Author’s response to reviews

Title: Voices from the frontline: Supervising infant feeding community peer counsellors in South Africa, a qualitative study

Authors:

Karen L Daniels Ms (karen.daniels@mrc.ac.za)
Barni Nor Ms (Barni.Nor@kbh.uu.se)
Debra J Jackson Prof (djackson@uwc.ac.za)
Eva-Charlotte Ekström Dr (Lotta.Ekstrom@kbh.uu.se)
Tanya Doherty Dr (tanya.doherty@mrc.ac.za)

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Responses to reviewers’ comments

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The reviewer’s comments are highlighted in italics and our responses are in plain text.

Reviewer: Peter Winch

We are grateful to Prof. Winch for bringing his knowledge about community health worker programmes to this review.

- The word "management" appears so frequently that it detracts from the paper. For example on page 24 “These interviews have shown that the task of supervision is facilitated by good management. This kind of management relies on good senior management in combination with the individual’s capacity for self management and their sense of self efficacy. Supervisors need to feel structurally supported by senior management.” Aside from the stylistic problem, the term is very general, so in some cases it is unclear what specific phenomenon is being referred to. “Emotional management” is an example where an alternative term might be more informative such as emotional support.

We thank the reviewer for this useful comment. It has helped us to crystallize the point we were trying to make. In response the discussion (pp 25-31) has been revised in full and this section has been removed. Attention has been paid to being more specific about the kind of support supervisors may need.

- Cell phones are seen by some as a panacea for weak referral and supervision systems. This article suggests that there are important limitations to the supervision that can be provided by telephone e.g. “Telephone call support it’s not effective at all for myself because the peer supporter only tells you what she thinks you need to know but you haven’t seen what she did and that’s the difference.” This point might be stressed, by presenting more data related to this point, mentioning it in the abstract, and/or discussing it more in the discussion section.

We agree with the reviewer that this is an important issue. However since it is not a strong theme in our data we do not want to give it more weight than it is due. This issue is probably better explored in a study which specifically looks at the effectiveness of telephone support, and thus we do not discuss it any further in this paper.

- At several times the authors cite a large number of sources at once, sometimes more than 10. I don’t find that very informative, particularly when some of the sources are lengthy reports. I would prefer to have the authors cite fewer sources, and be more specific about what section or finding in the report they are referring to.
Initially we erred on the side of caution in not wanting to leave any reference out. Part of the difficulty was that very similar arguments about supervision were made in several reports. We have now gone back to our references and removed any that were not necessary or specific.
Reviewer: Adriano Cattaneo

We thank Prof. Cattaneo for his careful reading of the text and for his positive comments.

- **The methods are appropriate and well described; authors may wish to provide some more details.** Throughout the methods and findings sections it is not clear if the three interviewed supervisors were the only ones employed by the project, or were sampled from a larger group. Only in the discussion (page 27, last paragraph) the authors seem to clarify that the supervisors were the only three (if this is so, adding “and thus had a fully representative sample” is redundant). If, on the contrary, the interviewed supervisors were sampled from a larger group, the sampling methods should be described.

There were only 3 supervisors in the intervention and each of these women was interviewed. We have now clarified this in the abstract (p 3) and the article text (pp 10 & 11).

- **Data are sound, but their usefulness for other CHW programmes may be very limited because the results can not be generalised (as correctly pointed out by the authors).**

We have addressed the issue of generalization in the discussion (pp 30-31). Initially we may have over stated this as a weakness of the study against its strengths. We have now argued more strongly for the study’s credibility and trustworthiness. While it is true that the study is not generalisable in the positivist sense, the study sensitises the reader to the importance of paying attention to the experiences of supervisors and thus it is theoretically generalisable.

- **Author contributions, page 29. The contribution of DJ is not mentioned.**

This has been amended in the text (p 32). DJ is a member of international Promise EBF steering committee and was responsible for the South African study overall including this sub-study. For this paper she had been involved in discussions on the results and analysis and has contributed significantly to refining the progressive drafts of the paper.

- **References, page 32. No year and incomplete editor, publisher and publishing place in ref 31. No year in ref 33.**

All references have been checked and are now correctly formatted with Endnote.

- **Page 6, last paragraph. The authors may wish to add “health,” before “social and structural challenges.”**

This has been added (p 7).
Page 8, second paragraph. The authors may wish to add some details on the criteria for selection (age, education, parity, breastfeeding experience, etc) and contents of training (especially practical training) of CHWs. They may also wish to describe the criteria used to choose the supervisors.

Further detail has now been added (pp 10-11).

In the sentence “Each supervisor was employed managed …” “was employed” should be deleted (as far as my knowledge of the English grammar allows me to understand).

This sentence has been rephrased and corrected (p 10).
Reviewer: Ann Hill

We thank Prof. Hill for her astute comments. We are particularly grateful to have had a reviewer who has herself conducted research on infant feeding peer counselling in developing country contexts.

- **Abstract:** careful revision is required as several statements are stronger than is warranted and could be considered misleading. For example the statement that the ‘paper reports on the supervision and support of CHWs...’ is questionable as few details (such as frequency/duration of observations, on-the-job training) are actually presented in the main text. The number of respondents must be stated in the Abstract.

The abstract (p 3) has been revised so as to reflect the body of the paper more closely. We have removed any suggestions that may not be factually correct and in line with body of the paper.

- **Appropriateness of methods:** Three supervisors, one from each site, were each interviewed once. Thus the sample is exceedingly small, and cannot be expected to provide anything more than a flavour. No robust conclusions are possible. Important details need to be added. It is not clear if these are the only supervisors employed on the project. If there are others, then the process of selecting these three for inclusion should be stated. The duration of the interview should also be specified.

We take the reviewer’s concerns very seriously. The project had only three supervisors, all of whom were interviewed. This is now more clearly stated in both the abstract (p 3) and the text (pp 10 & 11). While this is a small study its value lies in sensitising readers to the need to take heed of supervision in the context of CHW programmes. Furthermore descriptive studies like ours are important in areas where there is little other research. In response to the reviewers concerns we have extended the Strengths and Limitations section to include a discussion on transferability (pp 30-31).

- **Description of the training:** Supervisors received ‘some attention to the supervision process’, which implies that training for their supervisory role was minimal, both in content and duration. This needs to be clarified as it might explain the individualistic and varied approach to supervision shown by the three supervisors. In planning home-visiting intervention programmes, one should prepare frontline workers during their basic training for difficult, disturbing or dangerous situations which they may encounter. It is not clear if this was done during the training of the counsellors, and whether supervisors participated. If it was not done, might it have been helpful in hindsight?

The training which our supervisors received mainly focused on the intervention content (pp 10 & 11). We have now commented on how a more specific training focusing on the various aspects of support which supervisors need to offer, might enhance the capacity to deliver their tasks (p 27).
• Interpretation and conclusions: One has the impression that the supervisors were diligent but the context is rather abstract as there is no indication as to whether they performed as expected, or whether the workload was manageable, or if the peer counsellors felt adequately supported. The supervisors tended to function idiosyncratically, but it is unclear whether this was encouraged, or reflects a weakness in their training or in the managerial system. A distinction must be made between what was expected of the supervisors (was this technical supervision alone?) and what was found to be needed.

The supervisors each performed to expectations in terms of making contact with the peer counsellors and giving them support. But each of them undertook this in a different way- one focussing more on the administration, another on the intervention and the third on emotional support. However if we look at their overall performance against a check list of what was required of them then each of them adequately fulfilled their tasks.

• Careful revision of the discussion is required

The discussion (pp 25-31) has been revised, with careful attention being given to what this study adds and what lessons can be drawn from it.

• The conclusions need to be more specifically related to the findings from the interviews.

The conclusion section has been revised (p32).

• p2: CHWs (not CHW’s)
Corrected (p 4)

• p4: 1980s (not 1980’s)
Corrected (p 5)

• p4: health promotion, disease prevention (not health promotion, prevention)
Corrected (p 5)

• p6: facilitating factors (not facilitators)
Corrected (p 7)

• p6: remove superscript 2

We have not removed this as we feel that it adds clarity. We have however replaced the word “commonly” with “locally” as this is more accurate.
- *Improve syntax and punctuation*
  The paper has been read by a first language English speaking academic and any grammatical errors have been corrected.