Reviewer's report

Title: Working Together for Mental Health: Evaluation of a one-day mental health course for NGO service providers.

Version: Date: 30 June 2006

Reviewer: Kamaldeep Bhui

Reviewer's report:

General

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

1. This is a pre and post training comparison of ratings for capacity and confidence of participants to provide community services to people with mental health problems including their attitudes and beliefs about mental health problems. There is no direct measure of improvement in service user experiences or outcomes or family in experience and outcome.

2. A 16-item instrument was developed from a number of existing questionnaires. How this was reduced to 16-items from 3 substantial questionnaires is unclear. The authors need to make some rationale for how this was done and why whether this process produced a robust instrument addressing the key domains of interest.

3. Missing data were handled by assuming no change in scores. It might be appropriate for the authors to actually assess the impact of changes in directions opposite to those expected for those participants for whom data was missing. Sensitivity analyses here would be helpful to ensure that the findings are not simply due to conservative rates amongst those with missing data. The exact proportions of those with missing data also need to be specified.

4. The scoring system, eg to produce scores of between 32 and -32 are 26 and -26 needs to be set out, although it is possible to discern this from the tables and instruments.

5. The authors report that perceptions of adequate skills to support a client with mental illness improved following the course and indeed at follow-up. The authors obviously need to be aware that this perception may be to do with confidence immediately following the course, an experience, rather than actual improvements in capacity and skills that might be judged by their practice. Similarly, the statement that they would treat the needs of a client with mental illness in the same way as any other client needs to be put into context; this may be inappropriate in that there may be special needs that require assessment for people with mental health problems. I appreciate the point they are trying to make, that the needs of people with mental health problems are not relegated due to stigma. The same can be said of the other findings. That is that these are perceptions and one could argue in either direction that they are the perceptions without any actual change in behaviour or which do not necessarily mean they are good outcomes.

6. If there is any qualitative knowledge about the course and it changes practice in the workplace this would be useful to include as otherwise the findings can be dismissed as simply ones of perception rather than actual changes in practice.

7. Throughout the paper the authors refer to “confidence™ in capacity of people working outside of the health sector. I would question the word “capacity™. This could suggest either that they are more able in terms of taking on a greater volume of work, or that they are more skilled, or that they are simply more willing. The word capacity does not distinguish between these possibilities and these different meanings are conflated within the paper.

8. Some interesting finding in Table 3: immediately post the course a greater proportion of people thought that those who have mental illness were more likely to be dangerous and that people with schizophrenia can work in regular jobs. These are worth some comment.

9. Overall, the paper is important and of interest as it supports the NGO sector to provide mental health
care. The NGO sector fill gaps in statutory service provision. Anything to support the NGO sector to do this is useful. However, as the paper is currently written, it raises more questions than it answers.

10. I would ask the authors to specify in more detail the different components of the course, the teaching and learning methods used and difficulties encountered and examples of changes in practice using qualitative data to support their assertions. They then have to interpret their quantitative data with care, a revision of the paper adhering to these principles would produce a better paper suitable for publication.

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

Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No

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