



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2013_IJTDH_6468
Title of the Manuscript:	STIGMA AND HIV/AIDS IN SOUTH AFRICA: A CAUTIONARY TALE OF RESPECT AND ADHERENCE
Type of the Article	Review

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)
Compulsory REVISION comments	I found the following issues not fully addressed: ➤ The sampling technique used is not clear (If the researcher used random sampling-how was this done and why?). ➤ Furthermore, the researcher did not motivate why two samples (rural and urban) were chosen. I suggest the researcher must also attempt to compare the results from the rural and urban sample since HIV related stigma varies across settings. ➤ The tool used to collect data was not adequately explained (was it an approved stigma scale? did the researcher develop his own scale/questions?). If the researcher developed his own questions, were the questions tested for validity and reliability. This will assist the researcher to motivate why his study is significant. ➤ The significance of the study was not explained. If the study is confirming the existing findings, is it worth to publish. The researcher needs to motivate the significance of his study.	We have outlined more carefully how the sampling was carried out for the exit interviews as well as the in-depth ones, pointing out that randomisation occurred for the entire project of which this is a part. We note that the samples were representative of urban and rural South Africa for the whole project. We found no differences between urban and rural and have noted that. We have inserted in a much longer method section that we developed our own questions around community living and health care experiences. This was carried out before the WHO guidelines on HIV stigma were published. This is noted.



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<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments	Most likely, given that the researcher is dealing with people with HIV, there is need for the researcher to explain the nature of the tools he utilised, thus, whether, the questions did not affect or cause harm to the participants. If the data collection tools were ethically approved by a research committee then the researcher must indicate that.	We have fully outlined the protections provided for clinics, providers and patients both in the text and also in consent and ethical statements as required by the journal.