Author’s response to reviews

Title: Title: Can mental health treatments help prevent or reduce intimate partner violence in low- and middle-income countries? A systematic review

Authors:

Wietse Tol (wtol@jhu.edu)
Sarah Murray (sarah.murray@jhu.edu)
Crick Lund (crick.lund@uct.ac.za)
Paul Bolton (pbolton1@jhu.edu)
Laura Murray (lmurra15@jhu.edu)
Thandi Davies (thandi.davies@uct.ac.za)
Johannes Haushofer (haushofer@princeton.edu)
Kate Orkin (kate.orkin@merton.ox.ac.uk)
Marc Witte (marcjosefwitte@gmail.com)
Leah Salama (lsalamal@jhu.edu)
Vikram Patel (Vikram_Patel@hms.harvard.edu)
Graham Thornicroft (graham.thornicroft@kcl.ac.uk)
Judith Bass (jbass1@jhu.edu)

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Author’s response to reviews:

(this letter is also included as a word file)
January 23rd 2019

Dear editors,

Please find below a response to the helpful comments raised by peer reviewers, with respect to our manuscript BMWH-D-18-00574 “Can mental health treatments help prevent or reduce intimate partner violence in low- and middle-income countries? A systematic review”

For ease of reading, we copied the reviewers’ comments and provided responses immediately below in italics. Direct quotes from the manuscript are additionally underlined. We also included a version of our revised manuscript with track changes for ease of reviewing our responses.

Thank you for the opportunity to revise our work, and we are looking forward to your evaluation of the revised manuscript.

Sincerely, on behalf of the author team,

Wietse A. Tol, PhD
Associate Professor, Department of Mental Health
Program Director, Peter C. Alderman Program for Global Mental Health, HealthRight International

BEATRIZ AYALA, PhD, MD (Reviewer 1):

Some minor observations/recommendations are set out below:

[R1.1] Was there any restriction of the year of publication?

[Response] We did not place any restrictions on the year of publication in our searches. We clarified this in the manuscript as follows: “We did not set any restrictions by year of publication.” (p. 8, end of first paragraph)
[R1.2] Please check the numbers of articles in the PRISMA flow chart. After double screening of 56 full text papers, 47 full text papers were excluded and 8 articles were identified as eligible for inclusion. Then, the number should be 9 articles instead of 8 articles.

[Response] Thank you for noting this inconsistency. We checked, and the correct number of full text papers excluded should be 48 not 47. We corrected this in Figure 1.

[R1.3] It may be important to mention the lack of standardized measures for IPV across studies, which would be important to assess comparability across studies.

[Response] We agree this is an important point, and added this to the discussion section: “In addition, a few studies used non-standardized measures for IPV with unknown psychometric properties, including sensitivity to change.” (p. 23, end of second paragraph)

Gene S Feder (Reviewer 2):

[R2.1] This is a systematic review of LMIC controlled studies of mental health interventions that measured IPV outcomes. From the 6 heterogeneous studies that were eligible for the review, it was impossible to draw any conclusions about effectiveness. There was a hint that interventions for depression may reduce IPV, but the authors wisely do not over-egg this finding from two primary studies.

The review was comprehensive in terms of search strategy and competent in application of ex/inclusion criteria, data extraction, evaluation of bias risk and (the necessarily limited) analysis. The reviewers’ critique of methodology is appropriate and helpful to this research field. The major limitation, given the global ambitions of the review, was restriction to papers published in English. It would be useful to know how many abstracts of potentially eligible studies were identified. As abstracts from French, German and other non-English journals are usually in English, this should be within the language competence of the reviewers.

[Response] Thank you for this comment. We did not exclude any studies (with abstracts in English) because the full text was in another language.

[R2.2] In their textual summary of findings from the primary studies, the reviewers do not clearly distinguish between measurements of perpetration and victimisation. This outcome measurement ambiguity to some extent (looking at the tables) tracks back to the studies themselves, as does insufficient characterisation of their populations in terms of perpetration and
victimisation. Needless to say, that distinction is not always straightforward, but I think perpetrated/victimisation measurement and characterisation in the primary studies needs more discussion in the review.

[Response] Thank you for this important comment. We agree that whether studies addressed victimization vs. perpetration was not systematically noted in the results section of our submitted manuscript. Under the paragraph “impacts of intervention” (results section), we now made edits to ensure that it is clear for all studies whether they assessed the outcome of combined perpetration/ victimization (e.g. Jiang 2014), victimization, or perpetration. We also clarified this distinction systematically in the discussion section.

Since there was only one study that did not make a clear distinction between IPV victimization vs. perpetration, we did not give this distinction extra weight in the discussion section. We believe we already sufficiently emphasized the need for future studies to display stronger theoretical finesse in developing and testing specific causal pathways through which mental health interventions may impact IPV outcomes – a point we illustrated with separate examples for IPV victimization vs. perpetration.