Author's response to reviews

Title: Knowledge and Behaviour of Nurse/Midwives in the Prevention of Vertical Transmission of HIV in Owerri, Imo state, Nigeria. A cross-sectional study.

Authors:

Chizoma M Ndikom (chizondikom2002@yahoo.com)
Adenike Onibokun (nike1955@yahoo.com)

Version: 5 Date: 8 August 2007

Author's response to reviews: see over
Author’s response to reviews

Title: Knowledge and Behaviour of Nurse/Midwives in the Prevention of Vertical Transmission of HIV in Owerri, Imo state, Nigeria. A cross-sectional study.

Authors:
   Chizoma M. Ndikom (chizondikom2002@yahoo.com)
   Adenike Onibokun (nike1955@yahoo.com)

Version: 3 Date 03 August, 2007

Author’ response to review: See over
Reviewer’s report
Title: Knowledge and Behaviour of Nurse/Midwives in the Prevention of Vertical Transmission of HIV in Owerri, Imo state, Nigeria. A cross- sectional study.
Version: 4 Date: 1 July 2007
Reviewer: William Holzemer
Reviewer’s report:
General
Overall, the author(s) have been very responsive to comments made on the initial review. However, there are several things that still must be addressed before the manuscript is ready for publication. Again, the overall topic is extremely important and does add knowledge to our understanding of the delivery of appropriate nurse/midwifery care.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
1. Clarify the meaning of nurse/midwives as used in this study. Are all of the participants both nurses and midwives? Initially I thought this was the case but Table 1 suggests only 84% are RNMNs. Please clarify.
   All the respondents were registered nurse midwives. Majority, 84% were RNM only, that is they did not have any additional qualifications. 10% were RNM and also had public health nursing (PHN) as additional qualification. 6% were RNMNs and had various additional qualifications. These other categories have been added to table 1 on page 13 for better clarity.

2. p. 6 Reliability. It does not make sense to conduct a Cronbach's alpha reliability estimate for a test-retest evaluation. Cronbach's alpha is used for a one-time administration of an instrument, exploring internal consistency at one point in time. Perhaps the author should report a Pearson correlation between the overall scores at time one and time two in a repeated measures model.
   Correction has been done using Pearson correlation coefficient which was used for the work originally.

3. p. 7 Respondent's knowledge - note that the manuscript states that a "majority (36.8%) could not correctly identify... and then a "majority 45.8%)..." These figures do not represent majority, particularly the 36.8% figure. This paragraph needs to be revised.
   Noted and corrected on page 7

4. p. 7. Knowledge of vertical transmission - last sentence. "Majority of the respondents (51%) has moderate level of knowledge...." The author(s) use this term, "moderate" in a strange way. Please add at the end of the sentence, "as measured by this knowledge test." to emphasize that 50% correct is sample specific and refers only to this instrument and says nothing about being "moderate."
   Noted and corrected as suggested

5. p. 9 last sentence Chambers - reference has a typo and should be [19]
   Noted and corrected
6. p. 10. Conclusion. The study revealed a moderate level of knowledge ...

either
say something like. "Participants answered approximately 50% of the items correctly on the knowledge test...." or add again the phrase "as measured by this test."

**Correction has been effected as suggested.**

7. Table 4a and 4b. I can live with categorizing your responses on behavior with levels of low, moderate, and high but I really do not understand why the author(s) did not simply correlate age with behavior score and years of experience with behavior score. Why code a continuous variable into 3 levels? The categories have been replaced with the scores. The scores were used for the analysis. Low was 47% and below, Moderate was 48% to 59%, while high score 60%.

8. Table 3, page 14. I was surprised to see the response to question, "how often do you obtain consent before testing.." and seeing only 56.1% report Yes. I felt the author(s) might want to point this up in the conclusion as this might be one of the most interesting findings. In PMTCT provider-initiated testing is much more common and here we may be seeing some of the consequences of this practice, i.e. testing women without their permission.

The conclusion has been reviewed on page 10 as suggested

9. Table 3, page 14. Item: "Are pregnant women usually counseled with their husbands" Seems strange to this reviewer to score this a 3. What control does the nurse/midwife have over this patient behavior? It may be ideal, but it is not the reality yet in this analysis it appears that women are being penalized as if their behavior is not as good, yet it is their reality. ?

The researchers tried to find out if the nurse/midwives encourage couple counseling. Only 35.5% of the respondents agreed that they usually counsel women with their husbands. This shows that even though it is the ideal, it is not easily practiced. Women are not usually penalized.

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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)

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Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests: I declare that I have no competing interests

Reviewer's report
Title: Knowledge and Behaviour of Nurse/Midwives in the Prevention of Vertical Transmission of HIV in Owerri, Imo state, Nigeria. A cross-sectional study.

Version: 4 Date: 12 July 2007
Reviewer: Leonardo Palombi

Reviewer's report:
General
The paper seems now acceptable and well structured.

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

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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)

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Discretionary Revisions (which the author can choose to ignore)

What next?: Accept without revision
Level of interest: An article of importance in its field
Quality of written English: Acceptable
Statistical review: Yes, and I have assessed the statistics in my report.
Declaration of competing interests:
I declare that I have no competing interests