Reviewer’s report

Title: Involving deprived communities in improving the quality of primary care services: does participatory action research work?

Version: 2 Date: 17 January 2007

Reviewer: Steve Iliffe

Reviewer’s report:

General
Thank you for asking me to review this interesting and well-written report of an attempt to improve the quality of primary care in a deprived area.

The description of the process is clear, and I have a sense from the account of how the whole process of consulting with service users developed. The lack of impact of this participatory approach is also clearly documented. The discussion contains some important points, particularly about defining communities and the authenticity of ‘participation’. I was left feeling that policy imperatives about involving patients and the public were perhaps rather cynical pretences at being democratic.

However, I think there are some things missing from the account that if added might make the paper richer and even alter the conclusions. The first is that the authors seem a bit defensive about their methods and so do not contextualise them enough. This is understandable given the negative stance of academic medicine (as opposed to academic nursing) towards action research methods. I think it would help to compare the methods used in this study with whole systems approaches (for example Jee M, Popay J, Everitt A & Eversley J Evaluating a whole systems approach to primary health care development King’s Fund, London 1999) and to justify their use of a combination of methods with reference to systematic reviews of techniques (for example Ryan M, Scott DA, Reeves C et al Eliciting public preferences for health care: a systematic review of techniques Health Technology Assessment 2001;5(5)) There may be some value in comparing the approach used with a traditional community oriented primary care model.

The second point is that we know little about how the health centre staff thought about change in their own work organisation. It might be helpful to describe the workplace management culture in terms of innovation theory, strategic planning approaches or change theory. The participatory project may have had little impact because it did not mesh with the health centre’s own cycle of change, but instead reflected the desires of an outside body to engineer change. Harrison is quoted as saying that communities are excluded from meaningful control of the health service, which is certainly true at middle management levels, but it need not be true at the level of the work unit. The health centre might have been able to benefit enormously from the participatory research, if the need for this approach had been generated from within the work unit.

The third point may be connected to the previous one, in that the social distance between doctors and the local community was seen as a problem, and respect was an issue. Although this is not surprising when thinking sociologically, it is a (refreshing) surprise to see it in print, as a product of medical research, and I would encourage the authors to explore the implications of this further.

My argument is that this account needs to be slightly longer and slightly more discursive for readers to get the full benefit of the authors’ experiences.

-------------------------------------------------------------------------------

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
My first & second points

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

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, the manuscript does not need to be seen by a statistician.

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