Author’s response to reviews

Title: Mental wellbeing among Hispanic female domestic cleaners

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Author’s response to reviews:

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Dear Editor:

Enclosed please find the revised version of our manuscript (AOPH-D-19-00106) entitled “Mental wellbeing among Hispanic female domestic cleaners” re-submitted for publication in your journal.

We would like to thank you for the comments we have received on our manuscript and for the opportunity to submit a revised version. We have made the revisions according to the comments made by the reviewers. A point-by-point numbered response to the reviewers’ comments follows this letter. Additionally, we have revised manuscript text referring to the worker well-being framework to more appropriately reference the Total Worker Health® framework. We have marked the changes to the manuscript using tracked-changes. Please note that the line numbers refer to the tracked-changes version of the manuscript.

We hope our revision is satisfactory and look forward to a favorable reply.

Yours sincerely,

Jennifer Ish, MS
Reviewer #1:

Please note that line numbers refer to the tracked-changes version of the revised manuscript. Thank you.

COMMENT #1. More details on recruitment methods are needed. Where, when and how were women recruited in the study?

Response: We agree with the reviewer that more information is needed regarding recruitment methods. Please note that the date of the survey is reported in the first sentence of the methods section, and we have added additional details to the manuscript on the recruitment strategy (lines 84-87 in the tracked-changes version). The text now reads:

“In collaboration with Domésticas Unidas (DU), a local grassroots organization, eligible women were recruited for participation at monthly DU meetings. At these meetings, Spanish-speaking study staff approached women to explain the purpose of the research and ask if they would like to participate in the study.”

COMMENT #2. Ethical considerations. Was the study approved by an Ethics Committee? Were participant women asked to give informed consent?

Response: We thank the reviewer for pointing out this omission and have included the appropriate details (lines 89-96 in the tracked-changes version). The revised text is included below:
“Before administering the survey, study staff provided participants with an information page that assured participants of the voluntary nature of their participation and that their responses would remain confidential. Additionally, all participants were informed of their ability to withhold responses, terminate participation, and provided staff contact information should they have questions or concerns about the study. By completing the survey, participants granted implied consent to participate in the research. The study protocol was approved by The University of Texas Health Science Center at Houston (UTHHealth) Committee for the Protection of Human Subjects.”

COMMENT #3. How was the study explained to potential participants?

Response: We believe that this issue is addressed by the manuscript revisions in response to Comment #1 above. In the added text, we explain that women were given information about the study during recruitment (lines 84-87 in the tracked-changes version). The text in the revised version of the manuscript is as follows:

“In collaboration with Domésticas Unidas (DU), a local grassroots organization, eligible women were recruited for participation at monthly DU meetings. At these meetings, Spanish-speaking study staff approached women to explain the purpose of the research and ask if they would like to participate.”

COMMENT #4. At the end of the results section the authors wrote: "There were no statistically significant differences in the prevalence of poor mental wellbeing by socioeconomic, neighborhood, or health characteristics » This sentence is contrary to the findings that women with lowest education, those who perceived their neighborhood as unsafe and those who reported musculoskeletal pain have poorer mental health. Please, clarify.

Response: We appreciate the reviewer’s comment and recognize that this statement may be misleading. While the prevalence of poor mental wellbeing was in fact higher among certain groups, none of the differences were statistically significant. To help clarify this point, we have revised the sentence in the manuscript and added a sentence in the discussion (lines 135-136 and 170-174 in the tracked-changes version). The text in the revised version of the manuscript is as follows:
Lines 135-136: “None of the differences in the prevalence of poor mental wellbeing between groups were statistically significant.”

Lines 170-174: “None of the observed differences in mental wellbeing were statistically significant, perhaps due to the small sample size of the study. Nevertheless, the observations of this study suggest that the mental health of this group of informal domestic cleaners may be affected by socioeconomic, job and neighborhood factors.”

COMMENT #5. The WHO-5 index has been widely used, as the authors of the cited systematic review (Topp CW, Østergaard SD, Søndergaard S, Bech P), explain in their abstract. Please change sentence in limitations section of the discussion.

Response: We thank the reviewer for noting this inconsistency and have made changes in the manuscript accordingly. The text in the revised version of the manuscript is as follows:

“To our knowledge, the WHO-5 index has not been used among domestic cleaners; however, the WHO-5 scores of the women in this study is similar to that of informal caregivers in the 2016-2017 European Quality of Life Survey who had a mean score of 60.84 (18).”

COMMENT #6. Given the small sample size, statistical differences should be indicated in Table 1 for all variables. It is hard to read all 95% confidence intervals and assess the possible significance of the associations. For instance the difference in poor mental well-being between those who visit a private doctor and those who go to ER or public clinic is not significant (Chi-square p-value = 0.22). Please change statements about this non-significant difference accordingly.

Response: While we appreciate the reviewer’s recommendation to indicate statistical significance in Table 1, none of the differences were in fact statistically significant, as noted in the last sentence of the results section (lines 135-136). Our intention of reporting 95% confidence intervals was to give the reader a sense of the distribution of the outcome among the participants, rather than indicate statistical significance. However, we recognize that the 95% confidence intervals may make Table 1 difficult to interpret. Therefore, we have decided to report standard errors instead. We have also added a footnote to the table to indicate that none of the differences are statistically significant.
COMMENT #7. Feeling unsafe and perceiving the neighborhood as unsafe may be indicating that these women have been subjected to street victimization, violence at work, or even domestic violence. All kinds of violence are risk factors for chronic diseases and inflammation. Please check the literature on domestic violence and gender violence and chronic conditions since this could be an important issue to be explored in future studies of the vulnerable population of domestic cleaners.

Response: We thank the reviewer for their insightful recommendation. We have reviewed the relevant literature on domestic/gender violence and chronic disease and added text to the manuscript to address how the issue may relate to domestic cleaners (lines 157-163 in the tracked-changes version). The text in the revised version of the manuscript is as follows:

“Also, more women who were concerned with safety at their jobs had poor mental wellbeing than those who never felt unsafe. This pattern was similar but attenuated for women who felt unsafe in their neighborhood or felt that violence and/or crime was a problem where they lived. Feeling unsafe may indicate that these women have experienced street victimization, violence at work, or even intimate partner violence, all of which are risk factors for negative health behaviors, chronic disease, and mental health problems (20).”

Reviewer #2: A very interesting research covering hard-to-reach and vulnerable population of Hispanic women working as domestic cleaners and assess the prevalence of various occupational and environmental hazards and health status of this population.

Response: We greatly appreciate the reviewer’s favorable comment.