Author's response to reviews

Title: Sexual Behavior and Vulnerability to HIV Infection among Seasonal Migrant Laborers in Metema District, Northwest Ethiopia: A Cross-Sectional Study

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Author's response to reviews: see over
Point by point response

Reviewer 1

Title: Sexual Behavior and Vulnerability to HIV Infection among Seasonal Migrant Laborers in Metema District, Northwest Ethiopia: A Cross-Sectional Study.

Reviewer: Loraine Townsend

Dear Reviewer,

We are very grateful to your thoughtful comments that significantly improved our manuscript. Below is the point by point response and revisions as per your comment.

Reviewer's report:

I am satisfied that the authors have addressed the comments and concerns in my first review.

1) Minor essential revision: the Background could be better organized as there is a fair amount of repetition in this section.

Comment well taken, repetitions minimized.

2) I would strongly recommend a very careful edit of the manuscript. At times the English is quite poor; for example, the section headed "data collection procedures".

Comment well taken, this part edited.

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

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

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
Point by point response

Reviewer 2

Title: Sexual Behavior and Vulnerability to HIV Infection among Seasonal Migrant Laborers in Metema District, Northwest Ethiopia: A Cross-Sectional Study.

Reviewer: Jennifer Hirsch

Dear Reviewer,

We are very grateful to your thoughtful comments that significantly improved our manuscript. Below is the point by point response and revisions as per your comment.

Reviewer's report:

Major compulsory revisions:

The revised article is greatly strengthened; the authors have done a good job clarifying the language and drawing more appropriately on the relevant research from other parts of the world. I still have concerns, as discussed below, regarding ways in which the conceptual significance of work could be more clearly articulated to make this of interest to readers beyond those focused on Ethiopia.

The most important continued limitation of the article is need to more strongly articulate the importance of study. As laid out on the bottom of page 4 and top of page 5, it is still primarily descriptive. As written, it is certainly of interest to HIV policymakers and researchers working in Ethiopia, but not clearly to those outside the country. In order to move the article to a place where it might be of interest to BMC’s broad readership, authors should discuss their findings CONCEPTUALLY in relation to work in other places. I am more interested, for example, in whether the principle determinants of sexual risk/vulnerability were different in this location than I am in whether the prevalence of any particular determinant is higher or lower here than it is elsewhere. To answer this question, authors should take a step back and look at how the conceptual model of vulnerability might point to different elements in different places, and thus distinct policy solutions. In other words, is what seems to be most important as a driver of vulnerability in this region of Ethiopia for rural labor migrants different than what seems to drive vulnerability in other areas? Are there resounding similarities that suggest that there is one element that overall, everywhere, should get more attention? Are there factors in this area that seem important that are entirely absent elsewhere? That is what I mean by assessing the conceptual importance of this work – that is, looking at how the empirical findings might contribute to/critique/advance the conceptual model presented earlier in the article.
There is a good statement of conceptual framework on the bottom of page 3, and then the model itself appears in the text. In the discussion and conclusion sections, authors should refer back and articulate precisely how their work relates to this model.

Comment well taken:
- Importance of the study improved
- The conceptual framework improved
- Findings discussed Conceptually in relation to work in other places, and in other regions of Ethiopia (see P.14)

Minor essential revisions
On page 4, authors write “Because of stigma and discrimination associated with HIV and STI, returnee migrants are less likely to receive screening for possible HIV infections.” Stigma and discrimination are certainly reasons that migrants might not receive screening, but there are many other reasons as well – it may not be available, or else return migrants may not want to consider themselves at risk and thus may not want to get screened.

Comment well taken and statement modified: In most cases, service for HIV infections screening is available anywhere in the country, but return migrants may not want to consider themselves at risk and thus may not want to get screened.

p. 14 – what do authors mean by a “deterministic” view of sexual activity?
Response: When authors say “deterministic” view of sexuality, it is to describe the characteristics of young people (most seasonal workers); that they are ambivalent about their changing roles. This behavior may lead them into hard choices. They are frequently influenced to participate in behaviors that place them at risk, such as unsafe sexual activities (Clawson et al 2003)

On page 14, this does not follow: "More than half (57.6%) of sexually active respondents reported they usually did not use a condom during any sex episodes. In addition, 49% of the respondents do not use condom during their recent non-marital sexual intercourse. This percentage was higher when compared with studies done in India [9,12] where only 33% and 25% male migrants reported condom use during sex with CSWs. Further, this percentage exceeds that reported in the 2005 HIV/AIDS Behavioral Surveillance Survey (BSS) in Ethiopia, where condom use among youths, migrants, and mobile workers in Amhara Region was lowest (24%). This finding was more similar to the percentages of migratory workers in South Africa (38%) [13] and Croatia (44.7%) [14]. This suggests that a particularly high rate of HIV infection and other Sexually transmitted infection may exist among seasonal migrant laborers at Metema District. “

Why do authors presume a higher rate of HIV infection because of lower rates of condom use? These two things are clearly not independent of one another, but condom use is not the only determinant of HIV (for example, patterns of partnership, sexual activity, baseline prevalence).
Response: As you stated, condom use is not the only determinant of HIV infection, there are also other factors: as multiple sex, sex with CSWs, higher HIV prevalence in that geographic location …etc.

Comments are well taken, document improved

p. 15 – Authors write of “the fight against HIV/AIDS” – they should note the UNAIDS recommended language and terminology. Not to be obsessively politically correct, but it is certainly true that “the fight against AIDS” has all too frequently meant the fight against people with HIV and AIDS. Many advocates and researchers consider the use of these military metaphors implicitly stigmatizing.


Comment well taken, and corrected as “the fight against HIV” in Ethiopia:

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

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

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests: No competing interests