



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2014_IJTDH_13296
Title of the Manuscript:	The effectiveness of de-stigmatizing interventions
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.

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

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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	Would it be possible to explain more evidently already in the introduction that the three different interventions occur in the three separate districts, and not all interventions in all districts, to clarify that fact early?	Revised accordingly.
	L.80: the authors write that no information was given to the health providers in Tepsatit, why is that? May that also have been an issue affecting the absence of effects on stigma in that district?	No information was given to the health officers in Tepsatit because we would like to see whether displaying leprosy information in leprosy campaigns week that Tepsatit had conducted on yearly bases was enough to change leprosy related stigma among health workers. We cannot be sure about the effect of not providing this information. However, it may not have affected the absence of effects on stigma in Tepsatit, because we did not find stigma changed among health workers in Nhung Bua Daeng either, where leprosy information was provided directly to health officers. This proves that only information alone either in the form of information displayed or in the form of information provision, does not change stigma.
	At some point I was confused as to whether the community sample also included persons with leprosy or not, but this point is clarified on line 288. However, on line 263 the authors write that there was reduced internalized stigma in people affected by leprosy. Is that a result of the qualitative assessment (reference nr 17?) or does that include people indirectly affected, such as relatives?	On line 263 of the original manuscript, it is the result of qualitative assessment presented in another paper (also submitted to this journal) not reference nr 17. The statement about internalised stigma only concerns people who have had leprosy themselves, not their relatives.



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	L. 289: does the qualitative assessment refer to reference nr 17 in the reference list?	On line 289 of the original manuscript, it is the result of qualitative assessment presented in another paper (also submitted to this journal) not reference nr 17.
<u>Minor</u> REVISION comments	The spelling of the three different districts is not consequent throughout the paper and the figures (e.g. Bantan, Ban Tan).	Revised accordingly.
<u>Optional/General</u> comments	This is an interesting paper using different approaches to address stigma towards persons with leprosy and showing differences in their effects, although it is difficult to draw any conclusions as to the mechanisms behind the effects, only hypotheses can be put forward for further testing. Nevertheless, as stated by the authors, sustained efforts are needed considering the high levels of stigma in the community. Similarly, studies about stigma and mental health show that personal contact with a person with mental health issues is the most powerful approach, and that attitudes are difficult to change through knowledge only, as shown in the present study. Ethical approval granted, informed consent collected. None that can be seen.	Thank you very much for your critical comments.