### **Peer Review Report**

# Review Report on How mHealth can contribute to improving the continuum of care: A scoping review approach to the case of human immunodeficiency virus in sub-Saharan Africa.

Review, Public Health Rev

Reviewer: Maoyi Tian Submitted on: 12 Apr 2022 Article DOI: 10.3389/phrs.2022.1604557

#### **EVALUATION**

#### Q1 Please summarize the main theme of the review.

This review seeks to determine how mHealth interventions improve the continuum of care for HIV treatment in Sub-Saharan Africa. The manuscript is well-written, but there are a few comments for the authors to consider.

#### Q 2 Please highlight the limitations and strengths.

Strength - this study conducted a landscaping exercise to understand the role of mHealth of providing HIV treatment in Sub-Saharan Africa, from the academic literature and the grey literature.

Limitation – despite this is designed as a compressive scoping review, the current results and discussions are loose and not tight enough. In particular the conclusions draw from the studies are in fact the authors' recommendations, that may mislead the audience in interpreting the study results.

## **Q 3** Please provide your detailed review report to the authors, structured in major and minor comments.

#### Minor comments

Line 15 - please do not use 95-95-95 in the abstract - very difficult for audience who not in the field to understand. Please also explain what does tripe 95 mean in the introduction.

Line 175/177/179/181 and others - the word "selected" is not appropriate, I guess the authors may want to say "identified"

Major comments

Line 31 - After reading the entire manuscript, the current conclusions the authors made in the abstract are more like recommendations.

Line 85–90 – the objectives of this study are three folds. I understand objective 1 is addressed by this study, but I don't understand how objective 2 and 3 are addressed in this study? what are the methodologies to develop key priorities and identify the key challenges? I don't think the scoping review itself will serve for that purpose. The scoping review will help to landscape (as the authors already addressed in objective 1) and identify the gaps, but I think more data are needed to actually support objective 2 and 3.

Line 115 - quantitative study includes cohort study and RCT

Line 116 - does the RCT include cluster RCT or step-wedged RCT? and why only include randomized controlled trial? how about quasi-experimental studies? Costing-study sounds a bit odd, I guess the authors meant health economics studies?

Line 117 – mHealth is not well defined here. Later in this paragraph, the authors said any articles promoting the use of tablets, social media etc are excluded. The broader definition of mHealth includes the use of tablet and smartphone equipped with wireless technologies.

Line 120 - please justify the reason to include French language. please also justify the selection of the starting date, i.e. Jan 2, 2017.

Line 133 - the authors may consider to include all detailed search strategies in an appendix

Line 153 - was still only one reviewer to conduct the full text review and data extraction? I concerned the rigor of the review process.

Figure 1, Table 1-5 - these are results, not methods. Because table 1-5 are very long, the authors may consider to include those tables in an appendix.

Results – the current structure of the results are very difficult to follow without any figures or proper tables. The authors may consider to include figures or other appropriate formats to better illustrate the current results. The authors also need to consider a risk assessment of the current trials. The interpretation of the study results really depends on the quality of the trials. The study included several qualitative studies, what is the main findings from those qualitative studies? The authors presented patient-reported outcomes on SMS-based intervention, it does sound to me as the results related to the functionality of the SMS intervention. The authors may consider to retitle the subheading of this section. In addition, the authors excluded all technologies that are not easily accessible nor affordable in the methods section. But in the results, there presented studies using mobile cash transfer, iPhone biometric functions. It does sound to me as a technology that perhaps not affordable. Again, the authors need to have very clear definition in the methods what is included or excluded.

Discussion and conclusion – the authors may consider to discuss health equity associated with the mHealth intervention, would the digital divide cause health equity gaps in particular given there are gaps in terms of the number of studies between WCA and ESA. The authors may also consider to discuss focus on the results from the study, i.e the effectiveness/cost-effectiveness of the intervention, the functionality of mHealth intervention as well as the limitation of the current interventions (e.g. small-scale and the quality of the current studies, how generalizable are the current study results). The recommendations that authors provided (i.e. public-private partnership) should be clearly differentiate from the study conclusion. I suggest the authors to have a separate subheading of "recommendations".

#### PLEASE COMMENT

**Q4** Does the reference list cover the relevant literature adequately and in an unbiased manner?

Yes

Q 5 Does this manuscript refer only to published data? (unpublished data is not allowed for Reviews)

Yes.

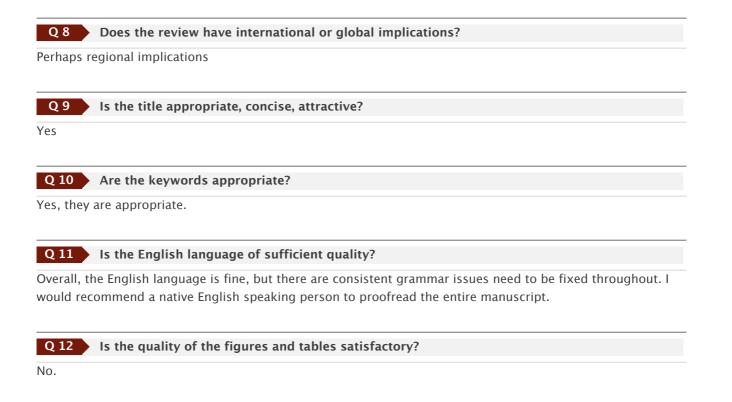


Does the manuscript cover the issue in an objective and analytical manner

Yes.



No.



QUALITY ASSESSMENT					
Q 13	Quality of generalization and summary				
Q 14	Significance to the field	-			
Q 15	Interest to a general audience	-			
Q 16	Quality of the writing				
REVISION LEVEL					
Q 17	Please take a decision based on your comm	ents:			

Major revisions.