Reviewer’s report

Title: MEDICAL DIASPORA: AN UNDERUSED ENTITY IN LOW- AND MIDDLE-INCOME COUNTRIES’ HEALTH SYSTEM DEVELOPMENT

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Reviewer: Elena Neitermann

Reviewer's report:

Thank you for an opportunity to assess this manuscript that examines the prevalence of medical diasporas from low- and middle- income countries in four destination countries. The paper is well organized and well written. It summarizes the key purposes of medical diasporas and engages in an interesting discussion about the potential role diasporas can play in addressing health human resources shortages. Overall, I found the paper informative, but the following areas for potential improvements caught my attention:

1. Provide a stronger rationale and well-articulated research questions - I would have liked to see a more clearly articulated rationale for conducting the review alongside with a clearly stated research question(s). Most of the rationale for this study is provided in the discussion section, but the readers might find it beneficial to see this stated in the background section. And while in the background the authors do mention that they plan to "develop an inventory" (p. 4) of the diaspora organizations, I would have appreciated to see why they think it is important and what exactly were the questions driving their curiosity about this topic.

2. Define what is meant by medical diaspora - the authors provide a good definition of what they mean by diaspora, but I would have liked to also know what is meant by "medical" diaspora. Depending on the context, medical diaspora can mean different things and it does not always/only rely on ethnic belonging for the membership in such communities. I think that the paper would benefit from clearly defining right at the outset what is meant by medical diaspora.

3. Include more detailed description of methods - I had some questions remaining after reading the methods section. Did the researchers utilize any specific search methodology for their review? Why did they only decide to focus on four destination countries? How did they know that their search was exhaustive? How many hits did they get on google, for instance? Did they review all the hits? Because when I entered "medical diaspora services" in google, I got 51,100,000 hits and over 7 million for "medical diaspora organizations". I would have liked to know more about the search process. Perhaps the
authors could include some basic info, such as the search tree that is common in PRISMA reviews, to show how did they get the number of organizations that they identified?

I would have also liked to know more about the process of analysis. Content analysis has different methodologies - which method did authors use to conduct the content analysis? And what did the authors analyze? The websites' content? What is written about these organizations online? This information was not provided. I would also suggest that the authors consider if what they looked for was the "roles" of the organizations or main themes? When we use "themes" in qualitative content analysis, we usually refer to some implicit content in the text. But in the results section, the authors simply state the key purposes of organizations. Perhaps they can link it to the research questions (e.g. see point 1)? For instance, the questions for this paper might be "what are the key roles of medical diaspora organizations?"

To improve the methods section, I would suggest that the authors (1) provide more information about the rationale for focusing only on four countries, (2) detail the search process, including decisions made, and (3) provide more information on how the analysis was done.

4. I found the discussion section of the paper to be both interesting and engaging. On page 18, the authors reflect on the fact that some African countries, while having a large number of immigrants, do not have their own organization (lines 40-50). This is just a thought, but may be the emergence of the medical diaspora organization is related to the proportion of ethnic minority people in a particular geographic region (e.g. a large ethnic community would produce a diaspora)? I was just wondering if the authors considered this as a possible factor - got me curious.

I hope that the authors will find these comments helpful and I would like to thank them for providing an interesting overview of medical diaspora organizations.

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