Reviewer's report

Title: Devolution and human resources in primary healthcare in rural Mali; exploring the potential.

Version: 1 Date: 8 February 2011

Reviewer: Riitta-Liisa Kolehmainen-Aitken

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Minor Essential Revisions

1. The second paragraph in the Discussion section (called Devolution and human resources for health: five key issues) discusses four issues, not five. According to the way the headings are formatted, these are Responsiveness, Retention of health workers, Downward accountability and Capacities. What is the fifth key issue?

2. Language correction: Second sentence in the second paragraph under Responsiveness should read "DHMT has [not have] always faced a lack of data for planning and it affirms..."

3. Language correction: First sentence under Financial incentives should read "Another initiative that the Government of Mali has introduced is [not are] financial incentive schemes..."

4. Spelling mistake: In Acknowledgement, a letter a is missing from the word Décentralisation in the name of the Ministry of Health Cellule d'Appui.

Discretionary Revisions

1. In the Introduction, the authors state that the "overall number of health staff in Mali respects the norms defined by the World Health Organization." What norms are the authors referring to?

The Oxford English Dictionary defines "norm" as a "value used as a reference standard for purposes of comparison." To my knowledge, WHO has never defined norms for health staff numbers. The authors may be referring here to the statement in the 2006 World Health Report that countries with fewer than 2.5 health professionals per 1,000 population have failed to achieve 80% skilled coverage of births or measles immunisation. If so, it should be acknowledged that this is not a WHO-defined staffing norm, but a suggestion by the Joint Learning Initiative.

2. The authors state that "little is known about the effects of devolution policies on HRH." This area certainly merits much more scrutiny than it has received so far, but the topic is neither new nor recent. Two examples of previous publications that the paper does not reference are my own: a 2004 review article in this journal and a 1992 article in a different one (respectively Decentralization's

Overall comment

The aim of the paper is to inspire debate in Mali and elsewhere by highlighting "key issues at stake." This is a laudable aim and the issue of accountability, in particular, is a critical one that merits much more discussion. Accountability requires both a clear definition of roles and responsibilities - horizontally as well as vertically - and the requisite management systems, structures and capacities. The challenge in a devolved setting is indeed how to "develop or strengthen accountability." But it is also how to develop and strengthen the mechanisms that allow an individual or a management entity to be held accountable.

Equity in staffing is an issue that the paper does not mention. In my experience, devolution that does not pay sufficient attention to building appropriate accountability mechanisms inevitably increases inequity in staffing. Where local governments have a high degree of discretion in hiring staff and setting their terms and conditions of work or in defining their contracts, the richer and better managed areas will pull ahead at the expense of the poorer. This is particularly so in the many settings where skilled health workers are scarce.

**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

**Declaration of competing interests:**

I declare that I have no competing interests.