Reviewer’s report

Title: What impact do Global Health Initiatives (GHIs) have on human resources for anti-retroviral treatment (ART) roll-out: evidence from Zambia

Version: 1  Date: 18 September 2008

Reviewer: Phillimon Ndubani

Reviewer's report:

1. Introduction
This paper examines the impact of GHIs on human resources for ART roll-out in Zambia, at national, province and in two districts. The paper presents a clear and current state of the Human Resources for Health (HRH) situation in Zambia using a qualitative approach and an interesting combination of key informants, most of whom are well-versed in the health care delivery systems in Zambia. The title and abstract accurately convey what the study has found and the writing, both style and clarity, is of acceptable standard.

In the assessment of this paper, the points presented below have been considered and are being commented upon as required in the reviewers’ guidelines.

2. Research question
The question posed by the authors and the area of study presents a major challenge for Zambia as a country and although the question may not be new, the findings are significant and contribute to the ongoing HRH policy and implementation debates, especially with relevance to the Global Health initiatives (GHIs).

3. Methods
The research approach used for the collection of data is qualitative, which is most suited for this kind of study. Therefore, the data collection technique is appropriate as it has enabled the researchers to collect rich materials as evidenced by numerous quotes presented in support of their arguments and observations. Consequently, the data is valid and well focused.

4. Discussion and conclusions
The conclusion brings out very pertinent issues and valid recommendations. However, whilst the discussion and conclusion may be balanced, the presentation does not follow the standard format. What is presented as the discussion (is supposed to) should be part of presentation of findings. This observation is detailed in the specific comments that follow.

Below are specific observations and comments for the attention of the authors. Most of the comments fall under the appropriate heading/sub-heading as they
appear in the paper:

1. Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

NONE

2. Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

2.1 Introduction and context: This section is well written but one wonders whether the last paragraph should be here. That paragraph is on methods and therefore would have been better placed under an appropriate methods section. The methods section needs to be more elaborate as to specify the province and the districts. I do not think that naming the province constitutes any breach of ethics. When the authors say one province and two districts- does the province refer to the provincial headquarters where interviews were held? Are the two districts in the same or different provinces? Mentioning the province and the two districts has positive implications not only for programmatic reasons but also for future research on a similar topic as that will guide the selection of possible research sites so as to avoid duplication.

2.2 Abstract: The methods section indicates that the study was “….a qualitative policy analysis relying on in-depth interviews with more than ninety policymakers at all levels”. It seems that the study was not purely a policy analysis and the more than ninety key informants cannot be said to be policymakers especially those at district and local levels. There is need to differentiate policymakers and implementers. The authors should clarify this (See also 1.4 below).

2.3 Findings and Discussion: There is constant reference to “Interview, District 2”, Have not seen "Interview, District 1". Does it mean that all the quotes are from district 2? There are also quotes from Lusaka. Does Lusaka represent national, province or district? The methods section needs to clarify the research sites.

2.4 Adherence to standard of reporting and data disposition: The normal and standard way of presentation has not been strictly adhered to by the authors. As already mentioned, the methodology section is not visible and, as a matter of fact, it is missing save for a paragraph at the end of the introduction section. This is also noticeable in the abstract which does not seem to reflect the methods reality. The people interviewed were not all policymakers. There is need, in the methods section, to describe and categorise the people interviewed.

Secondly, the presentation and layout of the paper (especially findings and discussion) is not coherent. There does not seem to be a clear line between findings and discussion. The discussion section appears to be a continuation of the finding section. My view is that the presentation of the five themes should be part of the findings whilst the last section can be devoted to a more analytical discussion and conclusion. For effective reference to the various components of the paper, sections and sub-sections need to be numbered.
2.5 Findings: The abstract shows “Results” section whilst the main body shows “Findings” - Which is which? In Paragraph 1: there is the use of Technical Officers - Are these the same as Clinical Officers (CO)? Reference is also made to “.........technical officers (a diploma certified degree in Zambia that allows clinical practice)”. If this refers to COs, their training is a three year diploma course in Medical Sciences. Within paragraph 1; this sentence is not clear “Since 2004 more than 4000 people started ART in each district, in district clinics with no additional staff being provided by the Ministry of Health”.

3. Discretionary Revisions (which are recommendations for improvement but which the author can choose to ignore).

3.1 GHIs in Zambia: The statement that “Global Fund resources are directly received by the Ministry of Health and at the time of conducting this research were paying for the actual ARV medication” Here, it may be important to mention that the Ministry of Health is one of the other three Principal Recipients of the Global Fund. The impression being created is that MoH is the sole recipient of GF.

3.2 Findings: In paragraph 2 second sentence- What are the non clinical interventions?

3.3 Discussion: Paragraph 1 sentence 4- All nurses and sisters interviewed…..” Who are these sisters - Were they nuns from mission hospitals?

3.4 Mentoring and the ‘secondment’ of GHI staff into the public sector: Paragraph 3- This sentence is not clear “In addition, interviews suggested that nurses and technical officers at district level referred to the MoH clinical care specialist, whereas doctors worked with the HSSP employed clinical care specialist” This may need rephrasing.

3.5 Increasing workload through coordination : Paragraph 6- “Many new initiatives instigated and supported by GHIs, including through financial resources for trainings and materials have to be implemented at existing staff level” This may need rephrasing.

3.6 GHI’s addressing human resources for health shortage: Paragraph 1-Does the training for health staff address shortages of human resources? In my view, it improves skills rather than alleviate shortages. As the authors state elsewhere in the paper, training tends to remove staff from their normal duties.

3.7 Conclusion: Paragraph 6- This sentence is not clear: “The impact of top-ups, increases staff motivation and interest in the ART programmes affects the health services overall” May need rephrasing.

3.8 General Comments: Whilst other GHIs have been mentioned, the authors seem to focus more on PEPFAR funded program, at least in terms of examples. It might be useful to mention somewhere at the outset this inclination towards PEPFAR.
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests