Author’s response to reviews

Title: Qualitative Evaluation of the Saleema Campaign to Eliminate Female Genital Mutilation and Cutting in Sudan

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RESPONSE TO REVIEWERS

Reviewer #1:

Very interesting read.

It would have been good to know the age groups of the participants and the variations in their responses (perceptions) to the stimuli.

AUTHOR RESPONSE: WE THANK THE REVIEWER FOR THIS REVIEW AND NOTE THAT WE HAVE PROVIDED THE AVAILABLE DEMOGRAPHIC DATA ON PARTICIPANTS.

Reviewer #2:

Thank you for the opportunity to learn more about this important program in Sudan. I think the paper would greatly benefit from the addition of contextual and theoretic information. I hope these comments are useful.
Abstract

Need for clarity of expression i.e. Line 15 should read

"The Saleema campaign evaluation involved gathering data from four focus group discussion from each of the 18 states in Sudan"

Sentence beginning "codes were.." at line 19 not clear. The first sentence of the results is also unclear.

AUTHOR RESPONSE: WE HAVE EDITED THE ABSTRACT AS REQUESTED.

Background

Page 4  Line 38 should read "change" not "changing"

While health communication is important on its own it will not change behaviour. Berg et al have noted the focus on the dissemination of health information in FGM programs while those interventions that demonstrate promising outcomes are those involving an integrated approach.


It would be good if the authors could discuss the contribution of the findings of this evaluation in relation to the FGM literature and what it contributes or adds to our understanding of communicating to change social norms relating to FGM

AUTHOR RESPONSE: WHILE AN EXTENSIVE DISCUSSION OF THE FGM LITERATURE IS NOT THE PURPOSE OF THIS PAPER, WE HAVE ADDED TO THE BACKGROUND ON THE TOPIC IN THE INTRODUCTION. WE NOTE THAT THE PURPOSE OF SALEEMA IS TO USE A BRANDING STRATEGY, WHICH IS MORE EXPANSIVE THAN COMMUNICATION, AND HAVE CLARIFIED THIS POINT.

Page 4  line 40 Social norms cannot be decreased but changed - see also in abstract

AUTHOR RESPONSE: WE HAVE EDITED THE RELEVANT TEXT.

Page 4 line 45 As I understand it health branding is not a theory rather a tool. Health branding is related to social marketing which is underpinned by behavioural theory. What is the theory that
underpins the Saleema campaign? How did this theory affect the campaign design and message framing and choice of channel to communicate? How were these decision made and testing undertaken to ensure the materials were robust enough to roll out?

AUTHOR RESPONSE: HEALTH BRANDING IS A THEORETICAL MODEL AND EXTENDS EXISTING THEORY, AS NOTED IN THE TEXT AND AS CLARIFIED. SOCIAL NORMS THEORY AND HEALTH BRANDING THEORY ARE THE UNDERPINNINGS OF THE CAMPAIGN. WE HAVE HIGHLIGHTED TEXT WHERE THIS IS DESCRIBED AND CLARIFIED.

Page 5 Can the authors please explain what an "interim evaluation" is and how this fits with say process and outcome evaluation. Is this part of a formative or is it a post implementation review?

AUTHOR RESPONSE: WE CLARIFY THAT THIS STUDY IS ONE STEP IN A MULTI-YEAR EVALUATION PROJECT, WITH ADDITIONAL STEPS TO FOLLOW.

What is the time frame of this health communication campaign? What was the campaign objectives, what messages did it aim to communicate? It would be good to discuss the branding of the images and messages in more detail here than in the findings. How does this evaluation relate to other aspects of the larger Saleema evaluation? Is there other data that these results can be compared or understood in relation too?

AUTHOR RESPONSE: WE NOTE THE START OF THE CAMPAIGN. WHILE WE AGREE THAT DISCUSSION OF THE FULL BACKGROUND OF THE CAMPAIGN MAY BE OF INTEREST TO SOME READERS, THAT IS BEYOND THE LIMITED SCOPE OF THIS JOURNAL ARTICLE. WE HAVE NOTED THE ORIGINS OF SALEEMA AND PROVIDED CITATIONS TO ADDITIONAL LITERATURE ON ITS BACKGROUND IN THE REVISION.

Methods

What s the methodological orientation of this study? The authors state that Grounded theory directed their coding approach. This requires elaboration. I think the authors drew upon some of the analysis processes used in Grounded theory but have undertaken a descriptive qualitative study.

Page 5 Line 30 PAU needs explanation, why random sampling?

Why were focus groups chosen?
How were participants recruited?

Was ethics and consent from participants obtained?

I suggest the authors look to Tong et. al. to assist with reporting these methods more fully


**AUTHOR RESPONSE:** WE NOTE THAT THE METHODS FOR THE STUDY ARE BASED ON THE OVERALL EVALUATION STRATEGY, WHICH CALLED FOR A NATIONALLY REPRESENTATIVE SAMPLE OF SUDAN. THE QUALITATIVE SAMPLING MIRRORED THE QUANTITATIVE STUDY TO PROVIDE A BASIS FOR THE MIXED METHODS DESIGN. WHILE WITH LIMITED SPACE WE CANNOT DESCRIBE THE RATIONALE AND METHODS IN FINE DETAIL, WE HAVE ADDED FURTHER METHODOLOGICAL DESCRIPTION.

The description of the analysis is confusing and lacking in detail. There are two tables relating to this that the authors do not describe in the manuscript. I suggest that the authors provide some examples of how they coded text inductively and the framework that this was compared with to finalise decisions. Not satisfactory to quote Creswell and Patton and state that "This type of qualitative analysis technique has been utilized in various disciplines". There are many approaches to qualitative data analysis.

**AUTHOR RESPONSE:** WE HAVE ELABORATED ON THE ANALYSIS PROCEDURE.

How did the messaging on the posters relate to other messaging on radio, etc? I am not clear if the authors are evaluating the poster or the images portrayed in the posters that are representative of the campaign itself?

Can the authors provide some example of the questions asked and explain how these related to the 4 "ps" and "brand equity?"

**AUTHOR RESPONSE:** WHILE THOSE ARE IMPORTANT POINTS FOR EVALUATION OF THE LARGER CAMPAIGN, AND ARE THE SUBJECT OF FUTURE ANALYSES AND PAPERS, THE POSTERS WERE THE ONLY SALEEMA STIMULUS OR CAMPAIGN COMPONENTS ASSESSED IN THIS STUDY. THAT SAID, WE HAVE ADDED TO THE DISCUSSION OF THE OVERALL CAMPAIGN STRATEGY, WHICH INCLUDED ALL 4 P’S IN THE FORM OF STRATEGIES AT THE COMMUNITY-LEVEL, THROUGH PARTICIPATORY EVENTS, MEDIA, AND OTHER STRATEGIES.
Findings

What are the characteristics of the participant? Age ethnicity marital status etc?

AUTHOR RESPONSE: AS NOTED IN RESPONSE TO ANOTHER REVIEWER, WE HAVE PROVIDED ALL THE AVAILABLE DATA ON FOCUS GROUP PARTICIPANTS.

Quotes more than 3 lines should be separated from the text and indented.

With reference to "information and sources" This seems to refer to information generally not information about FGM. I am not clear why this information was required - surely this would have been part of the baseline data that informed what channels to communicate the FGM related messaging. Print materials seem to be the least common source however this paper refers to the use of a poster to stimulate discussion.? Why did the researchers select this and not say an example from the internet/ TV or sound bite from the radio?

Very interesting findings on page 10

AUTHOR RESPONSE: AS NOTED IN THE MANUSCRIPT AND HIGHLIGHTED IN REVISION, THE POSTERS WERE REPRESENTATIVE OF THE LARGER CAMPAIGN. WITHIN THE LIMITED OPPORTUNITY TO STIMULATE PARTICIPANTS AND GENERATE DISCUSSION, THESE POSTERS WERE CHOSEN AS THE BEST WAY TO CREATE A MEANINGFUL DISCUSSION OF REACTIONS AND RECEPTIVITY TO SALEEMA.

Discussion

There is no discussion of the findings in relation to the literature or other aspects of the evaluation. What insights do these findings provide for other contexts and how they be translated into policy and practice?

AUTHOR RESPONSE: WE HAVE MADE SOME EDITS TO THE DISCUSSION, NOTING THAT THE PURPOSE OF THIS PAPER WAS SPECIFICALLY TO PROVIDE A QUALITATIVE EVALUATION OF RESPONSE TO THE SALEEMA CAMPAIGN.
Reviewer #3:

I don't have much to add here. I think the study was well designed, the data appropriately analyzed and the findings of interest. My only concern is that the data are potentially limited in application. Though FGC is a widespread practice, with some similarities in reasons for its persistence, the campaign was quite local and findings may not be generalizable to areas outside of Sudan, or in areas that don't use the same vocabulary/speak the same language.

AUTHOR RESPONSE: WE THANK THE REVIEWER FOR THESE COMMENTS AND HAVE NOTED THE CONCERNS RAISED IN THE LIMITATIONS SECTION.

Reviewer #4:

1. It is not clear how long the national campaign for Saleema was carried out before the evaluation of the same was conducted. This information needs to be provided because it will give the reader an indication of whether there was sufficient time for any expected behaviour change.

AUTHOR RESPONSE: WE HAVE PROVIDED SOME ADDITIONAL CONTEXT ON CAMPAIGN BACKGROUND PER THIS REVIEW AND ANOTHER REVIEWER’S COMMENTS.

2. While the use of the word FGM may be politically correct, it is value laden and may not be culturally appropriate. FGC is less stigmatising and culturally neutral for those who engage in the practice it (An edited book by Bettina Shell-Duncan and Ylva Hernland (2001) "Female "Circumcision" in Africa: Culture, Controversy, and Change" would be very helpful).

AUTHOR RESPONSE: WE ARE USING THE TERM USED BY UNICEF, NGO PARTNERS, AND THE GOVERNMENT SPONSORS OF THE SALEEMA PROGRAM IN SUDAN TO REFLECT THE ACTUAL LANGUAGE USED.

3. Methodology: Given that this was an evaluation study where different groups (eg. young, old, education, how many were mixed etc). It is important to know how these FGDs were distributed to assess how they reacted to the campaign messaging and activities the authors evaluated. From the conclusion section, a variable such as age seems important, yet it is given less weight in the constitution of the FGDs.
AUTHOR RESPONSE: WE HAVE HIGHLIGHTED AND CLARIFIED THE PREVIOUSLY DESCRIBED SAMPLING PLAN, RANDOMLY SELECTED PSU’S BASED ON A NATIONALLY REPRESENTATIVE SAMPLE.

4. Results: The conventional way is to write words in full not symbols (eg. &). The authors need to check the quotations to be sure they are grammatically correct. Some words are left out eg. 'be' pg 9. The authors say frequent channels used for information include internet. But no elaboration on who uses internet? What age, education levels etc? This is necessary to enable the reader to contextualise the findings.

Some quotations are too long they should be indented (pg.12).

AUTHOR RESPONSE: WE HAVE REVIEWED AND EDITED QUOTATIONS FOR ACCURACY.

Discussion:

This should be more robust, rather than merely repeating what is presented in the results section. Discussion should compare findings of the current study with findings of other/similar studies or studies dealing with similar/same subject. This is entirely lacking in the discussion!

AUTHOR RESPONSE: WE HAVE EDITED THE DISCUSSION.

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Please also take a moment to check our website at http://reph.edmgr.com/l.asp?i=51673&l=BCP3LXYL for any additional comments that were saved as attachments. Please note that as Reproductive Health has a policy of open peer review, you will be able to see the names of the reviewers.