Author’s response to reviews

Title: Analysis of strategies to attract and retain rural health workers in Cambodia, China and Vietnam and context influencing their outcomes

Authors:

Anna Zhu (anna.jo.zhu@outlook.com)
Shenglan Tang (shenglan.tang@duke.edu)
Thu Nguyen (nguyenhoaithu@hmu.edu.vn)
Leang Supheap (leangsupheap@yahoo.com)
Xiaoyun Liu (xiaoyunliu@pku.edu.cn)

Version: 2 Date: 15 Aug 2018

Author’s response to reviews:

1. Thank you for the opportunity to review this paper which is valuable but I think will be stronger and more accessible to a wide global readership if it is re-fashioned in a different format (as a policy narrative) and condensed around a clear aim.

RESPONSE: Thanks for all the valuable comments. We have made relevant changes as explained below.

2. Title: I suggest a revision in line with the aim (suggested below) and the actual method used and material presented to "A narrative review of human resource strategies and broader policy context for rural health workers in three south east Asian countries, at different levels of development"

RESPONSE: We have changed to the title as “Policy analysis of human resource strategies and broader policy context for attraction and retention of rural health workers in Cambodia, China and Vietnam”.
3. Abstract - Aim:

The aim needs revision for clarity. This is extra important in a conceptual paper like this one, as a lot of material presented is jumping around at the moment making it hard to read. To keep this paper really focused I suggest the following aim

"The aim is to describe the specific strategies and broader policy context supporting rural health workforce development in three South East Asian countries that are at different levels of development”.

RESPONSE: We have changed to the aim as “to describe the specific strategies and broader policy context supporting rural health workforce attraction and retention in Cambodia, China and Vietnam”.

4. Abstract - Method:

I suggest you revise this paper given the aim and the presented material. I suggest "This is a policy narrative based on a review of available material sourced from key informants, and key informant interviews about local context, strategies and their outcomes”

The reason I recommend this, is that this is not a case study, nor a qualitative study, but a policy analysis, and policy review, which is why I think this method fits with the material presented, and can encompass key informant interviews to strengthen the identification of material and provide stakeholder perspectives.

RESPONSE: We have changed the methods as “This is a policy narrative based on key informant interviews and literature review about local context, strategies of rural health workers attraction and retention, and their outcomes”.

5. Abstract - Results:

I suggest re-write the results to summarise the strategies used and differences between the countries and then present the overview of the policy context and how that compares by country. So re-write this around the revised aim.
RESPONSE: The results part of the abstract contains two parts, first, a brief summary of the strategies used in the three countries; second, various context factors and their influence on the design and implementation of strategies.

6. Abstract - Conclusion:

The conclusion can only conclude on what was presented in the abstract results, so limit this down to broad themes noted, specifically referring back to reporting on the aim.

Please note: avoid the term "context" and "implications" and use specific terms instead, wherever possible, so it is really clear exactly what you are talking about, given this is a conceptually challenging piece of work.

RESPONSE: We re-phrase the conclusion as suggested.

7. Main article - Background:

Suggest shift the last para to first, as that would provide more immediate context and aim of this paper.

p5. line 11 make this paragraph 1 and revise the aim as suggested above

p.4 line 7 make this paragraph 2 etc.

RESPONSE: We re-structure the background as suggested.

8. Main article - Methods:

I suggest to write this method as a policy narrative, based on selected south-pacific countries with different socioeconomic status, and within them, key informants, via purposive sampling, representing a range of stakeholders to promote wider understanding of the scope of strategies and broader policy context of the country.

Remove headings like "sample strategy" and "data collection". A policy narrative is deliberately broad, which fits with what you've done here. remove much of "data analysis" not needed - just that the interviews were done, an hour long, recorded and thematically coded to inform the aim.
RESPONSE: We emphasize that this is a policy narrative, and removed the headings of "sample strategy", "data collection" and "data analysis" as suggested.

We keep much of the data analysis methods, with the justification that an in-depth analysis using thematic framework can help answer the research questions even if it is a policy narrative.

9. Main article

Results

Suggest present in two equal parts: the first "human resource strategies employed" and the second "broader country policy context influencing rural health workers"

RESPONSE: The results was organized in two parts as suggested. We applied the headings as suggested.

10. Table 2 - not needed, the text provides more information so there are a few conflicts, suggest take it out.

RESPONSE: Table 2 is now taken out as suggested.

11. Please be clear where policies targeted rural regions - often the regions are stated but the international reader doesn't know if they are "rural".

RESPONSE: Majority of the interventions introduced in the paper are for rural areas. We now make it clear when the policy is for both urban and rural areas.

12. p8 line 50 delete 'rural', it is there twice.

RESPONSE: Deleted.
13. p.9 line 6 and line 22, are these "rural" provinces and counties?

RESPONSE: A province has both urban cities and rural areas, we have indicated that the interventions was targeted at the rural health facilities in these provinces. A county is in rural areas, this is now made clear.

14. p.9 line 27 what is drug mark up - suggest delete this sentence.

RESPONSE: The drug mark-up was removed from the sentence (it means the hospital can earn a profit as mark-up by selling drugs).

15. p.9 line 36 what is twinning - this is not a known term

RESPONSE: The word ‘Twinning’ is deleted.

16. p10. line 36 do you mean "rural health workforce" of all workforce.

RESPONSE: Yes, here it refers to rural health workforce.

17. p.10 line 50 unclear "As for regulation...

RESPONSE: It means regulation interventions. This is now made clear.

18. p11 line 4 to line 14 delete paragraph "contextual factors" this isn't needed.

RESPONSE: Re-written as suggested to make the structure clear.
19. Suggest reduce the words in the broader policy context around the key themes, socio-economic, hospital or community health care investment, private and public investment.

RESPONSE: We have tried to reduce the words in this section.

20. p.12 line 29 I don't understand decentralization as the way you have referred to it, as investment in hospitals. So turn the sentence into a discussion of devolved investment in primary care, not hospitals

RESPONSE: Decentralization has different forms. Delegation (increasing management autonomy of hospitals) is one of the forms. The increase of hospital autonomy can significantly attract physicians from rural areas. That is why we regard this as an important context factor.

21. p.13 line 43 retain "rural" health workers avoid terms like 'brain drain" which are not evidence based in this paper.

RESPONSE: We remove the word ‘brain drain’ in the text.

22. Main paper - Discussion:

Suggest re-work this. This section should bring together the policy implications from the material presented (the two sections suggested) in the results (the strategies and then the broader policy context) rather than being focused on introducing new evidence from overseas.

Please focus your discussion on what can other countries learn from what you have presented - about countries at different socioeconomic levels? Since the academic material you present is only discussing and observing, not testing the outcomes of the strategies or the policies, the implications and conclusions should only "suggest" what should be the right balance of human resource strategies in different types of countries and what other broader policy influences should be considered (socio-economic development, balance of public and private sector, acute and community services etc.). So avoid making inferences that things are definitely linked in a causative way.
Then this section needs to perhaps make a statement about whether the strategies to get more rural workers are piecemeal or still worth it, within the effects of the broader policy context of the country to add true value to the aim that it was set up for.

RESPONSE: We have re-write the discussion part.

23. Once again I congratulate you on your efforts with this paper and encourage you to re-package this for the global readership of rural health workforce capacity building, with the potential to inform the range and scope of different strategies needed and the country policy landscape that we need to also be aware of.

I strongly encourage you to resubmit this important work.

RESPONSE: Thank you very much for all the valuable comments.