Reviewer's report

Title: Community views about routine HIV testing and antiretroviral treatment in Botswana: signs of progress from a cross sectional study

Version: 4 Date: 11 December 2006

Reviewer: Hilary Curtis

Reviewer's report:

General

An interesting report which is reassuring in so far as it shows high levels of awareness and support for Botswana's RHT and ART programmes, while highlighting some specific issues such as travel distances and waiting times. The data presentation and discussion is problematic particularly in relation to gender issues. For example results have been weighted to census data by rural/urban/capital location but have not been adjusted for the undersampling of males, especially employed men, which is presumably a more significant source of bias, and in most cases are not stratified by sex.

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

1. The Abstract is misleading as regards the relationship between HIV testing and partner violence: taken together, the mentions of partner violence in the Abstract Background and Abstract Results and the statement in the Abstract Conclusions that "We found little evidence of problems" seem to imply a positive finding that being tested did not lead to an increase in violence. However, as the Discussion section of the full article acknowledges, the cross-sectional design means no conclusions could be drawn on this point.

Suggested amendments:

Replace "We found no association between being tested and experiencing partner violence within the past 12 months" with "Experience of partner violence was associated with believing oneself at risk of HIV, which was in turn associated with having had an HIV test within the past 12 months" in Abstract Results.

Delete "We found little evidence of problems with RHT in practice" in Abstract Conclusions.

2. The reporting and discussion of respondents' sex and partner violence is inadequate, given the huge global significance of gender injustice as a determinant of vulnerability to HIV. As a minimum, the proportion of respondents who had experienced partner violence should be given separately for males and females – in the review draft it is not reported at all. The discussion should address the extent to which partner violence (in multivariate analysis) accounts for the association (in univariate analysis) between sex of respondent and perceived HIV risk.

3. Data in table 3 should be presented separately for male and female respondents to give a better picture of the demographics and likely representativeness of the sampling, eg to clarify the unhelpful statement in the text that "some" employed men were included.

4. Discussion of the determinants of having an HIV test should address the likelihood that the reason why many respondents visited a government facility was because they believed themselves at risk.

5. The actual number of people who believed they had been tested without consent should be stated. This is unclear as the table shows 52 people not asked about testing believed themselves to have been tested but the text says this figure includes "some" who were not asked because they'd attended the health facility specifically to request testing.

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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)
6. RHT is used as an abbreviation, at least in the Abstract, but not included in the List of Abbreviations.

7. Table 6 shows 846/1529 participants had been tested in last 12 months but the last 5 rows give 836 rather than 846 as denominator.

Discretionary Revisions (which the author can choose to ignore)

8. The paragraph on page 8 relating to satisfaction with government clinics is unnecessarily long-winded. The third and fourth sentences could be shortened to "Nearly all those who had visited a government health facility were satisfied or very satisfied with the visit (91.6%, 1130/1233 of those visiting within the last 24 months and 91.8%, 707/771 of those visiting within the last three)." The remainder of the paragraph could be amended on similar lines.

9. You may wish to discuss the implications of people who believed they had been tested for HIV "when they simply had blood taken and were given the results of a different type of test". Presumably, since they have not been given a positive HIV test result, these individuals assume that they are HIV negative. Even if the numbers involved are small this may have public health implications in a high prevalence population.

10. The sentence "More than half the respondents said they talked about ART in their family "often" or "seldom". would be easier to understand if it just said "More than half the respondents said they talked about ART in their family." As currently written the reader needs to refer to table 8 in order to discover that "never" was the only other option given.

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

I declare that I have no competing interests.