

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)	Parental understanding and self-blame following sudden infant death: a mixed-methods study of bereaved parents' and professionals' experiences.
AUTHORS	Garstang, Joanna; Griffiths, Frances; Sidebotham, Peter

VERSION 1 - REVIEW

REVIEWER	Dorte M. Christiansen National Center for Psychotraumatology, University of Southern Denmark, Denmark and Department of Psychology and Behavioural Sciences, University of Aarhus, Denmark
REVIEW RETURNED	08-Feb-2016

GENERAL COMMENTS	<p>My concerns have been adequately addressed. I only have two minor issues that I would like for the authors to consider:</p> <ol style="list-style-type: none">1. I still do not think that the term "families" is appropriate to use here, as only one or two parents were included. I would still much prefer "parents" or "participants", both of which can be used to describe both mothers interviewed alone and parents interviewed together, thus not requiring any definition. Furthermore, where parents were included together, they appear to be treated as a single case, rather than as two separate persons interviewed together. Although it is not fully clear from Table 2, it appears that mothers and fathers interviewed together only count as one. This is very misleading. Although they represent a single loss, the loss may have different qualities for the two parents and when quotes are used, these are traced back to one parent, either the father or the mother. Thus, even when they are interviewed together, they should still be treated as individuals - and reported as such. The same goes for parents who participated via self-report, whether they filled out a questionnaire each or did one together. In accordance with this, the authors should be aware that parents interviewed together may not have had the same opportunity to be heard as mothers interviewed alone. This is especially likely to be true for fathers who are often less verbal about their loss and who tend to take on the role as supportive husband before that of grieving father. I think that the authors should mention this in their limitations section.2. There are still some remaining typing errors, including errors in the new text added. I recommend another round of thorough proof reading to get rid of errors such as the numbers in Table 2 not adding up and a missing word in the sentence "the term parents or is used..."
-------------------------	---

REVIEWER	Jane Warland UniSA: Australia
REVIEW RETURNED	16-Feb-2016

GENERAL COMMENTS	<p>Thankyou for the opportunity to re-review this important paper. There are still some issues with it that the authors need to consider.</p> <ul style="list-style-type: none"> • Page 4 line 25. "Now seen as" consider wording change as the Filiano paper was published in the 90s which is hardly "now" • Page 8 line 18. You say scores were entered into SPSS here and repeat on page 10s. This makes this sentence redundant here. • Page 10: ethical issues the last sentence needs rephrasing "so not" ? • Page 20: it remains my view that this analysis is inappropriate in this paper. However, if you want to keep it, as is apparently the case, then you need to add the n to table 6. Unless I am mistaken, your text seems to indicate that you are putting some kind of importance on 3 participants scoring highly on the HADS and wanting to correlate this with those same participants also reporting "complete blame." You have very small numbers in this "mixed methods" study in first place and making any kind of pronouncement of relevance based on 3 participant's views is nonsense, IMHO. • Discussion: remove the dogma from many of your claims such as "thus increasing anxiety and grief" • Regarding your claim that you have found that "self blame is related to "anxiety and depression." Your discussion needs to acknowledge that your findings SUGGEST "severe" blame and anxiety and depression MAY be associated with each other however, the numbers were tiny meaning you could have made a type one error and that even if an association exists your study couldn't establish the direction i.e. do anxious women blame themselves more highly or does self blame lead to anxiety. • Your conclusion appears out of the blue. You do not seem to have demonstrated a clear link between sharing information and "levels" of self blame.
-------------------------	---

REVIEWER	Professor Helen Ball Durham University, UK
REVIEW RETURNED	26-Feb-2016

GENERAL COMMENTS	<p>This is a greatly improved manuscript compared to the previous version. I commend the authors for carefully addressing the comments of all reviewers. I am confident that they have now produced a publishable and useful paper. The only comment I have remaining is that not all readers will be familiar with what a Framework Approach is, and this could have a sentence or so of explanation in the text in addition to the citation.</p>
-------------------------	--

VERSION 1 – AUTHOR RESPONSE

Reviewer 1

1. I still do not think that the term "families" is appropriate to use here, as only one or two parents were included. I would still much prefer "parents" or "participants", both of which can be used to describe both mothers interviewed alone and parents interviewed together, thus not requiring any definition. Furthermore, where parents were included together, they appear to be treated as a single case, rather than as two separate persons interviewed together. Although it is not fully clear from

Table 2, it appears that mothers and fathers interviewed together only count as one. This is very misleading. Although they represent a single loss, the loss may have different qualities for the two parents and when quotes are used, these are traced back to one parent, either the father or the mother. Thus, even when they are interviewed together, they should still be treated as individuals - and reported as such. The same goes for parents who participated via self-report, whether they filled out a questionnaire each or did one together. In accordance with this, the authors should be aware that parents interviewed together may not have had the same opportunity to be heard as mothers interviewed alone. This is especially likely to be true for fathers who are often less verbal about their loss and who tend to take on the role as supportive husband before that of grieving father. I think that the authors should mention this in their limitations section.

We have removed the term 'families' throughout the manuscript and replaced it with parents. We have clarified the different inputs of both mothers and fathers through the interviews and questionnaires, and have acknowledged some of the difficulties in ensuring that both parents' voices are heard: 'We interviewed many parents together as couples; these parents did not have the opportunity to give their own individual account. It is possible that some parents (particularly fathers) may not have fully shared their feelings with us trying to protect their partners from further distress or that only the dominant parent's view was voiced.'

There are still some remaining typing errors, including errors in the new text added. I recommend another round of thorough proof reading to get rid of errors such as the numbers in Table 2 not adding up and a missing word in the sentence "the term parents or is used...".

We have thoroughly proof-read the manuscript and ensured that the numbers add up correctly in table 2.

Reviewer 2

1. Page 4 line 25. "Now seen as" consider wording change as the Filiano paper was published in the 90s which is hardly "now"

Page 4 introduction: 'now seen as' has been changed to 'can be understood as'.

2. Page 8 line 18. You say scores were entered into SPSS here and repeat on page 10s. This makes this sentence redundant here.

Page 8 methods: the redundant sentence on SPSS has been removed.

3. Page 10: ethical issues the last sentence needs rephrasing "so not" ?

Page 10 ethical issues: this has been rephrased as 'interview dates were arranged at least two weeks ahead to avoid rushing parents'.

4. Page 20: it remains my view that this analysis is inappropriate in this paper. However, if you want to keep it, as is apparently the case, then you need to add the n to table 6. Unless I am mistaken, your text seems to indicate that you are putting some kind of importance on 3 participants scoring highly on the HADS and wanting to correlate this with those same participants also reporting "complete blame." You have very small numbers in this "mixed methods" study in first place and making any kind of pronouncement of relevance based on 3 participant's views is nonsense, IMHO.

Page 20: we have added 'n=3 and n=18' to table 6. We have highlighted in the discussion section the difficulties posed by such a small sample size. 'Although the HADS scores were significantly different between mothers exhibiting over-whelming self-blame and mothers who did not, the sample size was small thus limiting the reliability of this finding which will need confirmation from a larger study.'

5. Discussion: remove the dogma from many of your claims such as "thus increasing anxiety and grief"

Discussion section: we have rephrased this to ensure that a less dogmatic stance is taken, for example: 'In this study, most SIDS parents seemed to understand the concept...'

6. Regarding your claim that you have found that "self blame is related to "anxiety and depression." Your discussion needs to acknowledge that your findings SUGGEST "severe" blame and anxiety and depression MAY be associated with each other however, the numbers were tiny meaning you could have made a type one error and that even if an association exists your study couldn't establish the direction i.e. do anxious women blame themselves more highly or does self blame lead to anxiety. We have rephrased our statement about the link between severe blame and depression/anxiety to

make it less dogmatic: 'Self-blame was common in mothers following both medically-explained deaths and SIDS, however when over-whelming it appeared associated with clinically-significant anxiety and depression.' As in point 4 above, we have emphasised the need to confirm this association with larger studies.

7. Your conclusion appears out of the blue. You do not seem to have demonstrated a clear link between sharing information and "levels" of self blame.

Conclusion: we have rewritten the final sentences to show how our conclusion follows logically from the results. 'Our results suggest that parents want to know why their infants died, that they can understand the role of risk factors in SIDS. Our findings should provide reassurance that sharing of detailed information by healthcare professionals is what parents want. We found no evidence that sharing this information is a direct cause of parental self-blame.'

Reviewer 3

1. The only comment I have remaining is that not all readers will be familiar with what a Framework Approach is, and this could have a sentence or so of explanation in the text in addition to the citation. We have added a sentence explaining about Framework Approach 'Framework Approach was developed for policy evaluations; it is grounded in the original accounts of the subjects of research, is a systematic process and allows for within- and between-case analyses.'

2VERSION 2 – REVIEW

REVIEWER	Dorte M. Christiansen Department of Psychology and Behavioural Sciences University of Aarhus, Denmark & National Center for Psychotraumatology, Institute of Psychology, University of Southern Denmark
REVIEW RETURNED	04-Apr-2016

GENERAL COMMENTS	All my remaining concerns have been adequately met, and I believe that the manuscript is ready for publication.
-------------------------	---