Reviewer's report

Title: Antenatal education and the birthing experience of Brazilian women: a qualitative study

Version: 1 Date: 21 March 2013

Reviewer: Rosemary Mander

Reviewer's report:

Antenatal education and the birthing experience of Brazilian women: a qualitative study
An article whose findings are important to those with closely related research interests
Needs some language corrections before being published

1. Is the question posed by the authors well defined? Yes
2. Are the methods appropriate and well described? Attention to the type of qualitative research is needed.
3. Are the data sound? The weakness of collecting data in the maternity unit needs to be mentioned.
4. Does the manuscript adhere to the relevant standards for reporting and data deposition? Largely
5. Are the discussion and conclusions well balanced and adequately supported by the data? Yes reasonably well-balanced, but claims of autonomy are not well-founded.
6. Are limitations of the work clearly stated? No
7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished? The lit review is reasonably comprehensive. Some omissions are annotated.
8. Do the title and abstract accurately convey what has been found? Yes
9. Is the writing acceptable? Occasional lapses in comprehensibility are annotated.

Discretionary Revisions (D)
Minor Essential Revisions (ME)
Major Compulsory Revisions (MC)

Methods: The type of qualitative study employed should be named and discussed, including details of its theoretical basis. (MC)
The timing of the women's consent to involvement must be stated. (MC)
Study sample: The organisation of the study is not entirely clear. There should be a diagram showing when the various forms of information were given to the experiment group and the control group. (D) I am concerned that information about psychosocial matters, such as locating support, does not seem to have been provided. (D)

Data Collection: the location of the interview matters because (ME), as Anne Oakley has shown, women feel pressured into giving more acceptable responses while they are still in the maternity unit after the birth.

Discussion: It is not safe to assume that all women received comparable support from staff because they were in the same ward. There are many factors which may affect midwife-woman interaction, but they tend to act randomly so are unlikely to have had any systematic effect on the research. (ME)

Conclusion: the possibility that autonomy has been increased by this intervention in such a seriously medicalised setting, as evidenced by the seriously high anaesthetic rate, is unlikely. (MC)

A seriously large majority of the women were administered ‘anaesthesia’. I have to assume, because it is not discussed, that this means a regional anaesthetic being used for analgesic purposes. It sounds like the preparation techniques described merely functioned until the woman was administered the regional anaesthesia. This scenario is not mentioned and I’m not convinced that the intervention really has any effect on factors such as autonomy. (MC)

Were the statements of satisfaction genuine or because the women were still in the maternity unit?

More information about the precise timing of regional anaesthesia would give a better indication of the benefits of this intervention. (ME)

There is no mention of the women having a companion of their choice (or birth partner) while in labour. If such a person was involved, their role (both during pregnancy and during labour) should be discussed. If such a companion was not permitted this should be mentioned. (MC)

What is the reason for the long delay between the publication of the RCT findings (2007) and the preparation of the current paper? Is it possible that this ‘qualitative’ study was not planned as such? This may explain the lack of detail about the qualitative research methods, including the limited information about how the data were analysed. Either way, if more than six years have elapsed since the study, this paper is likely to be past its ‘sell by’ date.

Minor Issues – Not for Publication

Presentation

While the presentation is generally all right, there are some points (indicated on the attached file) where the material is not comprehensible.
Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published