Reviewer’s report

Title: Factors influencing implementation of Ministry of Health-led Private Medicine Retailer Programmes on Malaria in Kenya

Version: 1 Date: 20 July 2009

Reviewer: Lesong Conteh

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Minor Essential Revisions

This is an interesting paper and provides useful insights into the often overlooked practicalities and human interactions that can make or break the successful implementation of a policy. I am happy to recommend this manuscript for publication. I have listed a number of suggestions below that might strengthen the paper further. My main comment is that the reader needs more information on the sampling both of the PMRs included in the intervention and on those interviewed in this qualitative study.

- General -

1) Page 5 - Why use the use of the actor-process-content analysis framework? Were there other theories/frameworks for understanding (more recent, from market research literature) that could have provided an equally or more insightful framework for thought?

2) Could the authors bring out differences within the sites and across the sites a little more or was there considerable homogeneity?

3) The issue of frequency of training and retraining could be discussed in more detail.


5) What is the role of regulation?

- Specific -

Abstract

Results section – ‘this was promoted amongst their clients by increased awareness and experience of the programme’. I found this point a little unclear.

Page 6

1) Add (CORPS) after writing it in full for the first time and also maybe add a line
or two to describe who they are and their role?

2) Change from ‘trained’ to ‘training in’ PMR monitoring and supervision?

3) In terms of selection criteria… was it all or one of the listed characteristics?

4) Are district public health officers and public health officers the same?

5) I would like to have seen a little more information on training included here, although I recognize that it is addressed later in the paper (a lot of useful info on page 20 which is possible a little to far into the paper). For instance I would like to have known from the beginning (a) were per diems given (b) number trained in each session (c) how frequent was the training planned – annual or one off? (d) was it group work, written? (e) where was it held and when – (during opening hours?).

6) Who was responsible for public information activities?

7) Maybe slightly restructure the programme implementation section into the activities associated with the PMR and the consumers? Last paragraph switches between the two.

Page 7

1) This is my only major comment of the review – ‘Selection of study sites for the evaluation has been described in a separate paper [22].’ - I don’t think this is enough. The reader needs a little more info on the sampling to help understand the findings. Can you add a few sentences here on, for example was it purposeful or random sampling? Individual or cluster? Stratified by distance to health facilities? On quotas of types of PMR?

2) How do the two annual malaria peaks relate to the timing of the training and the evaluation?

3) Why no in-depth interviews with the PMRs? Implications of this might be worth raising in the discussions section

Page 11

1) Any difference between the ‘private retail sector’ and the ‘general retail sector’

Page 14

1) ‘Amongst the mothers interviewed, the level of awareness of the programme positively influenced their (and other actors’) support for the programme.’ Who are the other actors?

Page 16

1) ‘…. tensions between officers and PMRs’. Officers refers to PHOs?

Page 17

1) There seems to be a contradiction/ friction that it would be good to explore more – ‘ For example, retailers generally reported financial benefits attributed to increased turnover of drug stock due to selling full instead of partial courses as illustrated by a retailer’ then on Page 18 ‘ Following training, PMRs reported
difficulty in stocking and selling more expensive drugs, a corollary to the affordability problem that mothers reported in purchasing these.'

2) I was not sure how successfully the PMRs could be expected to stick to their new knowledge, because if they did not give the client what the client wanted (for example a partial treatment dose using cheap drugs) then the client could go elsewhere? Maybe once the sampling strategy is more fully explained this issue will become clearer.

Page 18

1) Can you expand on this point, what do you mean about efficiency? ‘Trained sellers perceived greater efficiency in purchasing drug stocks, resulting from increased understanding of the differences and similarities between brands and reported improved status and relationships with customers’.

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