

BMJ -  
Decision on  
Manuscript  
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BMJ-2018-0  
48110.R1

**Body:**

08-Apr-2019

re: BMJ-2018-048110.R1 entitled "Increasing male engagement in Prevention of Vertical Transmission of HIV: What works in sub-Saharan Africa?"

Dear Dr. Aliyu,

Please accept my apologies for the delay in getting back to you about your revised paper for BMJ, above. As I noted in an informal email, I have discussed the revision with Paul Simpson, International Audience Editor, and we agreed that the revisions addressed the reviewers' concerns well, and we anticipate progressing forwards with the paper, with the anticipation of publishing.

However, before we can formally accept, we'd like to work with you to make some small improvements to the writeup of the article so it better fits with BMJ style for this series as well as helping to tighten the narrative somewhat.

I've directly edited and commented on a copy of the submitted (revised) file using Word track changes and comment balloons and it would be fantastic if the authors could look at those specific editing suggestions, as well as the comments below, and try to work these into a final version which we can then hopefully accept.

As well as the comments/changes on the attached, we had some general points:

\*We noticed that in a number of the places in the writeup the style "XX et al show that...." is used to present findings from published work - although numeric callouts (superscript numerals) are used to refer to all reference citations, the narrative style is a bit emblematic of journals which use a first author-date citation callout system, which the BMJ doesn't use. Per our style it would be better to rephrase these examples so that the author naming convention isn't used. I've highlighted some examples on the attached but not done it all the way through.

\*Previously, one reviewer felt that the article was a bit too bold in its claims about the effectiveness that interventions to promote male engagement will have. In places the revision has addressed this, but not completely - for example, the revision still implies in a couple of places that male engagement will achieve the end of VT. However, that's very much implicit and an assumption of the piece, whereas the authors' summary of the evidence makes it clear we can't conclude this at present, nor does it seem plausible to imagine this could be the case (presumably, women conceiving but not in a stable partnership could still lead to transmissions, and even if all women are helped by male engagement to be on effective ART, there will still be some transmissions). So it needs to be a bit clearer what the authors are saying the goals are for male engagement, if possible.

\*As a related point, Paul commented that it would be helpful somewhere in the piece to try to convey the likely sense of scale regarding the impact of interventions - rather than simply knowing a particular intervention is "statistically significantly" associated with behaviour change or reduced transmissions, but what the level of this is. This doesn't need to be done all the way through the article but some kind of indication somewhere in the text would be helpful.

Please try to keep the revisions within the word count of 1800-2000 words. It would be fantastic if authors could submit a clean, as well as tracked version, and ideally within the next two weeks if at all possible (ie by 22 April). Do let me know if you need more time.

I'm happy to discuss any revisions via email.

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I hope you will find the comments useful. Please don't hesitate to contact me if you wish to discuss this further.

Yours sincerely

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**Date Sent:** 08-Apr-2019

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