

Review of: "Individual and community-level determinants of intention to use contraceptive among married women in Ethiopia: A multi-level analysis of National Survey"

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Potential competing interests: The author(s) declared that no potential competing interests exist.

Reviewer reflections

Abstract

Line 16: women's? ...married women's...

Line 21: may influence?factors that influence...

Line 34: The recommendation should be supported by the study finding. There is no a finding in the result section that indicates information about ___ is a predictor of intention to use a CM.

Line 37: consistency of writing the key words...some of the start in lower case. Using consistent style

Introduction

Line 40: number of children could not be spaced, rather the age between children can be spaced.

Line 42: old? Traditional methods

Intrauterine Devices (IUDs)...first letter of each abbreviated word should be in block letter. Authors should stick to scientific writing styles

Line 45: traditional methods, not approaches

Line 49: unmet need for...not unmet need of..

Line 50-52: the word satisfaction is neither correct nor a properly explained concept. Alternatives like "meet the demand for FP" sounds right

Line 57: use either consensus or agreements...same meaning

Line 57-67, 68-71, 74-76: difficult to understand, it needs critical revision with language and conceptual clarity

line 105: households were...

Result

The way in which the result section presented the finding merged every thing into individual and community level characteristics that are very vast with lots of information packed in a paragraph or two. It would be unpacked in to logical subheadings under the individual or community level characteristics. The individual level result could be subcategorized in to Socio-demographic, Obstetric and fertility characteristics, Health service and information, etc. Such unpacking will also help to present the findings using different ways (figure, charts, tables) unlike the authors presented them in a single congested table.

The same opinion on the description of the community level findings

Line 220-225: Intention to use, is the main variable of the study. The authors presented this finding with a single sentence,

just the national level prevalence. This makes difficult to understand the problem and its characteristics. It would be more informative and complete if perspectives of intention to use categories based on fertility preference (Eg: magnitude of intention to use for spacing pregnancy and intention to use for limiting) reported, which will have future program implication. Again reporting the aggregate national level prevalence is among the specific objectives, however, understanding the prevalence in the different regions is very important and will inform policy and program that targets each region's context. For example the focus of future FP program in those regions with low magnitude of intention to use could be demand generation interventions as there are few proportion of people who intend to use, thus future programs should increase those who intend through behavioural change communication. On the other hand, the FP program focus in the regions that had an already high prevalence of intention to use could prioritize quality, equity and accessibility of FP services.

Line 226: As a study that used a multilevel analysis, the authors would have presented findings describing the models used in the analysis. Description of the between cluster variances in the empty model and the subsequent fittings could inform the reader about the worth of using multilevel analysis in the study. Using the ICC could described the dependencies in the data and measured the extent to which individuals within the same kebele (cluster) are more similar to each other than they are to individual in different kebele (cluster)

Line 231-242: Needs revision of the interpretation of the findings. They can present those factors with protective effect on intention to use could be presented in one sentence with clarity of language and those factors that positively associate with intention to use together.

Discussion

Line 252: ...is less than those observed in...

Line 250-263: They discussed every thing within one paragraph. The discussions and possible justifications should be carefully and separately presented for those evidences in agreement with the current study, for those reported higher prevalence and for those with lower levels. Again some of the justifications lack logic in explain the possible differences. For example, how the issue of confounding factors considered for variability of prevalence of intention to use in different study contexts seems irrelevant justification.

Line 265-266: ... in their future family??? not clear....

Line 268-273: Better to present another justification which could be logically integrated with the study finding

Line 302: children do not use contraceptives? It is intention to use, not use that was studied and to be compared. The same deformed report in Line 309-311.

Line 332-336: Conclusion and Recommendations must be drawn from the study finding. How the authors recommended a public health intervention that increases contraceptive information, urgently and nationally do not correspond to what was reported in the study result. Why they intend to recommend all regions to equally prioritize information dissemination intervention without analysing the gap in contraceptive information at the different regions? Is it worth to invest on IEC in regions with a high level of intention to use?