Reviewer's report

Title: Neonatal care in rural Karnataka: healthy and harmful practices, the potential for change

Version: 1 Date: 12 January 2009

Reviewer: Asha George

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GENERAL COMMENTS
This is an important effort to discuss a very vital aspect of child survival in India, with potentially rich qualitative data that is linked with quantitative survey data. The analysis could be significantly strengthened in order to make a contribution that goes beyond superficial observations.

MAJOR COMPULSORY REVISIONS
1. Better use of the data collected. For example, differentiating between data collected from focus group discussions versus in depth interviews, both in the text when identifying respondents and analytically as different research dynamics and biases operate. Explanation about whether the quotes used are representative of norms, of changing practices, of outliers etc. Better linkages between quantitative and qualitative data in the text.

2. Better presentation of the socio-cultural context. More information on caste and other social relations that define the study population. Although differences between Lambanis and other respondents are alluded in terms of study outcomes on p. 23 this is not explained. Access to water should be more clearly spelled out, especially considering the statements made by the author about the disregard to hygiene. Clarifications about whether the cowshed is inside the house or not should be made. In other parts of Karnataka, livestock is so precious that animals are kept inside the house.

3. Better presentation of the social context of birthing practices. An explanation of ‘pollution’ is necessary, since international readers may not be familiar with the socio-religious beliefs that define it.

4. The paragraph regarding TBAs on page 11 is superficial and does not reflect relevant analysis on the social position and delivery roles of TBAs in India (see articles by Pinto, Jeffreys, etc). P.13 mentions that grandmothers or mothers are responsible for cleaning under directions from TBAs...this maybe true but it runs contrary to the literature and thus should be explained. Furthermore, the focus on TBAs may not be warranted considering the quantitative data results.

5. Statements that ANMs and Anganwadi workers are “rarely fully utilized”, which are made without generalisable evidence seem to indicate author’s bias rather than research findings. Recommendations that ASHAs should help organise women’s groups are also beyond the scope of this article, as the research
findings did not explore the profile of ASHAs and their actual capacity to undertake such work.

6. The gap in time between the quantitative and qualitative data should not be dismissed as “not serious”. It would have been better if the author explored possible changes over time with her qualitative research to triangulate her results with the quantitative findings, for example by asking how was delivery and newborn care carried out 10 years ago vs. today.

MINOR ESSENTIAL REVISIONS

1. Description in Table 2 of delivery practices do not corroborate with other data presented by the author in the text, e.g. with regards to branding and place of delivery.

2. Reference 23 is inaccurate.

3. Acknowledgement of those who aided data collection (the translation, the interviewers), as well as the women who volunteered their time would be gracious.

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

Quality of written English: Acceptable

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