Reviewer’s report

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

Version: 1  Date: 7 April 2014

Reviewer: Nanteza Gladys Kigozi

Reviewer’s report:

The study sought to determine the reasons for low fidelity to a randomised cluster-controlled trial to improve TB treatment outcomes by providing economic support in the form of vouchers to tuberculosis (TB) patients. The authors provide a clear description of stakeholders’ views of contextual factors influencing the implementation and effectiveness of distributing vouchers to TB patients.

* Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)
  • Page 2: Mention the method of participant selection.
  • Page 4: Clarify the onset of voucher receipt by the patients. Mention the persons responsible for voucher distribution and the measures instituted to prevent voucher leakage/misuse during the trial.
  • Page 6: Describe the setting for this process evaluation. Also, mention the duration of the trial.
  • Page 24-28: Present references and tables according to journal style.

* Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
  • Page 1: Revise the sentence “A qualitative process evaluation, conducted in the final few months of the trial, explain some of the factors that contributed to this low fidelity.” Also include the duration of the trial.
  • Page 2: Insert “TB” after “tuberculosis” and use “TB” consistently throughout the text (see page 3: paragraph 2).
  • Page 3: Define HIV. Mention the national target for PHC utilisation.
  • Page 5: Change [16], [17] to [16,17].
  • Page 6: Together with this, mention whether data on other sources of economic support e.g. social grants was gathered. What proportion of those who did not get vouchers were receiving social grants?
  • Page 7: What was the duration of the interviews? Where were the interviews with patients conducted? What information was provided to the patients prior to seeking their consent to participate in the study? Who conducted interviews with the patients? What, if any training did field assistants receive with respect to procedures for ethical qualitative data gathering including the consent
procedures? The paragraph “All nurses interviewed were professional nurses, with a median nursing experience of 15 years. Patients had a median of 8 years’ schooling. Sixty nine percent of patients were unemployed, 14% worked in the informal sector, 3% in the formal sector and 14% were too young to work” can be inserted just after Table 1 on page 6.

• Page 20: define DOT. Change [25], [26], [27] to [25-27]. Use numeral reference for “Plaatjie 2012.”

• Page 23: Change “DOTS supporter” to “DOT supporter.” WHO distinguishes between “DOTS” and “DOT.”

* Discretionary Revisions (which are recommendations for improvement but which the author can choose to ignore)

• Page 11: Shift paragraph “It was clear from the interviews … non-significant findings of the trial” from results to the discussion section.

• Page 12: Shift paragraph “Travelling to the clinic … some patients were affected by them” from results to the discussion section.

• Page 21: In the last paragraph, better to use “treatment success” as already reflected in Box 1 instead of “cured or completed treatment.”

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