Reviewer's report

Title: Community Birth Attendants: Who are they and what do they do?

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Reviewer: Rafat Jan

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My comments

1. Is the question posed by the authors well defined?
   Ans: The objective is well defined and clear.

2. Are the methods appropriate and well described?
   Ans: Method described eloquently however, term ‘home based attendant’ for sample is confusing. Already traditional birth attendant and skilled birth attendant are in used and understandable, then what is the need for introducing a new term? Authors themselves mentioned in the manuscript ‘traditional home birth attendant several times’ so they must use term traditional birth attendant because, authors mentioned that majority of HBAs did one month training therefore, they sound like TBAs in majority of countries.

   Further, family members are also counted as birth attendant? Usually, they are not counted as TBA or birth attendants. Finally, I am not sure why authors selected Indian Auxiliary Midwives with this group?

   Location: The sites are either province or district(s) in various countries. Therefore, like Indian locations where 2 sites are mentioned in the manuscript, rest of countries sites need to be mentioned. This will make location congruent in method and data analysis section.

3. Are the data sound?
   Ans: It is appropriate to separate the data presentation of Indian Auxiliary Midwives, otherwise matching. Some points to be consider a) Data needs to be clarified in terms of district(s) or actual location. This data is not representing the whole country so in brackets with specific countries the authors must mention the name of sites; b) In table one the reported data about “own bicycle, or own motorbike’ is that mean own or usage by the birth attendants. These two are different things. Any person in family can own these vehicles but not necessarily use by birth attendants.

4. Does the manuscript adhere to the relevant standards for reporting and data
Ans: Yes, data reporting maintained the relevant standards but surprisingly, one central research office in the country which is not the data collection site has the repository center. In my opinion, that is the great limitations of development for scientific merit research units in the developing world.

5. Are the discussion and conclusions well balanced and adequately supported by the data?

Ans: Authors have described discussion section eloquently in line with data. Some important points that have implications in the developing countries are missed from this discussion section. I have listed below:

1) Despite the results are clear and evidences have shown that more literate and trained person has better pregnancy and birth outcomes for example, Indian auxiliary midwives, this has not been discussed or advocated in discussion section.

2) Second, the evidences from countries have proven skilled midwifery care reduced maternal and neonatal mortality and morbidity rates where there is no physician care available. But authors have given all time recommendation that ‘more trainings for TBAs which, authors themselves mentioned proven failure? Then why advocate for such training?

3) Authors have given their verdict that only facility based birth can save mothers and neonates? That is not correct; evidences are available that there is no significant difference in home birth and facility birth. Why calming for such a thing? This is just a blanket statement. Further, without keeping in mind the cultural context, financial implications, and other determinants for facility based delivery, such conclusion may suit for research recommendation section but not suitable in the real world as one medicine for all disease.

4) Finally, I also suggest to authors that they must do research on facility based obstetricians and post graduate medical students, residents as well as other health care providers who are primary care providers during birth cycle in the developing world. The mal-practice, in competent, highly expensive private sector and non-availability of medicine, expensive transport or not available and equipment in public sectors including non-respectful attitude always discourage women to go to facilities. Its time that researchers also conduct research on facility based personal competencies as well as practices before concluding and giving verdict for facility based births.

6. Are limitations of the work clearly stated?

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?

Ans: Yes, they do, they have highlighted references. They need to highlight some more references on TBAs trainings and their outcomes.
8. Do the title and abstract accurately convey what has been found?

Ans: Interestingly, title ‘community birth attendants’ who are they and what they do’ and throughout authors are using home birth attendants. I think many researchers consider that for publication they have to use word ‘community’ despite that it is congruent or not within manuscript.

9. Is the writing acceptable?

Ans: After some modifications that have been highlighted above this manuscript can be acceptable for publishing.