Reviewer’s report

Title: Listening to women's voices: the experience of giving birth with paramedic care in Queensland, Australia

Version: 1 Date: 12 Jul 2019

Reviewer: Rachel Rowe

Reviewer's report:

Thank you for sending me this revised paper to review. I appreciate that the authors have made efforts to address my comments, but it is disappointing that their responses were very brief, without detailed explanation of exactly what changes they had made. I have reviewed the revised track changes manuscript carefully. While the revisions go some way to addressing my original concerns, and the paper is improved, there are some areas where the authors do not appear to have answered my questions or fully taken on board my comments. In addition their revisions have brought more information to light about the aims of this study which means that further changes are required.

My detailed comments are as follows:

1. Title:
   i. The authors have now clarified that this study was actually investigating the experiences of women who had an unplanned hospital birth with paramedics in attendance. I think the title should be revised to make this clear, e.g. "Women's experience of unplanned out of hospital birth in paramedic care in Queensland, Australia". Consideration should also be given to being more explicit in the title about the focus on women's decision-making about when to access care (see below)

2. Abstract:
   i. Despite significant changes to the background in the main body of the paper the abstract has been changed very little. It should be made clear here that this study focused on women having an unplanned out of hospital birth with paramedics in attendance. Judging by the background in the abstract this study is about women's perspectives on factors that influence their decision about when to access care, viewed through the lens of women who experienced unplanned out of hospital birth, rather than simply about women's experience of unplanned out of hospital birth. I have addressed this point more fully below.

3. Highlights:
4. Background:

i. This section has been improved by the addition of more contextual information about unplanned hospital birth.

ii. The sentence which begins "The greater majority of unplanned out of hospital births..." does not quite work as currently phrased. The mention of freebirths here is confusing since these are not 'unplanned' out of hospital births. I recommend removing this to a separate sentence. It needs to be clear that the factors such as geographical distance from a maternity unit and low socio-economic status have been identified as being associated with unplanned out of hospital birth.

iii. The authors have added a statement that there is little research evidence on women's experience of unplanned out-of-hospital birth. This is true, but there is some relevant research evidence (I have found two relevant papers and the authors refer to one of these, suggested by reviewer 2, in their discussion). As I said in my previous comments, the relevant evidence in this area needs to be summarised in the background and cited in order to set this study in context and establish the need for this research. It should be made clear, for the reader, what is already known about women's experience of unplanned out of hospital birth.

iv. The authors have also referred to a gap in the evidence on women's perspectives on their decision-making about when to access care when in labour and refer to the influences on women's decisions. This is relevant and important, given the direction of the authors' analysis in this study, but it is a particular slant on the experience of the women in this study. As stated above, the abstract also implies that this is a focus of this study. There is a small body of research in this area, e.g. Cheyne et al, 2013 https://www.magonlinelibrary.com/doi/abs/10.12968/bjom.2007.15.10.27341 which should be summarised and referred to here. I appreciate that this particular focus may not have been an aim of the original study, as it may have emerged from women's narratives, but if it is an important focus of this paper it needs to be made clear at the outset. The paper does not cover all that you might expect to have come out of these interviews, for example there is nothing about the women's experience of being looked after by paramedics. That is fine, because with 22 in depth interviews, you could not expect to summarise everything in one paper, but it is important to say what this paper is focusing on. I would also suggest that the title could be changed slightly to reflect that. The following construction, or similar, might help at the end of the background section for example: "As part of a larger study exploring unplanned out of hospital birth in paramedic care in Queensland, we carried out a study to explore women's experiences. In this paper we report on
findings from that study which relate to women's decision making about accessing care in labour and their subsequent experience of unplanned birth at home."

v. In my previous comments I had suggested that some contextual information about the clinical and service context for the decision-making and experience of the women in this study should be provided. For example, how many women give birth in Queensland, what are their options for birth, where do most women give birth and how many have an unplanned hospital birth? The authors have responded that they have made additions to the background in relation to this, but I can't see any changes in this regard. This is important contextual information which, given the larger study the authors refer to, I suspect they may have ready access to, and it should be added.

vi. The clarification that this study was conducted as part of a larger study investigating unplanned out of hospital birth in paramedic care is welcome and helpful. I am unclear if this is a larger study investigating women's experience, but I suspect that it may have been a project investigating out of hospital birth in paramedic care more broadly. If this is the case this should be made clear and any previous publications from this larger study should be cited here, including a PhD thesis if relevant.

5. Methods:

i. This section is improved. In the opening sentence, and in the first sentence of the section on recruitment, the phrase "in the care of paramedics" needs to be added.

ii. I don't understand the authors' response to my previous comment: "Addition made to discuss location as a variable."

iii. The extra information provided about the interview process is welcome and informative. As previously requested, it would be helpful to have information reported about who carried out the interviews, i.e. which author and what their clinical/academic background is.

iv. The authors have retained the section on 'rigour' unchanged and have not responded to my questions. I am not trying to be difficult, or asking for anything onerous here, just asking for a little more information so that it is clear how the study was conducted. It would be helpful to know at what point in the study process the 'members check' was carried out, i.e. whether this was an extra question at the end of the interview or whether interview transcripts were given to participants at a later date so they could check and add to them later. And perhaps it's confusing to refer to these comments/clarifications form participants as "supplemental findings". It's probably sufficient to state
that further comments and clarifications from participants were incorporated into interview transcripts for analysis.

v. NVivo software needs a reference

vi. The further information provided about the analysis process is welcome, but some sentences are unclear. For example, the sentence which begins "Listening to each audio recording…" does not make sense. I don't understand the sentence "These phenomena provoked a cognitive and emotional connection to some areas of the data, as such an emotional connection impacted how and what narrative sections were represented." The sentence which begins "Maclure (2013,p.228) refers…" is not necessary here (and would need a reference in any case). As I said in my earlier comments it is better to simply explain here what you did in simple clear language.

6. Results:

i. The additions here in relation to parity and in response to other comments are helpful, as is the figure showing the overarching themes and sub-themes.

ii. The sentence which has been changed and now starts "The interview explored the role birth knowledge played in the woman's ability…" is not strictly correct. The interview simply asked women to talk about their experience of childbirth. Perhaps it would be better to say something like "Women's narratives revealed the role birth knowledge played…"

7. Discussion & conclusions

i. In my previous comments I had said that the first sentence of the discussion was not justified by the findings presented in this paper and asked for it to be changed. The authors have responded to say that they have changed the sentence to reflect my comment, but they have simply added/changed three words, which has not changed the overall sense of the sentence.

As I said before, it is not appropriate to say that this study "challenges data that suggests unplanned out of hospital birth predominantly occurs in multigravida women who have precipitate birth or in women who lack antenatal care". Quantitative studies of women who give birth before arrival would be required, and some have been carried out, in order to provide evidence on whether most women in this group are multiparous, have a precipitate birth or lack antenatal care. The data presented here do shed light on women's decision-making in this selected group, who did not appear to fit the 'precipitate birth' or 'lack of antenatal care' picture, but these women are not likely to be representative of all women having an unplanned out of hospital birth. For example, I suspect that many unplanned out of hospital births are not attended by paramedics. As I said before this study is informative, but the authors need to take much more care when considering their results and the implications not to overstate their findings.
ii. The extra information about the key findings of this study is welcome. I am uncomfortable with some of the assertions in the second paragraph, which stray into opinion, e.g. the sentence which begins "These stories highlight the need for professionals..." This should be toned down to ensure that it is rooted in women's narratives.

iii. While the authors have considered their findings in the light of some other evidence, and have cited one other study on women's experience of unplanned out of hospital birth, as in the background they have not given a detailed enough consideration of other research on the same topic. Where does this research fit with that work? Where is it similar? How does it add/differ?

iv. The authors have added a brief section on the limitations of this study, in response to my previous comments. I accept that the results emerge from the narratives of the participants, and do not have an issue with that, but the fact that these women's views are not likely to be representative of all women who have an unplanned out of hospital birth needs to be stated and considered critically.

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.

Yes

Are the conclusions drawn adequately supported by the data shown?
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No

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