Reviewer’s report

Title: Birth Preparedness and Complication Readiness Practice and Influencing Factors among Women in Sodo town, Wolaita zone, Southern Ethiopia, 2018; community based cross-sectional study

Version: 0 Date: 29 Jan 2019

Reviewer: Joshua Vogel

Reviewer’s report:

Thanks for invitation to review this paper and its interesting findings.

MAJOR:

* Can you please review the references? I noted some instances where reference does not match the corresponding statement, I suspect the references are out of order and need to be corrected.

* I don't see any mention of other components of BPCR (as per WHO recommendation - https://extranet.who.int/rhl/topics/improving-health-system-performance/who-recommendation-birth-preparedness-and-complication-readiness ) - identifying labour and birth companion; an identified support to look after the home and other children while the woman is away. Is there a reason these were not included?

* I suggest moving the section "Operational terms and definitions" to a study web appendix. However, the operational definition of what constitutes "birth preparedness and complication ready" is helpful in the main manuscript, although that section is written in both past tense ("identified… arranged") and present tense "save… arrange") so the outcome definition is not clear.

* Ethics page 10 - I note verbal consent was sought from participants, but not written consent. Was there a specific reason for this?

* Table 4 - the rationale for inclusion of "counseled to prepare blood donors" and "counselled to identify skilled birth attendants" as covariates in the model is not clear. It seems these two variables are part of the definition outcome variable of interest (BPCR), in which case they would naturally be positively associated? Testing the association of an exposure against an outcome which is in part defined by the exposure variable) would not be meaningful. Please clarify.
The paper would benefit from copyediting, and could be shortened without losing the main findings and themes.

MINOR:

* Abstract:
  o Line 28 "descriptive statistics was made" should read "descriptive statistics were reported"
  o Line 32 remove "were"
  o Line 39 "education" needs more description - I believe only women with college education were significantly more likely to practice BPCR?

* Plain English summary
  o Line 12: "low and middle income countries" should be "low- and middle-income countries"

* Background:
  o Please reword the first fragment of the first sentence of the Discussion (line 47) as it is not grammatically correct
  o Page 5, line 4 - the reference to WHO recommendation requires a reference/citation
  o Page 5, line 10 - I do not think reference 2 is the correct citation to support this statement
  o Page 5, line 19 "prepare important supplies for caring the newborn" - this should include any needed supplies for mother at birth as well as supplies for postnatal care.
  o Page 5, line 50 "more than half a million women" and other maternal mortality related metrics - these figures are outdated. Please see 2015 WHO report which quotes 303,000 annually - https://www.who.int/reproductivehealth/publications/monitoring/maternal-mortality-2015/en/
Page 6, row 13 - Reference 11 is not correct here

Page 6, row 36 - "fails to show consistency" is not the correct terminology. I suggest "MMR in Ethiopia has not reduced" based on the data you are presenting in this statement. I note that a difference of 3 per 100,000 is very likely not significant / lies within the uncertainty range of a DHS estimate of maternal death

Page 7, row 17 - the meaning of "potential health coverage" is not clear, suggest revising

There is some inconsistent terminology - suggest "participants" throughout rather than "subjects" or "respondents"

Page 8, line 15 should read "…not able to be interviewed…”

Table 1 - age of respondents - 177 + 264 + 114 = 555. I think an error here?

Table 4 - correct title "Parity_CUT" to "Parity"

As an a priori sample size calculation was used, it would warrant mention in the Discussion whether the study was adequately powered as planned, or not

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