Reviewer's report

Title: The Health Equity Implementation Framework: Proposal and Preliminary Study of Hepatitis C Virus Treatment

Version: 0 Date: 02 Nov 2018

Reviewer: Noah Ivers

Reviewer's report:

Thank you for the opportunity to review.

This paper highlights a composite framework to address this shortcoming. Specifically, two conceptual frameworks from implementation science and healthcare disparities research were combined to create one that would consider health disparities. The researchers tested this new framework on a study exploring barriers to the uptake of seeking hepatitis treatment in a population that experiences health disparities.

Strengths

The researchers recognized the need for an implementation framework that considers health disparities. Applying a social justice lens to implementation practices and research is important to promote inclusivity and equity. It is important to consider how health disparities may impact implementations and whether this field is being inclusive or reinforcing biases.

Opportunities for improvement

General:

The authors could consider broadening references on 'disparities' (an U.S.-specific term) to literature about equity.

The authors could consider broadening the discussion to identify how this fits with or might help with the literature on culturally tailored interventions.

New frameworks can be helpful, but implementation science is replete with them. The paper could be strengthened by adding more of an argument about where other commonly used implementation science frameworks fall short of considering health disparities. For example, the Consolidated Framework for Implementation Research (CFIR) considers many contexts, including patient needs and resources and knowledge and beliefs about the intervention. Although CFIR may not address health disparities specifically, would the construct of Knowledge and Beliefs About the Intervention (i.e., 'Individual attitudes toward and value placed on the intervention as well as familiarity with facts, truths, and principles related to the
intervention - retrieved from: https://cfirguide.org/constructs/knowledge-and-beliefs-about-the-intervention/ be a more general category that would encapsulate health disparities? Another example could examining the Theoretical Domains Framework…

A discussion about how this proposed approach could be adapted to suit the needs of other individuals who face health disparities might strengthen the paper. For example, would this framework be easily adaptable to other groups or individuals who face barriers to accessing care such as people without homes? What might be a challenge - if any - with this?

Specific:

Abstract
The objective could be more clear. Is it to test the new framework? Discover the barriers and facilitators to using this new framework? To determine whether using this framework is feasible? Having a clear objective would strengthen the abstract.

Page 4, line 95
Too general of statement. Could there be cases where this does not apply? Implementation Science methods are not all one and the same.

Page 5, line 132
The points in this paragraph are strong. Perhaps some could be incorporated into the abstract to emphasize the importance and why what your team is doing is different.

Page 7, line 162
Perhaps an example of why health care disparities are so complex would help illustrate your point.

Page 7, line 179-181
I am reading this as a euphemism for prejudiced clinical decision-making. If my interpretation is correct, I think this is an important point to emphasize. Perhaps making this point a bit clearer would strengthen the paper.

Page 8, line 187
I wonder if this statement is too conclusive for the current state of the framework, if your team is testing it at the moment. Perhaps rewording this or removing "fully" would add some clarity.

Page 9, line 218-220
Adding an example could help to clarify your point. In the current state this sentence is too vague to be meaningful.
Excellent point, but I think it could be strengthened by making it a bit more clear. As it is currently written, it seems as though the electronic health record would identify only those patients who are transgendered who also experience healthcare disparities.

Page 13, lines 298-302

Very clear! Having this type of information in the abstract would add clarity.

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Please indicate how interesting you found the manuscript:

An article whose findings are important to those with closely related research interests

**Quality of written English**
Please indicate the quality of language in the manuscript:

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