Author’s response to reviews

Title: Neonatal, Infant, and Child Mortality Among Women Exposed to Intimate Partner Violence in East Africa: A Multi-Country Analysis

Authors:

Peter Memiah (pmemiah@ihv.umaryland.edu)
Tristi Bond (tristi.ahmu@gmail.com)
Yvonne Opanga (Yvonne.Opanga@amref.org)
Caroline Kingori (kingori@ohio.edu)
Courtney Cook (ckc18@students.uwf.edu)
Michelle Mwangi (michmwangi18@gmail.com)
Nyawira Gitahi-Kamau (gnyawira@gmail.com)
Deus Bazira (DBazira@ihv.umaryland.edu)
Kevin Owuor (kevinowuor1@gmail.com)

Version: 2 Date: 04 Jun 2019

Author’s response to reviews:

Comments as of May 9th, 2019

Editor Comments:

Comment Action Taken

Significant text overlap between manuscript and previously published papers. Acknowledged this has been updated.

In “Availability of data and material” please state how you obtained data for the analysis. Acknowledged this has been updated

Please remove the copy of the manuscript and the point by point response from the supplementary material. Acknowledged this has been updated
In the abstract, please replace the heading methodology with methods.  Acknowledged this has been updated.

In the main text of the manuscript, please replace introduction with background.  Acknowledged this has been updated.

Please provide a list of abbreviations used in the text.  Acknowledged this has been updated.

Please proofread the text for possible English mistakes.  Acknowledged this has been updated.

Katherine Iverson (Reviewer 1)

Comment  Action Taken

Minor wording issues. Acknowledged this has been updated.

Angela Taft (Reviewer 2)

Comment  Action Taken

Abstract

Consider adding to the end of your final sentence…infants and children in East Africa and the wellbeing and safety of their mothers.  Acknowledged this has been updated.

Methods

P.3 Line 21, you have the Kenya number twice – 2432.  Acknowledged this has been updated.

Unclear how conceptual model was used, mention which SES and other variables you considered distal etc.  Acknowledged this has been updated.

P.5 3rd para, line 44 ‘neonatal’, not ‘meonatal’.  Acknowledged this has been updated.

Explain why you have set BMI at over or under 18. BMI is included as Anthropometric indicator for nutritional status of women (https://dhsprogram.com/data/DHS-Survey-Indicators-Maternal-and-Child-Nutrition.cfm) . This cut off has also been used in other peer reviewed similar studies including. Ezeh et al, Determinants of neonatal mortality in Nigeria:
evidence from the 2008 demographic and health survey; 2014;

Table 3, give total n on top of tables. Acknowledged this has been updated.

Table 3, Place the IPV finding at the top of the table. Acknowledged this has been updated.

Asterisk all significant findings in table 3. Acknowledged this has been updated.

Characteristics of women who experienced IPV. Suggest your comment reports that factors associated with SES disadvantage more commonly associated with IPV, such as poverty, young age at first birth etc – then comment under the categories in your table – health system factors e.g. no antenatal care, delivered by non HCPs. The comment was not understood. Kindly clarify if needed.

Table 5 is difficult to follow, major variable (IPV) is buried within maternal factors. Move to top of table 5. Put a double line to demarcate unadj from adj analysis. Include label for table 5 within the table. Acknowledged this has been updated.

Discussion

Consider relating your findings also to high rates of unintended and unwanted pregnancy. Acknowledged - The second paragraph relates to pregnancy and pregnancy outcomes- kindly consider if that is sufficient

You still claim a relationship between artificially ‘low’ or ‘high’ BMI and cut-off has not been justified. BMI is included as Anthropometric indicator for nutritional status of women (https://dhsprogram.com/data/DHS-Survey-Indicators-Maternal-and-Child-Nutrition.cfm). This cut off has also been used in other peer reviewed similar studies including. Ezeh et al, Determinants of neonatal mortality in Nigeria:

You have not incorporated the WHO guidance about a whole of health system response. Acknowledged this has been updated.