Reviewer’s report

Title: The effect of a community health worker intervention on public satisfaction: evidence from an unregistered outcome in a cluster-randomized controlled trial in Dar es Salaam, Tanzania

Version: 0 Date: 26 Aug 2018

Reviewer: Oluwatosin Adeyemo

Reviewer’s report:

First of all, I must affirm that this is an excellent piece of work by any standards. It is novel in its quest to fill gap in knowledge in health systems research. The idea of unpacking how human resources for health interventions such as the CHW program impacts on health system satisfaction is timely as little is currently known in this area. Of commendation is that this research has not only succeeded in generating a body of evidence, but has also succeeded in raising pertinent questions for further research.

I submit that all the aspects of this study have demonstrated some degree of scientific rigor but for some certain elements of the methodology. These methodological considerations may have enfeebled the strength of evidence generated, even though some of these were already highlighted as limitations of the study.

First of all, the intervention group had more respondents than the control, about 3 times more. From this submission, it is unclear whether sampling weights were considered during analysis to equalize sample size distribution across the study groups. Non-equalization of sample size could have skewed findings towards the intervention group. More clarity on sample size considerations (such as weighting) between the study groups during data analysis could improve the validity of the findings.

Secondly, the CHW intervention is just one of several interventions that health system offers. There are other service delivery structures beyond CHW that make up the public-sector health system. Thus assessing the level of satisfaction with the public-sector health system based on experience with the CHW alone may not be sufficient for this purpose. As several other factors might have also been responsible for public satisfaction in the health system like availability of functional health facilities amongst others, this study has not sufficiently demonstrated whether public satisfaction as demonstrated from the study could have solely been as a result of the CHW intervention. The study could have done better by demonstrating the degree to which public satisfaction in a health system could be solely engendered by the CHW intervention or conditions and factors that must be in place before the CHW intervention could have such effects of increasing public satisfaction in a health system. Caution therefore needs to be exercised in taking up this evidence for decision making for policy formulation and programmatic interventions in using CHW program alone as a means to increase in public satisfaction in a health system.
Lastly, the choice of CHW as data collectors is methodologically flawed. The CHWs are key stakeholders in the intervention and they might have regarded the study as an assessment of their performance on the program. Apart from the response bias that might have been induced if respondents knew the surveyors were CHWs, the surveyors might have also influenced the respondents to elicit satisfactory responses. CHW shouldn't have served as data collectors as the bias this could have introduced into the study may have undermined the validity and veracity of study findings.

While this study is recommended for acceptance, it is suggested that the authors exercise caution in the interpretation of the study findings.

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