Reviewer's report

Title: Transversal analysis of public policies on user fees exemptions in six West African countries

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Reviewer: Bart Criel

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This is a very interesting and well written paper that is definitely worth to be published.

I have, however, a number of comments that I would like the authors to address.

1. In terms of methodology, the authors write on page 8 that "we used an analytical framework inspired by the realist review approach of Pawson and Tilley". Could they please develop this? It is not very clear where and how exactly the realist review feeds in the present study...

2. I believe that the issue on financing of the exemption programmes (page 11) deserves more emphasis - also in the discussion. It is striking that exemption programmes for specific illnesses (along the lines of a "vertical" approach) are more often donor-funded, than endogenous programmes, based on endogenous priority setting (like for instance the Sésame programme for elderly in Senegal).

3. The same issue comes up again on page 15 when the M&E systems are being discussed. The authors write that in the case of Togo, "most certainly due to the involvement of persons with HIV", there appears to be an effective M & E system (and not elsewhere).

4. The discussion on other barriers (than financial ones) to health care is interesting and important. The following hypothesis can be formulated: given the problematic implementation of the exemption policies (altogether not very "user-friendly"), it is likely that the "weakest" socioeconomic groups, who are also the most needy in terms of health care, are most affected by these other barriers, and therefore benefit least from the exemptions... The authors themselves also raise the issue on page 25 when writing that "none of the policies set up activities specifically to promote access to the user fees exemption by the indigent and the poorest". This is a recurrent feature of many social programmes: the ones who most need it, are often not the ones who most benefit from it. See the "Inverse Care Law" developed by John Hart in the early 70's in the frame of his analysis of the British NHS. I would propose the authors to develop this point further.

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