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.

Authors:

Babar Shaikh (shaikh.babar@gmail.com)
Qayyum Noorani (qayyum.noorani@yahoo.com)
Shazia Abbas (shazia.khoja@gmail.com)

Version: 2 Date: 19 Jul 2017

Author’s response to reviews:

AUTHORS’ RESPONSES

Thank you very much for accepting our paper. We are very excited to have this piece of evidence published in your esteemed journal. Peer review has been extremely useful in improving the manuscript.

Please see our responses in square brackets under each point raised.

Reviewer reports:

Editor: please check all references for uniformity.

[All references re-checked for uniformity.]

Reviewer #2: Abstract : Community women: Kindly re-frame the terminology

[Word reframed to ‘local women’.]

Conclusion: "This model of CBSG could be replicated and scaled up in other similar setting of rural underserved areas of Pakistan for improving the access to skilled birth assistance, and maternal and child health outcomes." It is future recommendation and not the conclusion of this study.

[Phrase removed and replaced with other sentence from the conclusion.]
Keywords: Remove repetitions from title: Community Based Savings Groups; Pakistan

[Community Based Savings Groups; and Pakistan are two important words for making our title visible for citations in the future. However, we have replaced Pakistan as a key word with another one: “health care seeking’.

49-Has Ref.5 addressed all these matters? specify the references for each point as you have mentioned 9-references but there is only one citation for this statement.

[Reference 5 is our own paper and it does mention all the factors and difficulties of the area with regard to health care seeking by the local women.]

38-keep the terminologies uniform throughout the manuscript. Who are lady health workers? Did you mean CHW?

[Lady health workers are the community based workers who go door to door and provide health and nutrition advice and some basic medicines for mothers and children. They are also involved in family planning and assist in immunization campaigns. Lady health worker and community midwife together are called as CHWs sometimes.]

50-As suggested in first review 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. As a reader I will be more interested in knowing about CBSG, since the title gives an “innovative approach” picture. Even though the end result of implementation was not uniform, kindly give these details.

[Some details were given in the last version and some more are added now. Ref 10 (which is another paper from the same project) was also added for the readers who are keen to learn CBSG dynamics.]

44-The newly deployed CMWs faced many challenges... "These challenges are narrated by the local women (many of them are relatives)." As a reader or reviewer, I will not be able to understand how these participants could report this statement. Hence clarify in the manuscript itself.
[Why not? As a closed community where everybody knows everybody; people know that young girls who became a CMW and was deployed in the village and was also supposed to give coverage to adjacent villages, did face these challenges initially.]

42-"....they were hesitant to ask their husbands for the money, initially required to join a CBSG. what about the initial amount? it is still not clear.

[Please try to imagine the level of poverty; even a petty amount sometimes is to be spent on other priority items at home like food, fuel wood, gasoline, medicines etc. Since CBSG was a new phenomenon in their community, therefore many women who did not have ready money at hand, indeed felt hesitation in asking the money for joining it.]

We once again thank the learned reviewers and the editor for helping us giving a better shape to our paper. We look forward to our publication now and would be keen to disseminate it to the wider audience in the health sector of the country.

Best regards

Shaikh et al

(Authors)

20 July 2017