Reviewer's report

Title: Using a human resource management approach to support community health workers: experiences from five African countries

Version: 2 Date: 8 February 2015

Reviewer: Asha George

Reviewer's report:

Compliments
1. Important and relevant topic, clearly mapped out.
2. Good use of qualitative data
3. Good opportunity to undertake comparative health systems research on HRM
4. Good opportunity to triangulate data sources & respondents
5. Important recognition of variance among CHWs globally and excellent description of CHW characteristics in the country case studies
6. Good limitations section.

Major revisions
1. While it is useful to delineate between “management actors” meaning program managers, frontline supervisors and community oversight, these are not the only actors involved in ensuring that CHW expectations are met and managed. CHWs and CHW beneficiaries/users also play a role and this could be acknowledged more strongly. There was tangential reference to senior CHWs acting as supervisors but no further information provided.

2. The total number of interviews and FGDs undertaken in each country seems extremely small to have yielded saturation. In some instances there is only one interview per respondent type or FGD type. While this is acknowledged in the limitations section, repeated reference to aiming to attribute causality to HR outcomes is not warranted since this seems to be a rather exploratory or rapid assessment study, without any depth of data collection to map out further relationships.

3. Section on “Who manages CHWs” needs strengthening, considering that your article focusses on HR MANAGEMENT. No information is provided on the training provided to these managers and supervisors, review of their own job description, monitoring their performance, incentives for managers & supervisors, operating guidelines, workload, etc. Are there budgets, support structures in place to effectively undertake management/ supervision? Are there competing vertical programs? Is this more of an issue for CHW programs vs. other health workers? While on p.17 it is argued that you “looked at the support provided to CHWs” there is no data beyond qualitative data on actor perspectives. You may want to rephrase your study as “actor perspectives on x,y,z” rather than actually...
measuring x, y, z.

4. While the HRM approach can broadly be applied to CHWs, the authors do not sufficiently use their own data to argue how CHWs have different needs from formal sector workers and that these differences in managerial needs can no longer be not costed, planned for and assessed/made accountable. The lack of attention to these issues has negative unintended consequences for CHW programs, eg failing to deliver on promises made. This could be emphasized further drawing from their own data. The article would have made a stronger contribution if it had explored the barriers to providing HRM for CHWs, rather than only documenting that this is provided in an incomplete fashion.

Minor revisions

1. N of document review, interviews and FGDs needs to be mentioned in the abstract.

2. Reference in the conclusions section of the abstract is made to “three groups of management actors” without explaining to the reader who these three actors are.

3. Third sentence in the background section argues that “managers have resorted to seeking much greater collaboration with communities and the use of non-formal health workers”. While this type of discretionary agency is no doubt true in many instances, I believe the authors are referring to policy and program decisions that go beyond individual managers?

4. Third section under ‘Human resource management and CHWs’ needs some revision.
   a. Second paragraph makes reference to “management actors” without defining who these actors are.
   b. The first sentence in the third paragraph says that “many CHWs” are formal employees, whereas earlier in the paper you state that most CHWs are non-formal health workers who are volunteers. Perhaps you mean to say “Some CHWs” in this sentence?
   c. Reference to “human resources outcomes” on p.5 without spelling out what these are in either the text or the figure. Spelling this out will help those who are not familiar with HR language.
   d. Reference to CHW work as their ‘jobs’ implies that these are full-time employment opportunities/responsibilities, which they are not.
   e. If your emphasis is on HR MANAGEMENT, perhaps you should refer to HRM practices and outcomes, rather than the generic HR practices?

5. On page 10, you state that “the workload of CHWs appears to be very heavy”. Considering the challenges in actually measuring time allocation/work load, would be good to substantiate this statement further.

6. Section on “HRM practices: attraction and retention” does not seem to do justice to your data. Your present more information in the table, which is not reflected/interpreted in your text.
7. Bottom of p.14, you seem to be stating that training increased breadth of services, managing heavy workload and improving community health. It is not clear what you are referring to with the word ‘practices’…is it training or improvements in performance?

8. Flow of argumentation in discussion section could be improved. For example, unclear why financial incentives is discussed first before other forms of job satisfaction, particularly when the latter forms an important characteristic of CHW expectations as substantiated by your data.

9. Your final recommendation assumes that programs measure HR outcomes. Programs barely measure health outputs, let alone HR retention, motivation, etc.

10. Figure 2, would be good to spell out what are the HR outcomes you want to see for a lay reader. Also assume that you want to emphasize HRM, as in human resource management (HRM) practices, and not just generic human resources practices (HR).

11. Figure 3, the arrows linking ways of recruiting to selection criteria to impact seem misleading. The fact that few people volunteer, that younger applicants are not applying, or that people drop out due to misinformation about the work are not linked to what is currently listed in the ways of recruiting or selection criteria. The linkages would be clearer if you added something like ‘inability to pay competitive salaries for young more literate community members’ and ‘lack of information of job criteria/ workload” to these other sections.

12. Table 4, bullet point on job description is confusing. Are you trying to say there is varied description of CHW work including no description?

13. Table 4, not clear that all the points listed under HR outcomes are due to HR practices? The first 4 seem to be more characteristics of the programs documented, rather than due to explicit HRM practices?

14. Table 5, man of the ‘practices reported across many contexts’ that are supposed to ‘support performance’ reflect the gaps found. You may want to change the presentation of the table to reflect better the continuum of support found, from full support, to varied or mixed support, to failed expectations.

This is a good exploratory study that provides a useful and coherent framework for thinking about HRM approaches to CHWs. The article will make a contribution, after revisions are made to strengthen it.

Level of interest: An article of importance in its field

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 I have no competing interests