Reviewer's report

Title: Talking about links between Sexually Transmitted Infections and Infertility with Young People: A qualitative study

Version: 1 Date: 7 September 2013

Reviewer: Katie Newby

Reviewer's report:

Major compulsory revisions

The research questions are clearly specified but for me you need to go a step further in explaining why understanding what young people know/think about STIs and their link with infertility is important. I would like to see the questions placed within the context of risk appraisal to give the paper a more theoretical focus. Risk appraisal is generally believed to be made up of beliefs about the likelihood of negative event and the seriousness of this. If we want to change risk appraisals in order to motivate protective behaviour (i.e. using condoms to prevent infection, or getting tested/treated) then we need to understand the beliefs underlying appraisals of likelihood/seriousness. What you have done is explore beliefs about infertility which is the major consequence of chlamydia/gonorrhoea and helps us to better understand beliefs understanding appraisals of severity. Some work I recently published (Newby et al 2013) found that appraisals of severity were associated with belief that infertility was a consequence of infection and you might like to reference this to help make your case.

The issue of relevance is important and interesting too, especially as some research has shown that young people tend to be more motivated by proximal than distal consequences of behaviour. Your research shows that they are concerned about infertility and therefore that highlighting this consequence may be an effective health promotion strategy.

Whilst for me the importance of exploring beliefs about the link between STIs and fertility and the relevance of infertility to young people is important for the reasons outlined above, I am less sure about beliefs about reproductive technologies and blame. In the paper you do not currently set out the case for exploring this or pick up on the implications of this in the discussion. If you any data which explores whether knowledge that infertility can be treated reduces beliefs about severity then that would be interesting. Somehow you need to make the case for why you have explored this and its importance.

Framework analysis: I don’t know much about this type of analysis, and nor might your wider audience. Either way, I think it’s a good idea to be very clear on your approach. Was it inductive or deductive for example? Sometimes your language gives the impression that themes emerged from the data but at other times it
seems that then were determined a priori (e.g. table 3: ‘A summary of themes discussed in the focus groups’). Whether the approach was inductive or deductive has significant implications in terms of interpretation. Give as much detail as you can about your approach to help the reader understand your stance and how the data was treated.

At the start of the results section you state ‘we report master and sub-ordinate themes surrounding young people’s knowledge and beliefs about the link between STIs and infertility’ but your master theme is ‘knowledge and beliefs about untreated ...’. There are two issues here. One is that the last two subordinate themes do not fit in with your first statement which sets out what your master subordinate themes cover. It just needs rephrasing to broaden out the focus. The second is that I’m not convinced you really have master and subordinate themes.

You haven’t actually described your master theme or the way in which subordinate themes relate to this; could you not just have four master themes?

Minor essential revisions

First sentence of background section your need ‘or’ prior to ‘anatomical’.

Second paragraph of background section needs reworking, maybe something like ‘...both male and female reproductive systems is sexually transmitted infection (STI) where treatment is delayed or absent.

STI data for 2012 is now available so you can update you figures on incidence.

In the findings section, the last paragraph under the ‘relevance’ subordinate theme would be better suited to the previous awareness theme.

The subtitle for the theme ‘blame’ should be in bold to be consistent with rest of formatting.

Second page of discussion, end of second paragraph there is a sentence beginning ‘Previous research found that focussing on how the bacteria...’. It would be more accurate to say ‘Previous research has also led to the suggestion that focussing on how ...

Page 3 of discussion, very top of the page, as well as encouraging STI checks and screens, it could also encourage prevention.

When discussing strengths and limitations, include discussion of limitations of cohort sampling.

Table 3 – I’m not sure this is necessary and doesn’t add anything.

Reference:

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

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests