Author’s response to reviews

Title: Distribution and quality of emergency obstetric care service delivery in the Democratic Republic of the Congo: It is time to improve regulatory mechanisms

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Responses to reviewer’s and editor comments

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Distribution and quality of emergency obstetric care service delivery in the Democratic Republic of the Congo: It is time to improve regulatory mechanisms

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Reviewer reports:

Reviewer #3: The manuscript has greatly improved. Some minor comments remain.

Comment 1

Page 3 Line 37 - remove 'to this state of affairs'

Answer 1: the words ‘to this state of affairs’ were deleted
Comment 2

Page 4 line 15 - add obstetric and line 27 and 28 similar comment. Be consistent with terminology. Also in plain English summary use obstetric, it is part of the title and I would say common language.

Answer 2: we agreed with this comment

Comment 3

Methods

I would advice to use the subtitle 'study setting' instead of the current and add some basics about the DRC. Population fertility rate etc. and perhaps something about the geography, regions etc as this is something you report in the results and discussion, then followed by the health system paragraph.

Answer 3: we changed the subtitle and added a new paragraph focused on some reproductive health statistics.

Comment 4

Variables 3: for readability list the 7 items after mentioning BEmOC and then CEmOC including all the former plus... etc

Answer 4: It’s Ok

Comment 5

Variable 4: page 11 line 48-49 is this an example? Then add e.g. to the sentence in brackets

Answer 5: It’s ok. We added e.g. at the beginning of the sentence in brackets

Comment 6
Page 12: line 9. Remove the mention of Donabedian in the beginning and just mention what the index contained.

Answer6: the first sentence in this paragraph has been deleted

Comment 7
Page 12: both for basic and comprehensive you list availability of service guidelines. Are there the same one or specific? If the latter please specify.

Answer7: The guidelines for basic EmOC are different from those dedicated to comprehensive EmOC.

Comment 8
Ethics: mention number of approval here in brackets

Answer8: ok

Comment 9
Page 15: you can remove 'among the surveyed facilities' because it is safe to assume you only report on what you did. You didn't report on 'unsurveyed facilities'... so the addition to the title doesn't add anything.

Answer9: Thank you for this comment which we took into account in the revised version of the manuscript

Comment 10
Page 15 line 13: so just to confirm you are sure assisted vaginal delivery is the right definition to use... the official definition is:

'Assisted vaginal delivery is vaginal delivery of a baby performed with the help of forceps or a vacuum device. It sometimes is called operative vaginal delivery.' - ACOG
Answer 10: For this study, we focused on assisted vaginal deliveries. But before selecting the health facility, we sought to know if that facility organized a vaginal delivery service. We also decided to update the limitation section focused on possible confusion between “the assisted vaginal delivery” and ‘vaginal delivery’

Comment 11

Following on this point: you mention in line 32-33 that a quarter doesn’t offer vaginal delivery but this is not something you assessed. You did not assess availability of routine services. You assessed EmOC! You need to mention 'assisted vaginal delivery' here which is related to the definitions above. If that is in fact what was assessed. You need to be sure about that or mention it in limitations if you think data collectors thought this meant normal delivery.

Answer 11: the correct formulation is “assisted vaginal delivery”

Comment 12

Discussion:

The discussion about the 'doctors' resulting in falsely becoming hospitals puzzles me and I am still not sure of the purpose of including this. Is this related to doctors being able to perform CS? Why is there no mention on the need to increase midwifery staff as they are the once doing most of the work and require the EmOC skills. Also I still believe the discussion would be stronger if connected to health system strengthening inc stewardship and financing.

Answer 12: The discussion concerning the work of medical doctors is important in the DRC: we need that everybody (every health worker) keeps in mind that to be more effective, all component of the health system are important. Besides the presence of doctors, it is necessary to have adapted infrastructure, the equipment, the inputs, etc. Even if all these elements are in place, it remains important for health facility managers to respect the orientations raised by policy makers regarding the organization of certain interventions.