

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Inequalities in realized access to health care among recently arrived refugees depending on local access model: study protocol for a quasi-experimental study
AUTHORS	Wenner, Judith; Rolke, Kristin; Breckenkamp, Jürgen; Sauzet, Odile; Bozorgmehr, Kayvan; Razum, Oliver

VERSION 1 – REVIEW

REVIEWER	Karen Zwi University of New South Wales, Sydney, Australia
REVIEW RETURNED	29-Oct-2018

GENERAL COMMENTS	<p>This is a well written and very important study protocol. Minor comments include that:</p> <ol style="list-style-type: none"> 1. the language (largely word order) could benefit from a native English speaker modifying slightly. 2. the authors claim that settlement in a certain municipalities is "almost random". Do families get placed in areas where that particular ethnic/national community has settled. if so, then that particular community may also have specific health beliefs and practices that may affect their health care utilisation. This concept could be explored a little more, either to explain the true random nature, or the adjustments made to address the bias that may emerge. 3. Families and the individual within them have similar health beliefs systems and this may impact on their health seeking behaviours - is this accounted for in the analysis?
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REVIEWER	Karin Diaconu Queen Margaret University, Edinburgh, UK
REVIEW RETURNED	23-Nov-2018

GENERAL COMMENTS	<p>I commend the authors on what is sure to be a very interesting paper and valuable contribution towards our understanding of how diverse entitlement models affect real access to care.</p> <p>I believe your protocol is well elaborated, but would offer the below for consideration:</p> <ol style="list-style-type: none"> 1. It would be very helpful if you included an additional table clearly identifying your tested hypotheses, outcomes, principal and extended statistical analyses to be conducted. The information is available in text form but as a quick overview a table would be helpful. 2. While I do somewhat agree with the statement that assignment is random, I would urge you to include very briefly more information on NRW's policy to pursue this kind of assignment
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	(e.g. you say refugees are assigned, but do they not assign refugee families etc?) to ensure appropriate level of information is available to readers. 3. I am slightly unclear if your data would allow for clustered regression analyses. If possible, I would urge you to do and present these as extended analyses and report. 4. Please note the reporting standards you expect to follow when publishing results (e.g. STROBE etc).
REVIEWER	Denise Efionayi-Mäder Swiss Forum for Migration and Population Studies of the University of Neuchâtel, Switzerland
REVIEW RETURNED	11-Feb-2019
GENERAL COMMENTS	The research question is highly relevant, in a field which largely lacks empirical studies, especially quantitative. The quasi-experimental study design is very promising, i.e. should produce sound results. The description of the hypotheses is very technical and hard to follow for someone who is not super familiar with the design including abbreviations and methods; it would be helpful to be more explicit.

VERSION 1 – AUTHOR RESPONSE

Reviewers' Reports

Reviewer: 1

This is a well written and very important study protocol. Minor comments include that:

1. the language (largely word order) could benefit from a native English speaker modifying slightly.

- We performed intensive English language editing which made us rewrite several sentences. All changes are visible in the main document.

2. the authors claim that settlement in a certain municipalities is "almost random". Do families get placed in areas where that particular ethnic/national community has settled. if so, then that particular community may also have specific health beliefs and practices that may affect their health care utilisation. This concept could be explored a little more, either to explain the true random nature, or the adjustments made to address the bias that may emerge.

- Community is not a criterion for assignment to a municipality according to the official guidelines.

However, if it is still considered on the administrative level, we are unable to detect this, as we have no information on the country of origin or on the composition of the community refugees are assigned to. We have made this more explicit in the introduction and in the section on "confounding"

3. Families and the individual within them have similar health beliefs systems and this may impact on their health seeking behaviours - is this accounted for in the analysis?

- Unfortunately, there is no information available on health beliefs of individuals or families. We also have no information on family relations. As this is a very important aspect, we have explicitly added the information in the introduction and the "confounding" section.

Reviewer: 2

I commend the authors on what is sure to be a very interesting paper and valuable contribution towards our understanding of how diverse entitlement models affect real access to care.

I believe your protocol is well elaborated, but would offer the below for consideration:

1. It would be very helpful if you included an additional table clearly identifying your tested hypotheses, outcomes, principal and extended statistical analyses to be conducted. The information is available in text form but as a quick overview a table would be helpful.

- Overview and brief explanation of the methodological approach of the study is now provided in table 2.

2. While I do somewhat agree with the statement that assignment is random, I would urge you to include very briefly more information on NRW's policy to pursue this kind of assignment (e.g. you say refugees are assigned, but do they not assign refugee families etc?) to ensure appropriate level of information is available to readers.

- We have added more information on the assignment. Indeed, NRW assigns families. We have made this more explicit in the introduction and in the section on "confounding"

3. I am slightly unclear if your data would allow for clustered regression analyses. If possible, I would urge you to do and present these as extended analyses and report.

- Unfortunately, the data will not allow for clustered analysis as individual level information on age, sex or family relations are not available. However, we are able to control for age and sex distribution on municipality level allowing for ecological analysis or standardizations.

4. Please note the reporting standards you expect to follow when publishing results (e.g. STROBE etc).

- We have added the respective information at the end of the article.

Reviewer: 3

The research question is highly relevant, in a field which largely lacks empirical studies, especially quantitative. The quasi-experimental study design is very promising, i.e. should produce sound results. The description of the hypotheses is very technical and hard to follow for someone who is not super familiar with the design including abbreviations and methods; it would be helpful to be more explicit.

- Reviewer 2 had a similar remark and suggested to sum up the methods in a table for a quick overview. This was added to the article (table 2).

VERSION 2 – REVIEW

REVIEWER	Karen Zwi SCHN and UNSW, Australia
REVIEW RETURNED	06-Mar-2019
GENERAL COMMENTS	the paper reads well and should be published.