Reviewer's report

Title: For more than money: willingness of health professionals to stay in remote Senegal

Version: 0 Date: 23 Jul 2018

Reviewer: Christophe Lemiere

Reviewer's report:

Hello,

Thanks for the opportunity to review this paper.

Overall, I found it very clear and nicely written.

I have only two main comments.

1. Despite the authors' claim, I am not convinced that this paper adds much to the literature on DCEs applied to rural retention issues. The findings are very similar to other studies. And the methodological approach (which is sound BTW) is not particularly innovative. For instance, an unforced response approach is rather common.

2. I am a bit annoyed with the attribute regarding "permanent / temporary contract", and for two reasons.

A first reason is related to the fact that providing a permanent contract is an extremely powerful offer, as anybody with some experience on HRH in Africa knows. This is confirmed by the authors' findings. Given that this attribute is present in this DCE, I will assume that all the sampled health workers are on a temporary contract basis (MoH, facility or local authority). Is it the case ? Could the authors provide any info on that ? I am asking because it is rather unusual that health workers (especially for physicians) in Senegal to be in this legal situation. If all sampled health workers are with temporary contract, I wonder about the nationwide representativeness of this sample. If - conversely - some surveyed workers are already on a permanent contract, how this is factored in in the analysis ? Again, we need more info on the existing situation of the sampled health workers (beyond the usual demographic variables).
A second problem I have with this attribute is that it may be highly preferred because being given a permanent contract allows the recipient to freely move to an urban area without risking losing her/his salary. In Senegal, payroll management for civil servants (i.e. those having a permanent contract) is still centralized, thus generating situations where salaries follow recipients (wherever they are actually posted). Consequently, a preference for a permanent contract may not be interpreted as a preference for "stability in employment" but rather as a preference for getting an opportunity to come back in an urban area. Maybe this could be checked by the authors through a quick qualitative survey.

Some other comments but rather minor:

1. Maybe I missed a detail in the WTS, but I could not figure out how the WTS estimated among the physicians was 10.7 years while the maximum range for this attribute is 8 years.

2. It would be worth analyzing further the overall impact of a rural origin of participants.

Best regards

Christophe Lemiere

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