Reviewer's report

Title: Facilitators and Barriers to Effective Scale-Up of an Evidence-Based Multilevel HIV Prevention Intervention

Version: 3  Date: 25 October 2013

Reviewer: Sarah Flicker

Reviewer's report:

) Fix up some grammar issues in intro – here is a brief suggestion for alternative phrasing:
Since the scale-up of HIV/AIDS prevention evidence-based interventions (EBIs) has not been simple, it is important to examine the processes that occur in their translation into practice. The goal of this paper is to examine facilitators and barriers to effective implementation that arose among 72 community-based organizations as they moved into practice a multilevel HIV prevention EBI, the Mpowerment Project, for young gay and bisexual men.

2) I would encourage you to use fewer acronyms. Where possible spell out (D)EBI or MP…

3) Table 3 might benefit from a little reformatting to make info more clear and comparable. Also, I think it would help if you identified some of the characteristics you say make a big difference (eg rural or proximity to a “gay magnet city” or those that targeted particular ethnicities. It would be very interesting (perhaps for future analytical work) if there were any patterns associated with any of these characteristics that influenced efficacy…

4) I would have liked to see a little bit more about the role of technical assistants. Who were these folks? How were they trained? How was their quality assessed? It seems to me this was a key feature that could mitigate or vastly improve the quality of the intervention.

5) I was also left wondering at the end, was there any impact evaluation? For instance, were those that implemented MP better at reducing HIV transmission among YMSM in their communities? Is there any way to know this? Is it possible, that some of the CBOs were indeed providing better programming prior to MP? Is it possible that MP is just a better fit in some places than others?

6) How might the results have been similar or different if you were focusing on other DEBI’s? What are some of the unique issues about working with YMSM vs IDUs vs Sex Workers?