Author's response to reviews

Title: Can HIV testing campaigns expand access and protect individual rights? Provider and client perspectives on the ethics of campaigns ethics in Burkina Faso

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Version: 3 Date: 18 August 2014

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18 August 2014

Editor in chief
BMC IHHR

Dear Editor,

We thank you for the reviewers’ comments on the manuscript of our article ‘Can HIV testing campaigns expand access and protect individual rights? Provider and client perspectives on the ethics of campaigns in Burkina Faso’. We appreciate the care with which the three reviewers have read the document, and find ourselves in agreement with most of their suggestions.

You will see from the extensive changes we have made that we have taken the reviewers’ comments to heart and worked to address them thoroughly. In the course of revisions, we also made a few additional changes throughout the manuscript to further clarify and improve the text. The track changes version is included with our submission as an additional file.

Because of the large number of comments and because the three reviewers seemed to agree on some key points, we thought it would be easier to regroup the comments according to the substance rather than the order in reviewers’ letters.

We indicate what comment is being addressed, by referring:

• to reviewers as follows: R1: Dr Atusingwize, R2: Dr Lubogo, R3: Dr Bukenya
• to comment by its number within each reviewer’s list (R1# 1 to 63, R2# 1 to 20, R3# 1 to 14).

I hope you will find that we have addressed all the reviewers’ comments, and that the paper is now improved and suitable for publication. Please let me know if there are further questions.

Sincerely

[Signature]
Summary of revisions

Reviewers’ reports present their comments in various ways. To make our corrections as clear as possible, we gave numbers to the R1 and R2 comments and used R3 comments’ numbers. We grouped them according to scope into 5 sections.

Scope and rationale

The main issue raised by R2 was the lack of a precise definition of ‘individual rights’ consistent along the paper (R2#5), that might be mistaken for ‘confidentiality’ (R2#14). We added a definition and made it consistent with other terms (‘confidentiality’, etc.) all over the paper. We now explain the choice and uses of this definition at analytical and methodological levels. We also changed some sentences for more precise definitions of 3Cs and 5Cs, particularly when requested (R2#14).

Reviewers gave us very different comments about the title. (‘Can HIV testing campaigns expand access and protect individual rights? Provider and client perspectives on the ethics of campaigns in Burkina Faso’). R3 thought it was ‘precise, concise, and reflects content of work. The title also stimulates interest of readers to read article. Well formulated’ (R3) […] while R2 raised some concerns about the title fearing that the topic studied has already been studied in a previous article entitled ‘Campaigns for HIV testing, an effective strategy for universal access to prevention and treatment ? The experience of Burkina Faso’ (R2#12). In fact, the scope and methods of the two papers are completely different. The present paper focuses on ethics and considers providers’ and clients’ subjective perspectives through the use qualitative methods, while the previous paper focused on services around testing, and was based on objective, mainly quantitative data obtained from monitoring/evaluation of CT facilities. In view of all this, we left the title of the present article unchanged. We did however make more obvious in the text the differences between the two papers. We also made clearer the scope of this study within MATCH overall research project.

Methods Section

Reviewers requested much clarification about the methods, and we re-wrote the whole section to answer all requests.

We clarified the meanings of respondents categories (testers, non-testers, users,..) and we applied the new terminology throughout the article, as requested by two reviewers (R1#17,26,34,36,40 R2#15-16).

We described:

- the process for selection of respondents (R2#1-2)
- the setting in which the interviews were conducted (R1#5)
- the management of ethical aspects (R3#5)
- Morè and local languages used (R1#31)
- the details on populations number of participants in FGDs (R1#29-30)
- and the issues covered in the FGDs and interview guide (R2#4).

We also presented more clearly the role of observation (as requested by R3#1, R2#3). We explain which data were treated with Word and which were treated with Dedoose (R1#32). Unfortunately it was not possible to add details on authors of quotations because they were not identified individually during FGDs.

In response to a question about ethical clearance: (R1#6) We were given ethical clearance by both the WHO Ethical Review Committee and by the Comité National d’Ethique de la recherche en Santé du Burkina Faso, at the start of the study. We were not however given a specific number for the clearance documents.

Results section

We were asked to move the description of the interviewees from the “Methods” to the “Results” section (R1#33), and to give details about participants to FGDs (R1#29, R2#6). All reviewers suggested moving lines
We also added for introducing interviews and FGDs extracts, and past was adopted for reporting of experiences (R1#60), 326 (according to line numbers in the second version). Quotations were turned to italics (R2#7).

For instance we checked abbreviations again. Since we were asked to shorten long sentences, we divided them. Additional sentences start line 38 (R3#3), line 81 (R1#13), line 101 (R1#18, 3#3), 355 (R1#51), 434 (R1#60), 326 (according to line numbers in the second version). Quotations were turned to italics (R2#7). Numbers of consecutive citations were included in the same bracket (R1#63). Regarding tense, present was adopted for introducing interviews and FGDs extracts, and past was adopted for reporting of experiences (R1#12).

We also ameliorated main text by clarifying sentences and providing more explanations (R1#16,43,45,59, R3#8). We also we added references when requested (R1#12, R1#21, R1#63).