Author's response to reviews

Title: Protocol for a systematic review: understanding the motivations and barriers to uptake and use of female-initiated, primary biomedical HIV prevention technologies in sub-Saharan Africa.

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Author's response to reviews: see over
15 July 2015

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Re: Response to Review of MS: 1731604643167597

Dear Editors,

Thank you for your feedback on this application for publication. I have addressed your comments as well as those of the external reviewer. Below is a point by point summary of how these points have been addressed.

1) A more detailed title page with the requested information has been included in the manuscript.
2) The abstract has been reformatted and some text added to now fit within the required standard. Please note that this review has not been registered as it does not meet registration requirements being that it is of qualitative data.
3) A section which lists abbreviations has been added to the manuscript.
4) An authors’ contributions section has been added to the end of the manuscript.
5) An acknowledgement section has been added along with the funding information.
6) A competing interests section has been added to the manuscript.
7) There is no PROSPERO registration number so this has been noted in the Methods section.

In addition, I have addressed the very good points raised by the external reviewer. The review aims to examine and combine results from all instances of actual use of female-initiated HIV prevention technologies since 2003. As the reviewer very rightly pointed out, it may be argued that incentives could be quite different in a trial setting where participants are paid to come to a clinic as compared to a ‘real-world’ setting where patients come when they feel they need to. From this perspective, trial participants could be more incentivised to attend the clinic. However, in the case where new prevention options proven to protect against HIV are available, the accessibility of the product or intervention may be the incentive to come to the clinic. Clearly, there are a variety of motivators for engaging in health related behaviour, which we hope to explore in the context of female-initiated HIV prevention. In this review we hypothesise that some of the experiences of actually using the products should be similar regardless of initial motivation. This explanation and acknowledgement of the potential differences in the two setting types is quite important to recognise in the protocol and I have therefore included this in the methods section.

The typo identified by the reviewer, in addition to a few others, has been addressed, as well as the updated citation. All changes made to the manuscript have been highlighted in yellow. I look forward to any additional feedback you may have.

Sincerely,

Ropyn Eakle