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## **REVIEWER'S REPORT**

### Manuscript No.: IJAR-52448

Date: 24/06/2025

Poor

ISSN: 2320-5407

Fair

Good

 $\checkmark$ 

 $\checkmark$ 

**Title:** "Prevalence of Low Uptake of Prescribed Dosage of Adjunct Therapies among People Living with HIV/AIDS in Bugesera District, Rwanda"

Rating

Clarity

Originality

Significance

Techn. Ouality

Excel.

 $\checkmark$ 

 $\checkmark$ 

Accept as it is	
Accept after minor revision	
Accept after major revision	
Do not accept ( <i>Reasons below</i> )	

Date: 25/06/2025

# **Reviewer's Comment for Publication:**

Reviewer Name: Dr. S. K. Nath

The research underscores a significant challenge in HIV care in Rwanda—the low adherence to prescribed adjunct therapies among PLWHAs, particularly among males. The findings emphasize the critical role of knowledge, stigma, gender, and healthcare access in influencing treatment adherence. The study advocates for targeted education, improved healthcare access, stigma reduction, and gender-sensitive approaches to improve adherence rates. It calls for further research and multisectoral strategies, including public-private partnerships, to enhance health outcomes and combat antimicrobial resistance (AMR).

## **Reviewer's Comment / Report**

#### Strengths:

- 1. **Mixed-Methods Approach:** Combines quantitative surveys with qualitative interviews, providing comprehensive insights into both statistical trends and personal experiences.
- 2. **Sample Size and Sampling:** Utilized Slovin's formula to determine an appropriate sample size from a sizable population (926 PLWHAs), enhancing the reliability of the findings.
- 3. Focus on a Critical Issue: Addresses an important aspect of HIV management—adherence to adjunct therapies—which significantly affects treatment outcomes and disease control.
- 4. Gender Disaggregated Data: Highlights gender differences in health behaviors, facilitating gendersensitive interventions.
- 5. **Contextual Relevance:** Focuses on a specific region in Rwanda, providing valuable localized data to inform health policies.

#### Weaknesses:

- 1. Limited Generalizability: The study focuses on a single hospital in Rwanda, which may limit the applicability of findings to broader or different contexts.
- 2. **Potential Bias in Self-Reporting:** Reliance on self-reported adherence data might be subject to social desirability bias, leading to overestimation of compliance.
- 3. In-depth Analysis of Underlying Causes: Although factors affecting adherence are identified, the study could benefit from a deeper exploration of cultural, socio-economic, and systemic barriers.
- 4. Limited Longitudinal Perspective: Being cross-sectional, it captures a snapshot in time, and cannot assess changes over time or causality.
- 5. **Intervention Strategies Not Tested:** The study identifies the problem but does not test or propose specific intervention models for improving adherence.