**Revisions for Transcultural Psychiatry**

Prof. Laurence J. Kirmayer, MD
Editor-in-Chief, Transcultural Psychiatry

Dear Prof. Kirmayer,
I am very grateful for the opportunity you have given me to revised the manuscript entitled - "*Cultural Competence in Multi-Family Psychoeducation Groups: The Experiences of Russian-Speaking Immigrant Mothers of Adults with Severe Mental Illness"* for consideration for publication in *Transcultural Psychiatry.*

The reviewers’ comments were very helpful and the revised paper is a much clearer and better one. I have uploaded the revised manuscript on the specified website. I would like to express my gratitude to the anonymous reviewers for their constructive and helpful suggestions. Below please find a detailed outline of the changes introduced and my responses to the reviewers’ comments.

With kind regards,

Evgeny Knaifel, Ph.D.

**Reviewer: 1**

Comments to the Author

I found the manuscript very important and interesting.

The manuscript is very well embedded in current literature and recent developments in the sphere of cultural competence and mental health interventions. I find it important and of a significant contribution on a number of levels and will mention only a few:

On the theoretical level, the manuscript demonstrates the possibility of integration between evidence based interventions and cultural competence. It challenges the often sounded criticism, that evidence based interventions are necessarily not culturally attuned. Contrary to this stand, the manuscript demonstrates that it is quite possible to integrate both approaches and may encourage practitioners to follow its example.

Another "general" contribution of the paper is the notion that families (and mothers) need to be viewed as full partners in the treatment of young people who suffer mental illness and they too deserve to be offered support and other interventions. Especially in Israel, families and parents are too often left behind and neglected by the mental health system and the manuscript is a welcome reminder how important and helpful interventions with parents can be.

The most striking innovation of the manuscript is the ability of the author to capture, analyze and describe the intersection between immigration and mental illness. The paper communicates the complex perception of the respondents as both mothers and immigrants, as coping with the challenges of adjusting to a new country and with the reality of mental illness of their children, and the ways these two processes affect each other. The presentation of this complex view is a major contribution of the paper on the theoretical and even more so – on the practical and clinical levels.

Another contribution worth mentioning, is the presentation of culturally specific characteristics of FSU immigrants that affect their dealing with mental illness and mental health establishment. This information offers practitioners a glimpse into the ex-Soviet culture and is important for those who work with this population. Moreover, the manuscript can be taken as a blueprint for exploring cultural attitudes and explanatory models of other ethnic groups in other countries.

It is very fortunate that these important contents are conveyed in a methodologically meticulous manner. The study design and procedures are clearly described, as is the data analysis. The results are presented, as required in the qualitative paradigm, as a "rich description" – clearly, with much detail and in a way that transmits to the reader a full picture. The discussion section provides a deep insight into the results.

1. It is commendable that the position of the researcher has been disclosed. This position may not only be the basis of empathy with the respondents, but also, possibly the source of the ability for integrating and bridging between different worlds.

*Response: I thank the reviewer for this appraisal and the positive feedback for the article. Following the reviewer`s suggestion I added the detailed reflexivity section and it's influence on the data collection and analysis (page 10).*

**Reviewer: 2**
Comments to the Author

The paper focuses on an important topic and is well written.  The main limitation is that the title raises the expectation that it will focus on the important topic of cultural competence and instead it is more like the experience of mothers who completed a family psychoeducation program (with the cultural issues not being enough the emphasis)

*Thank you for positive feedback of topic and written style of the article. Thank you also about raising this very important concern about the title expectations. To justify the article focus on cultural competence several steps were taken:*

*a) The purpose and implication of article was reorganized and the cultural characteristics of FSU immigrant mothers were more highlighted in introduction and discussion sections (e.g., pages 5-6; for example the high-education background of participants).*

*b) I tried to stress more the cultural components of FSU immigrants in context of family psychoeducation and added new quote that also demonstrated it in findings section (page 13, paragraph 3).*

 *c) I elaborated through the article the issue of language (language as a cultural representation) and the important implications of using the Russian language in psycho-educational groups (a key component of cultural competence that well reflected in current findings) (for example 25, paragraph 4).* *In line with this direction I used the term of Russian-speaking MFPG more often in the article, includes in research question (page 5).*

*d) In limitation section I added the reviewer comment that article more focused on general experiences of immigrant mothers and further detailed investigation of culturally issues are needed in the future studies (pages 24-25).*

*e) As part of critical reflectivity that so important in cultural competence, the position of the researcher and his cultural and professional closeness for participants has been detailed presented (page 10).*

Below are a number of suggestions:

1)      Page 5 should include more details about efforts for cultural adaptation in different countries as well as the adaption of the intervention to Israel (not specific to the Russian population)

*Response: Following the reviewer’s suggestion more information and references about cultural adaptation of interventions were added (page 5, paragraphs 2-3).*

2)      Needless to say more details about the adaption for the Russian population should be elaborated upon

*As recommended more details about the adaptation of Russian immigrants in Israel were added (page 5, paragraph 3).*

3)      There needs to be a much stronger and convincing argument to justify the purpose of the study (which is currently general and vague) and the specific research questions

*Response: As recommended, I reorganized and revised the purpose of the study, research questions and made some of them more specific (page 6)*
4)      End of page 5 beginning of 6 – be more explicit as to the unique contribution of this study (beyond those published based on the same data)

*Response: As recommended an unique contribution of this study were reorganized and stated clearly at pages 5-6.*

5)      Page 6 = more information about the inclusion criteria (how 40% disability was determined as well as a SMI)

*Response: Done (page 6, paragraph 3).*

6)      More information on the recruitment process is needed and though the goal was not a random sample it is important to mention possible biases

*Response: Done (page 7, paragraph 3 and page 8 paragraph 1) and the considerations of possible selection biases were also added in limitation section (page 24, paragraph 2).*

7)      Page 8, the below sentence (in particular the “me”) is awkward “Data were collected by me at the end of the 15 psychoeducation group sessions.”

*Response: The problematic sentence was removed.*

8)      More information on the rigor (possibly a section within the methods) and ethical considerations is needed

*Response: As recommended, I added the sections of ethical considerations (page 9) and reflexivity (page 10-11). The section of critical reflexivity will strength the trustworthiness (rigor) of the results and especially the influence of author' s personal and professional position on the data collection and analysis.*

9)      Page 18 – i do not think the design and findings support the opening sentence of the discussion “The present study explored the efficacy of MFPGs for Russian-speaking immigrant mothers who care for adults with SMI in Israel”.

*Response: As recommended, I changed the opening sentence of the discussion (page 20, 1 paragraph).*

10)     Page 20 – the following is not supported by the data, the finding that mothers tend not to conceal is not evidence of stigma (this is not to say that there is not stigma or that stigma is not likely to contribute to the desire to conceal). “These findings are congruent with many studies that have noted a pronounced public stigma of mental illness in general, as well as stringent and negative stances among FSU immigrants towards the field of mental health that persist after they immigrate to Western countries (Author, 2015a; Dolberg et al., 2019; Polyakova & Pacquiao, 2006)”

*Response: The confusing sentence was removed.*

11)     The limitations need to be more specific to this study and not general (for example qualitative studies are often small so this is not necessarily a limitation)

*Response: As recommended, some general limitations were deleted, and others were revised and added with more specific content as possible selection bias (page 24).*

12)     The implications of the study need also to emerge more directly from the findings and avoid general statements

*As recommended, some general statements in implications were reorganized and the specific context and needs of FSU immigrant caregivers were emphasized (page 25, paragraph 4; page 26, paragraph 4).*

**Reviewer: 3**
Comments to the Author

Dear Author,
First of all sorry for my English, this is not my first language. Here are my comments :

1) What you say is very understandable and coherent, I noticed only one English error : p.5 line 19 you used « to adopt to » presumably instead of « to adapt to »

*Response: The mistake has been revised.*

IMRAD structure of the article : though this is qualitative research, you sticked to the classical IMRAD structure and I can see the progress through the different parts.
The Results part is really clear and the for main themes seem linked in a comprehensive way. The examples look related to the themes. The Discussion seems well-linked to the Results

*Thank you for this positive feedback!*

2) Data analysis and data collection : While most readers and most articles (and decision-makers?) are more used to the classical IMRAD, I think this might be a little bit problematic when using grounded theory (page 9 l. 12, Glazer and Strauss, 1967) and some procedures of respondent validation (presenting the results before the MH professionals) page 9 l. 31. When you have to build up your own theory (as in classical  Glazer and Strauss 1967) it is recommended to go back to the original respondents (or other similar) with other questions stemming from the analysis or to search for other more specific respondents. Why didn’t you do that ? When you say you presented the results to the MH professionals, why didn’t you rather discuss them ? If you didn’t use the « full/classical » grounded theory approach  in the data collection phase, and therefore in the theory building process, but rather more of an adaptation of the results and theories from existing MFPG/FSU migrants litterature, you should state it more clearly and justify this choice. Some of your findings  are close to the traditional MFPG findings, and you used a preestablished interview.

*Response: Thank you for this concern. As reviewer mentioned I actually can't use the classical grounded theory approach (theoretical sampling) and search for more purpose sampling, because FSU caregivers immigrants are a hard to reach group and it is empirically difficult to interview them and to map their characteristics and needs. Therefore, in theory building process I use an adaptation of the results and theories from existing MFPG/FSU immigrants literature. As recommended, I deleted the problematic reference of grounded theory (in the context of this study) and added the explanation about challenges in data collection in the new reflexivity section (page 10) and limitations of this study (page 24). In addition, I added some revision that the results were not only presented but also discussed with MH professionals as part of more collaborative dialogue that I managed with them (page 10, paragraph 1).*

5) You mentioned your background p.9 and said it facilitated your analysis, but you didn’t mentioned how it influenced the data collection, i.e the communication with the participants, the way they saw you.

*Response: As recommended, I added the detailed reflexivity section and it's influence on the data collection and analysis (page 10).*

Participants :
6) You didn’t mention the steps you took to ensure that the sample can be reasonably compared to the target population. FSU migrants are an heterogeneous group, and I would like to know for instance : about the sample : were the 2 groups in the MFPG conducted by the same MH professional : if yes the study would be considered a monocentric one. Why did you choose only two centers? How many centers provide Russian-speaking MFPG in Israel?what is the socio-economic status of these 2 particular zones. Is it comparable to the other FSU populations in other cities ?

*Response: Following the reviewer’s suggestion I added more detailed information about the sample of FSU immigrants in this study, MH professionals, psychoeducation groups and FCC locations (page 7, paragraphs 1 and 3; page 8, paragraph 1)*

7) - why did you select 18 people: How many people could have participated and didn’t reach you ? was it enough to reach saturation ?

*Response: 18 people are those who participated in Russian-speaking MFPGs and agree to participate in this study. It was enough for saturation and I added this point (page 9, paragraph 3).*

8) To give some hint to the reader about the centrality of the five processes, you should state how many people on 18 mentioned each process.

*Response: As recommended, I added this valuable information before each presented process (for example page 11, paragraph 2).*

9) Why didn’t you include the 6 fathers?

*Response: There are no fathers who participated in MFPGs and agree to share their experiences in individual interview. However, because it is very difficult to outreach them, I recommended to try to recruit the fathers as well other caregivers (siblings, spouses) in the future studies (page 24, paragraphs 2-3).*

        About the target population:
10) - what proportion of the FSU migrants of this generation are fluent in Russian ( if the percentage is low, then less people would be able to benefit from Russian-speaking MFPG)

*Response: The first generation of FSU immigrants are fluent in Russian. The FSU immigrants tend to preserve their culture and language also for 1.5 and second generation (see Remennick & Prashizky, 2019). I added this point in the introduction (page 5, paragraph 4).*

11) - does the general first-generation FSU migrant population have such a high proportion of academic degree (89 % in the sample)

*Response: As reviewer mentioned correctly there are about 60% of first-generation FSU migrant population with academic degree and in the current sample is much higher (89%). It seems that in this study the sample represent more the Russian intelligentsia. I think that maybe more educated-intelligent people want more to collaborate with the psychoeducation interventions and with researcher (because some of them are researchers by themselves). I added this valuable argument in limitation section (page 24, paragraph 2).*

Other comments :
12) p. 21 : your finding contradicts other findings but these are from 1999 or 2006, and in 2020 less and less families from the FSU will be in the early stages of coping as the main migration wave is over. Addressing first generation issue issues might also be less and less necessary while their number decrease.

*Response: In line with reviewer suggestion, I added this explanation between the different stages of acculturation in older studies and in current study and their implication on help-seeking patterns of FSU immigrants (page 23, paragraph 1). In addition, I agree with reviewer that first generation issue might also be less necessary, however in context of mental health field maybe there are some uniqueness. As some of participants said, although they acculturated in Israeli society they prefer to speak on Russian and with Russians on the painful mental health issues (see page 12, paragraph 2, Daria quote).*

13) p. 22 : as the mothers in your sample seem to lack extended or nuclear family support, can you tell if it’s because of the sample recruitment (people participating in MFPG) or if it’s more a general problem in families from the FSU with a MH patient in Israel in  2020 ? that would mean different strategies for the outreach procedures in the FCC or MH care.

*Response: The literature suggests that lack extended or nuclear family support this is a general problem of FSU immigrants (see for example Remmenick, 2015) which is further emphasized in the context of caregiving. I added this statement as well as their need for more active mediation of MHP in implications section (pages 25-26).*

14) p. 23 : you stated in the introduction that over 1 million immigrants arrived from the FSU. That doesn’t say how many suffer from a severe mental health condition and eventually could benefit from the policy change you suggest.

*Response: I don't mention how many FSU immigrants suffer from the mental illness, because I don't have accurate source of these numbers (I evaluate that about 30,000-40,000 in Israel today, if about 150,000-200,000 persons are with SMI in Israel in general). But I think that some of the benefits from the policy change could be relevance also outside the Israel, for many FSU immigrants in US, Germany and other Western countries and therefore the implications of this study are more expanding. I added this point in introduction (page 3, paragraph 2) and in discussion (page 26-27).*