Reviewer’s report

Title: Low coverage and poor quality of postnatal care in rural Hebei, China: a mixed method research

Version: 1 Date: 7 October 2013

Reviewer: Charlotte Warren

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Major compulsory revisions

Low coverage and poor quality of PNC in rural Hebei, China

This paper highlights the both the poor quality of PNC in one rural area in China and the perception by women that care for their newborn after delivery is necessary. This reflects the findings of other studies elsewhere. Please find my comments below.

Recently there has been discussion around the confusion of postpartum and postnatal care – with the former more likely attributed to the mother and the latter to the infant. However, often the postnatal period also makes reference to the mother. It is my understanding that this paper intends to focus purely on the child but it is not always that clear – and really the mother – baby dyad should be seen together by health workers (as is the case of the MCH workers). Perhaps a change in the title to reflect that this is purely about the baby would help. However it would make the paper stronger if there is also discussion around maternal death (and morbidity) in the introduction after the first paragraph – as well as including some data around the mother’s health and access to PNC and quality of those services.

Clarification around the challenge of the taxonomy on postpartum/postnatal/neonatal would also help. The second paragraph talks about PNC and neonatal survival and is slightly confusing.

I recommend reviewing later documents on PNC than the WHO 1998 PNC technical working group - see the 2010 WHO, Technical Consultation on Postpartum and Postnatal Care. Department of Making Pregnancy Safer, 2010 as well as the IMPAC guidelines form 2003.

3rd paragraph says the MoH China set the targets for 3 PNC visits - for mothers or babies or both? – please check throughout that it is explicitly clear we are talking about the baby only or mother and baby.

Again in 4th para is this for mothers/babies/both? It would also be good to highlight/summarize the content of the national policy guidelines – to understand the policy environment for both mothers and babies. Care for the mother is alluded to in para 4 under the Part II qualitative study…. 
Please add a short paragraph describing the cadres/expected to perform PNC - how long their training is and what their training covers and who supervises who – this helps the reader to understand the context.

Methods

The methods description seems fairly straightforward, however I would expect either additional quantitative data from the providers AND/OR more qualitative data from the mothers to really triangulate /or complement the results. If mothers are willing to be visited at home – were they also asked if they would be willing to go to the facility if they understood the reasons why the newborn (and themselves) should be checked (even though it is within the ‘sitting month’ period)

please be explicit in 8th line of paragraph under ‘quantitative study’ heading – that you are looking for a 10% point reduction of anemia prevalence in the infant – and not the mother (though this would also be important)

The heading ‘semi structured interviews’ would be better with a heading of ‘qualitative study’ based on the description in the beginning of the methodology section.

How are you defining poor quality of care? – need a paragraph on how you set about measuring it against what standards or criteria?

Results

Regarding the quantitative data - I think some more in-depth analysis could be done. What is presented is very basic descriptive data – without any exploration as to which type of provider discussed which component of postnatal care.

Especially if the MCH providers are better (or worse) than the rest. – or whether richer/poorer less /more educated women did or did not seek PNC. Were there any questions on maternal health care? - problems with breastfeeding /bleeding /danger signs/ any uptake of family planning?

What was the content of the care the women received at the clinic within the first 42 days? (but after the first week) it would be interesting to see if the quality of care/or counseling reported is any worse or better than that of the home visits.

Table 2 indicates 24% women received any PNC AFTER 42 days but the text in para 2 of the results section says WITHIN 42 days, please clarify.

Part II qualitative study for postnatal home visit.

Heading for third paragraph - there is no mention of any 'quality of care' – just the challenge of poor or no coordination between MCH workers and village doctors. I would like to see more information on this issue.

Apart from the next paragraph – is there any more information on the quality of care? Ned a paragraph or two on the findings for this – if you intend to keep the current title: How are you measuring quality of care? This really needs a description earlier on.

Barriers to postnatal home visits - to whom? Consider revising the title to ‘barriers for MCH workers conducting postnatal home visits’
As part of the larger project - was there any policy analysis done regarding how the free PNC was initiated in Hebei Province? The findings would not be remarkable if nothing had actually happened.

Discussion
The discussion should follow the same order as the results. Require more discussion on the transport barriers an important barrier that gets lost in the fifth paragraph.
More should be discussed around the poor quality of care and what that means. The text does not include sufficient to match the title
Para 5 – some of this information would be helpful in the background to set the context
One paragraph on recommendations before the conclusion: –the conclusion seems to be a summary of everything –this should have one key message that is linked to the title.

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

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that i have no competing interests