

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Experiences of how services supporting women with perinatal mental health difficulties work with their families: A qualitative study in England
AUTHORS	Lever Taylor, Billie; Billings, Jo; Morant, Nicola; Bick, Debra; Johnson, Sonia

VERSION 1 – REVIEW

REVIEWER	Margaret Carroll School of Nursing and Midwifery Trinity College Dublin The University of Dublin Ireland
REVIEW RETURNED	12-Mar-2019

GENERAL COMMENTS	<p>Reviewer's comments Thank you for the opportunity to review this paper. This is a very timely and interesting study. It is very well reported in this well written paper. It was a pleasure to read it. I have two suggestions for your consideration.</p> <p>Page 6, line 9 and Page 16, line 58-9 typo 'noone' to 'no one'</p> <p>Consider changing the use of a 'colon' to a 'semi-colon' in the following sentences: Page 7, lines 15-6; Page 14, lines 43-4; Page 15, lines 3-4; Page 16, lines 27-8; Page 17, line 51; Page 20, line 22; Page 28, lines 3-4.</p>
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REVIEWER	Anne Sved Williams Womens and Childrens Health Network, South Australia
REVIEW RETURNED	16-Mar-2019

GENERAL COMMENTS	<p>Overall, I enjoyed reading this article. It is well written (rare to review an article without various grammatical errors, repetitions, misplaced sentences etc!) and well structured. Overall, I believe it is very publishable. With the number of families interviewed, there is a richness of data which is interesting to read.</p> <p>I do have a few minor concerns and perhaps positive critiques to offer as follows.</p> <p>1. It does seem rather long to me. Whilst I appreciated the way that the themes were structured and analysed, given the</p>
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	<p>number and variations of participants, the range of services and mental illnesses and the themes identified, I can appreciate that inevitably the article is long. It may well fit within journal guidelines so the editor may be happy to publish as is. I do think that perhaps having less quotes (?is it necessary to have quotes for each of the themes identified) and more discussion may be worthwhile – perhaps fleshed out as suggested below.</p> <p>2. There are 2 issues that I thought could be usefully addressed in the discussion and conclusions:</p> <ul style="list-style-type: none"> - Firstly, there is plenty of literature on psychoeducation for families which isn't necessarily directed at perinatal families but has some relevance and could be referenced, rather than implying that the wheel must be reinvented. In addition, there is a large range of family therapy literature which also describes very well about how to work with perinatal families, for instance Cluxton-Keller and I think it would be useful to reference this as well or perhaps some other similar articles - I was struck by the lack of cultural focus. Although the ethnicity of the participants is mentioned, and it is clear that there are many who are not Anglo-Saxon, there is a general implication that women and their babies are either in a nuclear family with a partner or else are single parents with their main support from the maternal grandmother of the infant. There are publications, for instance Rahman et al which clarify that in many LMIC family involvement is the norm, and can be utilised for improving outcomes. Thus some discussion of culture and its place in the UK would seem appropriate in terms of looking for useful directions. <p>3. A couple of minor specific points:</p> <ul style="list-style-type: none"> - Page 10L Line 53 – a bit confusing – would be better if the last sentence in that para were the first sentence in the next - In Table 3, 37 partners' ethnicity documented for 32 partners – perhaps they are mixed race but in all other boxes, the parts seem to add up to the correct whole. <p>PLoS One. 2018; 13(6): e0198730. Published online 2018 Jun 14. doi: 10.1371/journal.pone.0198730 Clinical effectiveness of family therapeutic interventions in the prevention and treatment of perinatal depression: A systematic review and meta-analysis Fallon Cluxton-Keller, Bruce ML</p> <p>Interventions for common perinatal mental disorders in women in low- and middle-income countries: a systematic review and meta-analysis Atif Rahman a, Jane Fisher b, Peter Bower c, Stanley Luchters d, Thach Tran e, M Taghi Yasamy f, Shekhar Saxena f & Waquas Waheed c</p> <p>Bulletin of the World Health Organization 2013;91:593-601. doi: http://dx.doi.org/10.2471/BLT.12.109819 [PDF]</p>
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REVIEWER	Eimear Muir-Cochrane Professor Eimear Muir-Cochrane Flinders University, Adelaide, South Australia.
REVIEW RETURNED	03-Apr-2019

GENERAL COMMENTS	This is an interesting paper and of interest to the readership. I offer some thoughts to improve the paper and hopefully strengthen the argument.
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	<p>The paper is well written and I have attached only the pages of the manuscript where I have made comments etc.</p> <p>I think a lot of the references are very old and the inclusion of more recent papers is required for the background as well as the discussion.</p> <p>A specified qualitative method is required in the methods section. Part way down page 4, there are findings provided so I'm not sure this should go into findings rather than methods.</p> <p>Ethical issues could be detailed more, for example what measure were created in the case of mandatory reporting of child abuse , domestic violence etc... and did this occur? Is a limitation that families and mothers were interviewed together in terms of what might not have been said in front of the parents? Were pilot data included in the overall findings and what changes were made in light of the pilot data? many significant and interesting points in the findings, perhaps could be reduced in word length. Good thematic development. Discussion is brief and requires more depth of interpretation and implications of the findings.</p> <p>-- The reviewer also provided a marked copy with additional comments. Please contact the publisher for full details.</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer 1

Comments:

Thank you for the opportunity to review this paper. This is a very timely and interesting study. It is very well reported in this well written paper. It was a pleasure to read it. I have two suggestions for your consideration. Page 6, line 9 and Page 16, line 58-9 typo 'noone' to 'no one'. Consider changing the use of a 'colon' to a 'semi-colon' in the following sentences: Page 7, lines 15-6; Page 14, lines 43-4; Page 15, lines 3-4; Page 16, lines 27-8; Page 17, line 51; Page 20, line 22; Page 28, lines 3-4.

Response:

Many thanks to reviewer 1 for the positive feedback. We have changed 'colons' to 'semi-colons' in the various places suggested (highlighted in track changes throughout).

Reviewer 2

Comments:

Overall, I enjoyed reading this article. It is well written (rare to review an article without various grammatical errors, repetitions, misplaced sentences etc!) and well structured. Overall, I believe it is very publishable. With the number of families interviewed, there is a richness of data which is interesting to read.

I do have a few minor concerns and perhaps positive critiques to offer as follows.

1. It does seem rather long to me. Whilst I appreciated the way that the themes were structured and analysed, given the number and variations of participants, the range of services and mental illnesses and the themes identified, I can appreciate that inevitably the article is long. It may well fit within journal guidelines so the editor may be happy to publish as is. I do think that perhaps having less

quotes (?is it necessary to have quotes for each of the themes identified) and more discussion may be worthwhile – perhaps fleshed out as suggested below.

2. There are 2 issues that I thought could be usefully addressed in the discussion and conclusions:

- Firstly, there is plenty of literature on psychoeducation for families which isn't necessarily directed at perinatal families but has some relevance and could be referenced, rather than implying that the wheel must be reinvented. In addition, there is a large range of family therapy literature which also describes very well about how to work with perinatal families, for instance Cluxton-Keller and I think it would be useful to reference this as well or perhaps some other similar articles

- I was struck by the lack of cultural focus. Although the ethnicity of the participants is mentioned, and it is clear that there are many who are not Anglo-Saxon, there is a general implication that women and their babies are either in a nuclear family with a partner or else are single parents with their main support from the maternal grandmother of the infant. There are publications, for instance Rahman et al which clarify that in many LMIC family involvement is the norm, and can be utilised for improving outcomes. Thus some discussion of culture and its place in the UK would seem appropriate in terms of looking for useful directions.

3. A couple of minor specific points:

- Page 10L Line 53 – a bit confusing – would be better if the last sentence in that para were the first sentence in the next

- In Table 3, 37 partners' ethnicity documented for 32 partners – perhaps they are mixed race but in all other boxes, the parts seem to add up to the correct whole.

Response:

We would like to thank reviewer 2 for her feedback and suggestions, which we found very valuable.

1. As suggested, we have now removed some quotes from the results section in order to allow space to expand on the other areas suggested by the reviewer. We have shown the quotes that we have removed in track changes.

2. We have now added to the Discussion (p.31) references to the literature on psychoeducation for families and to previous research showing the benefit of family therapy interventions in the perinatal period – thank you for these suggestions. Throughout the results section, we have also included greater reference to culture (see p.14, p.15, p.20). We have also expanded on this in the Discussion section (p.27) to show more clearly that families came from a range of cultural backgrounds and differed in their family set-ups. We have also included the Rahman/WHO reference mentioned.

3. We have made the minor amends suggested – e.g. correcting the error in the table relating to partners' ethnicity – many thanks for picking that up.

Reviewer 3:

Comments: The paper is well written and I have attached only the pages of the manuscript where I have made comments etc (2985_001). I think a lot of the references are very old and the inclusion of more recent papers is required for the background as well as the discussion. A specified qualitative method is required in the methods section. Part way down page 4, there are findings provided so I'm not sure this should go into findings rather than methods. Many significant and interesting points in the findings, perhaps could be reduced in word length. Good thematic development. Discussion is brief and requires more depth of interpretation and implications of the findings.

Response:

Thank you also to reviewer 3 for the positive feedback and useful suggestions to further strengthen our paper.

1. In response to reviewer 3's suggestion, we have included some more recent references in the introduction and discussion sections, where possible. Overall, we believe our introduction and discussion sections reference up to date research where this is available.
2. In the method section, we specify that thematic analysis was used (p.7) and we provide the Braun & Clarke (2006) reference for this.
3. We have moved the section on p.4 relating to services accessed to the start of the results section (p.9-10), as suggested.
4. On p.6 we have now expanded the information on ethics to explain how mandatory reporting of risk was handled.
5. We have included in the strengths and limitations section (p.30) the possible limitation arising from parents being interviewed together in exceptional cases.
6. We have now expanded on how pilot feedback/interviews were used in the method section (p.7)
7. As suggested by reviewer 1 too, we have removed some quotes from the results section to reduce its length.
8. Thank you for the suggestion to expand the discussion to provide greater depth of interpretation of the findings and their implications. We agreed with this point and have now added some further critique/analysis on p.29 and p.31 (shown in track changes). We have also amended the abstract slightly in light of this.
9. Finally, we made the minor changes shown on the relevant pages attached by the reviewer (again shown in track changes).

We have also included a data sharing agreement at the end of the paper and have included in-text citations of the two diagrams.

VERSION 2 – REVIEW

REVIEWER	Anne Sved Williams Women's and Children's Health Network, South Australia
REVIEW RETURNED	19-May-2019

GENERAL COMMENTS	<p>Thanks for asking me to review this paper again. it is much better and stronger for the revisions made eg somewhat shorter with removal of some of the quotes, and the conclusions are stronger for a focus on culture and family and societal norms - i really liked this section. However the only minor criticism is that it is still very long - i think the results section would be better for further pruning eg i have here some examples of places where there are 2 quotes to make the same point and also an example where the quote is shortened and i think to better effect. Grandmother 6/Partner 7 – on page 17 – doesn't need to have both</p> <p>Mother 26/relative 2 – on page 19</p> <p>On p 23 there is a shorter quote and this works better or at least just as well “Even the thought of going to see a counsellor for an hour was just like, well I just don't have time for it.” (Partner 2).</p> <p>Obviously it is an editorial decision about whether the article could be published as is rather than further pruning. It does read very well</p>
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REVIEWER	Eimear Muir-Cochrane Flinders University, Adelaide Australia
REVIEW RETURNED	29-May-2019
GENERAL COMMENTS	Changes made well and I think it is robust paper now. Well done to the authors!

VERSION 2 – AUTHOR RESPONSE

Response to reviewers:

Reviewer: 2

Comments:

Thanks for asking me to review this paper again. it is much better and stronger for the revisions made eg somewhat shorter with removal of some of the quotes, and the conclusions are stronger for a focus on culture and family and societal norms - i really liked this section. However the only minor criticism is that it is still very long - i think the results section would be better for further pruning eg i have here some examples of places where there are 2 quotes to make the same point and also an example where the quote is shortened and i think to better effect. Grandmother 6/Partner 7 – on page 17 – doesn't need to have both

Mother 26/relative 2 – on page 19

On p 23 there is a shorter quote and this works better or at least just as well “Even the thought of going to see a counsellor for an hour was just like, well I just don’t have time for it.” (Partner 2).

Obviously it is an editorial decision about whether the article could be published as is rather than further pruning. It does read very well

Response: Many thanks for this positive feedback on our revised manuscript. In response to the outstanding comment, we have now removed or shortened a number of quotations throughout the 'Results' section.

Reviewer: 3

Comments:

Changes made well and I think it is robust paper now. Well done to the authors!

Response:

Thank you for this feedback - we are pleased that the reviewer is now happy with the manuscript.