Reviewer’s report

Title: Midwives' respect and disrespect of women during facility-based childbirth in urban Tanzania: a qualitative study

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Reviewer: Timothy Abuya

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General comments

The paper provides insights processes that are focused on provider-client interactions using qualitative approach. This methodology is unique and has potential to grow the field of respectful maternity care further.

There are a however a number of issues that might be useful to highlight regrading methodological process, content and other aspects of study that is detainee below

Abstract

In the abstract the authors may need to make the language clearer and ensure good flow of the idea being presented. For example line 5 they use the word unsafe care without substantiating it. Line 6 "there are mounting studies" perhaps may need better language

Page 3 line 18-20 may require clarity of language. The same applies to line 30-33 in the same page

Background section

Page 6 line 70 and line 75 there are a few typos that may need clarity. Line 104 also requires clarity of language

Page 9 line 119-123 will require language edits as well.

One substantial issue in line 123 is the fact that they report of having got permission to collect statistical data from the facility- can they describe why this was important and where they use it in this qualitative study? if this was for purposes of identifying facilities for inclusion this needs to come out in the methods section
Methods section

Line 131-133 page 9 is unclear on the inclusion criteria

An interesting idea of posting study process on the ward is good however, can the authors describe a little more ie in what language and what was the impact of such an approach on the data collection process and its effect on the outcomes observed?

The authors describe that they interviewed the midwives in page 11 line 166, the question left for the reader is what is the content of the interviews ie scenes that emerged-what were they? and how did the team record the observations were there tapes used for the process and how was that done given that they observed form a distance?

Can the authors describe examples of situations that they found dangerous for the mother but could not intervene at the point of observation? This is important in observational studies

Results

With a ex exception of a few typos in the quotes, i would recommends that results of encourage mother-baby relationship come after all data on labor observations.

In general since the observers were at the service point, the results beg the question of what is precipitating the behaviors observed?

Second, are the observed positive experiences also perpetuated by the same nurse who exhibited negative experiences? in other words do the bad behavior co-exist with the good ones. It is hard to tell from the notes in the narratives.

My final concern us how the authors have organized the categories- i think if they use Bohren approach they might realize that the new concepts/behaviors can actually be fit in the broader first second and third order themes described by Bohren and thus giving insights on how diverse the issue of D&A can be what drives it

If the authors can try and link this data with the order of themes then it will advance this field better

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