Reviewer's report

Title: Rwandan family medicine residents expanding their training in South Africa - the use of South-South electives in enhancing learning experiences

Version: 2
Date: 10 April 2015

Reviewer: Geoffrey A Anderson

Reviewer's report:

Major Compulsory Revisions:
- None

Minor Essential Revisions:

1. In your abstract (line 19) and in your methodology (line 119) you state that you will compare this international medical elective (IME) to “those of North-South electives from the literature.” While you briefly touch on this in your intro and discussion it does not appear anywhere in your results. You attempt to make the case that international medical electives (IME’s) are an important part of student and resident education and that “South-South” IME’s should be included as equally beneficial. If you state in your methods that you are comparing this to the existing literature then you should have a section of your results that summarizes the current literature on “North-South” electives. A systematic literature review would help add weight to this innovative study that currently suffers a bit from lack of significance due to the very small sample size.

2. While the scientific writing in this paper is good there are several parts that would benefit from the use of a traditional editor. Some example of language and grammar that need to be improved include the overuse/misuse of the semicolon (e.g. lines 65, 66, 147, 276, 305, 306), run-on sentences (e.g. lines 73-75, 85-87, 93-98, 104-107, 203-206, 230-234, 326-328), or sentences that simply need work (e.g. lines 66, 76-77, 228-229, 236-238, 289-290, 314-317)

3. You state in your limitations that the interviews were conducted by “one of the faculty of the department.” You go on to state that you believe any reporting bias from this “was minimal.” You must state why you believe this to be minimal. To my mind this is potentially a significant source of bias. The person to whom these residents are describing their experience is also someone who has a vested interest in this experience being beneficial.

Discretionary Revisions:

4. You use the terms “North” and “South” when referring to High Income Countries (HIC) and Low or Middle Income Countries (LMIC). While these terms are used frequently in the literature I find that they are not the ideal terms to use. Not all countries in the “South” are LMIC’s and not every country in the “North”
are HIC’s. These terms are relevant for this paper dealing with Africa but there are many other situations where these terms would be inappropriate. I would not limit the applicability of your paper in this way. Once again, these terms are acceptable and frequently used but I think we should start moving towards a more accurate terminology in peer-reviewed literature.

5. In line 137 and 138 your list of themes includes “family medicine” and “family medicine training.” It is unclear to me how these are different. You expound on this later on but I think you can add to the distinction here.

6. Lines 163 states that the residents saw a “number of patients with non-communicable disease… and several cases of rape.” This is in the context of explaining how the IME in South Africa added to the knowledge gained from Rwanda. How were these cases different from what the residents learn in Rwanda? To better illustrate this you could include a quote that shows how this experience adds to what is learned in Rwanda. You quote on line 165 does not accomplish this. Line 172 also talks about experiencing the “importance of studying and learning.” I also find it unlikely that this lesson is not learned in Rwanda as well. The point of this article is to convince someone that this IME adds to the education of the residence and leads to lessons and experiences that they cannot have in Rwanda. This is not a small task as this involves one month away from training where they cannot even touch patients and often have difficulty understanding their language.

7. You list of challenges of “South to North” electives in lines 334-336 is good but many of the same points could also be made of “South-South” IME’s.

8. Figure 1 adds very little to your paper.

9. For your Data Analysis section I would include (if true) that the researchers that coded the interviews were not the same people who conducted the interviews and were not associated with the residency training programs.

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

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