



SDI Review Form 1.6

Journal Name:	International STD Research & Reviews
Manuscript Number:	Ms_I-SRR_29202
Title of the Manuscript:	Preventing mother-to-child transmission of HIV: The perception and experiences of HIV positive mothers in Benin City, Edo State, Nigeria
Type of the Article	Original Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<p>It is very critical to re-organize the study results as proposed:</p> <ol style="list-style-type: none"> 1. Perceptions of PMTCT programme <ol style="list-style-type: none"> a. Self-perception as HIV positive women with respect to the mode of enrolment into PMTCT b. Perception of HIV positive women about PMTCT programme <ol style="list-style-type: none"> i. Positive perception ii. Negative perception iii. Perceived barriers for PMTCT programme 2. Experiences of HIV positive women throughout the programme <ol style="list-style-type: none"> a. Experience on HIV testing & disclosure b. Experience on compliance with PMTCT recommendations/Interventions i.e. ARV uptake, institutional delivery, baby feeding c. Experience in the continuum of PMTCT services (trajectory) d. Lessons learnt of being PMTCT users (PMTCT literacy) <p>Discussion of the study to be improved. Major findings to be interpreted and discussed within the context of prior studies</p>	<p>Thank you for the feedback on the manuscript. The study findings have been re-organised in line with the recommendations from the reviewer.</p> <p>The discussion section has been re-written to highlight the public health significance of the study findings and to interpret same in the context of existing literature on the topic.</p>
Minor REVISION comments	<p>The key words need to standardized throughout the article "perceptions and experiences" or "perception and experience"</p> <p>L7 to be re-written after reviewing the result component</p>	<p>The keywords of the manuscript have been standardised to read: "perception" and "experience" throughout the document.</p>



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	<p>and to add in the conclusion, the implications of the study, just one sentence.</p> <p>L14&L16 reference 2 to be removed does not match with the idea developed in the book referred</p> <p>L19-20 name the country (Nigeria)</p> <p>L22-35 to be reorganized. The problem statement not clear. It is critical to describe the performance of the PMTCT programme in the Nigeria with respect to HIV counselling and testing, ART uptake, institutional delivery, baby feeding and EID before to evoke different reasons of weaknesses of the PMTCT programme. Discuss other studies done to show the gap on perceptions and experiences of PMTCT users then formulate the article's objective.</p> <p>L42-43 the study might be descriptive and cross-sectional but it is a qualitative study and needs to respect most qualitative study criteria:</p> <ul style="list-style-type: none"> • Section Method instead of material and methods • Procedures and participants as sub-section instead of sampling methodology and method of data collection • Data analysis <p>The sample size needs to be justified</p> <p>L50, 51, 52 to be reviewed. There is discrepancy between the definition of comprehensive services of PMTCT provided in L40-42 and L50-51 which has additional criteria of support group or paediatric HIV clinic. It is a bias. The support groups or paediatric HIV clinic might be the entry point for data collection.</p>	<p>The problem statement has been revised to highlight the on-going challenges of the PMTCT programme in Nigeria.</p> <p>Few (if any) studies in Nigeria till date have focused on the perception or experience of HIV positive mothers accessing PMTCT services.</p> <p>However, the findings from studies conducted in other countries on this topic have been highlighted in the manuscript.</p> <p>Corrections have been made to the title of the section on "materials and methods" to read "Method".</p> <p>In addition, the sections on sampling methodology and method of data collection have been titled: "procedures and participants" in line with the recommendation of the reviewer.</p> <p>The sample size for the study was not determined in advance as this was a qualitative study. The research focused on a sensitive topic and was conducted among a highly vulnerable population (mothers living with HIV/AIDS). Hence it was not possible to determine in advance the number of mothers that would be recruited into the study from the different health facilities.</p> <p>The mothers were recruited from health facilities which had support group meetings for HIV positive mothers, paediatric HIV/AIDS Clinic or early infant</p>
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		<p>diagnosis clinics. These were sites where the HIV positive mothers gathered together on a regular basis in a relaxed atmosphere to access care and support for themselves or for their children. Thus making such sites suitable avenues for recruiting these mothers into the study.</p> <p>At health facilities where more than six HIV positive mothers were gathered at a time, data was collected from the mothers through focus group discussions. At centres, where less than six HIV positive mothers were present at a time, data was collected from the mothers through in-depth interviews.</p> <p>The focus group discussions and in-depth interview sessions were conducted repeatedly across five different health facilities with different groups until there was no new information about the patients' perception and experience of the PMTCT programme across the different health facilities.</p>
<u>Optional/General</u> comments	The study has a rich information to be organized.	