Reviewer’s report

Title: Impact of the Urban Reproductive Health Initiative on family planning uptake at facilities in Kenya, Nigeria, and Senegal

Version: 0 Date: 21 Aug 2017

Reviewer: Kelsey Holt

Reviewer’s report:

Review of "Impact of the Urban Reproductive Health Initiative on family planning uptake at facilities in Kenya, Nigeria, and Senegal"

Thank you for providing me with the opportunity to review this submission. In this article, the authors present the results of a pre-post evaluation using facility audits and individual provider interviews to assess the impact of supply side interventions to improve family planning service quality in Nigeria, Kenya, and Senegal. The findings have great relevance for the FP2020 initiative, given that the outcome variables are directly related to the initiative's goals of increasing use of contraception.

With minor revisions, I recommend the manuscript for publication.

Feedback:

1. It is critical that the authors engage with the component of FP2020 related to rights-based service delivery and acknowledge in the Intro and Discussion that any supply side interventions should adhere to principles of voluntary, rights-based family planning service provision, and that comprehensive assessment of impact of supply side interventions should include client-centered, rights-focused measures. For example, I encourage authors to note in the Discussion that assessment of impact should also take into account not just contraceptive use but also include examination of client-centered and rights-based measures such as client assessment of experience with family planning care. For reference, see recent work by the FP2020 initiative related to quality of care in the context of rights based family planning.

2. The justification for fixed effects regression rather than mixed effects is not clear - please elaborate on what variables were included in the model and how that relates to the point authors make about facility improvements being targeted at underserved areas

3. P-values for Tables 3 and 4 should be provided so that readers can gauge the degree of statistical significance

4. More detail on how the findings from Table 3 were translated into the creation of dose scores should be provided, including a description of weighting or justification for no differential weighting of elements if appropriate.
5. Limitations section should make clear that this approach to measuring impact of the intervention does not include a control group and limits causal inference capabilities (not only because of selection bias, which is mentioned, but also confounding by unmeasured covariates that may be associated with both contraceptive uptake and service improvements in a given area)

6. Discussion of promise of the initiative based on these findings should include acknowledgement that the implementation of each component does not always equate with good implementation - e.g., provider training might have influenced uptake but do we really know that this is because training led to higher quality care? What if it was through a different mechanism such an inadvertent training effect leading providers to inappropriately encourage method use to the detriment of voluntarism?

Thank you again for the opportunity to review this submission; I look forward to seeing a revised version of the manuscript.

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.

Yes

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

Yes

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.

I am able to assess the statistics

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable

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