Reviewer's report

Title: Economic support to improve tuberculosis treatment outcomes in South Africa: a qualitative process evaluation of a cluster-randomised controlled trial

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Reviewer: Christo Heunis

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This is a very interesting article describing the results of a qualitative process evaluation to explain factors contributing to low fidelity to an intervention providing food vouchers to TB patients to improve adherence to treatment.

Major Compulsory Revisions

The specific study setting (province) is mentioned too late in the article (Results, 5th sub-section). Perhaps the province/districts can be mentioned in Box 1. This is all the more important because the article emphasises the importance of contextual (socio-economic) information (Background, fifth paragraph, Conclusion, first paragraph).

For the same reason it would be important to not only mention that two districts were involved (Population and sampling, fourth paragraph), but to actually name and contextualise them. The poverty profiles of both the province and the districts (relative to the rest of the country) should be described.

The eligibility criteria for patients should be specified. (There is reference to such criteria but they are not specified anywhere.)

Minor Essential Revisions

The Abstract, Background variably refers to “tuberculosis” and “TB”. In the section “Equity and social justice in the implementation of the voucher system”, “[pulmonary tuberculosis]” should be “[pulmonary TB]”.

In the section “Perceived effects of the voucher on adherence to treatment”, “i.e.” is used in the explanatory note between square brackets. This is not done in any other explanatory note within an illustratory citation.

In Discussion, fourth paragraph “(Plaatjie 2012)” should be replaced by a reference number with Plaatjie (2012) listed under References.

Corrections needed in References:

Tuberculosis control in South Africa: reasons for persistent failure. In: van

In the above reference:
• “Meulmans” should be “Meulemans”
• “Janse-van Rensburg-Bonthuysen” should be “Janse van Rensburg-Bonthuyzen”

Referencing (e.g. journal article page numbers) should be according to journal style.

Article titles in lowercase – Cegielski et al. 2012.

Date accessed not consistently indicated for all website references.

Discretionary Revisions

The study is variably referred to as a “qualitative process evaluation”, “process evaluation”, “qualitative study” and “qualitative analysis” – can this be standardised?

Use “TB treatment outcomes” rather than “outcomes of patients on treatment” (Background, first paragraph, Discussion, first paragraph)

In Ethical considerations, second paragraph, the statement “… and no participants were paid for taking part in these interviews” should/could be offset against the incentive to patients to participate in health research (e.g. London et al. Improving ethical review of research involving incentives for health promotion. PLoS Med 2012; 9(3): e1001193. doi:10.1371/journal.pmed.1001193).

The distinction between results and discussion is not very clear. The following extracts from Results, in my view, could more appropriately be integrated in the Discussion:
• “It was clear from the interviews that all participants found the exclusivity of giving vouchers only to a select group of patients to be problematic. The targeting of economic support to certain groups to the exclusion of others, is an important issue in addressing the social determinants of health. How participants are selected for any programme that seeks to address poverty-related risk factors for disease may be contentious, among participants and administrators of the programme. The perceptions of those who implement economic interventions to improve health outcomes, and of those who receive these interventions, may have profound effects on the process of implementation and the effectiveness of such interventions. In this trial, such perception lead nurses to limit the number of vouchers received by eligible patients, because they felt that some patients did not need vouchers at all, and some needed them only intermittently. The effect
that this had on the fidelity to the intervention protocol may have undermined the impact of the voucher and contributed to the non-significant findings of the trial.”

• “Travelling to the clinic on another day to collect their vouchers would have imposed additional costs on patients, and very poor patients may not have been able to afford these additional visits. Similarly, patients who were working may not have been able to take time off work for an additional clinic visit, and patients who were very ill may not have been able to visit the clinic a second time in a month. Although the proportion of patients affected by these factors was not quantified in the trial, this qualitative process evaluation suggests that at least some patients were affected by them.”

• “If the economic support intended for one patient only is shared with family or community members, the efficacy of that support may be diluted. The targeting and sharing of economic support for the improvement of health outcomes is an important area for further research.”

• “These complex views reflect both the perceptions of the deep poverty which prevails in KwaZulu-Natal and the effects of poverty on illness, as well as ideas on how poverty should be addressed. These views echo age-old debates over social support for the poor and are discussed further below.”

In the section “Equity and social justice in the implementation of the voucher system”, the finding “The patients themselves felt that this was fair – if they were doing well financially that month, it was better that someone else received the voucher that they might have taken:” is followed by the illustratory citation: “When I am here I get it if I ask for it” (Patient, Clinic 5 page 4).” Does this speak to patients wanting other more needy patients to receive the voucher?

In the section “Impacts of the voucher on patient poverty” the sentence “However in some cases, especially in the case of children or the elderly, the food was reserved for the index patient alone” is followed by an illustratory citation referring to “the child”. Could the same be provided for “the elderly”?

Level of interest: An article of importance in its field

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.