Reviewer's report

Title: Social autopsy: INDEPTH Network experiences of utility, process, practices and challenges in investigating causes and contributors to mortality

Version: 1 Date: 11 April 2011

Reviewer: Morten Sodemann

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Major compulsory revisions

1. With a focus on delays in the care seeking process the methods section is not clear enough. It does not describe the exact methodology behind the evaluation of delays: who, when, how, guidelines etc. As it is it would not be possible for somebody else to repeat the study. This could be the source of important bias could

2. It is not explained why a dataset with 434 deaths is compared to a data set with only 40 deaths in a different country. The comparison is not neccesssary and it creates more questions than answers.

3. If the comparison was justified it still lacks a range of confounders and co-variates: disease/mortality pattern, geography, logistics, ethnic diversity, referral policies, transport access, malnutrition rates, chronic vs. acute illnesses, formal/informal user fees, constellation of evaluating physicians. Are the two study areas comparable?

4. By not including information regarding care sought between first and last visit valuable information is lost that could explain behaviour - it is not clear why this information is omitted

5. It is not clear how symptom severity was assessed but it is still a crucial parameter in the analysis. This could also be a source of important bias.

6. Inappropriate decision making (p. 17) – patients and care takers are always rational on their own grounds – was there any effort to explore their gounds? – could it be that the child temporarily improved because of treatment given and then deteriorated?

7. p. 19 first paragraph last sentence important but does not make sense – missing words?

8. Not clear why SA tools for newborns and for maternal deaths are given so much attention in the introduction while no data are presented regarding the tools.

9. Sounds as if more than the two sites reporting results in the present paper have evaluated the tools. What were their experiences – the study being exploratory and pilot testing of the SA tool?

10. The statement regarding the findings from Ghana ("While the results from Ghana compare with most many other studies which link child deaths to poor
care-seeking behaviour”) is incorrect. There are many studies that demonstrate appropriate care seeking in fatal childhood illness.

11. It would be informative with some additional results from the other sites that tested the SA.

12. The discussion should include a discussion of the obvious factors that influence care seeking mentioned under 3.), and the conclusion should be adjusted accordingly. It is not reasonable to conclude as the authors do based on their findings.

**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