

Review of: "Using a Health and Demographic Surveillance System to Assess Stillbirths Trends and Risk Factors in Siaya County, Kenya between 2008 and 2019"

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Potential competing interests: No potential competing interests to declare.

Thank you for the opportunity to provide a peer review of this significant paper. The paper makes a notable contribution to our understanding of stillbirth trends and risk factors in Siaya County, Kenya. Its principal strengths are evident in the comprehensive data analysis and the thorough identification of key risk factors. The study leverages a large, longitudinal dataset from the Health and Demographic Surveillance System, which robustly underpins the assessment of trends and risk factors for stillbirths in the region. The paper's success in identifying a decreasing trend in stillbirth rates from 2008 to 2019 is commendable, as it provides valuable insights into the effectiveness of current interventions in the county.

Moreover, the study does well in identifying and analyzing various risk factors associated with stillbirths, such as maternal age, education level, number of pregnancies, and socio-economic status. This detailed analysis is crucial in the broader context of global health, particularly in developing countries. The focus on stillbirths in this context addresses a significant gap in global health research, offering timely and relevant insights.

However, there are areas where the paper could be enhanced. The methodology section would benefit from a more detailed description of the data collection process, particularly in terms of how pregnancies were registered and monitored. A clearer understanding of this process would help readers assess potential biases and the reliability of the collected data. The paper mentions missing values for several factors but falls short of clearly articulating **how** these were handled in the analysis. A more detailed discussion on the approach to managing missing data would strengthen the study's findings.

Additionally, while the paper acknowledges some limitations, a more thorough discussion in this area would be beneficial. For instance, the impact of using proxy interviews and the potential recall bias associated with collecting retrospective data needs further elaboration, I feel. Also, a more comprehensive comparison with similar studies conducted in other regions or countries would provide a broader context and help to understand how the findings align with global trends.

The paper concludes with recommendations, but it could further elaborate on specific policy or practical implications of the findings. For instance, how the findings could influence future health interventions or strategies to reduce stillbirth rates would be valuable information for readers. Lastly, the structure and clarity of some sections, especially the results and discussion, could be improved to enhance readability and overall understanding.

In summary, while the paper stands out for its comprehensive data analysis and its contribution to understanding stillbirths in a developing country context, addressing the aforementioned areas for improvement would further elevate its impact and relevance in the field of global health research.