Reviewer's report

Title: Problem-solving therapy for depression and common mental disorders in Zimbabwe: piloting a task-shifting primary mental health care intervention in a population with a high prevalence of people living with HIV

Version: 4 Date: 10 July 2011

Reviewer: John Cape

Reviewer's report:

The further revision of this paper is very much improved, in particular with much clearer Methods section, and has more than adequately addressed the points made in my last reviewer comments.

There are just a couple of points of accuracy in the additional material.

Minor Compulsory Revisions

1. The analysis presented in Table 3 does not, I think, match the description of it on page 7. From inspection, as Table 1 shows a regression coefficient of 1 for people who attended for 3 sessions, I suspect the analysis is of the incremental benefit of people who attended for 4, 5 and 6 sessions compared to people who attended for 3 sessions. If so, this may be an appropriate analysis and makes a similar point to that which the authors wish to make, but is different from the description on page 7 of the Results section and that in the data analysis subsection. Either the analysis as described needs to be carried out and presented (in which case one would expect a regression coefficient different to 1 for people who attended 3 sessions), or the current analysis can be retained but be appropriately described together with revision to the statement that “a drop of more than 3 points was observed among those who attended all six sessions” as of course the change scores will likely be higher for this group given the mean change score across all patients was 4.8.

2. In the Discussion it is stated that “We do not have a comparison group from the same study who did not receive the intervention. However, a prospective study in primary care in Harare showed that a drop in score of 3.8 or more on the SSQ was associated with recovery from ‘case’ to ‘non-case’ [20].” Having checked this reference (in fact 1998, 172 not 1988, 157 given in the reference list), the 3.8 SSQ change score given in the paper relates to patients who rated themselves as improved and not to patients who moved from ‘case’ to ‘caseness’.

Discretionary Revisions

3. As the authors refer in their revised discussion, as noted above, to the Patel et al 1998 prospective naturalistic study of outcomes using the SSQ in Zimbabwe, it would be reasonable to note the high recovery rate (62%) at 2 months found and
commented on in that study.

4. Figure 2 should be referenced in the text in the first paragraph of the Discussion section (which describes what the Figure depicts)

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I declare that I have no competing interests