Reviewer's report

Title: Policymakers' perceptions of introducing task shifting for voluntary counselling and testing in Kenya: applying the policy analysis triangle

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Reviewer: Freddie Ssengooba

Reviewer’s report:

Thanks indeed for the opportunity to review this paper. It provides rare insights in the interests of different groups in expanding VCT at a country level. It also illustrates the power that different groups bring to decision making in the national programming of interventions. I believe the readers of the journal will find a lot to learn and hopefully better engage in the national policy development processes with these insights.

Major revisions to consider:

Having said that, I think that the overarching aspect of the manuscript needs to be addressed. By reading the manuscript it was not clear if the authors intend to write about task-shifting, task-rationalization or scale-up of VCT program in Kenya. Although the description in the paper is about the expanding VCT and the different models for doing so – i.e. community based, counsellor-based, nurse-based and laboratory the authors have branded this task-shifting. It was not clear in the manuscript what was “shifted” and from whom to whom? My reading of the manuscript is that the national scale-up of VCT was described and in the process of scale-up, different groups needed to play some roles and the politics of who does what comes out strongly. The policy discussions seem to be about rationalizing the workload for VCT tasks during scale-up – i.e. assigning different groups to play a role in the scale-up of VCT. I did not get a sense in the manuscript that the testing task in (VCT) was being shifted from laboratory personnel or the counselling task being shifted from the professional counsellors. What comes out strongly is about expanding VCT by expanding the models for testing and counselling by adding to the available but over-burdened models of the 1990s. From this perspective I invite the authors to reflect and reconsider the use of task-shifting Vs Scale-up approaches to VCT in Kenya. In their conclusion the authors use “scale-up” (instead of task-shifting) which I find to be a more appropriate term for the overarching message in the manuscript.

Related to the point above the change in technology for testing in VCT was given a short mention in the paper but not well grounded in the overall discussion of the scale-up models for VCT. My thinking is that the simplification of the VCT technology – especially the arrival of rapid test kits allowed many more actors to undertake testing that was the preserve of the laboratory group in the past. The authors may wish to consider if and how this fact can be addressed beyond a passing mention.
The objectives of international agencies (donors) in the VCT scale-up/task shifting in Kenya received some description ie mostly the issue of their reluctance to finance salary payments. From my research and in the context of HIV programming, donors usually have wider influence and power in terms of expectations of HIV/VCT scale-up and the speed of interventions. This power usually enables them to introduce innovations such as lay community counselling/volunteers – sometime before the government is committed to such models. Are issues of sustainability that usually plague such discussion did not surface in the Kenya? On the bottom of page 12 (paper not paged) there is a description about this – that funding for lay counsellors got finished in 2009. Table 1 refers to donors as the “driving force for the taskforce” but the descriptive findings do not bring out this clearly.

Many useful findings are provided. However, I felt that information from the newspaper articles (figure 1) was not clear. It may help to highlight the main issues on these papers than just provide pictures of news headlines. Relevant background information if available may include the number of professional laboratory and counselling staff produced annually and trend of total VCT tests in the country during the period covered by the paper. If the country had a VCT scale-up plan, targets thereof would also assist in contextualising the issues better.

In table 1, the last column was not very informative to me and use code words or phrases that are hard to appreciate like “ignore” “filter information back up”, “go to the press” etc. I advise that the authors relook at this table and make it simpler and meaningful.

Minor Discretionary Revision to consider

1. Acronyms are too many. It was a constant distraction from the reading flow. There are several confusing terms e.g. “flash-card” etc. These may not be widely known to the readership.

2. Several typos that need to be cleared, redundant words to be removed and several long sentences that need to be split to aid understanding. An example is at the bottom of page 12 “the eventual agreed initial wording …”. Proof reading the manuscript would help clear these.

3. The use of “triangle” in reference to the analysis framework could be restated in my view to mean “analysis framework” or theory. But this is a style issue. I hope the use of triangle will not be confused with mathematical trigonometry as the framework for policy analysis!

These are issues I believe the authors need to respond in someway to make the paper move from good to exceptional. Again I thank you for the opportunity to review and learn from this work.

Level of interest: An article of importance in its field
Quality of written English: Needs some language corrections before being published

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 in this paper.