Reviewer’s report

Title: Exploring the views and experiences of callers to the PANDA Post and Antenatal Depression Association Australian National Perinatal Depression Helpline: a cross-sectional survey

Version: 1 Date: 29 April 2015

Reviewer: Gill Thomson

Reviewer’s report:

Many thanks for asking me to review this interesting, detailed and well reported study that explores callers experiences of the PANDA helpline service. While I feel this paper is suitable for publication and will be of interest to the readership of the journal, a number of revisions have been suggested as follows:

Major Compulsory Revisions

1. Abstract: Thematic headings should be included in the results section. The conclusion also reads as a re-iteration of some key findings rather than a conclusion to the study? This section should be revised to include practice implications/recommendations.

2. Background:
   a. Paragraph starting on line 77 (p. 3) feels to be out of context, and does not tell us much in terms of what is effective? This section requires further information and should be appropriately integrated in this section (e.g. to substantiate barriers and facilitators information?).
   b. Cindy-Lee Dennis’s (2003) definition of peer support from her concept analysis would be more appropriate to include (page 4, line 101 onwards).
   c. Further details regarding the PANDA service should be provided, e.g. what is the recruitment criteria for volunteers (particularly as it appears that ‘having a mental illness’ does not appear to be a shared characteristic for all?), length/content of training for volunteers, are the counsellors trained professionals, how does the service operate, i.e. do volunteers take the initial call and then decisions are made about who will call them back, i.e. volunteer, counsellor etc.? How many volunteers/counsellors are employed/work in the service?
   d. An overview of the ‘whole study’ should be included (i.e. page 7, line 172-174)

3. Method:
   a. Further details on the recruitment into the evaluation should be included, i.e. were all callers asked whether they would like to participate in evaluation by the volunteers (e.g. at the end of the call), or did you just approach ‘anyone’ who called in this timeframe?
   b. Was a detailed information sheet provided to the participants? Please
include/make reference to such.

c. Were the reminders issued to everyone, or just targeted to non-responders (in which case it is difficult to claim that researchers ‘were not aware of the client’s identity’ (p. 8, line 201). Further clarification is required.

d. Additional details on the survey questions should be included.

4. Results:

a. While the thematic network model works very well, with clear interpretive themes generated, it is usual to describe the ‘global theme’ first and making it explicit how the organising themes network/inter-link together. I would suggest that the presentation of this information is re-organised.

b. While overall the blend of interpretations and quotes is well done, there are occasions where multiple quotes that reflect the same points are included, e.g. p. 16 (line 383-387), p. 18 (line 411-419), p. 18. Checks to prevent against unnecessary repetition of quote material should be undertaken.

c. p. 17, line 391-394. This sentence seems to suggest that it was after all the analysis had been undertaken (although this then lends the question as to which approach was used?), it was decided to just apply Attride-Stirling’s thematic network analysis model - rather than using this approach from the offset? This requires revision.

5. Tables: ‘Missing data’ should be made more explicit across the tables (i.e. tables 1 & 2) as it unclear as to why totals do not add up to 124? Why is the number after the variable not the same as the n value (Table 4)?

Minor Essential Revisions

1. As Attride-Stirling’s model is referred to as ‘thematic network analysis’ – this terminology should be used throughout in order to differentiate it from a general ‘thematic analysis’ method.

2. Information on classification of risk (p. 7) would be better presented in table format – this will make it easier to follow and will prevent against repetition in the text.

3. It is unclear as to why the recommendation regarding increased availability of the helpline service is the only one that is emphasised in this paper (i.e. conclusion), when actually all are valid/important to consider?

4. Can numerical information on callers’ classification of risk be included in the results section (albeit that this won’t apply for those living outside of Victoria)?

5. p.13, line 317 reads as if it also relates to the significance/benefits of anonymity in using a helpline service?

6. p. 13, line 319, some interpretation of the quote material should be incorporated into this sentence.

7. p. 14, line 328-329 –why are words being underlined within the quote?

8. p. 14, line 335-338 – the sub-themes should be re-ordered so they match how they are presented in the text and it should read as ‘parenting advice/support’ not
‘practical advice/support’ in this section.

9. Discussion: Further limitations relate to those who actually use the helpline service, i.e. older, generally well educated, and most within high SES bracket, etc.

Discretionary Revisions:

1. While overall this is a well written paper, there are a few occasions of unnecessary repetition, e.g. p. 3, line 81 onwards, long sentences, p. 21 (line 479-482) and unusual terms, e.g. ‘response fraction’. A final/thorough proof read should be undertaken to address such issues.

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