Reviewer’s report

Title: A cross-sectional study of low HIV testing frequency and high-risk behaviour among men who have sex with men and transgender women in Lima, Peru

Version: 1 Date: 17 January 2015

Reviewer: Erin Wilson

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Major Compulsory reviews

• The combination of transwomen with MSM in studies is increasingly being recognized as scientifically problematic. These are two very different populations that in many countries do not socialize together, do not have the same types of sexual partners and do not have the same psycho-social risks for HIV. At the very least, the differences in these two communities need to be acknowledged and the limitations of this approach discussed.

• There are no barrier and motivation responses that may be specific to the experiences of transwomen (e.g. transphobia in the medical setting, criminalization)? Please address.

• There is a disconnect between talking about the importance of meeting the standard of care for testing frequency in Peru and the analysis of using the outcome of having ever been tested before the baseline survey. Based on the rationale provided in the introduction, it seems as if the best outcome is recent HIV testing- or in the last year as these data may yield.

• It would be helpful if authors could address all motivations and barriers listed in the table to identify specific interventions (e.g. address concerns about violence from partners, fear with getting the result, stigma related to being HIV-positive).

• Authors recommend using non-traditional outreach methods. Readers need an explanation of what current traditional methods are used for promoting HIV testing.

• Would having mobile van be feasible in the Peruvian context? Also, would a mobile van further stigmatize highly marginalized communities like transwomen and MSM. Did Project Accept include transwomen in the study?

• Suggesting that non-traditional outreach efforts is the solution without describing the context more fully and what’s currently going on is currently an unfounded conclusion.

Minor Essential Revisions

• Pg. 8 line 69, the sentence is unfinished and ends mid-stride

• The results related to age need to be articulated better- i.e. that older age was
significantly related to ever testing

• What were the open-ended response choices with fill-ins (it’s not clear in table 2 that any write-in responses were included in the analysis)?

• Line 220, add the word “testing” after HIV

• It seems likely that other social-structural barriers to HIV testing may exist that were not asked about in this study. Many MSM and transwomen may be hidden in Peruvian society and not willing to come get an HIV test for fear of being further stigmatized. This should, at least, be mentioned in the limitations

• Can authors provide examples of the range of options participants could choose as testing motivations and barriers?

• Also, how was transactional sex defined? It’s important to know whether transactional sex or sex work was being reported.

• Authors could consider the testing among new positives as high relative to overall testing patterns in Peru. It may be that those at highest risk are the most likely to get tested in Peru and this phenomenon could be strengthened with public health efforts. Furthermore, high HIV prevalence among ever-testers may be because those who engage in more risk behavior are more likely to get tested for HIV. The ineffectiveness of post-test counseling is not supported in these data. This needs to re-visited or taken out.

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

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

**Declaration of competing interests:**

I declare that I have no competing interests