Reviewer's report

Title: Towards an Understanding of Barriers to Condom use in Rural Benin using the Health Belief Model: A cross sectional survey.

Version: 1  Date: 27 September 2004

Reviewer: Cheryl Koopman

Reviewer's report:

General

It is commendable that the researchers used a theoretical framework (the Health Belief Model) to guide their investigation of factors associated with condom use in rural Benin. Even if such a model proves to be inadequate, as it did in this study, the results of such a study provide a good foundation for future research, particularly given the breadth of this study.

The survey that was conducted had a number of major methodological strengths. The sample size was guided by a preliminary statistical power analysis. A stratified random sample was used in which an average of 25 individuals per village were invited to participate in the study. The acceptance rate of persons agreeing to participate in the study was outstanding, 251 of 270 individuals, with only 16 being dropped for providing insufficient data. The questionnaire was pretested on 20 persons of both genders living in Toffo (where the study was conducted). Also, interviewers were matched to participants by gender, which is important for asking such sensitive questions.

The authors appropriately note the limitations of the study as well as its strengths and implications for practice.

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

A few sentences should be added to the Introduction describing the Health Belief Model, what it is used for in general, and identifying its components.

It is important to add some information in the Methods section about the nature of the questions used for the survey - their source (either pre-existing measures or measures created for this study) and whether there is any evidence for their validity and reliability. A case could be made for the measures' face validity given the pilot testing of items that was conducted. Also, a case could be made for content validity, if the authors would identify more explicitly the construct that each item was developed to assess. This would also clarify what the respondents were asked to assess the components of the Health Belief Model. It would help to either include an appendix with the survey items (in English) with the constructs identified for the substantive items, or to describe the items in the Methods text or the Tables where the Results are presented.

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

The nature of the barrier that was examined in this study should be more clearly identified as such in the abstract.
In the Data Analysis section, the specific variables that were analyzed should be listed.

Discretionary Revisions (which the author can choose to ignore)

It is better to write out a number when it begins a sentence, e.g., "Two hundred and fifty one individuals..." (rather than 251 individuals....).

It would be useful if the authors would conjecture a bit more explicitly about the possible implications of this study for preventing HIV infection.

**What next?:** Accept after minor essential revisions

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** No

**Declaration of competing interests:**

None.