

## REVIEWER'S REPORT

Manuscript No.: IJAR-52181

Date: 10/06/2025

**Title: Fear of Childbirth Among Antenatal Women Attending Government and Private Hospitals in East Sikkim: A Comparative Descriptive Study**

### Recommendation:

- ✓ Accept as it is .....
- Accept after minor revision.....
- Accept after major revision .....
- Do not accept (*Reasons below*) .....

Rating	Excel.	Good	Fair	Poor
Originality	✓			
Techn. Quality		✓		
Clarity		✓		
Significance	✓			

Reviewer Name: Dr. S. K. Nath

Date: 11/06/2025

### Reviewer's Comment for Publication:

The study concludes that fear of childbirth is notably higher among antenatal women attending private hospitals compared to government hospitals, with primigravida women exhibiting more fear than multigravida women. Significant associations were observed between fear levels and factors such as age, occupation, and access to pregnancy information, emphasizing the need for targeted mental health interventions. The authors recommend implementing structured antenatal education and mental health counseling, integrating evidence-based childbirth practices, and regular screening using validated tools like W-DEQ to manage and reduce childbirth-related fears effectively.

### Reviewer's Comment / Report

#### Strengths:

- Comparative Design:** The study compares fear levels across two different healthcare settings (government vs. private hospitals), providing insights into how healthcare infrastructure or associated factors influence fear.
- Use of Validated Instruments:** The employment of the Wijma Delivery Expectancy/Experience Questionnaire (W-DEQ), a widely validated tool for assessing fear of childbirth, enhances the reliability of findings.
- Sample Size:** A sizable sample of 320 antenatal women (160 from each hospital) improves the statistical power of the study.
- Focus on Multiple Variables:** The study considers demographic factors such as age, parity (primigravida vs. multigravida), trimester, occupation of women and their husbands, and source of pregnancy-related information, providing a comprehensive analysis.
- Clear Objectives and Conclusions:** The study explicitly assesses and compares fear levels and provides actionable recommendations for healthcare providers.
- Ethical Consideration:** Obtained necessary ethical approval and informed consent, ensuring ethical compliance.

#### Weaknesses:

- Limited Generalizability:** The study focuses on only two hospitals in East Sikkim, which limits the applicability of findings to broader populations.
- Cross-Sectional Design:** Being descriptive and cross-sectional, it cannot establish causal relationships or track changes over time.

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3. **Sampling Technique:** Convenience sampling may introduce selection bias, affecting the representativeness of the sample.
4. **Exclusion of First Trimester Pregnancies:** The study only includes women in their 2nd and 3rd trimesters, missing insights from early pregnancy.
5. **Potential Reporting Bias:** Data collected through self-report may be affected by social desirability bias or inaccurate recall.
6. **Limited Exploration of Cultural Factors:** The study briefly mentions cultural influences but does not deeply analyze how cultural beliefs and norms impact fear.