Reviewer’s report

Title: A Call for Better Care? The Impact of Postnatal Contact Services on Women’s Parenting Confidence and Experiences of Postpartum Care in Queensland, Australia.

Version: 2
Date: 18 October 2014
Reviewer: Virginia Schmied

Reviewer’s report:

While overall the authors have addressed many of the concerns I raised and also those of the second reviewer – there remain some fundamental issues with this paper that mean the results are of limited value to policy makers and practice. The results raise more questions than they answer and the authors need to be very clear about that.

These issues include – 1/ the theoretical premise that a postnatal contact can improve parenting confidence particularly as in the main this is a one off contact; 2/ the question as to whether a different result would be obtained if the analysis had combined fairly confident and extremely confident instead of using just the top score of extremely confident as the measure of confidence and 3/ the fact that the service was delivered by either a midwife or a nurse.

I question whether the premise or conceptual basis of this paper - that is that a routine, one off home visit or phone contact either by an unknown midwife or child and family health nurse is likely to make a difference to parenting confidence. Parenting confidence is a complex construct that has been debated in the literature and I do not believe that parenting confidence, particularly in isolation from other variables, is the correct outcome to measure the efficacy of the universal contact. I remain concerned about a one item measure of confidence. The authors now indicate this is a limitation and stress the importance of further research.

The second reviewer did raise the issue of only using the top score. This is a really important point and I would also argue a flaw. It would be rare for a mother in the first week to rate her confidence as extremely confident as she gets to know her new baby. Indeed many clinicians would be concerned about a mother who did say she was extremely confident.

I reiterate that the services provided by midwives and nurses are different and therefore should not be analysed together. The purpose of this first home visit by a child and family health nurse is to ensure families are linked to ongoing services, to highlight the importance of health promotion and developmental surveillance of children and to address any immediate concerns that the family may have, particularly related to infant feeding. In most other jurisdictions, a full family assessment is conducted by a child and family health nurse at this time to
identify risks and strengths in families and need for further support to ensure the health and development of the infant/child. This type of service is available in all Australian States and Territories albeit to differing levels. However Queensland has not in the past offered this service but has had a more targeted approach. The outcome of this policy may possibly be evident in the AEDI results where Queensland children at school entry perform worse on most domains than children in other jurisdictions. Please see paper by Brinkman et al 2012.

On the other hand midwives visiting in the home or contacting by phone provide a different service that is more like an extension of in hospital postnatal care, where a midwife will undertake a physical ‘check’ of the woman and baby, will discuss any concerns she has and will provide support around breastfeeding. There have been a couple of large population based studies in Victoria and in Western Australia that indicate that overall women are more satisfied with home based postnatal care than they are with in-hospital postnatal care. While these papers are cited by the authors they do not make this point about previous research instead suggesting that there has been no evaluation of postnatal care in the home. So I return to my point here that these two services and professional groups are providing a different service. Yet in this study they are treated as the same service. This is acknowledged in the limitations but may have influenced the results.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

'I declare that I have no competing interests'