

## Review of: "Demographic and Clinical Characteristics of Refugee Children Utilizing Healthcare Services of Türkiye (2021-2022): A Single-Centre Study"

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Potential competing interests: No potential competing interests to declare.

I found the paper very interesting and timely. I commend the authors for taking on a difficult study, particularly on a hard-to-reach population. I have some suggestions to help improve the manuscript and interpretation of the results.

## Introduction:

The introduction described the characteristics of refugee children in Turkiye and presented the burden of disease and other health and social problems. However, some statements need referencing, and baselines for comparisons need to be made clear. For example, the number of Syrian babies born in Turkiye has been mentioned, but no mention of how this compares to other refugee and migrant populations, as well as the general population.

The statement "In older children, higher rates of certain infectious diseases, anemia, dental caries, malnutrition (undernutrition, overweight, obesity) have been described in the literature." needs a reference, and the baseline or comparison group needs to be more explicit.

The statement "This has created a considerable burden on the pediatric and maternal health services in the country." is contentious and places the increased burden on the number of Syrian babies born; this statement needs further support and proper referencing.

The statement "Studies report that refugees are commonly afflicted with both infections and infestations and have a high incidence of health care utilization." needs a reference.

What is the difference between temporary protection and international protection?

## Methods:

It would be good to mention the study participation refusal rate.

The statement "Information from ED, OC, IS of all refugee children ≤18 years old were obtained from the hospital medical record system." needs clarification. Do you mean all refugee children whose parents gave consent?

It was mentioned that malnutrition was defined as patients whose weight is at or under the third percentile than according to the reference standards for the growth of Turkish infants and children. Can the authors provide an explanation for this?



Could more general or worldwide reference standards be used?

The list of the data obtained for each dataset is repetitive. Perhaps mention common data variables, then the sections can mention other variables not in this list.

Results:

The description of the average age can be improved. It was not quite clear to which groups these ages pertain.

The triage system (red, yellow, and green) in ED was described in the results; it would be good to describe these in the methods section.

Tables: Small numbers (e.g., <5) should be suppressed.

P-values should be interpreted with caution.

Discussion:

It would be good to mention possible reasons for the differences observed.

More comparisons with the proportions observed in the general population can provide insightful interpretations of the results and can help place the results in a wider context.

The implications of incomplete or missing data should be discussed.

The implications of not being able to take into account socio-economic factors, particularly parental SES, educational level, and income, should be discussed.