Reviewer's report

Title: Feminisation of the medical workforce in low-income settings; findings from surveys in three African capital cities

Version: 1 Date: 13 May 2015

Reviewer: Jonathan SICSIC

Reviewer's report:

Dear Editor and authors,

The topic of this article is interesting and the methodology used to respond to the research question is sound. The paper is well written in general, but there remain some errors (typos, unclear sentences, references lacking) that should be addressed to improve its quality for the journal.

Minor essential revisions

- Page 2: The authors write “In high-income countries the number of women entering medical education is superior to that of men. Newly graduated male physicians represent the majority of new entrants (...)”. Did the authors mean female rather than male? Otherwise the two sentences are contradictory.

- Page 3: The authors write that “the three locations were selected for the similarities of their national healthcare systems (...)” but the authors provide no further explanation about the healthcare systems organization and major remuneration schemes for doctors. One or two sentences would be necessary in order to characterize these systems in comparison to OECD healthcare systems, for instance.

- Page 4: At the end of the Data collection subsection, the authors write “41.1% could not be located”. This figure is not clear: what do the author mean by “not be located”? Indeed, the survey questionnaire was “administered in person” (page 3), so it does not make sense.

- Data analysis: “Confidence intervals for proportions (...) were obtained using Wilson and Agresti-Coull methods”: please add a reference as one may not be familiar with these tests.

- “The Vuong test was used to verify if a GLM is indistinguishable for the corresponding ZI model”: please also add a reference for the test.

- Page 6: “Female physicians worked shorter hours per week (50.23) than their male colleagues (53.88) (p=0.025)”: it is not clear where the results are reported. I can’t find the results in Table 2.

- The authors say that “the adjustment of the GLM model to the data is poor, displaying some high Pearson residuals”. Is there a threshold to judge about large residuals? Note that providing standardized Residuals (that are staked) could facilitate the interpretation.
-Page 12: Please create Tables for the results of the ZI models, rather than the outputs of R software.

Discretionary revisions

-Page 2: “Some authors put forward the hypothesis that while female physicians have for quite some time already given preference to a lighter work-load (...).” The sentence is not clear, please revise.

-Page 5: The authors write “Overall, 52.3% of female physicians declared holding a specialty (...) and then “(...) General practice and gynaecology were the most frequent specialties”. In some countries, General practice is not a specialty, so one may ask what medical profession are practised by those who do not hold a specialty (47.7% of the female physicians)?

-Page 8: -Paragraph 3: ‘female doctors distribute unevenly across medical specialties (...), although all in all (...).” Please delete “all in all” which is unclear.

-Paragraph 4: “(...) the specificities of its consequences”: not clear, please revise.

-Page 9: There is a typo in Table 1: please replace 133rd by 133th (line 4, column 4) to be coherent with the notation of the other columns.

-Page 10: There is a typo in Table 2: the p-value of the effect of ‘Married (%yes)’ in the Maputo subgroup is incorrect. Please revise.

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

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