Reviewer’s report

Title: Perspectives on care and communication involving incurably ill Turkish and Moroccan patients, relatives and professionals: a systematic literature review

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Reviewer: Hilde Buiting

Reviewer’s report:

This systematic literature review that examined the care experiences and communication patterns involving Turkish or Moroccan patients / relatives / caregivers, reports that the family has a prominent role in the provision of palliative care; that (end-of-life) wishes are influenced by patient’s cultural background; and that communication with Turkish and Moroccan patients is different and is hampered by several factors. The study is straightforward, and the design of the study is clear. However, I would recommend clarifying the innovative points of the study. Also in light of the existing literature in other non-western countries as well as health policy / guideline development in the Netherlands.

I only have minor essential / discretionary revisions, which I will clarify below.

Minor comments (essential)

- The ultimate objective of the study is to improve palliative care for immigrants in the Netherlands. The authors only conclude that it is important to take into account specific cultural characteristics. Please clarify. For instance: What about studies in other non-western countries, which appear to have similar results (as addressed in the Introduction/Discussion section)? One may suggest that care experiences and communication patterns are to a certain extent similar in non-western cultures? Please reflect a little bit more on this.

- The authors sometimes present findings from previous studies as a fact (for instance, p 14, ‘Turkish and Moroccan patients often strive for maximum treatment till the end of life’) or as a new empirical finding. I would recommend referring to the studies in the literature review in such a way: Many studies revealed that / reported that, et cetera. I advise to do the same in the Results-section of the Abstract.

Abstract.

- What are the inclusion criteria of the systematic literature review?
- Please reformulate the conclusion section by adding one concluding sentence about the implications.

What is already known, what the paper adds.
- I later on understood that the literature about ‘what is already known’ is about countries other than Turkey and Morocco. In the Introduction section, second paragraph, I had the same problem. I suggest to better clarify that these are study-results from other non-western countries/cultures.

- Intuitively, it feels somewhat strange to present results from the literature in the ‘what this paper adds’ section in the same way as in the ‘what is already known’ section. Perhaps, it would be stronger if the authors could present them in overarching themes to illustrate the additional value of performing a systematic literature review. E.g., make the role of the family clearer and clearly refer to previous studies.

Methods.

- One of the inclusion criteria is that the publication is about socio-cultural factors concerning Turks and Moroccans. For readers who are unfamiliar with the topic, it is unclear what is meant with socio-cultural factors. Please explain.

- The study focuses on immigrants in the Netherlands with a Turkish or Moroccan background. Why did the authors chose to include studies from the countries of origin (Turkey/Morocco) as well as the host-country? Especially with respect to acculturation.

Results.

- I was somewhat confused by the subtitles in the Results section ‘ Perspectives on...’; I only expected data about attitudes / perspectives towards the different topics. The focus was however broader. Perhaps, ‘An overview of findings regarding family care / professional care...’ is more appropriate. The same holds for the title of the manuscript.

- In the paragraph, ‘barriers to the use of professional care’, it is unclear whether this is the view of the patient, the family, or the caregiver. I would recommend to clearly specify the perspective throughout the Results section.

- Sometimes, the authors already explain findings in the Results section (for instance, p 15, The different percentages may be related to...). As there is already some overlap with the Results and Discussion section, I would recommend discussing such explanations in the Discussion section only.

Discussion.

- As mentioned previously, I would like to suggest reflecting a little bit more on the results. In addition, is the information that was found in the literature sufficient to recommend taking into account specific cultural characteristics for the immigrant population in the Netherlands? Or would the authors recommend further research (in specific areas)?

Minor comments (discretionary)

Abstract.
- Please add one or two sentences in the Background section to illustrate the reason of performing this systematic review (if the word limit will allow this).

**Background.**

- I would advise to add the year when the WHO stated that guidelines on palliative care have to be adapted to cultural contexts.
- Again, I would advise to explicitly report the year the authors performed the empirical study (3rd paragraph) as this is the main reason to perform this systematic literature review.
- The last sentences about the definition of incurably ill Turkish or Moroccan patients’ are more appropriate in the Methods section.

**Methods.**

- Was there a specific reason to include qualitative as well as quantitative studies?

**Results.**

- The results section is divided in four different themes. Did the authors want to present available data on these four topics or did the authors identify these themes later on?
- P12. In general, the Results section is rather long; I therefore would recommend leaving out the concluding sentences in each paragraph.
- P14. To focus a bit more, I believe that a large part of the findings in ‘perspectives regarding end-of-life care and end-of-life decision-making’ could be left out. As the title suggests, the primary focus is on care and communication; I would recommend integrating the paragraph ‘Hope for cure and faith in Allah’ in another section and leave out the decision-making part (euthanasia, withholding and withdrawing treatment, et cetera): the topics are interesting but not the most relevant parts to answer the research questions. In addition, the research questions are diverse and therefore even more difficult to compare.

**Discussion.**

- I don’t understand the last sentence of the second paragraph ‘However, … Netherlands.’ Please clarify.

**Tables.**

- All tables elaborately describe the study-results. For readers who did not read the full paper, it is sometimes difficult to understand what is exactly meant. (For instance, Table 3, fifth reference, ‘self-help groups were not effective…’). I would suggest to take a fresh look at the Tables and to reformulate some of the sentences.
- There are already three perspectives (patient, family and caregivers); in Table 3, first reference; the general public is taken into account too. I’m not sure
whether this fits with the inclusion criteria.

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.