Reviewer's report

Title: Strategies to Prevent HIV Transmission Among Heterosexual African American Men.

Version: 2 Date: 2 September 2004

Reviewer: Robert Fullilove

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General

I have a few comments that I hope will be of some assistance for the authors.

First, it is often useful to have a table that lists the questions that you presented to focus group participants – even if you used a semi-structured format for your focus groups. I am quite interested in what you asked as well as what you didn’t ask. You paraphrase your questions at a few points in the Results section, but I still have an incomplete picture of the line of questions you used to create your data. Knowing these aspects of your work would help me and other readers put the comments of respondents into perspective.

Secondly, there are two components to this paper that are worthy of particular attention. The first involves a careful commentary on what was said by study respondents. You do that, but in a somewhat cursory fashion. For example, crack cocaine is obviously an important factor in the AIDS epidemic in that area, but it receives little attention in your discussion. Secondly, the recommendations that participants make are interesting, but it is perfectly okay for you to amplify and comment upon what they’ve said.

For example, education is a prominent recommendation, but what kind of education should be provided to the community? I am pretty clear that most health educators are not impressed by educational approaches that simply list key facts about AIDS. There is substantial evidence that this part of the educational task has already be done. The question that your data raises is “what else?”. What hasn’t been done educationally that needs to be done now, three decades into the epidemic, to change behavior? Many commentators have suggested that education needs to be dramatically altered if it is to reach an audience that is completely saturated with educational messages about AIDS. What do you think?

And should fear – via reality show kinds of AIDS education messages – be an option? Many of us have had the experience of seeing an STD worker from the department of health show up at a high school assembly with a set of slides showing an hour’s worth of genital sores and horrific pustules. These sorts of presentations appear to have had little impact on rates of STDs. Much of the literature confirms that scare tactics don’t work. You might want to comment, therefore, on your respondents’ recommendations and then proceed to use more current literature from the social marketing field to make additional observations about the possible impact of “reality show” programming to get the message across.

In short I think the paper does a nice job in providing the reader with many citations from sample
participants. The next step – putting it all into sharper perspective – has not been completely done in this draft.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

The authors need to redo their Conclusions section. It does not adequately discuss or analyze the data presented in their findings

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

None