Reviewer’s report

Title: Research priorities of women at risk for preterm birth: Findings and a call to action

Version: 0 Date: 27 Sep 2019

Reviewer: Alex Peahl

Reviewer's report:

This article is quite timely given the emphasis on disparities in maternity care seen in the media and among key policymakers on the state and national level. The idea of including women's voices in setting a research agenda through a research justice framework is a novel idea, and ensures questions are not designed in isolation of the community.

My enthusiasm for this article is damped by three key issues:

1. The background fails to adequately account for the needed partnership between patients, community leaders, providers, and researchers. No single stakeholder can address maternity outcomes on their own, and a greater emphasis on collaboration would be helpful for the framing.

2. The methods section does not sufficiently describe the focus group leaders' role in developing research priorities and questions; while the video describes a method of sharing information on preterm birth and pregnancy, the focus group leaders' credentials for providing complex counseling on these topics is not clear. Additionally, how misconceptions were corrected is not addressed in the manuscript.

3. The results section does not employ a specified qualitative framework of analysis, and how the specific themes were selected remains unclear. Perhaps the use of the framework would help with organization of the participant responses and aid in making comparisons.

Background:

The background is well written and logically flows. My main concern is the dismissal of Community Based Participatory Research. CBPR is a well-established framework that is designed to engage key community stakeholders across all levels. While the framework may not have been employed properly across all settings, this does not mean the framework itself is broken. Based on the language describing the RPAC approach, partnership between community experts (i.e. patients/community leaders) and clinical experts (researchers and physicians) does not seem to be as valued; softening of the language or further description of how these stakeholder groups can work together would be helpful.
Preterm birth:

This section is a bit disorganized, and does not acknowledge medical interventions that have shown reduction in preterm birth including birth spacing, 17-hydroxyprogesterone, cervical length screening, and cerclage. While many preterm births are unexplained, we do have some interventions that can impact outcomes.

Methods:

I appreciate the video shared within the methods section- this gives great insight into the approach. Further description of the thematic analysis and qualitative approaches would be helpful. Additional information on the focus group leaders’ methods for providing education and clarification of misconceptions would be helpful.

Results:

Overall, without a background theoretical framework or clearer organization of key themes, I struggle to see the connections and differences between specific communities. More rigorous qualitative analysis using an accepted framework would be helpful for clarifying the data. Additionally, clarification between participant questions and resulting research questions is needed within the text. Separation into main these with subcategories and quotes would be a helpful data presentation.

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

No

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?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

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