Author’s response to reviews

Title: Spanish Validation of Female Condom Attitude Scale and Female Condom Use in Colombian Young Women

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Author’s response to reviews:

Editor Comments:

As you will see, Reviewer 2 continues to raise concerns about the issue of back translation. We are offering you a further chance to address this issue before we make a final decision.

Response: Ok thanks, I will be more specific regarding the back translation.

Reviewer reports:

Susan Witte (Reviewer 1): This is a very important topic that has significant ramifications for HIV research and health promotion. The authors addressed most of the concerns noted by the earlier reviews. However, a few small edits will strengthen the quality of the manuscript: filling in some information related to variables and theory in the Background, and then more carefully tying these concepts in to the Discussion is needed.

Please clarify whether Colombia is considered a developing country or a low-resourced country, adjectives that are used in the manuscript (see additional note later). Please consider using definitions, e.g. WHO [or LEDC, etc].

Response: Thank you, we have clarified that Colombia is a Lower-middle-income economy according to the World Bank
In addition, please clarify throughout the "psychological variables" associated with condom use and how attitudes are among and associated with those psychological variables.

Response: We have added more information about this psychosocial variables.

Authors are testing criterion validity but never explicitly say so. Instead the figure 1 is called: "correlation matrix for the variables used in the present study." In the Background and Results section, and then again in the Discussion state that you are testing criterion validity. For example, on p. 7-11, "as in other scales and subscales used as criterion," be more explicit to name them to remind/refresh/clarify to reader here what you are doing.

Response: Done.

Finally, in the Discussion the authors refer to theory/theories, but they are not clear about what these theories are in the background.

Response: We have included information about 3 main theories used in sexual health promotion.

Please also pay much more attention to the grammatical composition and have the paper carefully edited.

Response: The paper has been now reviewed by professionals.

Detailed comments are listed below:

Line 18 pg. 2 Instead of using participants' quotes, consider discussing the findings of the study to support the need to promote female condoms.

Response: We have include more information and we arrived to female condoms promotion.

Line 25 pg. 2. Are there two groups of variables? Psychological and attitudinal? This paragraph may need clarification in light of what is coming next in line 14 pg. 3

Response: I think is clearer now.
Line 7. Pg. 3 how they are not the same? Is this because the method of research (qualitative vs. quantitative) or because literature indicates there are differences.

Response: The literature indicates differences.

Line 25 pg. 5. Please clarify which scale was translated. As it is written this paragraph could be related to the UCLS scale.

Response: Done

Line 25 pg. 5. This link maybe useful for the translation https://www.who.int/substance_abuse/research_tools/translation/en/

Please explain within the text the rationale you offer the reviewer for why you did not back-translate the instrument.

Response: We have covered this issue.

Line 25 pg. 7. The authors refer again to the "psychological variables," but this has not been elaborated or clarified in the background.

Response: Done

Line 13 pg. 8 this paragraph discusses the findings in agreement or disagreement with "the theory." Could you elaborate on which theory and how and what are the items that were different from the Portuguese version. In addition to the statistical difference, do you have any explanation why Portuguese version was different from the Spanish one?

Response: We have highlighted that theory is related with criterion validity. It is unclear to us those Spanish-Portuguese differences.

Line 30. Pg. 8 Could you elaborate more about how the pleasure-related sexual attitudes and attitudes toward sexuality in general support your observations.

We have include more info and a reference.
Line 10. Pg. 9 this paragraph needs more clarification and grammar. What kind of approach is not cross-sectional? Why do you expect a bigger impact in sexual health promotion programs?

We have reviewed the grammar and we have add a bit more information about the scale implication use.

Line 15. Pg. 9. Please provide citation for "90% of women in developing/developed countries…". Is Colombia considered a developing country?

Response: We have include the reference.

Line 17. Pg. 9 When you say American women are you referring to women in the U.S?

Response: Sorry, yes. We have changed it.

Reviewer 2 (Reviewer 2): PEER REVIEWER ASSESSMENTS:

OBJECTIVE - Full research articles: is there a clear objective that addresses one or several testable research questions? (Brief or other article types: is there a clear objective?)

Yes - there is a clear objective

DESIGN - Is the current approach (including controls and analysis protocols) appropriate for the objective?

No - there are minor issues

EXECUTION - Are the experiments and analyses performed with sufficient technical rigor to allow confidence in the results?

No - there are minor issues

STATISTICS - Is the use of statistics in the manuscript appropriate?

Yes - appropriate statistical analyses have been used in the study
INTERPRETATION - Is the current interpretation/discussion of the results reasonable and not overstated?

No - there are minor issues

OVERALL MANUSCRIPT POTENTIAL - Has the author addressed your concerns sufficiently for you to now recommend the work as a technically sound contribution? If not, can further revisions be made to make the work technically sound?

No - manuscript has some fundamental flaw(s)

PEER REVIEWER COMMENTS:

GENERAL COMMENTS: My sole concern originally was in relation to the back translation process, and the authors have challenged this, citing evidence that back translation can be somewhat problematic, and explaining that they favour their expert panel approach. I do not share that view. I agree that back translations can be a problem, and do sometimes produce linguistically awkward versions of the text in measures, BUT this is often because back translations are not always carried out by individuals with subject specialist translation expertise. Furthermore, I think that the best advice on this topic comes from the World Health Organisation, who recommend an expert panel FOLLOWED BY a back translation as an additional step.

Thank you for your comment. Well, we are not challenging your suggestion. This is a scientific discussion, and discordance may be even positive. We do not strictly do a “translation”, if you understand a formal way to rewrite all items in the original language and that is all. I think –and I may be wrong- that rigid translation with no adaptation process are more successful in these cases than well-adapted versions. And the important thing is not a linguistic equivalence but a content equivalence. In that order of ideas, we do this back translation as was previously write in the manuscript: “In the next step, a group of sexology and psychometrics experts revised content correspondence between the original version and the Colombian version with the purpose of preserving the psychometric characteristics of the original items. “. As you can see, there was a mistake in the writing, because you cannot look for psychometric equivalence like that. We have change the sentence and added more information about the adaptation process. I have include some references here, that support somehow why blinded trust in back translation are not always a good idea. And in my context this method has worked well (Vallejo-Medina et al., 2017). In fact, if the worry is “not good enough for this journal” we have also used this methodology in other similar journals (Moyano et al., 2017; Sierra et al., 2018; Vallejo-Medina et al., 2018; Vallejo-Medina et al., 2016). But probably most important, we have a good scale, useful, with
appropriate preliminary psychometric properties and I trust this adaptation. And, as the WHO recommends, we focus on “emphasis in the back-translation should be on conceptual and cultural equivalence and not linguistic equivalence. We have added a new reference.

Once again, it is not a challenge. I will accept your final decision.


REQUESTED REVISIONS:

I still feel that the translation issue could be an impediment to publication in the highest quality of journals.