Author’s response to reviews

Title: Community Based Saving Groups: An innovative approach to overcome the financial and social barriers in health care seeking by the women in the rural remote communities of Pakistan.

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Version: 1 Date: 21 Jun 2017

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REVIEWERS’ REPORTS AND AUTHORS’ RESPONSES

Dear Editor

Please find our annotated answers under each comment (in brackets)

Reviewer reports:

Reviewer #1: - In the methods section, inclusion of some example of the interview questions would be helpful.

[Added on page 7, under ‘Data collection tool’]

- In the results section, please provide a more accurate description of the participants. A Table of the participants’ characteristics would be helpful.

[Socio-demographic characteristics already explained but a table would only occupy space and would actually add nothing more.]

Reviewer #2: Kindly note that the numbers mentioned on left side of this document are the line number under each section.

Title: The specific study area can be included in title i.e Chitral district, Pakistan. Also, include the study design.
Abstract:

Methods-This statement is the objective and not part of methodology. Give further details on how many participants, how was the inquiry conducted, etc.

Conclusion-This cannot be the conclusion because it is not your objective. A definite conclusion like saving lives can be stated if number of deaths pre and post implementation is noted which is a different study design. Kindly modify this statement ensuring your conclusion matches the objective of the study.

Keywords-Avoid repetition of words from title

[Except one word, there are none in the title.]

Background:

31-The global/ general scenario can be presented first, following which the Chitral District scenario can be narrated.

[Authors never aimed to present global and general scenario, and are of the view that it will only add to the text of the manuscript, which is already lengthy.]

44-The Chitral district description must be narrated keeping in mind to the need to gain flow in introduction i.e. narrate the geographical attributes, sociodemographics, socioeconomic attributes etc. that are relevant to the study

[All attributes are described to familiarize the readers about the study /project intervention site.]
49-Has Ref.5 addressed all these matters? If not kindly include more references.

[Already 9 references used to explain the topography and geography of the study site i.e. Chitral.]

Program intervention:

16-Kindly give references

[Reference no 10 added.]

21-if statistics are available please include that

[Not really.]

38-please mentions how were these women identified

[Through Lady health workers and the village elders; text edited in the manuscript accordingly.]

41-please give more details, number per village, number of villages covered

[Text added with details]

50-Give more details regarding the program like how were these members selected, terms and conditions of loan, if not repaid within stipulated time what was the consequence notified, etc.? In the discussion there is a statement mentioning something regarding balance required to initiate the services. However there is no clear idea in this section regarding all these conditions.

[Interesting remark; but authors feel that it will delve too much into nitty gritty of CBSG operations which were also not uniform across the 400 + CBSG, and were agreed upon with mutual consensus.]

Page 7- Give more details regarding the training program: contents of program, number of contact hours, period of delivery of the program (month, year), selection procedure of CMW. Also, give reference for each.
Data Collection Tool: The interview guide should be included in appendix

[This is not necessary as per the journal’s guidelines; yet can be made available for readers on request.]

Kindly add details regarding pilot study: selection methods, number of participants, findings of the pilot (published/unpublished) specify

[Given details on the pilot study are already enough and are well explained in the methods section.]

Data Collection: Mention how the locations were selected i.e. the sampling method

[4 locations were selected to represent two sub divisions of the district and villages were selected randomly for conducting FGDs.]

Do not mention as "etc." kindly elaborate

[Removed]

Kindly include the participation diagrams in appendix

[Although we would have liked to; however, it is not the journal’s requirement. Supplementary material will be made available to readers if they desire so.]

Mention in which language and by whom was the data transcribed.

[Info on language added]

Data analysis: Please specify the tool/software used like if MS Word was used to analyse.

[No software or tool was used for analysis; and it was done manually.]
Results:

30-participants have been categorized as poor, give reference for the economic classification

[Already explained in the background and then in methods.]

33-The ratios like two third, one third are not giving clear understanding as to how many participants. Kindly mention exact number. However, the methodology adopted will not help you deduce any number and this was not your objective.

[Rightly pointed out. Removed and re-worded.]

Utilization of CMW services: if any explorations were done to identify regarding the role of CMWs during delivery, number of visits, mode of education/ awareness, etc. please include those details.

[No, we did not capture such details and info. For this CMWs would have been the right respondents.]

44-"The newly deployed CMWs faced many challenges..." were there any quotes regarding this? How and when was this identified? Since this can be identified by interviewing CMW and this FGD will not give such results hence, include only that what you have explored and analysed. However while writing discussion, you may give a background stating that during initiation of CMW program, many health workers had to terminate their services due to....

[Not really because we did not invite CMWs to the FGDs. These challenges are narrated by the local women (many of them are relatives).]

Social benefits of CBSGs:The main objective of the CBSG was to increase financial empowerment for maternal, child health and others. If the authors can first highlight on that then move on to awareness and knowledge, health-seeking behavior, social benefits and other benefits like integration of family, increased participation of elderly, etc. the manuscript will give a clearer picture on CBSG contributions.

[Increasing financial empowerment and access to money….already well captured in the theme 2 above.]
Perceptions of women non-members and their husbands about CBSGs:

42-"...they were hesitant to ask their husbands for the money, initially required to join a CBSG." kindly give details regrading this in the Program intervention. this has not been stated previously any where.

[It is already there in para 2, line 3-4 of program intervention.]

The aim of establishing a CBSG within a village is to improve accessibility. However the results state that " ...men were concerned about the odd distances that women have to cover on foot". Kindly mention in detail in the Program intervention section as to 1 CBSG would cater to how many villagers, how was this decided, within how much distance was each established.

[Good point. Text added on para 3 of program intervention.]

Discussion:

54- please replace the statement as, "Our principal findings suggest...

[Thx. Changed.]

4- "These findings resonate the fact that culture and traditional beliefs govern the health care seeking among the expecting mothers." this was neither the objective nor anywhere identified in results.

[Changed/edited]

The sentences in discussion have to be re-framed to shorter sentences. All the findings from results must be discussed like in results there is a statement on past experiences of non-members. Kindly discuss how were these associations were different from the present program.

If you could analyses again and identify any shortcomings of CBSG or CMW, then the article will have more credit. Because the aim of readers would also be to address any such shortcomings before implementation. However, if any such themes were not explored during interview, kindly mention that under limitation.

[Mention made in the last para of discussion.]
Conclusion: The conclusion should be in the same phrase as the objectives i.e. awareness of service availability, understanding of MNCH issues, utilization of MNCH services, financial and social barriers. Kindly keep terminologies consistent like do not replace social barriers with cultural barriers.

[Edited.]

46- Kindly use past tense of this sentence: "This community-based approach is culturally appropriate..."

[Edited.]