Author’s response to reviews

Title: Contraceptive use intentions and unmet need for family planning among reproductive-aged women in the Upper East region of Ghana

Authors:
Ayaga A. Bawah (aabawah@ug.edu.gh;aabawah@gmail.com)
Patrick O. Asuming (poa2102@gmail.com)
Sebastian F. Achana (fsachana@gmail.com)
Edmund Wedam Kanmiki (eddy100@hotmail.com)
JohnKokuAwoonor-Williams (kawoonor@gmail.com)
James F. Phillips (jfp2113@cumc.columbia.edu)

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Dear Editor,

We thank you for your interest in our paper.

Below we have provided a point by point response to the Reviewer’s comments below and made all the necessary revisions in the revised manuscript.

Thank you

Reviewer reports:

Thank you for your resubmission. This is a much stronger and clearer draft. Below, please find some additional suggestions to continue strengthening the manuscript. In particular, please note the comments about the results section:
Introduction
The concepts of spacing, stopping, and unmet need are well-known in the family planning literature, so you should be able to condense the first paragraph further. I don’t think the paper loses anything by deleting lines 6-18 and transitioning directly from “…limit childbearing (parity-specific deliberate control). Women may choose to limit fertility by using contraceptive methods to either space or stop pregnancy. There is ample evidence…” You go on to provide a concise explanation of unmet need, spacing and stopping in the second paragraph anyway, so eliminating this early section of the first paragraph reduces redundancy.

Authors’ Response:
We thank the Reviewer for this observation and suggestion. We have taken lines 6-18 out of the paper as recommended by the Reviewer (see page 4 of the revised manuscript).

Reviewer:
p. 4, Line 25: Women may “do something” but it may not be contraceptive use. Perhaps better to say “…time that they did, they often do not use modern contraceptive methods to ensure that they achieve those desires.”
p. 5, line 9: “use or non-use”
p. 5, line 13: “desired impact”
Authors’ Response:
These changes have been made in the revised manuscript (see page 4 lines 13 & 21 and page 5 line 1 of the revised manuscript)

Reviewer:
Methods
p. 9, line 7: Could you say a bit more about how the sample proportions were calculated?
Since later you include results from DHS, please include DHS in the description of the study data.
Authors’ Response:
Thank you for this comment. The sample proportions were calculated based on the relative population size of each of the 66 Enumeration Areas (EAs). These were used as weights to determine the number of women to interview in each EA. We have now included this explanation in page 8, lines 20 to 21 to bring about more clarity. In addition, we will like to note that we did not do any analysis of the DHS data which is why we have not discuss the DHS as part of the data and methods. We cited the fertility rate, contraceptive prevalence and unmet need for family planning from Ghana DHS 2008 report and Population Reference Bureau 2011 report. (see page 9 lines 2-6 of revised manuscript) and we have duly cited these reports.

Reviewer:
Please move limitations to be included in the discussion section
Authors’ Response:
We have moved the limitations to the discussion section as recommended.

Reviewer:
Results
p. 12, Effects of women’s characteristics: Some of these comparisons are a bit confusing. For example, why use women who are not using contraception because they have no need as the reference group for comparisons of women with unmet need? It seems like these comparisons (age, educational attainment, etc.) should be within categories of contraceptive use so that there is a more direct comparison (e.g., as
women who are not using contraceptives age, the odds that the reason is because they have no need increases X times). There may be another, better way to organize these, but I would suggest revisiting the choice of reference group, because right now it’s a little unclear what the comparison is and why that makes programmatic sense in terms of targeting. It may also be that the reference group is correct, but that the wording in the narrative needs to be revised to make the findings and interpretation clearer. Throughout in the narrative, you talk about changing odds, yet the tables seem to be reporting Relative Risk Ratios rather than Odds Ratios. Please review and ensure that these are aligned.

Authors’ Response:
We thank the Reviewer for this observation. We have carefully reviewed the suggestion and have accordingly revisited our choice of reference group and made changes to it as recommended by the Reviewer. We have now used women who use contraceptives for spacing the comparison group (see Table 3 and table 4 and also in page 12 lines 8)
We have also revise the use of Odds Ratios to Relative Risk throughout the results section of the manuscript.

We take this opportunity to thank the reviewer for helping to improve the quality of this work.