Author’s response to reviews

Title: Hospital detention of mothers and their infants at a large provincial hospital: a mixed-methods descriptive case study, Lubumbashi, Democratic Republic of the Congo

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Author’s response to reviews:

Editor’s Comments

The Introduction Section of your manuscript is too long. An Introduction can be written in three paragraphs containing the following: the motifs that lead you to do this study, literature support for your hypothesis and objectives of your study.

- We have shortened the Introduction section as you have suggested.

Also, please do not make statements, recommendations and conclusions that are beyond the results of your study.

- We have limited the scope of our statements, recommendations and conclusions.

Reviewer reports:

Reviewer #1: General comments

The paper is interesting and digs into issues of detention that demean child birth. The authors have attempted to provide a description of issues with some form of depth. However, the paper could be cut down significantly if some of the issues are more focused and presented in far fewer words.

The title could also be cut down to a fewer words and for example should not have the year on it.

- We propose to leave it to the editor’s discretion as to whether the year should be included in the title. Including the year is considered by some to be a good practice; in this case, it seems relevant to specify the date because this study captures the situation at one point and the policy environment may shift over time.
There are a few language issues that could be improved for clarity. Examples include the abstract, page 5 line 93,

- It’s not clear to us what the reviewer objects to here (perhaps part of this comment was cut off?), unless the implication is that the idiom “to curry favor” might be unfamiliar to readers for whom English is not a first language. We have replaced this with an equivalent term that may be more readily understood by an international readership.

Conceptual issues for consideration

1. Although the authors do trace the history of D&A from Bowser and Hill framework, perhaps they could consider a more recent paper by Bohren 2015 to help them define the issue of detention better. I like that they have framed within the human rights agenda but to be more recent work by Bohren and Freedman helps refine this work further.

- Thank you; we have integrated the Bohren framework into the revised version.

2. I do like that they situate the work in two broad contexts- inequality and D&A context. However when doing discussions, it might be useful to refocus the reader to what drives the practices and how they interrelate.

- Thank you; we have completely rewritten the discussion and have discussed both financial and rights-based drivers and their relationship.

3. The authors could also try to highlight what drives these practices in results section and discuss it in detail in the discussions section. For the system level issues such lack of money to ran facilities and the low figures set up by the political establishment makes it hard for facilities to manage clients at that prices. These and other drivers including economic challenges might be worth alluding to as drivers

- We have highlighted drivers in both the quantitative and qualitative portions of the results section and have discussed both financial and rights-based drivers in the discussion section.

4. Methods section- the retrospective data is supposed to complement the current study but I think it is difficult for one to link the length of stay with other reasons beyond pay. unless that records indicated reason being lack of funds. This data in my opinion should be underplayed and perhaps used as background to the context rather than data in itself

- We have removed the retrospective record review from the methods and results sections and mentioned it in the introduction as the reviewer suggested.

5. Structure of results- Perhaps the result should not be presented by type of study but could they integrate it by thematic areas and use data from all sources? - The authors use terms like more likely which begs one to think that they did logistics regression analyses which is not the case. I
guess better language to communicate results would be useful. There were a few discrepancies between facts in the table and text especially on costs of treatment and what they were detained for. The use of real name of a person the results section should be avoided due to ethical issues

- The suggestion to present results by thematic areas rather than separating the quantitative and qualitative results is an interesting one which we considered. We decided against this, as the themes addressed by the quantitative and qualitative components of the case study are not fully aligned, which might make the presentation more confusing for readers. We have, however, used the categories from the Bohren paper as headings for the results.

- We have rephrased the results to avoid using the phrase “more likely”

- We have reviewed the costs of treatment and reasons for detention reported in the text and the table and have not found the discrepancies the reviewer alludes to. If the reviewer would kindly point these out, we would be happy to correct them. Perhaps the reviewer is referring to the statement of the costs of treatment for the sample overall (n = 85), which is presented in the text only, and the disaggregated data (not detained n = 41 and detained women n = 44), which are presented in the table?

- The only name mentioned in the manuscript is that of the former governor, an internationally known politician, and we have removed it—but we are curious to know if the reviewer would kindly explain what ethical issues are raised by referring to him by name in this context?

6. Discussion- should reflect in my opinion three things- what is the level of detention and compare with other contexts (n=88) is small but provides useful insights on what level it might, two what drives it and situate within broader context and three what does it mean to alleviate it and build stronger health system

- We have shortened the discussion and followed the reviewer’s advice to focus more narrowly on the results and their implications.

7. Finally I think the conclusion is weak and should be linked to purpose of study

- We have rewritten the conclusion and linked it to the purpose of the study.

Reviewer #2: The topic covered by this article, post-partum detention of women, is interesting and has great relevance. It is a relatively new but urgent field within reproductive health and quality of care.

The authors took a mixed-methods approach to describe the past and current situation in the Jason Sendwe Hospital, in DRC. The study combined cross-sectional data with women after
delivery, retrospective data from medical records and qualitative interviews with key stakeholders.

The cross-sectional data showed that over 50% of women were detained at the moment of the survey; the researchers include within the detained all those women who have not been issued discharge papers on the expected day because they had not paid some or all of the fees incurred from their or their infant's care. From the retrospective records, the researchers found that between 2014 and 2015 4.5% had extended LOS; however, state that there was a significant proportion of missing data. From the qualitative section, they conclude that this practice is normalised by structural constraints and justified by staff because of their unfair working conditions.

The execution of the research is poor, with an unclear aim, weak methodology and untranslatable results. Significant improvement need to be done

- The reviewer’s frustration is understandable if they are looking at this as a study to test a hypothesis. We have changed the title and clarified throughout the manuscript that this is a descriptive case study meant to give a detailed look at one “instance of a broader phenomenon, as part of a larger set of parallel instances” [AM Orum, JR Feagin, G Sjoberg (1991) A Case for the Case Study, University of North Carolina Press, p. 2]

1. Background:

There are parts of the paper are hard to follow. The background section provides vast information about the DRC health system structure, which at moments seems unrelated to the topic of the study. A second read with a more critical lens would help summarise the main points that the authors are trying to make.

- We have shortened the background section to what we feel is the minimum information required to introduce the cross-sectional survey and key informant interviews.

You fail to mention the WHO framework on Mistreatment during Childbirth that builds on Bowser and Hill’s D&A landscape analysis. Also, Bohren et al. 2015 mix-methods review can add valuable information to the background.

- We were not able to find a “WHO framework on Mistreatment during Childbirth”. We did cite the WHO’s 2014 statement, The prevention and elimination of disrespect and abuse during facility-based childbirth.

- Thank you for suggesting the Bohren review; we concur that this is an important article and we have integrated the Bohren framework into the revised version.

2. Aim (Line 209-2011)
The research question is unclear. It does not state what the aim of the study is. They say that they are going to present forced hospital detention on the DRC. I had to read the result section to understand what their goal was.

- We have moved the statement of objectives from the first paragraph of the methods section to the last paragraph of the background and have explicitly stated the primary and secondary objectives.

3. Methods:

The fact that there was no research question clearly formulated makes the reader hesitate about how the methods were selected and what the aim of each of them is.

1. There is little explanation about the operationalisation of the different variables and how the data was collected. What do you mean by the trajectory of care? Is it how they reach the hospital? Also, how did you ask women about detention in the survey? Or did you assume that if they stayed longer than average discharge time, they were detained? This will need more clarification within the text.

- We have clarified what aspects of the trajectory of care we looked at: “(i.e., where they initially presented for care, whether they were referred, how they reached the health care facility)”

- We did not directly ask women if they felt they had been detained, but instead defined detention as stated in the text, i.e., “We considered a woman to be detained if she had been medically cleared for discharge but denied the ‘bon de sortie’, or discharge papers, because she had not paid in full for care received. “

2. In the discussion, you say that you look at medical records to have a longer view of hospital detention. However, there is no explanation of what you were looking for and how that contributes to your overall aim.

- We have removed the retrospective record review from the results section and tables.

3. The methodology of the qualitative section is very weak. Are 10 participants enough to get robust information? How did you select those participants? What was the aim of the section and which approach did you take to answer your question?

- The 10 participants were key informants who were available and consented to participate.
4. There is no description of the analysis in any of the three components. You should clearly state what type of analysis you've done, in the quantitative and qualitative part.

- We have added the following statements:

“We tabulated descriptive statistics (proportions of categorical variables and means and medians of continuous variables) by detention status. The study was not designed to test any hypotheses, and so we did not report tests of statistical significance.”

“We did not perform a formal content analysis since we did not have verbatim transcriptions of the interviews, but we summarized and synthesized information from the interviews and related them to the themes put forth in the typology by Bohren et al.”

4. Results:

The results are purely descriptive. At times they feel confusing, but it might come from an unclear research question and weak methodology.

- This is a descriptive study. As noted above, we have changed the subtitle from “a mixed-methods descriptive study” to “a case study” to further emphasize the local and descriptive nature of the data.

1. The retrospective record review does not add any information to the study, as the proportion of missing data is very high.

- We have removed the retrospective record review from the results section and tables.

2. The qualitative section has no analysis done; it is just a recount of narratives from the interviews. How did the themes emerge? Do the things stated repeat across interviews or are they just stated individual comments on the situation?

- “We did not perform a formal content analysis since we did not have verbatim transcriptions of the interviews, but we summarized and synthesized information from the interviews and related them to the themes put forth in the typology by Bohren et al.”

- We also added this statement: “Unless otherwise noted, at least two key informants independently provided the information summarized below.”

5. Discussion

Although it presents a clear landscape of the DRC, the authors fail to present how the results of their study can contribute to other settings.
This is a case study of one hospital in the DRC. The in-depth study of this single case is meant to illustrate the complexity of the context that results in detention in one place. This context is likely to vary from place to place, though some determinants (or “drivers”) will be common to all places. A case study such as this provides the opportunity for researchers and practitioners in other settings to interrogate the context in which they work and to assess whether those determinants are present there, too. We have tied the findings of this study to the broader framework presented by Bohren et al. and to the Global Strategy.

Minor comments:

Line 187 - please state reference of the quote
- We have added an additional citation of the source.

Line 233 - A bit more explanation on how you evaluated the outcome would be good.
- We have removed references to the retrospective study altogether.

Line 266-268- The sentence is unclear: A higher proportion of detained than non-detained women had delivered by caesarean section in the past. At this delivery, they more often had complications, and a greater number of complications, including caesarean section, than women who were not detained (mean number of complications per woman 1.2 vs. 0.7).
- Thanks for pointing this out – we have replaced the pronoun to clarify the subject of the second sentence: “At this delivery, detained women more often had complications, and a greater number of complications, including caesarean section, than women who were not detained (mean number of complications per woman 1.2 vs. 0.7).”

Line 277- please avoid the "about" 93%, over 50% in the result section State the full number.
- Thank you for this suggestion. We have removed the word “about” and simply reported the percentage to the nearest integer, as we have for other values in this section.

Line 367/8: Please re-write the phrase
- Thank you – fixed.

Line 405- The referencing format changed here
- Thank you – fixed.

Line 439 - Ref?
- Moved CEDAW definition of GBV here, with reference.
Line 474- Does this statement come from your results?

- No, it is not unique to women in the DRC. This was the topic statement of the paragraph and was supported by the evidence presented in the sentences that follow. With the extensive revision of the discussion, this statement is no longer included in the manuscript.