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Confirmation of your submission to BMC Public Health - PUBH-D-20-03916

1 message

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To: Ratna Dwi Wulandari <ratna-d-w@fkm.unair.ac.id>

Mon, Jun 29, 2020 at 8:12 AM

PUBH-D-20-03916

The Effects of Mother's Education on Achieving Exclusive Breastfeeding in Indonesia Agung Dwi Laksono; Ratna Dwi Wulandari; Mursyidul Ibad; Ina Kusrini BMC Public Health

Dear Dr Wulandari.

Thank you for submitting your manuscript 'The Effects of Mother's Education on Achieving Exclusive Breastfeeding in Indonesia' to BMC Public Health.

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Ratna Dwi Wulandari <ratna-d-w@fkm.unair.ac.id>

Your submission to BMC Public Health - PUBH-D-20-03916

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Reply-To: BMC Public Health Editorial Office <victorino.silvestre@biomedcentral.com>

To: Ratna Dwi Wulandari <ratna-d-w@fkm.unair.ac.id>

n>

Tue, Sep 8, 2020 at 1:17 PM

PUBH-D-20-03916

The Effects of Mother's Education on Achieving Exclusive Breastfeeding in Indonesia Agung Dwi Laksono; Ratna Dwi Wulandari; Mursyidul Ibad; Ina Kusrini BMC Public Health

Dear Dr Wulandari,

Your manuscript "The Effects of Mother's Education on Achieving Exclusive Breastfeeding in Indonesia" (PUBH-D-20-03916) has been assessed by our reviewers. They have raised a number of points which we believe would improve the manuscript and may allow a revised version to be published in BMC Public Health.

Their reports, together with any other comments, are below. Please also take a moment to check our website at https://www.editorialmanager.com/pubh/ for any additional comments that were saved as attachments. If you are able to fully address these points, we would encourage you to submit a revised manuscript to BMC Public Health.

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Please also ensure that your revised manuscript conforms to the journal style, which can be found at the Submission Guidelines on the journal homepage.

A decision will be made once we have received your revised manuscript, which we expect by 08 Oct 2020.

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Best wishes,

Habiba Ali, PhD, RD, CDE

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Technical Comments:

Editor Comments:

There are numerous shortcomings with this manuscript as pointed out by both reviewers.

Please clearly address all comments raised by both

There are discrepancies of the content reported in the Results and Discussions sections in terms of EBF and employed mothers vs unemployed mothers and should be clarified.

The Discussion section does not adequately cover the Results of the study

Social support for EBF was not investigated but included in the Discussion of the results, please clarify

What are the implications of the findings for policies promoting EBF? This was mentioned that the results of the study will be import for policy makers to promote EBF (lines 74-77), however, this was not discussed in the Discussion section.

The manuscript should be edited for language and clarity.

We hope all comments raised by the peer reviewers and the editor will help the authors to improve their manuscript.

We operate a transparent peer review process for this journal where reviewer reports are published with the article but the reviewers are not named (unless they opt in to include their name).

Reviewer reports:

Reviewer 1: See comments in the uploaded document and ensure that the results are in line with the discussion please

Reviewer 2: This is a well done secondary data analysis, but there are some problems with it that should be mentioned in a "limitations" section at the

end of the discussion section.

Is EBF a binary variable, yes if the mother achieved six months, no if she achieved 5.5 months or less? Why do the research this way?

Enormous amounts of information and statistical power are lost by not using the duration of EBF per se. If it was done this way, then you are

not really linking the independent variable to duration of EBF but to the unusual and difficult to achieve practice of continuing with it up to 6

mo of age.

The authors should always report their findings as related to "reported duration/completion of EBF" rather than duration per se. We do not

know the actual duration.

Although there seems to be a widespread belief that "the larger the better" for sample size, there is a problem when it becomes as large as

this one is. This is linked to effect size. Tiny differences that are meaningless in real life are often statistically significant. This is clear from the

findings in Table 2 where very small and programatically meaningless differences in education by various variables are nonetheless

significant. For example, the average differences in child's age vary only by 0.28 years, yet this is associated with highly significant

differences in education of the mother. Since there is no trend involved, these differences are almost certainly due to random effects or small

sampling or measurement errors and have no practical meaning. This problem of excessive sample size tends to result in studies like the

current one in which very small differences in the association between dependent and independent variables (ORs of

1.1 or 1.2) is significant.

Differences with programmatic implications tend to have ORs larger than 1.5. Thus the researchers should refer to their findings as showing a

small relationship between reported duration of maternal education and reported duration of EBF.

The worst example of the misleading nature of this problem in the current manuscript is the authors' claim that EBF was more likely among

employed mothers. (This is a misinterpretation. The data in Table 3 show the odds of EBF were lower for employed mothers.) More

importantly, I was shocked when I saw how little the effect (if indeed it was one) was. There must be something special about Indonesia for this

to be the case. Do even informally employed women receive maternity benefits? Are most able to work at home or take the baby to work or

access infant care near their place of employment? In any case, an OR of 0.954 means there is hardly any impact of maternal employment on

EBF duration, certainly none that is meaningful.

There are three likely sources of significant error in a study such as this one: (1) Definitions of exclusive breastfeeding. Mothers may not

completely understand the researchers' definition of exclusive breastfeeding. The authors should try to determine from the original

researchers what steps may have been taken to avoid this. If 6 mo was a binary variable, were mothers considered to be "yes" only if they

NEVER gave anything else? Or was this even asked? What about prelacteal feeds? In places where this is common, very few achieve 6 mo

EBF if one starts counting at birth. (2) Recall error. My own research and others I have seen suggest that mothers remember the overall

duration of breastfeeding well. This is likely because the moment of stopping has personal and/or cultural significance. Whether or not this is

true for exclusive breastfeeding as well likely relates to whether mothers (or their culture) consider its duration to be important. If not, random

errors are likely to increase as the children get older. The authors could check this by seeing if there is a higher SD among EBF durations

reported by older and older children. (3) Where the duration of EBF is important, a more problematic error is likely. This involves mothers

reporting what they believe the researchers want to hear or what will make them look like better mothers. Mothers likely to do this might also

be likely to report higher levels of education than they actually attained. Regarding EBF, they might also inflate the duration to lower the risk

of their being blamed if the child has any health problems. Some studies I have seen suggest this problem gets worse as children get older.

These data do suggest that the reported duration of EBF increased somewhat by age of the child. This could of course also indicate a

secular change, that the duration of exclusive breastfeeding has been declining during the past five years. Is there evidence showing this? If

not, then this should be reported as an indication that there may be a response bias.

The authors cite one study from New Zealand suggesting that grandmothers have a positive impact on EBF. Two

sentences later they write

"Similar research results were also found in Ethiopia 33, Kenya 34, Taiwan 35, and Australia 36" Does this also refer to grandmothers? From

what I have seen from many studies, mothers in law in particular have a negative impact on EBF, especially where it a relatively new

practice.

I suggest it would be more logical to reverse the order of tables 1 and 2.

Research reports should avoid using language like "The results found" and simply report the results. Not only does this reduce the length of

manuscripts, in reality, results cannot find anything. "In line with the results of the study, from a different perspective." on line 192-3 is not a

sentence and its meaning is unclear.

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- Ethics approval and consent to participate
- Consent to publish
- Availability of data and materials
- Competing interests
- Funding

- Authors' Contributions
- Acknowledgements
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^{**}Our flexible approach during the COVID-19 pandemic**



Ratna Dwi Wulandari <ratna-d-w@fkm.unair.ac.id>

PUBH-D-20-03916: Publishing your article – information required

1 message

BioMed Central Customer Services <info@biomedcentral.com> To: Ratna Wulandari <ratna-d-w@fkm.unair.ac.id>

Tue, Dec 8, 2020 at 8:00 PM

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