**Author’s response to reviews**

**Title:** A systematic review of adherence in Indigenous Australians: an opportunity to improve chronic condition management

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**Version:** 2  **Date:** 03 Nov 2017

**Author’s response to reviews:**

Authors’ response to reviews

**Title:** A Survey of the Knowledge, Attitudes and Practices on Zika Virus in New York City

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Version: 3
Date: 2 November 2017

Authors’ response to revisions: see below for comments and responses.

Editor Comments:

(1) Please format your 'Authors' Contributions' section as detailed in the guidelines here: https://bmcpublichealth.biomedcentral.com/submission-guidelines/preparing-your-manuscript/research-article

A re-formatted ‘Authors Contributions’ is now included. See lines 449-458. Additionally, competing interests were included. See lines 441-443.
Email addresses for all authors are now included within the title page of the manuscript.

Reviewer reports:

Harapan Harapan (Reviewer 2): Congratulation again to authors for revised version of the manuscript on A Survey of the Knowledge, Attitudes and Practices (KAP) on Zika Virus in New York City!

Some issues raised by reviewers are well addressed by authors. However, here bellow are some further suggestions and recommendations from my side:

CONCERNED ISSUES:

I. Scoring system: I am pretty sure not all questions of WHO KAP questions were included in this survey and therefore I suggest to provide more details the number of question for each domain (KAP and each score K subdomain), scoring for correct or incorrect response and the score range of the domain.

Additional information on the original number of questions from the WHO KAP survey and in our modified survey is now included. See lines 85-93. Furthermore, we now include an appendix which elaborates on our methods of statistical analysis.

II. Analysis: I suggest authors to assess the association between K-A-P. For knowledge domain, authors could use total score of K domain rather then split into six domain for this analysis. This is important for KAP study to assess this association to provide data about the translation of the knowledge into practice.

Statements on the correlation between Knowledge of Zika Transmission and Knowledge of Zika guidelines as well as a lack of correlation between Knowledge of Zika Guidelines and
Knowledge of Zika Complications are now included. See lines 212-215. We feel that further statistical analysis of such domains is beyond the scope of our study, which was in response to a global health crisis at the time, rather than an ongoing endeavor. The aim of our work is to provide useful information that can inform future public health endeavors that can include such analysis.

III. Comparing results: I suggest to compare this study finding with other studies either in general population or in the specific population. Some studies in this field are: Gupta N, et al. 2016; Harapan H et al. 2017a; Harapan H et al. 2017b; Painter JE, et al. 2017; Sabogal-Roman JA et al. 2017; Varvara A et al. 2017). This is important for example, the authors wrote: (Line 362-365) "Being that only a minority of participants indicated that they first heard of Zika virus from "healthcare worker/ private doctor or pharmacy," suggests that increased educational endeavors led by local healthcare providers are needed..". The authors could elaborate more by analyzing that knowledge of healthcare workers on Zika infection. In fact the knowledge of Zika infection among healthcare workers is low too such as in Indonesia.

We believe that including comparisons from the findings of our study to the findings of other studies provided to be irrelevant to our manuscript. Firstly, the nature of our study was a response to an outbreak situation assessing what we felt to be an extremely vulnerable population at the time, those who may be traveling to Zika endemic areas and pregnant persons who are traveling to those endemic regions. Few cities are similar to NYC in that they have such vulnerable populations of interest and there does not exist data from similar regions to allow for a strong comparison. Additionally, comparisons of studies conducted in other vastly different regions that do not have those populations especially vulnerable to Zika are not strong. Furthermore, our study is aimed at the knowledge of the general population, rather than specifically healthcare workers. Since occupation status was not collected from participants, we do not know how many, of our participants, if any were in fact healthcare workers. Any comparison between a general population and the specific subset of healthcare workers would not be significant to our findings and is not particularly relevant. The fact that the healthcare sector is insufficient in Zika education is rather clear, given the lack of Zika knowledge the results of our study, and further work to specifically address this deficiency within the healthcare sector is beyond the scope of our study.
OTHER ISSUES

A. Background

1. Line 28-34 -- The sentence is too long and confusing
This sentence has been broken into separate sentences and revised. See lines 39-44.

2. Line 36-37 -- Not related to the next sentences within paragraph
This sentence has been added to the previous paragraph, allowing for better contextual flow. See lines 44-46

3. Line 36-45 -- The sentences are not flow smoothly, just pieces of information and no coherence.
This section has been moved to the beginning of the Background section of the manuscript and been revised to improve readability and cohesiveness. See lines 30-37.

4. Line 50-51 -- Please revise the sentence
That sentence currently reads, “On February 1, 2016, the WHO declared the Zika virus outbreak a public health emergency of international concern given the rapid rise in microcephaly and other neurological syndromes seen in South America and the Pacific islands.” What revision specifically is required? None seem apparent.
5. Line 52 -- Avoid number to start the sentence
This sentence has been re-structured and no longer starts with a number. See lines 53-54.

6. Line 52 -- Seems the data is ambiguity or not accurate. Please revise related to "since 2007"
The authors do not understand how the information in the sentence “seems the data is ambiguity or not accurate.” Perhaps the reviewer could elaborate.

7. Line 56 & 58 -- Please give the full name and abbreviation of New York City (NYC) in the first time and only abbreviation afterword.
This sentence has been adjusted to include the parenthetical abbreviation. See line 57.

8. Line 65 -- release a survey of Knowledge, Attitudes and Practices (KAP) -- add "kit" e.i survey kit
This sentence has been modified to include “kit” after “survey.” See line 65.

9. Line 65-66 --"efforts" two times, please revise
This sentence has been modified and no longer includes both “effort” and “efforts.” See lines 66-67.

10. Line 67-68 -- Need references
A citation has now been included. See line 71.
11. Line 71 -- Please add study aim of this study
A general statement of the aim of the study has been added to the manuscript. See lines 75-77.

12. Line 71 & 78 -- "Pregnant women" rather than "pregnant person"
Strictly speaking, not all pregnant persons might identify as a woman therefore no modification will be made.

13. Line 72-74 -- Only better knowledge> How about attitude and practice?
The analysis of knowledge was our original hypothesis and the results of the study that address the attitudes and practices are addressed later on in the manuscript.

14. Line 72 -- "Better knowledge" rather than "greater knowledge"
The authors do not agree with this correction, as it is in the design of this study to quantify knowledge, “greater” is the more appropriate word. No revision will be made.

B. Material & Methods
1. I gusset to move Ethic section to the last part of Materials and Methods
The ‘Ethics’ subsection has been moved to the end of the ‘Materials and Methods’ section. See lines 164-166.

2. Line 86 -- Just put the number of reference
This sentence has been modified and now only includes the reference number. See line 85.
3. Line 92 -- "actual study" rather than "our study"

This sentence has been modified and now includes “actual study” rather than “our study. See line 98.

4. Line 95 -- "pregnant women" rather "pregnant people"

Strictly speaking, not all pregnant persons might identify as women therefore no modification will be made.

5. Line 97 -- "NYC" not New York City ---Please be consistent

This sentence has been modified and now includes “NYC” rather than “New York City.” See lines 103-104..

6. Line 100-101 -- Please revise and combine the sentences and do not start sentence with number (again)

These sentences were combined to improve readability. The sentence no longer begins with a number. See lines 107-108.

7. Line 101-103 -- Please combine these sentences and give the reference in the end.

These sentences were combined to improve readability. The sentence no longer begins with a number. See lines 107-108.
8. Study Design, Setting and Sites -- Please reduce of using active sentences.

The authors do not understand this comment. Sentences in this section are all written in the past tense. Perhaps the reviewer could elaborate.

9. Line 107 -- Manhattans (NYC) not Manhattans. (NYC, NY)

This sentence has been revised and now includes “Manhattan (NYC).” See line 112.

10. Line 125-127 -- I suggest to rearrange the sentence in to K-A-P sequentially and therefore write the sentences afterward.

The authors feel that re-organizing this sentence is not necessary, as its currently structure does not hinder readability.

11. Line 130-132 -- Explain or state the point or score (1 or 2?) clearly. And what about incorrect answer? Write clearly if 0 score was given.

An appendix is now included with the manuscript that elaborates scoring methods. This appendix is now referenced in the text.

12. Line 135-136 -- Please avoid repetition the domain. I suggest just write "those domains"

Given the restructuring of this paragraph, we feel it important to repeat the domain names, in order to ensure clarity to the reader.
13. Line 138 -- Which domain have score 0 to 100? Therefore, I suggest to provide clear scoring system of each domain.

This information is now included in the appendix.

14. I am pretty sure not all questions of WHO KAP questions were included in this survey. Therefore please provide more details the number of question foe each domain and the score range of the of domain.

Please see response to ‘Concerning Issue I,’ which addresses this comment.

15. Line 140-141 -- Why not italic. Please be consistent

These lines were modified and now have the names of the domains italicized.

16. Analysis: I suggest authors to assess the association between K-A-P. For K domain, authors could use total score of K domain rather then split into six domain for this analysis.

Please see response to ‘Concerning Issue II,’ which addresses this comment.

17. Please delete "with 95% level of significant"

This sentence has been modified and no longer includes “with a 95% level of significance." See line 151.
18. Line 144-145 -- Please move to Results section

Given that this sentence addresses which surveys were included in analysis and directly pertains to the statistical analysis performed, the authors do not believe it should be moved to the results section.

C. Results

1. Line 149 -- Again, number

This sentence was modified and no longer begins with a number. See line 170.

2. Line 150 -- (plus minus SD 11.62)

This line was modified and a “±” symbol was added. See line 171 and 10.

3. Line 149-160 -- Please do not repeat the data that have stated in the table. Provide the crucial or interesting data only.

In this section, only the notable data from the survey is compared—which becomes especially apparent when comparing it to all of the information presented in Table 2. This section was already addressed in reviewer comments from the period draft and this version of the manuscript now presents most pertinent findings. Furthermore, the authors agree that the information presented in this section best reinforces the issues addressed in the discussion section of the manuscript, and that any paring down of this section, of this already brief section would diminish the importance the notable study findings.

4. Line 170 -- information (Table 2) not information. (Table 2). Apply for all.

This line was modified and now includes ‘[Table 2]’ before the period in that sentence. Similar revisions were made throughout the manuscript where applicable.
5. Line 176 -- delete "in the domain of Knowledge of Zika Transmission".

This sentence was modified and “in the domain of Knowledge of Zika Transmission" was removed. See line 197.

6. Please rewrite all 95%CI in this manuscript into standard format such as 38 (95%: 33-43) (Like 187). The way used in this manuscript could confuses the readers as similar to reference number.

The sentence in line 187 reads” However, the average score for the question on symptoms of Zika virus was 38 [33, 43], and few participants (2% (4/217)) were able to identify all of the symptoms.” Because the “38” in that sentence refers to an actual number rather a percentage, the authors feel that putting it in parenthesis would be more confusing to the reader. Furthermore, given that all of the references throughout the text are all end notes and none are parenthetical, the authors do not agree that this might be confused for a reference number. The first round of comments for this draft called for a more robust statistical analysis, which this section now provides.

7. Line 215-217 -- Please revise

This sentence was broken into two separate sentences to improve readability. See line 240-241.

8. Line 256 -- "sites importantly"

This sentence was revised and broken into two separate sentences. See line 281.

D. Discussion

1. Line 262 -- help in developing

The sentence has been modified and now includes “help in developing.” See line 286-287.
2. Line 262 -- Please revise "helped elucidate"

The sentence from this line includes “helped in elucidating.” See line 288.

3. Line 270 -- Please revise "there exists"

This sentence has been modified to improve readability. See line 295.

4. Line 307 -- were all non-pregnant for male or combine male and female?

This line refers to “non-pregnant males” as stated. The reason why “non-pregnant” is included before “males” speaks to the issue of gender identity as noted in lines 199-206.

5. Line 311 -- Pregnant women

Strictly speaking, not all pregnant persons might identify as women therefore no modification will be made.