Reviewer's report

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

Version: 1 Date: 14 February 2011

Reviewer: Siri Lange

Reviewer's report:

General comments
This commentary is timely because it focuses on policy reforms that may potentially have great effects on the human resources in health services. A large number of developing countries have decentralized in recent years. The case of decentralization by devolution in Mali is therefore relevant for researchers and policy makers working in other countries as well. Overall, the commentary focuses on policy and does not present results. The authors do, however, provide some interesting examples of how negative behavior, such as staff absence or bad attitudes, are sanctioned under the new system, and describes financial incentives that appear to be innovative. The commentary raises a number of interesting discussion points, and may be useful for researchers who are in the process of designing a study of devolution processes. The main conclusion, that local accountability measures are the key issues for decentralization to have positive effects, is well argued and in line with other research in the field.

Minor essential revisions
1. The commentary uses the term 'local government' without defining what level this government represents. In Mali, it appears that local government is a term used for levels that are lower than the district authorities. In some other countries (i.e Tanzania), district authorities are defined as local government, with a number of sub levels beneath. To avoid confusion, the authors should briefly describe the administrative structures (including local terms in French), and provide information of the population size/range that is covered by local governments and community health associations.

2. It would be interesting to know something about the relationship between local governments and community health associations. Are the latter a form of committee directly under the former, or are the committees formed independently of, and parallel to, local governments?

3. The discussion section says that five "key opportunities and dilemmas" will be discussed. The way the headings are presently organized, only four stand out: Responsiveness, Retention of health workers, Downward accountability, and Capacities.

4. In devolution processes, conflicts often arise between the educated bureaucracy – which looses influence – and the often less educated politicians.
who get increased power.

5. It is argued that capacity building is a central component of the decentralization in Mali and that different stakeholders were better prepared through training than in some other countries, like Tanzania. Is this so for the whole country, or only in pilot areas? Is it possible to say that stakeholders were well prepared if the actual training has not been evaluated?

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

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests.