Reviewer's report

Title: Low trust of ethnic minority patients in in-hospital care: a qualitative study

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Reviewer: Patricia Hudelson

Reviewer's report:

This manuscript provides descriptive results from a study involving 4 face-to-face interviews, 3 telephone interviews, and 2 (or 3?) group interviews. The study explores immigrant patients' experiences of hospital care, in an effort to identify factors leading to patient mistrust. The topic is widely relevant and of potential interest to many readers of BMC Health Services Research. The data appears to be quite rich despite the small number of interviews, and I strongly encourage the authors to further develop their analyses so as to fully exploit their data.

1) Major Compulsory Revisions

a) Under Background, trust is presented as “reflecting” or “including” various things, but I would have liked a clearer discussion of the operationalization of the concept (by others), and perhaps of variations in its definition by those who work in this field. This would then allow the reader to make sense of how you went from the definition to your interview questions.

b) I think the paper would benefit from more conceptual clarity regarding the use of the term “ethnic minority”. The authors cite American studies involving ethnicity, but in the USA ethnicity is poorly defined and is also a self-identified characteristic. The authors refer only to place of birth (respondents’ or respondents’ parents). I wonder if it doesn’t make more sense to talk about immigration status, since the authors themselves say that most respondents were first-generation immigrants.

c) The Methods section should be expanded to include a full description of the analysis process, including a description of the framework and charting methods. Who read the interviews? How was coding done? Independently or as a group? How were discrepancies identified/resolved? Who coded the data? How were data coded? (by hand, with software).

i) The authors should also provide the codebook (list of codes with examples) used to analyze their data.

ii) I also think the authors could include the interview guide as a box or table.

iii) I was not clear about whether there were 2 or 3 group interviews. 2 groups with Turkish patients were mentioned, then later there is mention of a group with 2 Chinese respondents.

d) Under “Respondents”, I think it would be clearer to say that “respondents included a convenience sample of 23 immigrant patients…”. To say here that you interviewed 23 people sounds like you had 23 interviews, which is not the case.
In fact, you conducted 9 or 10 interviews (7 face-to-face, plus 2 or 3 group interviews).

e) In the results section, I wouldn’t refer to the 3 types of situations as “patterns”. Rather, they are 3 sources of mistrust or types of situations where mistrust was felt, as described by respondents.

f) The results section should include an overview of results, perhaps in the form of tables (for example, codes by interview). One doesn’t really have any feeling for the full range of issues mentioned, nor the importance/frequency of the different issues mentioned.

i) What sorts of factors were discussed by which interviewees? Were there any differences between the group vs. individual interviews? Between different nationalities? What were the most salient issues mentioned by respondents?

ii) A table of respondent characteristics by interview method would be helpful (nationality, age, sex, migration status, etc.)

g) Discussion: I feel the paper would be greatly strengthened by a more indepth discussion of the significance of results. What does this paper add to the existing literature on language/cultural diversity and their importance for quality of care and patient safety?

h) There is no discussion of the study weaknesses. In particular, what are the potential drawbacks of the the mixed methods and convenience sampling used in the study?

i) The manuscript would benefit from review by an English native-speaker. A few specific examples:

i) I think the title could be improved. One option might be “Low level of trust among hospitalized immigrant (or ethnic minority) patients” Or “Factors affecting trust among hospitalized immigrant patients: a qualitative study”. However, I have replaced the authors’ word “in-hospital” with “hospitalized” but am not sure this is correct. Did all respondents describe experiences while hospitalized, or were there examples of mistrust during ambulatory care as well? If the latter is the case, then the title would need to be changed to reflect this. For example “Health care experiences of immigrant patients: a qualitative study of factors affecting feelings of trust” or something like that.

ii) “Presumptions” should be replaced by “prejudice”

iii) There are many places where commas have been used inappropriately;

iv) There are also a number of instances where sentence structure sounds a bit non-English.

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

Quality of written English: Needs some language corrections before being published
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'