Reviewer’s report

Title: Factors associated with intended use of a Maternity Waiting Home in Southern Ethiopia: a community-based cross-sectional study

Version: 1 Date: 30 Sep 2017

Reviewer: Kayli Wild

Reviewer's report:

Firstly, the author's response was never attached so it made it difficult to review again. Based on the track changes, I have the following comments.

Some good changes have been made, but I remain concerned that one of the most important findings of the paper is not adequately addressed and don't appear anywhere in the abstract. "Potential Users were more often below 25 years of age, educated, and had higher decision-making power. They were also more likely to have husbands with higher educational levels. Likewise, women who had received health education about danger signs of pregnancy complications, had had one or more previous facility-based childbirths, and envisioned few barriers to staying at a MWH had higher odds of being a Potential User. On average, these women were relatively wealthy, lived closer to hospitals, and in urban areas" - this indicates that MWHs are likely to be used by women who are more advantaged and able to access hospital care regardless of whether a MWH is in place. The authors have made substantial improvements in suggesting ways in which disadvantaged women can be targeted to use MWHs, but it still fails to take their voices into account. Isn't the data saying that MWHs are not really an appropriate strategy for them and that other strategies might be more appropriate? I feel the authors need to address this, even if it goes against the primary objective of the research to promote MWH use.

It would also be useful to raise a discussion about the risks of MWHs in not meeting the needs of the most disadvantaged women in the community. The study findings are backed up by our research in Timor-Leste, where women who lived within 5km were more likely to use the MWH (Wild et al BWHO paper). This would indicate other important factors are more likely to affect access rather than a MWH and points to other areas for investment (these are outlined in the barriers in the study in Ethiopia and mirrors barriers in our research in Timor - Wild Soc Sci Med paper). So the question becomes not how to make women use MWHs when it is not useful for them, but what does the data suggest would be better strategies that would meet their needs in accessing life-saving emergency obstetric care.

Please take out the following comment as it is not true "Similarly, Timor-Leste scaled up MWHs to the national level without considering literature nor local context." (those who supported the policy used selective reports and aspects of the Timorese context such are remoteness to back up their policy decisions, rather than a comprehensive analysis of the evidence - actually true for
most policy-making and why it's so important for researchers to give a balanced argument when discussing their own findings).

For the following could also reference Timor (Wild Soc Sci Med) as this was a major finding for us too "This is in line with several, mostly qualitative studies, which found that complications during previous deliveries may make women aware of the dangers of childbirth and the benefits of a skilled birth attendant."

In summary - the findings in this research are very important and add weight to the limitations of MWHs for the very remote and marginalised women they intend to target. This needs to be added to the abstract. Given the renewed focus on this approach in Ethiopia and the substantial investment it involves at the expense of other strategies, a more nuanced discussion of the limitations is needed.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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