The Impact of Institutional Delivery on Neonatal and Maternal Health Outcomes: Evidence from a Road Upgrade Program in India

Reflexivity Statement

1. How does this study address local research and policy priorities?

Addressing high rates of maternal and newborn mortality is both an important Indian and global health priority issue. We have previously conducted studies on the evidence of the effectiveness of institutional (vs home) births in various international contexts. This study aims to further strengthen the evidence base on the effectiveness of facility (vs home) births at improved maternal and newborn health outcomes.

2. How were local researchers involved in study design?

This study relied entirely upon secondary data analysis. There was no involvement of local researchers in this study.

3. How has funding been used to support the local research team?

As there were no local researchers involved in this study, no funding was provided to local researchers.

4. How are research staff who conducted data collection acknowledged?

We have acknowledged research assistants that aided this project.

5. Do all members of the research partnership have access to study data?

All data in this study are publicly available and will be made available to anyone who requests them.

6. How was data used to develop analytical skills within the partnership?

This study was conducted as part of a post-doctoral fellowship at Wilfrid Laurier University, which provided an opportunity for the lead researcher to develop his research skills.

7. How have research partners collaborated in interpreting study data?

All members of the research team were involved in the interpretation of data.

8. How were research partners supported to develop writing skills?

All members of the research team were involved in writing the manuscript.

9. How will research products be shared to address local needs?

We hope the findings of this study will further contribute to both Indian and global policy discussions on how to improve maternal health outcomes in low resource settings. In particular, we hope it helps to emphasise the message that it is not enough for women to simply give birth in a clinic, there also needs to be attention on the quality of care delivered in those settings.

10. How is the leadership, contribution and ownership of this work by LMIC researchers recognised within the authorship?

There were no LMIC researchers involved in this study.

11. How have early career researchers across the partnership been included within the authorship team?

The first author of this paper (AS) was a post-doctoral fellow at the time this manuscript was written. He has been listed as the first author of this paper to recognize the intellectual contribution he made to this paper.

12. How has gender balance been addressed within the authorship?

One author is male (AS) and the other is female (KG). We therefore have achieved even gender balance amongst the authors.

13. How has the project contributed to training of LMIC researchers?

This project made no contribution to the training of LMIC researchers.

14. How has the project contributed to improvements in local infrastructure?

This project has not directly contributed to improvements in local infrastructure.

15. What safeguarding procedures were used to protect local study participants and researchers?

There was no primary data collection as part of this project, therefore this question is not directly applicable.