Reviewer’s report

Title: Waiting for attention and care: Birthing accounts of women in rural Tanzania who experienced obstetric fistulae as an outcome of labour

Version: 2 Date: 13 July 2011

Reviewer: Janet JM Turan

Reviewer’s report:

This manuscript has been improved in this revision and for the most part the reviewers’ concerns seem to have been addressed adequately. There is now better description of the quantitative survey methodology, although a few problematic issues remain (see below). It is still disappointing that the authors did not really go much further than very simple descriptive statistics with their quantitative data, but perhaps this is enough to support their “dominant” qualitative findings. The manuscript now successfully strongly highlights the important delays at the health care facility leading to fistulas (as this is relatively new and interesting). I understand and agree with the authors’ desire to also cover the earlier delays at the home and community levels as well, as they convincingly argue that the three levels of delay are strongly inter-related. The English language is improved although some minor editing is still required throughout. Specific comments are given below.

1. Major Compulsory Revisions

1. Page 10-11, Methods, quantitative study: It would be helpful if the authors specify the specific time periods for a) the qualitative and b) the quantitative data collection, separately. Otherwise it is difficult to evaluate statements saying that all women on the wards “during the study period” were included in the samples.

2. Page 12, Methods, quantitative study: The appropriateness of the sample size calculation is still unclear. It now looks like a one-sided calculation (to the lower limit of the confidence interval) was used, but I’m not sure of the rationale for this. A two-sided calculation gives a significantly larger needed sample size. Also what is the justification for the 7% precision? I would either suggest that the authors give a rationale and details for using this type of one-sided calculation (why would you assume that the proportion could only be less than .41, not more?), or remove this sample size calculation and just state that all women on the wards during the quantitative data collection period of X-X were asked to participate.

3. Page 12, Methods, Data Analysis, Quantitative Study: The authors should also describe statistical tests they used to test associations between early vs. late arrival at the health facility and socio-demographic characteristics in the revised manuscript. Were other socio-demographic characteristics (besides education and living with husband) also tested and found not to have statistically significant associations?
2. Minor Essential Revisions

1. Page 2, Abstract, Methods: I would suggest removing the last sentence in Methods: “The women who consented and who met the specific inclusion criteria set for each of the study parts were included.” It does not say anything specific and doesn’t really belong in the abstract.

2. Page 3, Abstract, Results: In the last sentence the word “demonstrated” seems too strong. “Revealed” or “suggested” would be more appropriate.

3. Page 13, Ethical considerations: Was the informed consent obtained from women written (signed) or verbal?

4. Page 13, Results: It would be clearer if the four categories found in the data (given in the table) are also named in the text.

5. Page 19, Results: The term “the trying stages” is not recognized. Could be replaced with “the birth process”.

6. Page 24, Discussion: Instead of “the paternal side” the term “the paternal family” would be clearer.

7. Page 24, Discussion: Socio-economic status (SES) includes education and literacy, as well as economic factors. It sounds like the authors are referring to “lack of economic empowerment” in the first sentence, and if so, the sentence should be clarified.

3. Discretionary Revisions

1. Page 7, Study Aim: I would recommend revising the study aim sentence to read "The aim of this study was to use both qualitative and quantitative research methods to explore the birthing experiences of women affected by obstetric fistula and barriers to access adequate quality of care during labour and delivery.

2. Page 5, Introduction, Maternal Mortality: It would be better if this whole section could be moved up to follow the first paragraph of the Introduction, as the topic of levels and trends in MMR fits best there. In addition, the data on MMR on sub-Saharan Africa in the initial paragraph should be moved to that Maternal Mortality section.

3. Page 14, Jemimah’s story: The first paragraph is interpretation not results. I would recommend placing the thoughts represented in that paragraph at the end of the story or in the Discussion.

4. Page 29, Conclusion: I would recommend clarifying the statement “we argue that the three delays are closely connected and that delays after arrival at health facility fundamentally undermines trust and causes delays in the decision to seek professional care.” by adding “in the future” to the end of the sentence.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable
Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare that I have no competing interests.