



INTERNATIONAL CONFERENCE ON
FAMILY PLANNING
PATTAYA CITY, THAILAND • 14-17 NOVEMBER 2022



**World Health
Organization**

WHO ICFP Scientific Writing, Mentoring and Coaching Course

14-17 November 2022



Bill & Melinda Gates Institute for
Population and Reproductive Health



Learning objective & outcomes

Students will learn about the ICFP Gateway on Gates Open Research, the post-conference coaching program, gain tips on managing workload and being productive writers, and have an opportunity to give feedback on the course.

Intended learning outcomes

- Tips for how to "sell" your paper to a journal editor and reviewer, including compelling visualisations, tables, figures and video abstracts
- Discuss what makes a good peer review and how to respond to peer review
- Address any outstanding questions about the material covered in the previous sessions
- Present details of the upcoming coaching and webinar program

Gates Open Research

- Launched in 2017
- Set up to provide a fully open publishing venue for Gates-funded researchers
- Focus on increasing access to publications and reducing research waste by sharing as many outputs as possible



International Conference on Family Planning Gateway

- Supported by BMGF to enable access to peer reviewed publications around the conference
- All conference presenters are invited to submit research relating to their presentation to the Gateway, regardless of funder



Increasing the visibility and impact of results and discussion presented at ICFP

The International Conference on Family Planning Gateway allows publication of and access to selected research, programs and advocacy presented at the Conferences.

The ICFP serves as a strategic inflection point for the family planning and reproductive health community worldwide. Since its inauguration in 2009, ICFP has provided an opportunity for political leaders, researchers, policymakers, advocates and youth to disseminate knowledge, celebrate successes, and identify next steps toward improving access to quality family planning programs among all women and men in the world.

Gateway Advisor



LATEST ARTICLES

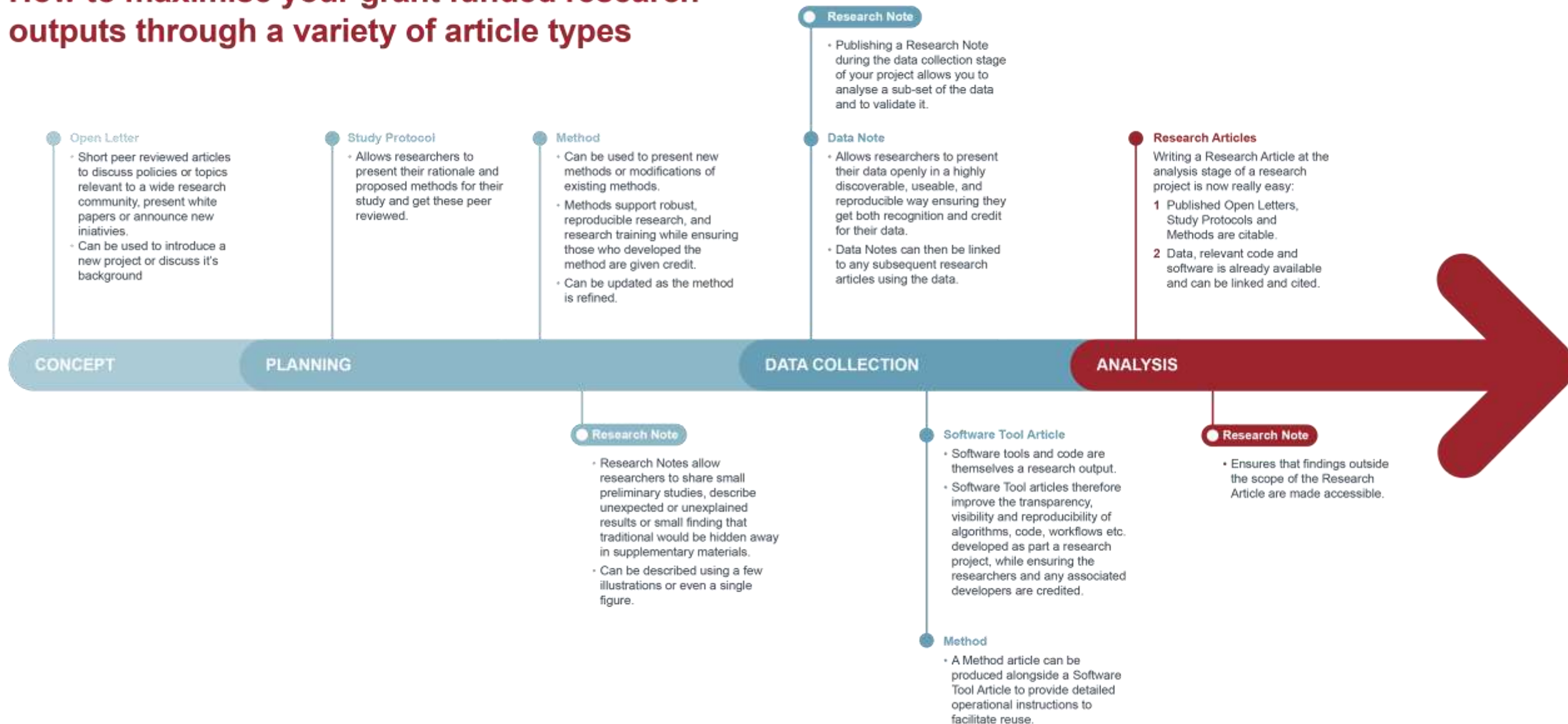
The effect of women's bargaining power within couples on contraceptive use in Cameroon
Dimin Tchakounté Tchumi, et al

The relationship between spatial

Preparing to submit

- Decide your article type
 - You are not limited to Research Articles
 - Which article type best suits your research stage and which journals accept it?

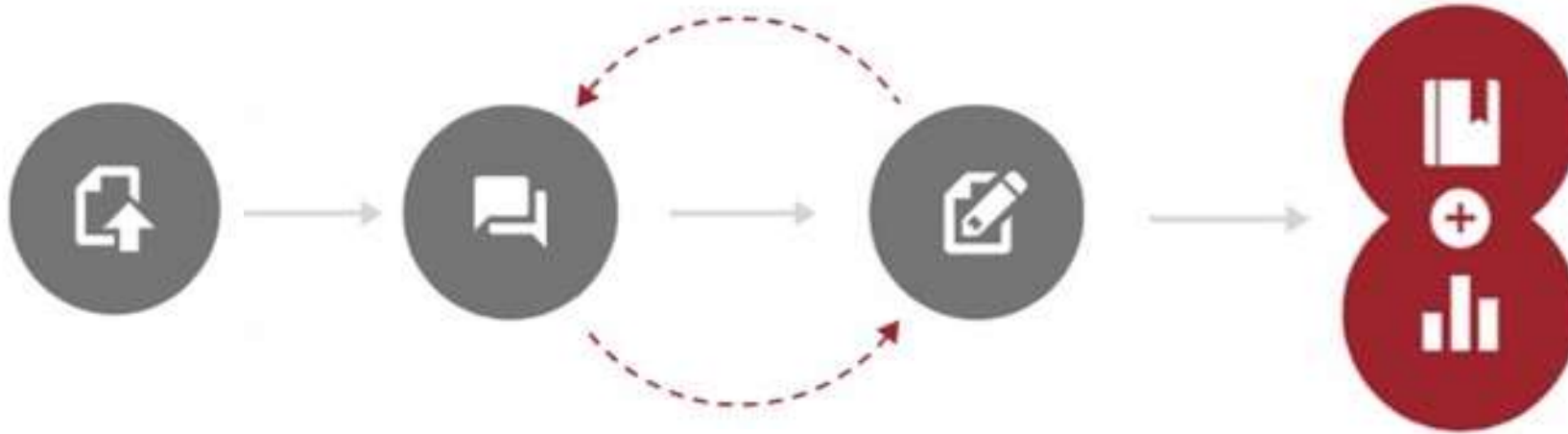
How to maximise your grant funded research outputs through a variety of article types



Preparing to submit

- Decide your article type
 - You are not limited to Research Articles
 - Which article type best suits your research stage and which journals accept it?
- Read the Article Guidelines
 - These will be on the journal website
 - Some journals require certain formatting or reference styles
 - Are any reporting guidelines endorsed or mandated?
 - Are any other policies applicable?
 - How should Figures and Tables be presented?
- Understand the publishing process for your chosen journal – what will happen when?

Traditional Publishing Model



Article Submission

Submissions are subject to checks that should include plagiarism and ethical considerations.

Some journals may also have editors screen papers at this stage for their scope, novelty and potential impact.

Peer review

Reviewers are invited to comment on an article. They may recommend changes or provide recommendations to the editor on whether or not the paper should be accepted for publication. Peer review may be open or closed but generally happens before publication.

Publication

After acceptance an article is published, shared with the community and citations and metrics can now accumulate.

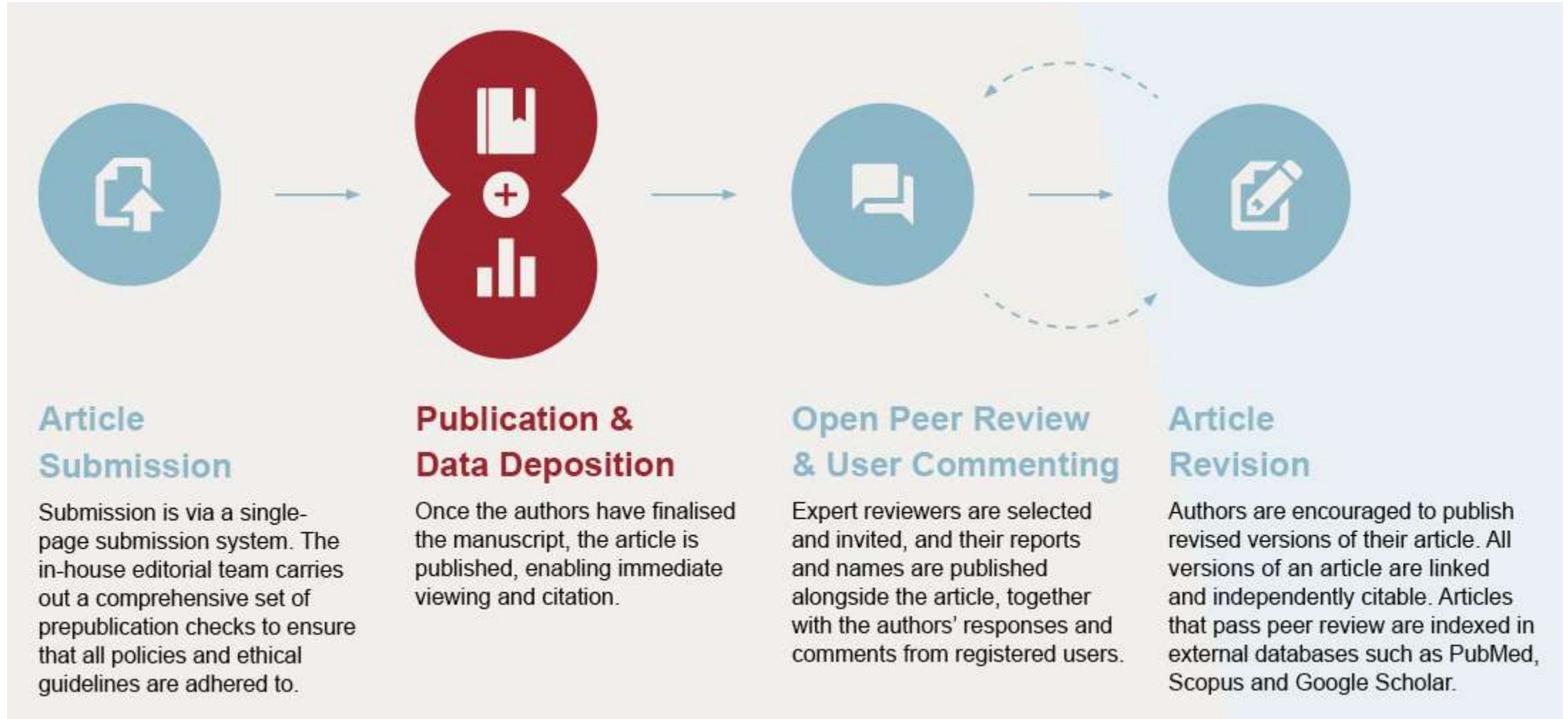
A note on peer review

Peer review may be open, closed or somewhere in the middle.

- Double blind or double anonymised means neither the authors nor reviewers know each others' identities
- Single blind or single anonymised means that the reviewers know who the authors are but authors are not aware of their reviewers' identities
- Open peer review means that both reviewers and authors know each others' identities

In any of these models, journals may or may not choose to operate transparent review where reviewer comments are published alongside an article. These may or may not be accompanied by reviewer identities.

Gates Open Research Publishing Model



Submission



The submission form

- Submission is via an online form
- If choosing Gates Open Research
 - Authors should select the ICFP Gateway from the dropdown
 - If submitting as an ICFP presenter without other Gates funding, **ICFP2022** should be entered as the Grant ID

Data sharing

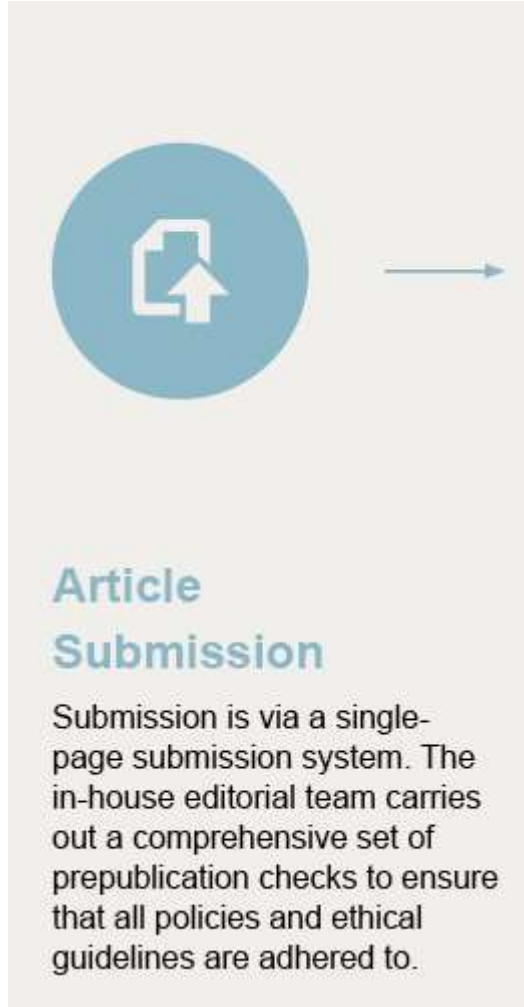
- Authors will be required to share their underlying data
- Data Guidelines provide detailed instructions and recommendations for data repositories

A note on data sharing

- Data sharing policies vary between journals, some will not require any but increasingly authors must at least provide a data availability statement
- Gates Open Research supports FAIR data principles: Findable, Accessible, Interoperable, Reusable. We encourage authors to:
 1. Prepare your data for sharing in a way that is 'as open as possible, as closed as necessary' e.g. do you need to anonymise patient data
 2. Choose a repository, look for a recognised repository that provides a persistent identifier, most commonly a DOI
 3. Add a data availability statement to your article, even if no data is associated with it
 4. Include a link to your deposited data in your article

<https://gatesopenresearch.org/for-authors/data-guidelines>

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Data sharing

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- Data Guidelines provide detailed instructions and recommendations for data repositories

Suggesting peer reviewers

- You will be asked to suggest potential reviewers for your article, these should be:
 - Experts in the subject area, with relevant publications of their own
 - Not your colleagues, friends or past collaborators/coauthors

Pre-publication checks



Article Submission

Submission is via a single-page submission system. The in-house editorial team carries out a comprehensive set of prepublication checks to ensure that all policies and ethical guidelines are adhered to.

Pre-publication checks

- Plagiarism
- Ethical consent
- Reporting guidelines
- Rigorous methods
- Sound science
- English language readability
- Data shared openly
- Image quality and integrity

English language editing on Gates Open Research

If needed, editorial staff will offer ICFP Gateway authors English language editing services to improve the readability of their submission. This service is being funded by the Gates Foundation at no cost to authors

Production and publication



Publication & Data Deposition

Once the authors have finalised the manuscript, the article is published, enabling immediate viewing and citation.

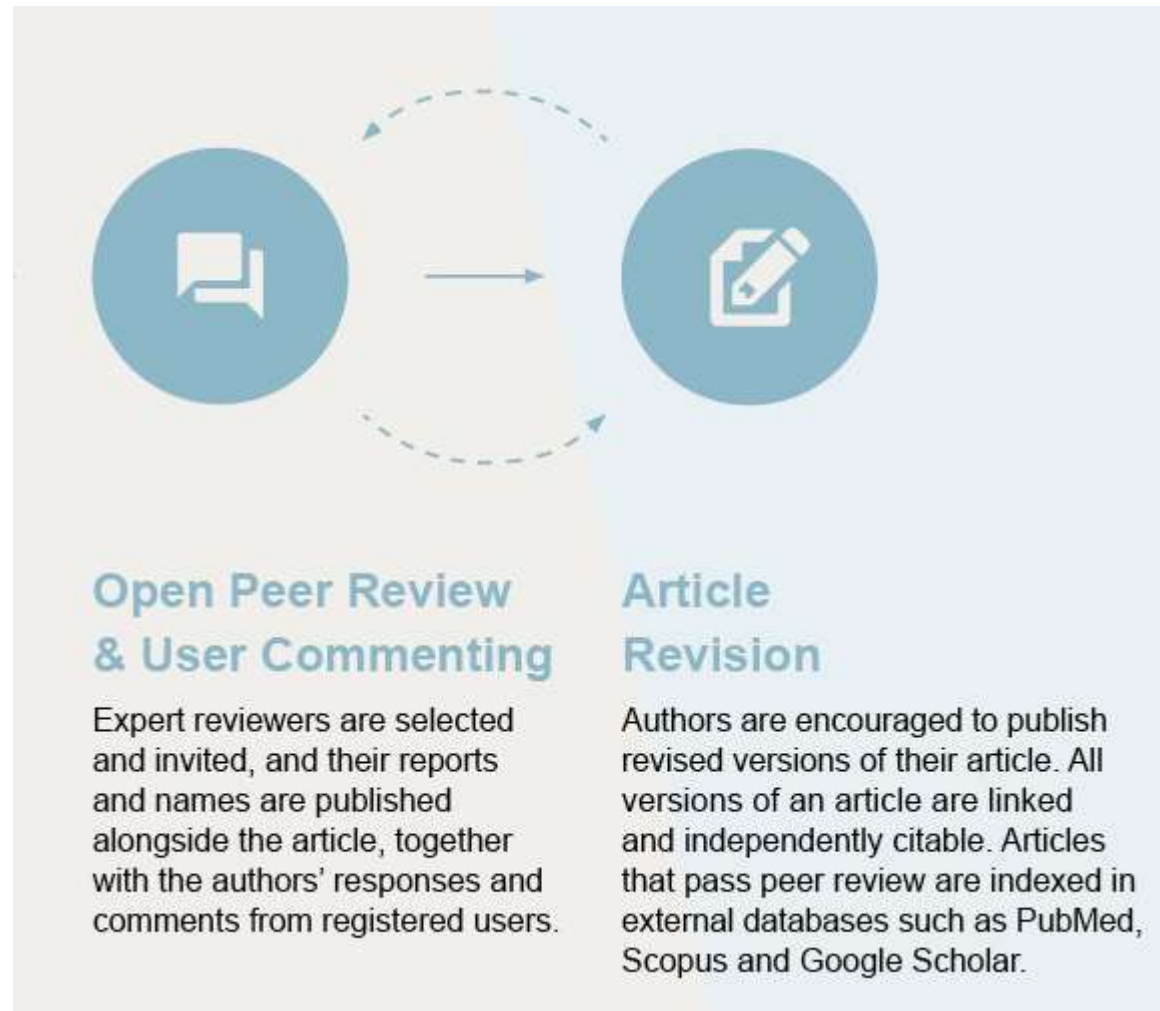
Production to publication

- Proofs will be sent for approval, be sure to respond to these in a timely manner
- If you plan to be away from emails or will be unable to check proofs consider appointing a co-author as responsible for these in your absence or let the journal know to expect a delay

Publication

- On Gates Open Research your article is now published, and described as 'awaiting peer review'
- It can be found in Google Scholar and can be cited

Peer review



Addressing peer review comments

- Be thorough, address each point in turn and provide a response including an explanation of any changes made
- Be prepared to say no. You are allowed to disagree with your reviewers but should provide a detailed response explaining why.
- Be prepared for multiple rounds of review.
- Manage expectations – not going to get a revised version submitted for a while? Let the editorial team know.

Open, transparent peer review

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RESEARCH ARTICLE

REVISED

Measures of family planning service quality associated with contraceptive discontinuation: an analysis of Measurement, Learning & Evaluation (MLE) project data from urban Kenya [version 2; peer review: 2 approved]

Karla Feeser ¹, Nirali M. Chakraborty ¹, Lisa Calhoun², Ilene S. Speizer²

[Author details](#)

 This article is included in the [International Conference on Family Planning gateway](#).

Abstract

Introduction: Several measures to assess family planning service quality (FPQ) exist, yet there is limited evidence on their association with contraceptive discontinuation. Using data from the Measurement, Learning & Evaluation (MLE) Project, this study investigates the association between FPQ and discontinuation-while-in-need without switching in five cities in Kenya. Two measures of FPQ are examined – the Method Information Index (MII) and a comprehensive service delivery point (SDP) assessment rooted in the Bruce Framework for FPQ.

Methods: Three models were constructed: two to assess MII reported in household interviews (as an ordinal and binary variable) among 1,033 FP users, and one for facility-level quality domains among 938 FP users who could be linked to a facility type included in the SDP assessment. Cox proportional hazards ratios were estimated where the event of interest was discontinuation-while-in-need without switching. Facility-level FPQ domains were identified using exploratory factor analysis (EFA) using SDP assessment data from 124 facilities.

Results: A woman's likelihood of discontinuation-while-in-need was approximately halved whether she was informed of one aspect of MII (HR: 0.45, $p < 0.05$), or all three (HR: 0.51, $p < 0.01$) versus receiving no information, when MII was assessed as an ordinal variable. Six facility-level quality domains were identified in EFA. Higher scores in information exchange, privacy, autonomy & dignity and technical competence were associated with a reduced risk of discontinuation-while-in-need ($p < 0.05$).

Conclusions: The MII has potential as an actionable metric for FPQ monitoring at the health facility level. Furthermore, family planning facilities and programs should emphasize information provision and client-centered approaches to care alongside technical competence in the provision of FP care.

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Reviewer Status   

Reviewer Reports

	Invited Reviewers	
	1	2
Version 2 (revision) 29 Jan 20	 read	 read
Version 1 02 May 19	 read	 read

1. Kelsey Holt , University of California, San Francisco, San Francisco, USA
2. Amy O. Tsui , Johns Hopkins Bloomberg School of Public Health, Baltimore, USA

Comments on this article

[All Comments \(0\)](#)

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Alongside their report, reviewers assign a status to the article:

APPROVED

The paper is scientifically sound in its current form and only minor, if any, improvements are suggested

APPROVED WITH RESERVATIONS


Key revisions are required to address specific details and make the paper fully scientifically sound

NOT APPROVED

Fundamental flaws in the paper seriously undermine the findings and conclusions

Reviewer Report

10 Jun 2019 | for Version 1

Kelsey Holt , Department of Family and Community Medicine, University of California, San Francisco, San Francisco, CA, USA

30 Views



 Cite this report

 Responses (1)

? APPROVED WITH RESERVATIONS



Thank you very much for the opportunity to review this submission. In the article, the authors present results of an analysis of data from household surveys and facility assessments related to the link between quality of care and contraceptive continuation. Though much research exists analyzing a similar question, the article is unique in utilizing the MII as an exposure variable. This is important because the MII is increasingly being used as a standardized quality indicator of client experience and it is important to know how it relates to contraceptive continuation. I have detailed a number of substantive recommendations to strengthen the paper.

1. I appreciate the use of "discontinuation-while-in-need" as an innovative way to describe the outcome of interest and signal that not all discontinuation is created equal. Please be sure that 1) this is evenly used throughout (e.g., in the Conclusions it is not used); and 2) that when it is first used the definition is given so that it is clear that it does not include people who have switched to another method. If possible, this clarification should also be added to the Introduction of the Abstract (i.e., "discontinuation-while-in-need *without switching*") as this will help normalize switching as not being a negative outcome. Also on page 4 where the DHS data from Kenya is reported, it would be important to clarify whether the 31% discontinuation figure allowed for switching.
2. Also related to use of discontinuation-while-in-need as an outcome, I suggest more justification in the body of the paper (and abstract if at all possible) as to why this is an important outcome. In the first paragraph of the Introduction, a circular argument is given (quality is associated with continuation which therefore means that continuation is an important outcome? But why?) Perhaps the authors want to justify this by pointing to the fact that a person's ability to use contraception when they don't want to be pregnant is an important outcome because it is an indication that the health system has met their

AUTHOR RESPONSE 29 Jan 2020

Karla Feeser, Metrics for Management, Baltimore, USA

Thank you for your detailed review and attention. We have carefully considered your feedback and revised our manuscript accordingly. Please see our responses to each of your numbered comments below:

1. We agree that "discontinuation-while-in-need" provides an important distinction from all forms of discontinuation in our outcome of interest, and that switching to another method need not be interpreted as a negative outcome, given that the users are still using contraception while in need. We have standardized our language from "discontinuation" to "discontinuation-while-in-need" throughout the manuscript, and clarified the definition to "discontinuation-while-in-need without switching" when it is first introduced. Regarding the DHS data from Kenya reported on page 4, the 31% of episodes that were discontinued does include switching (11% of episodes). This has been clarified in the body of the manuscript.
2. We apologize for our lack of clarity in our justification for discontinuation-while-in-need as an outcome in this analysis. What we intended to say was that it has been demonstrated elsewhere that the quality of services can impact continued use of contraception and that this provides a good basis for its use in our models from an analytical perspective. Additionally, we aimed to identify a need: We know that these two things (quality and discontinuation) are associated, and can reasonably expect improvements in quality to lead to reductions in discontinuation rates, but we haven't necessarily identified with any certainty which aspects of quality are truly related nor do we have a good way to measure process and structural quality in real time. We agree that there is an additional point to

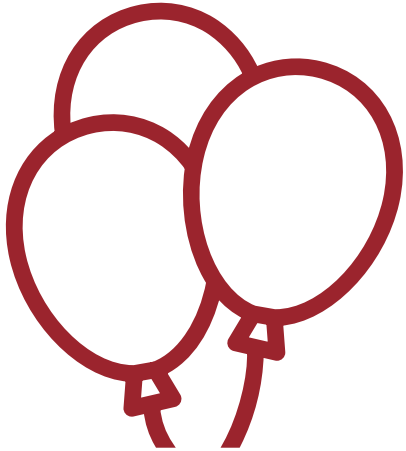
REVISED Amendments from Version 1

The most significant change in this version of the manuscript is that the exploratory factor analysis (EFA) used to identify facility-level domains of quality was updated to incorporate oblique rotation rather than orthogonal rotation. This change to our EFA did not impact the number or overall identity of the resulting domains; however, some variables were assigned to different factors, which resulted in downstream changes in the discontinuation models. Elsewhere, we edited the language and formatting to clarify our goals and removed supplemental analyses and tables to alleviate some of the complexity in the manuscript.

See the authors' detailed response to the review by Amy O. Tsui

See the authors' detailed response to the review by Kelsey Holt

Passed peer review



You have passed peer review

- Your paper will now be indexed in Scopus and PubMed, meaning even greater visibility
- You can promote your paper to your colleagues and networks
 - Share on Twitter or LinkedIn if you use them
 - Consider writing a blog piece, you can pitch it to Gates Open Research or another community site

Top tips

- **Read the Article Guidelines** – they're long (and not very exciting!) but are designed to help and will save you time overall
- **Understand the journal policies** – for example, if you need to share your data you should be prepared before submission
- **Manage expectations** – if you won't meet a deadline, or will be away, keep the editors informed so you can agree a new timeframe
- **Don't be afraid of your peer reviewers** – consider each of their comments carefully, and reply to each one, but remember you are not obliged to agree with them

Any questions



Hannah Wilson

hannah.wilson@f1000.com

You can also come and see us at booth #3 in the exhibit hall

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