SLUG: COMMENT

TITLE: Ethical obstacles in health systems research in India: need for focused guidelines

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Annexure 2: Comments from the IEC

Sr. no.	Comments	Corrections
1.	Explain the rationale for multiple information sheets and consent forms enclosed in the submission	The participants of my study are: Anganwadi workers, Caregivers/ mothers of children in 3-6 years age group in the catchment area of the Anganwadi center, and the health officers (DHO, CDPO). The objective of including the Anganwadi workers is to understand what are the roles and responsibilities of the various workers in the Anganwadi and what is the time devoted to each of these tasks and how do the Anganwadi workers manage their various responsibilities and which of these do they prioritise over others. The Caregiver/mothers of the children is to understand what do they and the children think of the programmes run in the Anganwadis. The health officers were included as the key informants in my study. Each of the three participants provide different aspects of information that will add to my study. Hence separate information sheets and consent forms were made for each of them.
2.	Explain the labelling of the non-so optimal AWCs and ensure that it does not stigmatise the respondents associated with the AWC functioning. Follow some numerical coding that does not label the anganwadi in any negative way.	The anganwadi centers labelled as Category 1 and category 2 in the checklist Sr no. 6
3.	Explain the criteria determining the well-functioning and not so well functioning AWCs. Use some objective criteria for the same.	The published data for may 2019 (https://womenchild.maharashtra.gov.in/content/innerpage/mpr.php#) is only at the project level and is not available at individual AWC level. Therefore these objective criteria that include infant deaths, child deaths, SNP coverage, nutritional status of children (0-5 years) does not provide a denominator. For example, data provided for eg. Of SNP coverage, there is data available only about live births and no. of deaths. Thus, I am unable to objectively select the AWC as suggested. Therefore, with all its biases, and for want of an alternative, I had chosen to take the expert's opinion (key informants) in the choice of Anganwadi centers.
4.	In the checklist include the instruments needed for measuring height of the children.	Instrument for measuring height included in Sr no. 27 of the checklist.
5.	In page no.23 -what are the steps taken during the corona outbreak- include this as a minor objective.	To describe the steps the Anganwadi workers took for implementation of nutrition supplementation in times of an outbreak of Covid-19