Reviewer's report

Title: Task-shifting and prioritisation: a situational analysis examining the role and experiences of community health workers in Malawi

Version: 1  Date: 14 January 2014

Reviewer: Wanga Zembe

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Minor Essential Revisions

This is a timely paper discussing an important issue for Malawi’s health system and the health systems of countries with similar settings. Below are essential revisions that the authors ought to make before the paper can be published.

Background:

1. The background is thin on the actual HSA program in Malawi -its history, the policy shifts that have occurred which have preceded (and necessitated) the addition of other roles to the original job description of HSAs. The background should also make specific reference to the ICCM program introduced in 2008 with donor funding (led by UNICEF) -the authors incorrectly refer to this program as 'village clinic'. There are several reports and published manuscripts on the Malawi ICCM program and how it forms the cornerstone of HSA work in Malawi which need to be referenced here.

2. Reference paragraph 1, line 5-6

3. Paragraph 4 -there are other papers that have been written communicating the views and perceptions of community health workers which should be referenced here -e.g Daniels et al (2005). Ear to the ground: Listening to farm dwellers talk about the experience of becoming lay healthworkers. Health Policy, 73, 92.

4. Paragraph 6: Authors need to mention a few more of the activities they say have been/are being regularly added to the HSA activities -it not enough to only mention HCT.

Methods:

1. Graphic illustration of participant selection and flow -in its current form the description of who and how many were selected for data collection is not very readable/easy to follow.

Findings:

1. Page 8 (Task shifting): quote 2 is said to be from a policy maker but it sounds like it is from an administrator/official -a policy maker would ordinarily be expected to be intricately involved in decision making at the central level and not merely receive instructions on who should be assigned what activity. Consider either using a different quote or assigning this quote to an official/administrator.
2. Page 9: Authors should please refrain from using the term 'village clinic' to describe the ICCM program in Malawi - the program is known as ICCM and operates from 'village clinics' - a concept conceived for a very specific purpose which should be explained in the background section so that by the time the reader gets to this section of the paper they know what the authors are referring to.

3. Page 19 (Specialisation): add ICCM to the list of specialized activities added to HSA training.

Discussion:
1. Page 23 paragraph 1: Authors suggest that "continued focus is also needed in ensuring HSAs have access to vital resources such as transport, mobile phones and accommodation that would increase efficiency...", while this is referenced, it seems odd that they make a recommendation on an issue (resources needed by HSAs) which was not explored/does not appear in the findings of this study.

2. Page 24 paragraph 2, lines 1-3: revise sentence, specifically this part ".....whether to recruit or train others specifically to programs...." does not make sense.

3. Page 24 paragraph 3, lines 4-6: Once again authors refer to 'core duties' without having ever explained what these are (if this information is included in the background, this sentence would make better sense in this discussion section).

Final Comments:
This manuscript needs to be edited for grammatical errors and poor sentence construction which appears throughout the paper.

Level of interest: An article whose findings are important to those with closely related research interests

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