Author’s response to reviews

Title: Intimate partner sexual violence and risk for femicide, suicidality and substance use among women in antenatal care and general out-patients in Thailand

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Reviewer reports:

Sheila Sprague, PhD (Reviewer 2):

*There are a number of grammatical errors throughout the manuscript, particularly in the introduction and discussion. The authors should consider enlisting the services of a copy editor or academic writer to review the manuscript for grammar and scientific writing style.

R: This is corrected

*While this manuscript addresses an important topic, the IPV prevalence rate reported by the authors in this study is substantially lower than prevalence rates reported in other similar studies cited by the authors. The authors have not provided sufficient explanations or hypotheses for this discrepancy. The discrepancy in findings without sufficient explanation challenges the validity of the study results.

R: Below is added

From 14288 women screened in antenatal care and in general out-patient clinics in hospitals, 1.5% screened positive for the past 12 months intimate partner violence

This prevalence seems to be comparable with similar studies in similar settings (2.2% physical abuse in six European countries) [4] and Asian countries (ranging from 1.2% in Japan to 4.0% in Thailand) [5]. In some local surveys in Thailand the prevalence of past 12 month intimate partner violence ranged from 4.8%, 9.5% to 26.6% [6-8]. One possible explanation for the higher prevalence in the latter surveys is that detailed validated intimate partner violence scales were used, while our intimate partner violence prevalence was obtained on the basis of two screening
questions that did not include the range of women’s experiences of intimate partner violence [16]. The lower screening prevalence of intimate partner violence in this study may also be interpreted in the context of Buddhist religion and Thai family structure, with a strong emphasis on order, harmony and responsibility within the family [17,18] and wife abuse may be tolerated in Thai culture as it serves to maintain male superiority and to re-establish order [17,18].

*In the previous version of this manuscript (revision 1), the authors stated, "The very low reported prevalence of intimate partner violence in this study may possibly be attributed to a lack of privacy when the screening interview was conducted since not always a private room was available in some of the study hospitals". This sentence was removed from the current version, however, no explanation was provided in the reviewer comments so it is unclear whether or not participants were screened in private. This is an important methodological issue as well as potentially an ethical issue. The authors should be clear as to whether screening was always conducted in private and clarify this change in the manuscript.

R: The screening was always conducted in private.

*Table 3 should include p-values (similar to how results are presented in Table 4).

R: Added

*Not all of the previous peer reviewer comments have been addressed. For example, there continues to be inconsistencies in language use around intimate partner sexual violence. Using consistent language would increase clarity and readability of the manuscripts.

R: Clarified