Reviewer’s report

Title: Advancing Care for Family Caregivers of Persons with Dementia through Caregiver and Community Partnerships

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Reviewer: Ken Bond

Reviewer’s report:

Summary. The authors report on the two main ways in which they engaged with communities of caregivers to develop a program called "Caring for Caregivers" at University of Texas Health San Antonio. The program provides support to caregivers of people with dementia. The first phase of engagement constituted a kind of needs assessment and involved the researchers identifying and establishing relationships with the relevant communities via meetings (both as organizers and as attendees) and by attending other community events. The second phase was a community-academic forum that involved many stakeholders. The authors used the forum to create small groups discussions to elicit views on barriers and facilitators to effective family caregiving and to identify the relevant supports that could be created for them. The authors conclude that these activities were crucial to the success and relevance of the Caring for the Caregivers Program.

GENERAL COMMENTS

The authors describe a very resource intensive and seemingly successful approach to establishing collaborative relationships with caregiver communities to identify and address the support needs of the caregiver community. I think the example provided here will be of interest to other health centers and regions looking to use community engagement to develop similar support programs. It also nicely describes what might be missed if this kind of engagement is not done.

The authors could provide a little more detail on how the environmental scan was conducted. The list is described as being "systematically developed". Via internet search? Or by a registry of such groups? Something else? All done by one person? How was the "community of interest" defined for the purpose of developing the list?

Since the authors appear to use qualitative research methods to gather and analyze the information at the academic forum, more detail on these methods would be helpful.

Relatively, since qualitative methods seem to have been employed in data gathering and analysis, there should be some mention of techniques used to ensure credibility and transferability, etc., of the findings. For example, how might the authors position and role may have influenced the interpretation of the data? What factors might be relevant when thinking about how relevant this is to other settings? E.g., socio-economic or education status? Is it possible for the researchers to comment on this?
SPECIFIC COMMENTS

Summary. The authors describe the forum as an opportunity to identify and discuss priorities; however, the description in the full text does not describe an activity that would allow the researchers to identify priorities. I suggest you remove this word or say more about how this was done in the full text and actually list the priorities identified.

Background, line 29. I think sentence should be "…can be particularly challenging because of the related cognitive decline…"

Background, line 56. "We are increasingly dependent…” Please specify who is referred to by "we“? The health center? The United States population? Globally?

p. 7. There are various frameworks for conceptualizing public engagement and the various obligations at each step. Can the authors say a little bit about why Rowe and Frewer were chosen? Why not IAP2 (which is similar)?

-p. 7. The last sentence of the Background doesn't seem quite right: the methods and results don't lead to the implementation plan. The methods were used to gather the information that was then used in the development of the plan.

-p.7. Phase one seems to be a kind of assessment of the needs of caregivers. Is it not?

-p.7. How was the information about the purpose communicated? Did the researchers have an introductory letter and an information package of some kind? How was the information provided consistently?

-p.8. Were the researchers invited to speak at events or did they request to speak at community events?

-p.8. Who funded the community-academic forum? How was it advertised? How were individuals/groups invited?

p.8. line 5 and 9. Who does "we" refer to? All the authors? If not, perhaps say "one author" or "two authors" etc.

p.11. The themes "Making the invisible visible" and "you don't know what you don't know" don't seem to adequately capture what the authors describe. Could the authors use themes that are more specific and descriptive as they have for the other two themes? For example, why not "Increasing awareness of caregiver role" for the first? Or "Unrecognized role as caregiver"?

-p.15. The authors mention that it was time consuming to establish relationships with the groups, but no timeline is given. Can the researchers better describe this? Can they say something about whether and how this might have been done better/more efficiently?
-p.16. I mentioned this point earlier. The authors should describe how they prioritized the activities and list them. Might also be helpful to say what they mean by "prioritized" in this context. Is it perceived importance or use to caregivers or in terms of ease of planning and execution ("low hanging fruit"), or something else?

Conclusion: The author's conclusion seems disconnected to the rest of the study. It also introduces a number of new claims. The conclusions should relate in a very general way what the authors can infer from the material they have provided. In this case, I think the conclusions should say something about the importance of identifying and establishing relationships with stakeholder groups to ensure relevance of support programs and perhaps something about the challenges this raises and how overcome (via environmental scan, forums, etc.). Perhaps 5 sentences and no more.

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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:

Not suitable for publication unless extensively edited

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