Author’s response to reviews

Title: Is the place of birth related to the mother’s satisfaction with childbirth? A cross-sectional study in a rural district of the Lao People’s Democratic Republic (Lao PDR)

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<Revised version title>

Is the place of birth related to the mother’s satisfaction with childbirth? A cross-sectional study in a rural district of the Lao People’s Democratic Republic (Lao PDR)

Authors:
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Author’s response to reviews

Dear reviewers,

We are grateful to the reviewers for their comments. We have revised our manuscript according to the comments. Please see a point-by-point response to the comments below. In the revised manuscript, all the changes we have made are indicated with tracked changes.

Sincerely yours,

Tomomi Takayama

Response to comments from Jeanine Young (Reviewer 1)

1. This is an interesting and relevant study involving a shift in birthing practices from home to hospital facilities in a developing country of Laos with the long term aim being a reduction in maternal and infant morbidity and mortality. The study aim was clearly articulated. The cross sectional study design used was appropriate to the research questions and study aim. Data collection considered language and cultural capacity of mothers to participate with recruitment facilitated by native speaker of the language, and was ethically approved. Statistical analyses and linear regression models appear to be appropriate for the data collected and research questions posed. Key findings were discussed within the limits of the tools and data collection methods used.
Thank you for the reviews and comments.

2. Please use term 'births' rather than deliveries. The language used should focus on women who birth their babies, rather than health professional who 'deliver' them, now regarded in the midwifery literature as an outdated paternalistic, medical paradigm. To have her baby delivered to her means that a mother is the recipient of the action rather than the agent of action.

Thank you very much for the recommendation. In the revised manuscript we have changed “deliveries” into “births” wherever appropriate.

3. The key finding that maternal satisfaction with birth was higher for facility based birth compared to home based births warrants some caution and should be placed in context of a developing country with high maternal and infant mortality and morbidity. Although this was done well in the discussion, this should also be contextualized in the abstract.

We have added the following sentence in the abstract and conclusion part of the main text.

(Line 57-59) (Line 400-402)

Facility-based birth was significantly associated with a higher level of satisfaction with childbirth among the mothers in the study district where maternal and neonatal mortalities are relatively high.

4. In the discussion it was not clear as to the factors associated with this satisfaction (as outlined in the study limitations and interpretation) and the point could be made that this is an area for future research.

We have described and the future research area in the discussion part as follows.

(Line 357-363)

In the present study, other factors that were positively related to satisfaction with childbirth were; 1) absence of pregnancy complication and 2) family members decision on delivery place. However, the present study could not identify the association because this study did not adjust for these confounding variables. To enhance the mother’s satisfaction with childbirth in developing countries, future studies are recommended to explore the factors that are associated with the satisfaction with childbirth in consideration of high maternal and infant mortality and morbidity.

Response to comments from Louise Brough (Reviewer 2)
1. This study investigates if mothers satisfaction with childbirth is associated with place of delivery in Lao PDR.

Introduction

In the discussion there is mention of previous Lao studies investigating hospital delivery and satisfaction at birth. It would be better to put this information in the introduction and it shows what previous work has been done in Lao.

Thank you very much for the review and precious comments. We have put one paragraph in the background section to show what previous work has been done in Lao PDR.

(Line105-111)

Previous studies conducted in Lao PDR investigated mother’s satisfaction with delivery care and satisfaction with services provided to women who gave birth at a health facility [24, 25]. These studies described that most of the mothers who gave birth at a health facility were generally satisfied, except with the accessibility to health facilities and cleanliness. Other Lao studies have qualitatively explored why Lao women choose to give birth at home. The reasons identified were convenience, low birth costs, comfort during childbirth, and traditional practices [26, 27].

2. Methods

The survey was translated into Lao and then back translated into English, which is excellent. However, the authors note that the participant did not speak Lao, then the survey was translated verbally into an ethnic language. This reduces the validity of the study as it has the potential to introduce translation errors. Why was the survey not also translated (and back translated) into other ethnic languages? How many women did this affect?

The reason is that the Makong/Tri ethnic group has no written language system [1]. Therefore, we basically did the interview in the Lao language and gave support in the translation in some parts where respondents did not understand. We did not count the correct number of the mothers who were affected. However, it is highly probable that the mothers who belong to the ethnic group and did not receive primary education were affected, and the percentage was 56% in this study.


We added the explanation in the method part.

(Line 188-190)

The questionnaire translated to ethnic language involving SWCh was not prepared for this study because the ethnic groups of the study participants do not have written language system [31].
3. The original SWCh has 7 questions - but on analysis of the present data this was reduced to 5. Has this been seen in other studies. If you are not using the full 7 Qs you are not using the validated tool. You need to discuss this as a limitation.

In the revised manuscript, we have discussed this as a limitation.

(Line 384-389)

Second, the present study used the five-item scale that has not been used in previous studies. The researcher had to eliminate the two items from the original, seven-item SWCh because to keep the original single factor model and to increase the reliability of the Cronbach’s alpha. However, the five-item scale used in the present study was ensured construct validity, and the main findings would not be changed even if the original seven-item scale had been used in the present study.

4. Results

Very few participants were referred from home to the hospital during birth. Is this normal, are women with expected complications advised to deliver at hospital. Or is this because most of the women this happened to not included in the study, this would mean these few are not representative and should be removed. Either remove or make it clear how these women coded, as hospital or home delivery?

We have removed the three participants who were referred from home to hospital during birth and have reanalyzed the data. We have mentioned this exclusion in the Methods section and presented the result of the reanalysis in the revised manuscript.

(Line 153-155)

Three mothers who referred from home to hospital during birth were also excluded because the referrals have a possibility to influence on mother’s satisfaction with childbirth [29].

5. Discussion

Make it clear how the previous Lao studies are different to current study.

We added the explanation in discussion part.

(Line 373-376)

Previous studies in Lao PDR explored the satisfaction with maternal care services in health facilities. This study is new in that it includes hypothesis-based analysis, including not only the mothers who gave birth at a health facility but also the mothers who gave birth at home.
6. More discussion of limitations of methods required (see above).

We have discussed the limitation in method part as No.3.

To reviewers

Thank you very much for your review and precious comments, indeed.

Sincerely,

Tomomi Takayama

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