Reviewer’s report

Title: Knowledge of HIV/AIDS among older adults (50 years and above) in a peri-urban setting: A descriptive cross-sectional study

Version: 0 Date: 17 Apr 2019

Reviewer: Reviewer 2

Reviewer's report:

PEER REVIEWER ASSESSMENTS:

OBJECTIVE - Full research articles: is there a clear objective that addresses a testable research question(s) (brief or other article types: is there a clear objective)?
Yes - there is a clear objective

DESIGN - Is the current approach (including controls and analysis protocols) appropriate for the objective?
Not sure - key details are missing from the manuscript

EXECUTION - Are the experiments and analyses performed with technical rigor to allow confidence in the results?
Not sure - key details are missing from the manuscript

STATISTICS - Is the use of statistics in the manuscript appropriate?
No - there are issues with the statistics in the study

INTERPRETATION - Is the current interpretation/discussion of the results reasonable and not overstated?
No - there are minor issues

OVERALL MANUSCRIPT POTENTIAL - Is the current version of this work technically sound? If not, can revisions be made to make the work technically sound?
Maybe - with major revisions

PEER REVIEWER COMMENTS:

GENERAL COMMENTS: This is a needed area for research, especially with the fact of demographic ageing worldwide, including in Ghana, and the success of ART in the management of HIV infection. The authors were careful in their sampling approach and methods. Need more attention to detail (for example, HIV is not typically known as "Human Immune Virus" as indicated in the first sentence), and clarity around the hypothesis used for sample size calculations, whether validated questions were used in the interview, interpretation of literature in the introduction, and application in the discussion.
REQUESTED REVISIONS:

As mentioned, I have concerns about interpretation throughout the paper. For example, in the intro, I am concerned by the interpretation of some of the cited literature - including this from Negin 2010: "The World Health Organization [10] also reported that more than 2.5 million HIV positive people who are aged 50 years and older live in Sub-Saharan Africa, accounting for more than half of the older adults living with HIV around the globe [10]." At that point in time, the estimates Negin published in this paper differed quite significantly from the UNAIDS and WHO estimates - and the Negin paper is published in the WHO Bulletin, but not a "WHO" report. Plus, this is then not consistent with the first sentence in the 2nd paragraph: "In 2013, UNAIDS estimated that 4.2 million people aged 50 years or older were living with HIV worldwide." (plus reference needed for this fact). Small point - for the general reader, would suggest the authors indicate country earlier in the manuscript than the Recommendations section. In the methods section: 1) is "chaplaincy" a clinical service?; 2) what hypothesis/question was used in sample size calculations (i.e. population mean of what issue)? (research not "researches"); 3) from where were the questions for interview derived? Are these entirely new or were they adapted from other HIV KAP instruments? would be good to have a few more details about how the pre-test of the Qs was undertaken and how many people were used in the testing phase? 4) how was verbal consent documented? 5) how did the authors determine the average score thresholds - and that &lt;50 was "poor" knowledge? 6) errors in text for Cronbach's alpha (and watch the random capitalization of words throughout the text: "....89 for prevention of HIV and 85 for signs and symptoms of HIV." Results: overall, this was organized and presented well. Is it possible that this many older adults are "students"? Is there some kind of unique educational programme in these two Ashanti districts? Was "retired" an option - or even a reality in this area? Table 2 probably doesn't need n and % given the sample size - would recommend revising this. Combine all three pie charts into one graphic. Table 3 (round mean values to 60.2 from 60.16, for example). I cannot interpret Table 4 because the referent group is not specified. I would say that perhaps first two columns of Table 4 could be merged with Table 3 - with more detail there, otherwise Table 3 is of limited value. Discussion: this section needs considerably more work in describing the impact of the results, including a more organized response to how these results relate to other studies.

ADDITIONAL REQUESTS/SUGGESTIONS:

In addition to my previous comments, language and word capitalization throughout the text should be reviewed.

Note: This reviewer report can be downloaded - see attached pdf file.
Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.
No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.
No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.
No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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