctor’s advice did not work for smoking cessation. I would suggest
reconsidering this point.

Response: Thank you for your comments. Village participants who successfully quit frequently reported significant health events that prompted a visit to a doctor and at doctors’ advice they quit. Please see the subsection on “Health Issues Experienced Directly or Indirectly” under the section of “What makes villagers want to quit?” (Pages 14-15, highlighted). However, village doctors on the other hand were often pessimistic about their advice and not usually offer the advice. Please see pages 18 (highlighted).

3. In the RESULT part, on page 14 and 5th to 15th line, the content in these paragraphs are not perfectly fit the context of this session namely “Limited Knowledge about Harm of Smoking”. I would suggest deleting it.

Response: Thank you for this thoughtful suggestion. We agree with the reviewer’s comment and have deleted the content on learning about the harm from other source (i.e. tobacco farm). However, we do believe that those who choose to continue to smoke because they have not “felt” the harmful effects is a misperception and a reflection of their lack of knowledge of the true health hazards of smoking, because diseases like cancers caused by smoking may initially show no physical symptoms. Nonetheless, we do agree with the reviewer that the way this part was previously written does not fit the subtitle, “Limited Knowledge about Harm of Smoking”. We have revised it for clarity. Please see page 13, lines 6-9, highlighted.

4. In the RESULT part, on page 14 and 16th line “Benefits of Smoking: Physical and Psychological”. According to the content in the following paragraphs, there are no physical benefits from smoking. I do not agree that dependence is a benefit of smoking.

Response: Thank you for these insightful comments. You are absolutely right! Dependence is not a benefit. We have revised the title of this subsection to “Physical and Psychological Effects of Smoking”. By physical effects, we are referring to the relaxation and stress-relieving effect reported by villagers, which we believe is not just psychological.

5. The DISCUSSION part is mainly repeating the results. It would be meaningful and useful if author could deeply and evidence based analysis the main reasons of smoking, barriers of smoking cessation and tobacco control, and provide possible solutions. For example, on page 22th and 10th line, author described that ” Unlike Western countries, preventive care such as annual checkup is not a standard practice in China. Many only seek care with a healthcare provider when experiencing significant health problems that need immediate attention.” The expression as this sentence is too vague and not evidence based. Annual physical checkup is a standard practice for elderly and most of employees in China, and not a standard practice in some of Western Country. Also, increasing annual checkup may be not the priority solution for smoking cessation in China. The similar situations are not uncommon in the DISCUSSION part.
Response: Thank you for this suggestion. We have revised the discuss section. In particularly, our discussion is now guided by our suggested targeted focuses of tobacco control efforts in rural villages based on findings from this study. We have started each paragraph of discussion with a suggested target and illustrated our points based on the study findings and published literature. Please see the revised discussion section on pages 20-24 (highlighted). We believe the discussion section is a very important part of any paper and welcome further specific suggestions for improvement if the current revision is not satisfactory.