Author’s response to reviews

Title: Barriers to formal healthcare utilisation among poor older people under the Livelihood Empowerment Against Poverty programme in the Atwima Nwabiagya District of Ghana

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Author’s response to reviews:

Handling Editor
BMC Public Health

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Dear Dr. Eva Szunyogova,

I attach here the revised Manuscript with Ms. ID. No.:

PUBH-D-19-00501, entitled, “Barriers to formal healthcare utilisation among poor older people under the Livelihood Empowerment against Poverty programme in Atwima Nwabiagya District of Ghana”

On behalf of my coauthors, I write to thank you and our reviewers for a thorough review of our manuscript and the opportunity granted us to resubmit a revised version for potential publication. The various comments and suggestions were insightful and have helped to strengthen the manuscript.

We hope that the revised manuscript will fulfill your expectations and will now be suitable for publication in your journal, BMC Public Health.

Thank you.

Yours sincerely,

SIGNED

Williams Agyemang-Duah (Corresponding Author)
RESPONSE TO THE EDITOR’S REVIEWER’S COMMENTS

Background

Comment: Pg.4, lines 25-34: Are you suggesting that the healthcare utilization barriers for the general population and the older population are mutually exclusive?

Response: Thank you for this important comment. We wish to state that we have clarified this comment in the manuscript [page 4, paragraph 2, line 5-9]

Comment: Pg.4, line 39: I suggest you open a new paragraph here with a brief but detailed description of the LEAP programme to provide the reader with a bit of context.

Response: We thank the reviewer for this useful comment. We wish to state that we have revised the manuscript accordingly [page 4, paragraph 2, line 4-12]

Comment: Pg.4, line 39: "…poor older people were defined as those who have attained 65 years or above." Kindly qualify this statement as it is misleading. It currently suggests that merely being 65yrs or above automatically qualifies one as a poor older person. Perhaps is should read "…poor older people were defined as those who have attained 65 years or above under the LEAP programme were considered in this study as poor older people."

Response: We thank the reviewer for this comment. We wish to state that we have revised the manuscript accordingly [page 4, paragraph 2, line 1-3]

Methods

Study setting and design

Comment: Pg.6, lines 7-31: Most of the write-up in this section sound as though straight out of a textbook. Please try to tell the reader how these conceptual issues were operationalized in the current study. A good attempt can be seen in the last two sentences of that same paragraph.

Response: We wish to state that we have the above section of the manuscript [page 6, paragraph 2, line 2-10]
Comment: Please provide an estimated range of the duration of the interviews and FGDs, e.g., 40-45 minutes, since it is unusual for each interview to last exactly the same amount of time.

Response: We thank the reviewer for this important comment. We wish to indicate that we have revised the manuscript accordingly [page 8, line 14 (interview); page 8, paragraph 2, line 5 (FGDs)].

Comment: How were the participants of the FGDs recruited in the groups, and how many FGDs were conducted for each category (poor older, caregivers, providers) of respondents?

Response: We have clarified this in the manuscript. Three FGDs were conducted for only poor older people. [page 8, paragraph 2, line 1-6]

Comment: Please describe how the interview discussions and proceedings were captured.

Response: We have clarified this in the manuscript. [page 8, line 14-15]

Results

* The results are fairly fine. However, I would suggest that the authors reorganize the themes so that the issues align properly as follows:

- Physical Accessibility barriers (Main theme)
  - Economic - income, high charges, insurance - (sub-theme 1)
  - Transportation (sub-theme 2)
- Social barriers (Main theme)
  - Communication (sub-theme 1)
  - Poor family support (sub-theme 2)
- Unfriendly healthcare environment (Main theme)
  - Poor attitude of providers (sub-theme 1)
  - Poor architecture of facilities (sub-theme 2)

Response: We thank the reviewer for this useful comment. We wish to state that the comment was very useful and has really strengthened the manuscript. We therefore wish to state that we have followed to your suggestion.
Discussion

Comment: The discussion should be more focused and tailored than being rather too generalistic

Response: We thank the reviewer for this comment. We wish to state that we have revised the whole discussion section.

Comment: Pg.26, lines 22-33: The recommendation about older people learning English is not too sound in my opinion. In that case, why not the providers learning the local language then? Perhaps suggest the provision of translators by the facilities as is the standard internationally or encourage that accompanying caregivers have at least some proficiency in the language.

Response: We thank the reviewer for this important comment. We have revised the manuscript accordingly.

Comment: Pg.28, lines 24-27: How culturally and ethnically diverse is this study given that the study was conducted in one district, with majority of participants being of the same ethnic and religious group?

Response: We have revised the whole discussion section and that we have revised the above comment.

Conclusion

I don't quite agree with the conclusions. This section should be more succinct.

Response: We have revised the whole conclusion section.