Reviewer’s report

Title: Coping and compromise: A qualitative study of how primary health care providers respond to health reform in China

Version: 0 Date: 27 Mar 2017

Reviewer: Xiaoyun Liu

Reviewer's report:

This interesting paper used qualitative methods to explore PHC workers' coping strategies in response to the increasing workload of public health services in urban health setting in China. It identified three main coping strategies, passive loyalty, exit and compromise. The findings are useful for China's PHC development.

Major comments:

1. Background

More background information are needed regarding the BPHS so that the reader can better understand PHC workers' coping strategy.

- In China's health service delivery system, PHC facilities provide both clinical and public health services while at higher level, there are separate facilities in charge of medical services (hospitals) and public health services (CDC, etc). This was so even before the 2009 reform. Therefore, BPHS policy just expanded PHC's role on public health services, not totally re-designing their responsibilities. It should also mention usually there are both medical staff and public health workers to take these different tasks at PHC facilities. (One major change during the new reform is that some medical staff have to take public health works as the workload increases, or some public health work such as medical checkup needs clinical expertise).

- The contents of BPHS (and its evolution since 2009) should be introduced in more details. What are the key difference between the BPHS and the previous public health service package before 2009?

- Another key feature of the BPHS policy is the tax-based funding on a capitation basis. This changes PHC facilities income sources.
- If necessary, other context factors at PHC can also be mentioned, for example, the essential medicine policy (zero drug mark-up) and the performance based salary system changed the PHC's revenue source and the payment mechanism.

These background information will help justify the study, i.e. why PHC workers need to develop new coping strategies? What are they coping with? New tasks? High workload? Or changing income and payment mechanism?

2. Terminology

The study used 'CHW' to refer to the health professionals working at community health service centers in urban China. In international literature, CHW usually refers to a special group of health workers: they are members of the communities where they work, selected by the communities, answerable to the communities for their activities, supported by the health system but not necessarily a part of its organization, and have shorter training than professional workers (WHO, 1989).

In order to avoid confusion, I suggest the paper use PHC providers, or health professionals at PHC or other equivalents instead of CHW.

The authors should also clearly indicate the study setting is in urban areas.

3. The authors used MaxQDA 2 for data analysis, the current version is 12. Please check whether this is a misspelling or you really use Version 2.

4. The study selected interview participants from different types of CHS centers. It will be helpful to present how many participants were from each type of CHS center.

5. In the results, one characteristic of the work is 'less intensive', the other is 'heavy'. This somehow sounds controversial. It may be worth to clarify the medical services are less intensive while the public health workload are heavy?

Optional comments:

1. For most of the key findings, there is only one piece of quote to support. It is not easy to judge whether there is only one respondent or many who held the view. You may either use 'many', 'some' or 'majority' etc in the description, or add some more quotes.
2. The coping process part deals with the job resources and demand. It to some extent repeats what has already been mentioned in the previous section on job characteristics, rather than the process of how health workers develop and carry out their coping strategy. An alternative option is to add the income information to the job characteristics, and move the job resources and demand perspective to the discussion part.

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Please indicate the quality of language in the manuscript:

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