Reviewer's report

Title: Making stillbirths count, making numbers talk - Issues in data collection for stillbirths

Version: 5 Date: 19 November 2009

Reviewer: Rachel Haws

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The authors did an excellent job responding to the previous reviews, and I am pleased about the inclusion of a more nuanced and well-researched consideration of cultural factors that may be associated with underreporting of stillbirths. After rectification of the minor issues below, the majority of which are simple grammatical/syntax errors, I advise that the paper be accepted for publication.

MINOR ESSENTIAL CHANGES
P 5, first para, parallel verb structure needed: “…and societies COULD gain by reducing a major public health problem.”

Check spaces before endnotes (e.g., add space before [10] on p. 5, before [30, 31] on p. 8).

P. 5, second para, misspelling: “Millennium Development Goals” (second instance).

P. 7, second para, verb agreement: “making data collection problematic if context and culture ARE not sensitively addressed.”

P. 7, third para, verb agreement: “data NEED to be captured”

P. 7: change “data set” to “dataset” for consistency through paper

P. 7, third para, parallel verb structure needed: sentence beginning “We identify what data need[s] to be captured, WE suggest a data[ ]set to cover core needs…” – either begin all clauses with “we,” or drop “we” at beginning of third clause.

P. 9, first para, remove space between “30 %” (should be “30%”).

P. 9, first para in “Identification of Stillbirths” section: “Demographic and Health Surveys” should be a proper noun with “demographic” singular (not “demographicS and health surveys”).

P. 10, second para: you say that “In many cultures a new pregnancy is a celebrated event disclosed early in gestation.” Please change “many” to “some” and/or be more specific about which cultures you mean here, to more effectively make the point that pregnancy disclosure in low-resource settings may carry
substantial risk to the woman. Even in high-resource settings such as the U.S. (though this has become a decision with minimal social penalty and practice is gradually changing), the custom is not to disclose pregnancy publicly before about 12 weeks, when the greatest risk of miscarriage has passed.

P. 11, second para: it would help to have an example of the settings in which there have been changes from an individual blame culture to a system approach to adverse events (or alternatively, a citation).

P. 11, insert comma after “lack of sensitivity to privacy and social, religious and cultural needs,”

P. 11, second to last sentence: change “dietary supplementations” to “dietary supplements” (unless this is proper UK English – it is the first I have seen this term)

P. 12, first and fifth lines: hyphenate “liveborn” to “live-born” for consistency earlier in paper. Check usage throughout paper.

P. 12, last line: delete period after respectively (period after reference [49] is sufficient).

P. 13, first line: change “improvements of care” to “improvements in care”

P. 13, second para, verb agreement: “…the largest proportion of stillbirths ARE antepartum deaths”

P. 22, second para: “setting with low-resources”: “low resources” should not be hyphenated.

P. 23, first para: “user friendliness” should be hyphenated (“user-friendliness”)

P. 23, first line of Summary: capitalize “Demographic and Health Surveys”

**Level of interest:** An article of importance in its field

**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.