

JOGNN
Reviewer Handbook

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Remarks from the Editor

This handbook provides *JOGNN* reviewers with reference material for their information and development. The roles and responsibilities of the editors, the editorial advisory board and reviewers, as well as the review process, are discussed. I hope this material will clarify what is asked of you, and make your work easier and more efficient.

We may add to the handbook as new policies are developed, and we will notify you if this is the case. Please feel free to offer comments on the material or suggestions for improving the handbook.

Peer review is a respected tradition in scientific and technical journals. As a peer-reviewed journal, the quality of *JOGNN* depends on the critical review of manuscripts by both clinicians and researchers. I appreciate the time and effort you have volunteered, and on behalf of *JOGNN*, I thank you.

Nancy K. Lowe, CNM, PhD, FACNM, FAAN
Editor, *JOGNN*
September 1, 2005
Revised January 8, 2016

Roles and Responsibilities

Editor

The Editor-in-Chief is a registered nurse who is a member of AWHONN with a minimum of a master's degree, experience and expertise in the care of women, childbearing families, and infants, and a record of scholarly publications and excellence in written and verbal communication. In consultation with the *JOGNN* Editorial Advisory Board (EAB), the Editor is responsible for the scientific and technical content of *JOGNN*. The Editor works with the *JOGNN* EAB, the AWHONN staff, and the *JOGNN* publisher (Wiley-Blackwell) to establish future direction for *JOGNN*. The Editor is responsible to keep abreast of developments in perinatal and women's health nursing, seek authors for manuscripts that reflect emerging knowledge and innovations in care, maintain content standards that are consistent with the policies of the *JOGNN* EAB and the AWHONN executive board, assign reviewers for all unsolicited manuscripts, review all unsolicited manuscripts and their reviews, approve content for publication, act as the final arbiter on all editorial decisions, plan contents of upcoming issues of *JOGNN* and set priorities for specific issues in consultation with the Managing Editor. The Editor delegates editorial functions to the associate and managing editors, writes or solicits at least one editorial for each issue of *JOGNN*, develops and maintains guidelines for *JOGNN* reviewers in conjunction with the Managing Editor and AWHONN's Director of Publications, appoints reviewers, recommends editorial advisory board members for approval by the AWHONN president, conducts the annual meeting of *JOGNN* EAB, represents *JOGNN* at professional meetings, and reports biannually to the AWHONN board of directors.

Associate Editor

The Associate Editor (AE) is a registered nurse who is a member of AWHONN with a minimum of a master's degree, experience and expertise in the nursing care of women, childbearing families, and infants, and a record of scholarly publications and excellence in written and verbal communications. The AE is responsible for the "In Focus" (formerly Clinical Issues) department of *JOGNN* published in each issue. The AE is responsible to keep abreast of developments in perinatal and women's health nursing, participate in the annual EAB meeting, participate in decision-making regarding journal policies, represent *JOGNN* at professional meetings as requested, and maintain effective communication with the editorial and production teams. The AE works with the editor and the *JOGNN* EAB to set priorities for future "In Focus" topics and solicits expert guest editors for selected topics that reflect emerging knowledge and innovations in the care of women, childbearing families, and infants, and are consistent with *JOGNN's* vision, policies and procedures. The AE obtains written agreements from guest editors and works with them to develop "In Focus" table of contents, solicit and mentor authors, and meet the required publication timelines. The AE assigns reviewers to "In Focus" manuscripts, reviews all "In Focus" manuscripts, approves content for publication, and works with the Managing Editor to prioritize manuscripts for specific issues in conjunction with the Editor.

Managing Editor

The Managing Editor (ME) is an individual with a minimum of a baccalaureate degree in journalism with at least 2 years of publications production experience, extensive skill in editing, copy editing, proofreading, and writing, sound organizational and management skills, excellent verbal and electronic communication skills, meticulous attention to detail, and expertise in computer applications relevant to journal management. The ME oversees the *JOGNN* production process, works with editor to establish procedures and develop guidelines to facilitate the work of the reviewers and EAB, works with the publisher to assure compliance with the publication contract and to maintain efficient publishing schedules and procedures, serves as liaison with the publisher's staff, monitors work of publisher's editorial, advertising, and fulfillment staffs, and informs the publisher's advertising representative regarding specialty and AWHONN projects to stimulate advertising. The ME processes manuscripts, edits copy, prepares copy for the publisher, proofreads pages at all stages, assists the Editor in working with authors and potential authors, assists the Editor in identifying reviewers and editorial advisory board member, maintains *JOGNN*'s database to track articles, authors, and reviewers and match reviewer expertise to manuscripts, coordinates the EAB meeting, and maintains open lines of communication with the Editor, AE, and EAB. The ME coordinates the Continuing Education department, writes delegated non-technical copy, works with other AWHONN departments to develop copy for non-editorial pages in *JOGNN*, organizes placement of in-house advertisements in *JOGNN*, processes requests for information related to *JOGNN*, and prepares executive reports to summarize journal activities for the AWHONN board of directors.

Roles and Responsibilities: Editorial Advisory Board Member

Qualifications:

- Member of AWHONN.
- Registered nurse with knowledge and expertise in the women's health, obstetric, or neonatal fields.
- Published author.
- Significant experience as a *JOGNN* reviewer.
- Knowledgeable about women's health, obstetric, or neonatal nursing trends.

Responsibilities:

- Appointed by editor for up to three-year term.
- Reviews manuscripts submitted to *JOGNN*, according to established guidelines.
- Thoroughly and critically evaluates manuscripts for accuracy of content, relevancy to women's health, obstetric, or neonatal care, and potential for publication.
- Controls personal biases while reviewing manuscripts.
- Recommends manuscripts for acceptance or rejection.
- Provides authors with constructive criticism and recommendations for revision.
- Meets deadlines.
- Solicits manuscripts and letters to the editor.
- Attends annual editorial advisory board meeting.
- Assists in reviewing and revising editorial policies and procedures.
- Assists in decision-making regarding the Journal.
- Helps direct the focus and future of the Journal.
- Recommends new reviewers.

Term & Other:

- Appointed by the editor for 1 year at a time up to 3 consecutive years.
- May not serve simultaneously on AWHONN's Board of Directors, the *Nursing for Women's Health* Editorial Advisory Board, or the editorial boards of competing publications.

Roles and Responsibilities: Reviewer

Qualifications:

- Registered nurse or other related professional with knowledge and expertise in the women's health, obstetric, or neonatal fields and/or relevant quantitative or qualitative research expertise.
- Published author.
- Willing to read widely within obstetrics, women's health, and neonatology.
- Able to meet timelines and respond to electronic communication.

Responsibilities:

- Thoroughly and critically evaluates manuscripts submitted to *JOGNN*.
- Controls personal biases while reviewing articles.
- Recommends articles for acceptance, revision or rejection.
- Provides authors with constructive criticism and specific recommendations for revision.
- Meets deadlines as requested by the *JOGNN* editorial staff.

Guidelines for Authors

The complete guidelines for *JOGNN* authors can be found at <http://jognn.org>. This version of the author guidelines will always be the most current, so please consult it for any questions.

Guidelines for Reviewers

Editorial Manager (EM)

All manuscript submission and peer review for *JOGNN* is conducted electronically via the Editorial Manager system. Editorial Manager is web based, and all authors, reviewers and editors log in to the site to complete their assignments. A complete guide for reviewers using Editorial Manager is available at <http://jognn.edmgr.com> from the help link at the top of the page. Further assistance is available by contacting Angela Hartley in the editorial office (ahartley@awhonn.org).

All communication regarding manuscript review will be sent to you electronically (e-mail) Through the EM system.

General Principles

- Editorial review for *JOGNN* is a double-blind process; the identities of the author and the reviewers are concealed from each other. Please call the editorial office immediately if you think you might be biased because your interests conflict with those of an author(s) or if you recognize a manuscript because you have a close personal or professional relationship with the author.
- The manuscript is a privileged communication for your personal review. You are free to solicit advice from others, but please do not refer the manuscript to anyone else to review without approval from the editors. The manuscript is the property of the author and should not be photocopied. Any printed copy of a manuscript should be destroyed by confidential means, such as shredding, once the review process is complete.
- Reviewers are selected for their varying perspectives and may well render different opinions. Decisions to publish are not based on a unanimous vote by the reviewers; the editor weighs all the evidence, including timeliness of subject and availability of space in the journal, in deciding whether a manuscript should be published.
- All reviews must be returned within 21 days. A return date will be included in your reviewer invitation. Reviewers who consistently fail to meet deadlines will not be considered for reappointment to the review panel or promotion to the editorial advisory board.
- A well-written manuscript is the author's responsibility. If a manuscript's content has potential, but the writing is awkward and of poor quality, you may want to recommend that it be returned to the author, suggesting that the author obtain

professional assistance. It is neither your role nor the *JOGNN* staff's role to rewrite poorly written manuscripts. Your recommendation regarding the potential merit of the content is all that is needed.

- Peer review is not "voting" on a manuscript. Peer review is the process through which several independent experts critique the logic, methodology, writing, and clinical utility of a manuscript and make a recommendation to the editor about the suitability of the manuscript for publication in *JOGNN*. The individual perspectives of the reviewers help to inform and clarify the editor's own evaluation and eventual decision to request revision, accept, or reject a manuscript. When revision is requested, reviewers' comments to the author are essential to guide the author's revision.

Getting Started

An automatically generated e-mail message will be sent to you as a request to review. It is important that you accept the invitation as soon as possible. If you do not accept a reviewer assignment within 5 days, you will be "uninvited" by EM, and another reviewer will be assigned. Complete instructions, including your user name and password, will be included in your letter of invitation.

After you accept the reviewer invitation in EM you will have access to the complete manuscript in PDF format. You may either read the manuscript on line, or download and print it.

Consider the manuscript's scientific accuracy, originality, and interest to *JOGNN* readers. Evaluate the quality of the presentation and critique both its strengths and weaknesses. Here are suggestions that may be helpful to you.

1. Scan the title and subheadings. Read the clinical implications section.
2. Evaluate the manuscript on its merits. Use the concrete information available to you. If you do not feel capable of judging a specific portion of an article, please note that in your review and proceed with other sections. Clinicians will be asked to review research articles for their relevance and clinical utility; these manuscripts also will go to researchers for a review of the methods.
3. Read each article for accuracy of content and relevance to the specialties of obstetrics, women's health, and neonatal health care, particularly nursing practice.
4. Read the manuscript quickly without stopping to make extensive notes.
5. After re-reading the manuscript, complete the information as requested in Editorial Manager.

Submitting Your Review in Editorial Manager

When you are ready to submit your completed review, you will log in to the EM system. You will be asked to complete a reviewer form that includes the following information. If you have extensive comments for the author or editor, we recommend that you write and save these comments in your word processing program such as MSWord. Once you are

ready to submit your review, you can simply copy and paste your comments into the EM reviewer form.

Reviewer Recommendations

ACCEPT. If, aside from minor suggestions, you feel the manuscript could be published in its present form, check this option. Please note that it is your responsibility to check for technical, medical, and nursing accuracy and to evaluate research methods and conclusions.

REVISE. If the manuscript contains good material but should be revised by the author and resubmitted for additional review, check this option. Please check this category only if the paper has a good chance to be acceptable after the author satisfies your present criticisms. Please distinguish essential revisions from those you judge merely desirable in your confidential remarks to the editor.

REJECT. If the manuscript should not be published, check this option. Please identify specific reasons for this decision.

Reviewer Ratings

You will be asked to rate the manuscript in the following areas using the scale 1=poor
5=excellent.

The following questions should aid you in determining your rating for each criterion. These questions are available for your reference in EM. When you are ready to submit your review simply click the "Instructions for Reviewers" link on the center of the page.

SUITABILITY AND MERIT

The manuscript makes significant contribution to the body of knowledge on this topic.

This paper is written well enough for review.

The title is appropriate and clear. (Suggest a shorter title if needed.)

PRESENTATION OF MATERIAL

The abstract is specific and adequately structured.

The callouts are appropriate.

The keywords are appropriate.

The purpose of the article is stated succinctly in the introduction.

The content is presented clearly and logically in a well-organized manuscript.

The writing is succinct and clear. (Question ambiguous statements.)

Presentation of facts and their interpretation are accurate. (Scan and spot- check calculations.)

All sections of the manuscript are an appropriate length. (If sections can be expanded, condensed, or omitted, please specify in the comments section of this review.)

The author has cited the pertinent literature and all important references are included. (Please cite any that are missing.)

All references are current and necessary.

Material in the text is not repeated or duplicated in the tables or figures.

The conclusions are sufficiently supported.

The discussion is clear, logical, and orderly.

The implications for clinical practice and/or research are clearly identified and adequately discussed.

All facts that are not original are attributed to a source.

MANUSCRIPT ELEMENTS AND STYLE

Technical terms are clearly defined.

The tables and illustrations are necessary. (Specify which, if any, could be deleted.)

The form and arrangement of the tables and illustrations are satisfactory and self-explanatory.

(Indicate any graphs or tables that are hard to read because they contain too much information.)

RESEARCH

The participants are described clearly and accurately.

The study design is appropriate and adequately described.

The study procedures are described clearly and adequately.

Data collection (e.g., instrument, interview guide) is described clearly and accurately.

The protection of the human subjects(s) is discussed.

The statistics are appropriate.

The statistical analyses are properly interpreted.

The trustworthiness of qualitative data is discussed.

The results section contains only findings from the current study.

The results are discussed rather than merely repeated.

The clinical implications are discussed adequately and accurately.

The research recommendations are clearly identified.

The conclusions are supported by the results of the study.

The limitations of the study are acknowledged.

Comments to the Author

Make your suggestions to the author in the "Comments to Author" box. Indicate possible or necessary improvements in substance, organization, logic, and style. A brief section-by-section evaluation is most helpful. For each comment, please refer to the page number and line number. Indicate any text that should be shortened or omitted and any figures or tables that should be deleted. Please make your criticisms and suggestions to the authors in a constructive and courteous manner.

Please use your spell check and read through your critique before submitting it.

Do not express your opinion about the overall quality and whether or not the article should be published in the comments to author. Make your recommendation about acceptability of the manuscript in your confidential remarks to the editor only.

It is not a good use of reviewer time to rewrite sections of the manuscript or edit the text. Writing is the author's job, and professionals edit all manuscripts before publication.

Comments to the Editor

Please write your confidential opinions in this section and, as mentioned above, your compelling reasons for your recommendation regarding the disposition of the manuscript. Include general suggestions and qualifications. Comments in this section are of great value to the editor in making a decision when reviewers have not reached a consensus, in writing rejection and revision letters, and in preparing accepted manuscripts for publication.

Other Guidelines

Please notify the editorial office at your earliest convenience of changes in your address, telephone number, fax number, email address, or credentials even if you have notified AWHONN's membership office. Changes in your personal information can be made directly in the Editorial Manager system.

Reviewers are the cornerstones of any peer-reviewed journal. Your work is extremely important to *JOGNN*. If you have questions or suggestions, please call the *JOGNN* staff or a member of the editorial advisory board.

Sample Reviews

The following three examples represent excellent reviews taken from the EM system.

EXAMPLE 1

Reviewer Recommendation Term: Reject		
Manuscript Rating Question(s):	Scale	Rating
Suitability and Merit.	[1-5]	1
Presentation of Material.	[1-5]	1
Manuscript Elements and Style.	[1-5]	1
Research.	[1-5]	1
Clinical Relevance. (This manuscript contributes to the practice of nursing and is relevant for JOGNN readers.)	[1-5]	3
Comments to Editor: This manuscript is poorly written and lacks rigor. I do not believe that it is salvageable.		
Comment to Author:		
<p>The manuscript presents an important topic. Knowledge of postpartum depression in different ethnic groups is lacking and sorely needed as the population of the U.S. becomes more diverse. A review of the literature is the logical place to start to determine subsequent research and practice priorities. The method of review is appropriate and the author specified in detail the search engines utilized and the key words employed. Tables of findings are provided for the seven articles that met the study criteria and the discussion serves to explicate the data.</p> <p>General critique: There are many instances where words are omitted from sentences. Perhaps a grammar check would help to pick these up. Additionally, the format does not adhere to APA (serial commas, first page of manuscript text on a new page, omit the title of Introduction, citation within parentheses). The abstract is too long and not well structured. I would advise using more headings.</p> <p>Specific Critique:</p> <p>Title: The title is appropriate.</p> <p>Callouts:</p> <ol style="list-style-type: none"> 1. This could be made more significant by stating that "As Mexican American women become acculturated, the prevalence of PPD increases". 2. I would advise restating this to be: "The Spanish and English versions of the Postpartum Depression Screening Scale have similar psychometric properties". 3. This callout is not eye-catching. Is there another point that you could emphasize in the manuscript that would be appropriate to researchers or clinicians? 		

How about "cultural practices may provide a protective mechanism against PPD".

Abstract: The abstract benefits from the use of headings but needs to be tightened up by decreasing words and focusing more on the important points. Additionally, the conclusion is not well supported by the findings. PPD exists... to a greater extent than was realized - there is no evidence presented that supports this assertion.

Introduction: Cultural patterning is a term that needs to be defined (page 5, line 102). This is crucial since you are making the argument that culture and acculturation affect PPD development.

I am unclear in the paragraph on page 5, line 112, why you move into discussion barriers. Barriers to what? The topic sentence was birth rate. This entire paragraph is poorly structured and has at least 3 different thoughts in it.

Please be consistent within the introduction. In some places you state nursing research or nursing literature while in others, you state research or literature. I am never sure when you are referring only to nursing and when you are not. Along the same lines, I am not sure why one would limit their search only to nursing.

Results of Criteria Search: Could this information be consolidated in a table? The key text begins on page 8, line 175. However, the second part of the paragraph on meta-synthesis is not helpful to the manuscript.

Please omit a discussion related to a personal communication.

Instead of including a study that does not meet your criteria, perhaps starting with a conceptual framework would be helpful. Berry could be the framework that guides your selection of variables in your search. Rigor decreases dramatically from her through the rest of the procedure when you choose to include other articles/works that initially were discarded.

Emerging Conceptual Areas: I would like to see each of these discussed fully, bringing in what is known and what is yet to be discovered. These are important topics. The list format creates questions about why something is there and where it came from (for example #4, measurement. There are many other ways to measure PPD - and are you referring to PPD symptoms or PPD diagnosis?).

Summary and Consistency of Findings:

The listing of results by study is not a synthesis.

Recommendations: Why is #2 there? Why would we want to discover socioeconomic diversity? The same question for #3 - are you saying that these factors should be explored in relation to PPD?

Clinical considerations:

If nurses did administer the PDPI when the woman came in for labor, what would they do with the results? Is that the best time to assess a woman for risk factors for a potential postpartum problem?

Lines 329-334: Can you provide specific examples for this population? What is written can apply to any mother.

EXAMPLE 2

Reviewer Recommendation Term: Revise

Manuscript Rating Question(s):	Scale	Rating
Suitability and Merit.	[1-5]	2
Presentation of Material.	[1-5]	2
Manuscript Elements and Style.	[1-5]	2
Research.	[1-5]	1
Clinical Relevance. (This manuscript contributes to the practice of nursing and is relevant for JOGNN readers.)	[1-5]	3

Comments to Editor:

The manuscript needs a major, major revision. Currently, it lacks any literature review and discussion section. Moreover, the authors seem so committed to abstinence education that they ignore findings indicating that the respondents wanted a more comprehensive sexuality education. Finally, there are a number of methodological issues, including lack of clarity about which professionals were sampled and sampling and high percentage of adolescents outside the target age range.

Comment to Author:

This study examines the perceptions of parents, youths, and professionals about abstinence education for youths 10-12 years of age. This is an important topic that would be of interest to the readers of JOGNN. However, the manuscript is seriously flawed by the lack of any scientific justification for the study. No review of the research literature on this topic is presented in the introduction, and the findings are not related to previous studies. Thus, extent to which this study contributes anything new is unknown. In addition, the title is inaccurate since 10-12 year-olds are early adolescents, not pre-adolescents. Puberty begins at about 9 years for girls and 6 months later for boys. Moreover, the findings support sexuality education, rather than narrowly focused abstinence education.

The abstract is well written. However, the description of the results is deceptive since this description does not refer to the participants' desires for broad-based sexuality education. Keywords are appropriate. The callouts need revisions. In

Callout#2, the reason that it is important to define abstinence as refraining from all genital contact needs to be explained. Callout #3 is largely irrelevant to the findings of this study since the study did not address either one-to-one education or cost-effectiveness of abstinence education.

The introduction needs to be re-written to include a review of the literature on sexual abstinence. Why particularly was this study needed, and what will it add to the literature? In addition many statements are made without the needed references, such as lines 55-57 and 74-75. What evidence is there that early abstinence education prepares re-adolescents to prevent exposure to sexual risks? Moreover the current controversy over abstinence educations versus comprehensive sex education is not even mentioned.

The methods section also needs extensive revisions for clarity. What evidence is there that the patients of urban primary care clinic used for recruitment were representative of the community? No rationale is provided for the age of the youths to be studied. More details about the professionals who were recruited for the study are needed. A copy of the interview guide for each group should be presented. Lines 121-131 in the findings section should be moved to the sample section. The rationale for interviewing youths outside the targeted age range of 10-12 is totally unclear. At least 30% of the youth group was not in the targeted age range. This is a major limitation of the study. No rationale is presented for interviewing 10 individuals in each group. Lines 123-125 should be omitted since they are redundant with the table.

The results section also needs revisions for clarity. Given the differences among the groups, it is unclear why the authors so often pool their results, such as in lines 139-141. When discussing non-response to a question, the authors should mention from which group these participants came. In lines 178-179, the authors mention that early education prepares youths for puberty, but education begun at 10-12 years occurs after puberty has begun. Table 2 repeats some, but not all, of the findings. It does not add anything new to the paper and should be omitted.

No discussion section is included in the manuscript. Thus, the findings are not related to previous studies, limitations of the study are not mentioned, and recommendations for future research are not given. Instead, the authors provide a two-page discussion of clinical implications that does not focus on the major findings of the study. Lines 381-382 are irrelevant to the study and should be omitted.

In addition, several editorial changes are needed. The sub-headings should be flush with the left margin, rather than centered, and done in APA format.

Reviewer Recommendation Term: Revise

Manuscript Rating Question(s):	Scale	Rating
Suitability and Merit.	[1-5]	1
Presentation of Material.	[1-5]	1
Manuscript Elements and Style.	[1-5]	2
Research.	[1-5]	2
Clinical Relevance. (This manuscript contributes to the practice of nursing and is relevant for JOGNN readers.)	[1-5]	2

Comments to Editor:

A very "muddled" manuscript that lacks a consistent and coherent conceptualization. I would "vote" reject except the findings are quite intriguing and have clinical applicability. However, I am not certain that the authors are capable of placing the study they actually did in the context of the literature or of discussing the findings they have, rather than the findings they would like to have like to have.

Comment to Author:

This study examines the perceptions of perceptions of first-time parents of their relationship with their infants. This is an important topic that would be of interest to the readers of JOGNN. However, the manuscript is seriously flawed by a lack of a clear conceptualization of the problem, inaccurate descriptions of the methods, and overstating the findings in the discussion section. In addition, the manuscript is quite and should be shortened by 3-4 pages.

The abstract and keywords are well written. However, the statement of the objectives is unclear since themes are something researchers derive from participant statements, not something that participants present. It also unclear what the themes refer to. The first callout is not a complete sentence and does not present a complete thought.

The introduction needs to be re-written. It is currently confusing and does not present a coherent conceptualization of the problem and relies too heavily on secondary sources. The first sentence does not present any meaningful information. Lines 39-41 need a reference. Why is a perspective that brings together developmental, systematic, and parent experience needed and how does the present study accomplish this? The purpose statement is poorly stated since themes are something researchers derive from participant statements, not something that participants present. It also unclear what the themes refer to. Lines 50-55 are largely incoherent. The "parent-infant relationship" is not another term for "attachment," nor is it a "process." Attachment as conceptualized by Ainsworth is the process by which the infant becomes involved with the parent, not the other way around. Parents promote infant attachment through caregiving, protection, and sensitivity. Likewise, as the authors admit, bonding is a discredited theory so should not be used to justify the current study as is being done in lines 56-65. Most of the citations by Brazelton and Klaus and Kennell are not primary research studies.

Line 68 is unintelligible. Information on postpartum depression (lines 71-75) should be omitted since depression is not examined in this study. Lines 76-78 need references. Likewise, lines 93-96 seem largely irrelevant to the focus of this manuscript and should be omitted. In lines 98-100, the authors claim that the lack of studies focusing on mothers' intimate experience with their infants as a justification for the need for the current study. However, this term is quite vague, and the exact nature of this intimate experience is unclear. Given that mother's experiences have been studied from a psychodynamic perspective (lines 101-107), one would assume that the intimate nature of the experience has been captured. A number of concepts are introduced without any definitions: maternal role attainment (lines 113-114), related internal issues (line 147), paternal identity (lines 149). Lines 135-138 do not appear relevant to this study and could be omitted. As a result of this overall lack of clarity, the introduction and literature provide a weak argument for the significance of the current study. In addition, in the description of the study aims (lines 158-181, it is unclear what exactly is being studied.

The methods section also needs extensive revisions for clarity. Although the authors state they are doing grounded theory, they are not since they make no attempt to develop theory from their data, instead they moved "toward a more generalized mode of description" (line 252). Likewise, although the authors state they interpreted "how the categories are linked together in a theory-generating fashion" (line 260), there is no evidence in the findings of this being done. Thus, they seem to be doing a qualitative descriptive study. What are the ethnic group backgrounds of the sample and the genders of the infants? The rationale for the study time points of the study is quite weak because the Brazelton reference is not a primary research source and because the authors do not explain the significance of the time points they selected. A copy of the interview schedule should be included as a table. This is particularly important in this study since the interview was designed to elicit the five themes so it is necessary to see the interview schedule to determine whether the interview suggested the specific themes to the parents. Descriptions of the parents who did not fit the model (mentioned briefly in lines 256-257) need to be given in the findings. Although inter-rater reliability is not normally done in a qualitative study, when it is done as in this study, the inter-rater reliability statistic must be reported.

The results section is generally well-written and only needs a few changes. Given that the interview schedule focused on the five themes, it was not surprising that they were found. Lines 317-322 appear to contradict themselves with some mothers describing a two-way discovery process and others a one-way relationship. Babies should never be called an "it" as is done in line 338, 343, and 357. The mothers' theme at 16 weeks is reported to be "commitment to love and care for the baby" when the information in the text (lines 390-415) actually describes the mothers' need and ability to begin to individuate from the infant. This interpretation is the one given in the discussion section—lines 468-470.

The discussion section also needs major revisions for clarity and to avoid overstating

the findings. The description of the major findings in the first paragraph (lines 433-444) is incorrect because it emphasizes the presence of the five themes—two of which are not even mentioned in the body of the findings. Likewise there is no evidence of periods of stability followed by period of disorganization as stated in lines 441-452 in the findings. In addition, the linkage of the change in themes to external and internal demands (lines 454-456) is not mentioned in the findings.

Lines 475-477 need a reference. In lines 488-489, the "subjective experience of fathering" can not suggest "an expressed need." The findings also do not present evidence of stylistic differences in parenting between mothers and fathers (lines 493-496), only that fathers and mothers have different internal goals and emotions. Likewise the findings do not provide evidence of the "interweaving of these developing relationships" as stated in lines 499-500. How does one resolve a theme (line 503)? The fact that fathers are more preoccupied with the mother and how she is doing (lines 504-506) is also not given in the findings. Finally, different predominant themes at three time points does not provide evidence of continuous change in parental themes as stated in lines 512-515. The conclusion section is redundant and could be eliminated.

In addition, several editorial changes are needed. Citations in the text are not consistently done in APA format (see for examples lines 147 and 485). A number of incorrect word choices are made: line 90 "impairs" is used when impairment is meant, line 179 "interplay" is used when interaction is meant, line 353 and others "complementary interactions" is used when reciprocal interactions is meant, line 483 "coherent" is used when consistent is meant, and line 491 "claim" is used when want is meant. "In sync" (line 425) is jargon. I spot-checked 10 references. All were correct, except Bell et al. 1996 was listed as (1999) 5:19-28, Bendek is spelled without the "c," and "Delphi" should be capitalized in Crisp et al.

References

Standards for Manuscript Preparation

American Psychological Association. (2001). *Publication manual of the American Psychological Association, 5th ed.* Washington, DC: American Psychological Association.

Bergsjø, P. (1992). On case reports. *Acta Obstetricia Gynecologica Scandinavica, 71*, 257-258.

Manuscript development. Strengthening your case study approach. (1992). *Nurse Author & Editor, 2*(2), 1-4, 7.

Peer Review

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