



SDI Review Form 1.6

Journal Name:	International STD Research & Reviews
Manuscript Number:	MS: 2013_ISRR_5867
Title of the Manuscript:	Scaling Up Community ART Groups in Mozambique
Type of the 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.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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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)
<u>Compulsory</u> REVISION comments	This paper is on a topic of great importance and presents a novel and successful way in which Community ART Groups have been used to improve adherence in Mozambique. The subject matter is both interesting and relevant. However, this paper cannot be accepted in its current form without major revisions. I will review these in the following sections. 1) The paper should undergo major revisions and be re-submitted as a "brief report" or a "report from the field." Much of the data presented has already been published in the scholarly literature by these authors and these papers are, in fact, cited in this manuscript. To date, there are no data available on the efficacy of the national scale-up, which happened only recently. The material that is of value in this paper and should be highlighted is the process of forming these CAGs. More detail should be provided on how this was done, who lead their development, what worked in the program, what didn't work, how conflicts were resolved, what happened if a member of the CAG became ill, etc. The already published data from this group shows the CAGs to be effective. What is now needed is a presentation of the "how of things", i.e. a process analysis. This was very likely done by the authors as part of the process of working with the Ministry to scale up the program nationally. This would be very valuable information to share in this paper.	The very relevant question of the "how" will be answered by the results of a qualitative study, which is in the phase of write-up. In the present paper we describe the different steps from initial local response to provincial and later on national roll out. The Mozambican Ministry of Health adopted their policy to an emerging innovative approach which worked in the context of their country.



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	2) The introduction and background of the paper are too long and could be cut to a single paragraph. This paragraph could state the global problem with ART adherence and health worker shortages (which should have references added on the health worker shortage). This could be followed by information on AIDS and ART in Mozambique. The authors could then cite their published work on the topic and then talk about the need for process analysis/data in order to scale up. The data on the situation in Tete should be included under a “setting” section. 3) There is some need for a methods section here. Clearly, the authors have collected qualitative data focusing on both process and outcomes. This is valid data, but the reader needs more of an explanation of how this information was collected, by whom, etc. 4) The results section needs to be modified and shorten. It could focus on the three phases of the CAGs (pilot, Tete, national) and discuss some of the topics mentioned in point 1 of this review. 5) With the shift in focus of the paper mentioned above, the conclusion could then state what was learned in analysing the process of the CAGs formation and implementation. These are major revisions and would change the focus of the paper. In its current version, the paper seems unfocused and presents some data from this group that has already been published. Very likely, the audience of this journal would be interested in knowing about how these CAGs worked in case they would like to try and replicate this intervention in other settings.	The introduction and background were merged, as recommended, and the text is more concise. In the abstract we describe the method separately. In the full text we mention in the last paragraph of the introduction: <i>In this paper we describe the stepwise implementation of CAG in Mozambique, and how lessons learnt from an innovative local small-scale intervention were exported to the national level, to become a national strategy. The program data on CAG were obtained through a chart review and routine data-collection.</i> The result section was reworked with mentioning of the three phases proposed by the reviewer. The discussion chapter starts with the impact of CAG, as also proposed by the first reviewer.
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<u>Minor</u> REVISION comments	At times, the style of the writing in this paper is too informal (i.e. in the background section phrasing such as “nothing short of spectacular”). The paper should be edited to convey these concepts in a more scholarly fashion.	The writing style was reviewed, and in general the paper is more concise now.
<u>Optional/General</u> comments		