Reviewer's report

Title: Non-Spouse Companions Accompanying Older Adults to Medical Visits: A Qualitative Analysis

Version: 1 Date: 27 May 2018
Reviewer: Paulette Hunter

Reviewer's report:

Thank you very much for the opportunity to review this revision of a manuscript describing the experiences of non-spouse medical visit companions. This research represents the active collaboration of community and research partners to address this timely research question. In this revision, the authors have attended to some limitations in the presentation of the qualitative analysis and results. There remain some additional issues to address.

Substantive comments:

1. The title and sample descriptions suggest you are examining the experiences of "non-spouse" MVCs, yet the results include a number of statements given by spouses (pp. 18, 20, 23).

2. In the last paragraph of the introduction, the technical term social facilitation is introduced. It is not defined, and it is not made clear how social facilitation operates in the relationship between MVCs and patients during health visits, or how this construct is related to the research goals.

3. Be sure that the objectives of your study mirror the analysis and results. Your primary focus seems to be on MVC roles before, during, and after the visit rather than on MVC experiences. The final paragraph of your introduction should make this explicit, and the arguments made in the introduction should support that research goal. (Generally, they do; just make sure that your paragraph about research objectives integrates each research question. See also #15, below.).

4. In the methods section, since you have noted that you are using a CBPR approach, this deserves more attention. For instance, you could cite the works that are guiding your approach to CBPR for readers' further reference. In doing so, it would also be appropriate to provide examples of the ways in which your approach aligns with that described in the cited works. For instance, CBPR is intended to benefit both research and community. You have explained this reciprocity in very general terms at line 106-109. More detail would be helpful. What are the basic goals and expectations of the partnership on both sides? You have noted that your community partner both recruits the participants and
pays them for their participation. How does the partner organization benefit? Is the partner organization involved at all stages of the research?

5. The additional details about your approach to analysis are very helpful. Please provide some additional detail about the training/experience of the analyst, as you did for the interviewer. Also, specify how you approached analysis of material related to different points in time (before, during, and after the visit), to further resolve earlier concerns from both reviewers.

6. Since there was only one analyst at the earliest stage, how did the research team contribute to consensus around themes? Were all members of the research team at this meeting? If not, then who? Your results section contains 4 major headings, 3 of which are also headings in the interview. Were these the themes group the came up at this juncture?

7. I am not sure what you mean by the new line added at line 137 ("each coding pair was assigned two organizing themes before..."). To which themes are you referring? The 4 major themes? What do you mean by "before coding all transcripts" (were the analysts looking for material related to just 2 of the 4 themes, in all of the transcripts)?

8. At line 138, the term "validity" has been actively debated, as it relates to qualitative research. As a result, you'll need to make case that it is the right choice for you. The easiest way to do this is to provide a citation, but it is important that the citations and text you rely on to explain your approach to analysis align and reflect a single, coherent approach.

9. At line 98, you indicate a focus on cultural considerations in your analysis, but in the qualitative data analysis section beginning at line 130, you do not describe how you will attend to this (nor to the variability in MVCs relationships with patients). Note that qualitative research does not lend itself well to comparative goals, but qualitative sampling techniques can be used to represent diversity and assist cultural sensitivity, and this can also be a focus within the analysis.

10. With respect to the results, in your written reply to the reviewers, you indicated that your themes were saturated, and you provided appropriate evidence of this. You should also include this evidence in the manuscript.

11. At lines 174-178, the description and quotation seem to better match the "timekeeping" theme than the transport theme. Since the timekeeping theme doesn't seem to add much
to the transport theme and is supported by only one quotation, is it possible that it reflects a minor theme that could be discarded? If not, then this theme needs further justification.

12. Be consistent in your approach to describing the themes. At lines 193-197, there are no quotations to illustrate support for the theme.

13. At line 98, you indicate a focus on cultural considerations in your analysis, but here, you do not provide any description of diverse cases. Similarly, you do not address whether results varied based on the relationship of the MVC to the participant (nevertheless, you do appropriately indicate the nature of relationship in the quotations). Most qualitative methods do not lend themselves to direct comparison. However, as you become more intimately familiar with your participants and their voices, you can draw out their voices where relevant. What do spouses say that is different from what church volunteers are saying? What do African American participants say that is different from what Euro American participants are saying?

14. Related to this, it is good to see that you attended to cultural diversity in your sample within the theme introduced at line 340 and in the discussion. However, race is not a theme unto itself; rather, it's a characteristic of your interviewees. Considerations of cultural diversity need to enter into the descriptions of your themes.

15. As you have noted in your response to Reviewer 1's original comments, the three points in time that you are using to organize your results do not represent themes. Rather, they represent your research questions about the roles of MVCs at three points in time. In addition to this, you have seem to have three additional research questions: What is the nature of the MVC's experience?; Does culture influence roles or the nature of the experience?; and, Does the MVC's relationship to the patient influence roles or the nature of the experience? Overall, I have two concerns related to this. First, your response to Reviewer 1 clarifies your approach, but this remains insufficiently unexplained in the manuscript. Second, this is a complex set of questions, and it is very difficult to structure a paper to adequately attend to so many goals. Much simpler would be to say that you wondered what roles MVCs played before, during, and after medical visits, and whether how these roles varied based on the relationship of the MVC to the patient. It is your choice, but if you choose to include all of these research questions, it will be more difficult to structure the manuscript to adequately address them.

16. Be cautious about relying on the terms "positive" and "negative" as themes. These very general terms can sometimes suggest there is more work to do to articulate the nature of participants' experiences.
17. These guidelines are useful for reporting qualitative work, and I encourage you to consult both sources:


Minor comments:

a) In the last paragraph of the introduction, the second sentence does not follow from the first - improve what experience? (It might also be wiser to keep these arguments closer to your immediate research objectives.)

b) A comma and citation are missing at line 180. My preference would be to resolve this by deleting "as is common in the US" since this material is pertinent to the discussion and not to the results.

c) You sometimes use the term "culture" and other times "race". Be sure that there is reason to use both terms rather than adopting a single term.

d) Sometimes, "companions" is capitalized; other times, it is not.

e) For the theme described at line 208, be more specific about how the quotations link to the two aspects of the theme - giving and receiving.

f) Line 381 - what's the evidence? There are no citations to support the claims made in this paragraph.

g) The third paragraph remains poorly integrated into the overall argument. Despite some changes to the text, it still doesn't seem to fit. This problem should be addressed.

h) At line 242, the idea of visit summaries being provided by health providers isn't explained to readers who might not be familiar with this idea.
Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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Not relevant to this manuscript

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Please indicate the quality of language in the manuscript:

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