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| **Author, date** | **Aim of study** | **Context** | **Study design** | **Population & age** | **Sample size**  | **Country** | **CASP \*** |
| Hultsjö, Berterö, and Hjelm (2007) | To explore different perceptions of psychiatric care | Psychiatric care  | Phenomenographic interviews  | Adult foreign- and Swedish-born patients with psychotic illness  | 12 foreign-born, 10 Swedish-born people | Sweden | H/H |
| Garrett, Dickson, Young, and Whelan (2008) | To examine the perception and mitigating factors of negative events | Tertiary hospital care | Qualitative study using focus groups | Patients and carers, non-English-speaking background  | 49 patients, 9 carers | Australia | H/H |
| Worth et al. (2009)  | To examine care experiences, understand difficulties, find solutions for access to services  | End of life care | Prospective, longitudinal, interviews | South Asian Sikh and Muslim patients with life limiting illness, their families | 25 migrants, 18 family carers, 20 professionals | UK (Scotland) | H/H |
| B. Brämberg and Nyström (2010) | To describe positive and negative experiences and effects of being a patient in Sweden | Healthcare services | Interview study | Patients who immigrated to Sweden in 1975–1994. | 10 women, 6 men | Sweden | H/H |
| Kristiansen et al. (2010)  | To explore patients' emotional support needs and experiences | Cancer care | Interview study | Danish-born and foreign-born cancer patients | 7 immigrants, 11 Danish-born | Denmark | H/H |
| Marshall et al. (2010) | To examine unmet healthcare needs and to explore the effect of primary care experiences | Healthcare services | Focus groups  | Male Chinese- and Punjabi-speaking immigrants, aged 19-90 | 79 participants (Punjabi and Chinese persons) | Canada | H/H |
| Biswas et al. (2011) | To describe and analyse experiences of access to healthcare | Healthcare services | Semi-structured interviews and observations  | Undocumented adult migrants (Bangladesh, India, Nepal) | 10 men | Denmark | H/H |
| Munyewende et al. (2011) | To explore experiences with health services in South Africa | Healthcare services | In depth interviews | Zimbabwean adult migrant women | 15 women | South Africa. | H/H |
| Razavi et al. (2011) | To explore the viewpoints of refugees and families | Healthcare services | Semi-structured interviews, inductive content analysis | Refugees with a known chronic disease or functional impairment in need of long-term medical care | 5 women and 4 men | Sweden | H/H |
| Småland Goth and Berg (2011) | To explore determinants for GP compliance and obstacles experienced by migrants | Primary care | Semi-structured interviews | Leaders from 13 migrant organizations | 13 participants | Norway | L/H |
| Suurmond, Uiters, de Bruijne, Stronks, and Essink-Bot (2011) | To explore immigrant patients’ perception about hospital care and treatment | Hospital care | Semi structured interviews using critical incident technique | Adult immigrants from local immigrant organizations | 15 women, 7 men | The Netherlands | H/H |
| E. B. Brämberg, Dahlborg-Lyckhage, and Maatta (2012) | To describe the nursing care provided and patients' expressed care needs | Diabetes care | Observations of nurse patient encounters | Adult migrant patients with type II diabetes | 6 women, 4 men | Sweden  | H/H |
| Giuntoli and Cattan (2012) | To explore the accessibility and acceptability of care and support services | Care and support services | 21 focus groups, 53 in-depth interviews | Older people (age >60 women, >65 men) and carers (age 25-90 years), from eight migrant communities | 134 migrants, 33 carers (126 women, 41 men) | UK | H/H  |
| Legido-Quigley et al. (2012) | To explore migrated British pensioners’ experiences of health care in Spain | Healthcare services | In depth interviews; Interpretative data analysis constant comparative method  | British retirees, aged between 50-90 years.  | 62 migrant couples |  UK | H/H |
| Akhavan and Karlsen (2013) | To investigate variations in health care use between migrant and non-migrant groups in Sweden | Healthcare services | In-depth interviews, content analysis | Adult migrant patients and physicians, aged 23-60 | 5 migrants and 5 physicians | Sweden | H/H |
| **Author, date** | **Aim of study** | **Context** | **Study design** | **Population & age** | **Sample size**  | **Country** | **CASP \*** |
| Hurley et al. (2013) | To explore experiences with care services from a consumer and care provider perspective | Community based services | Interviews and focus groups | Greek-speaking postwar immigrants | 70 older Greeks and 22 service providers | Australia | H/H |
| Crush and Tawodzera (2014) | Examines the experiences of medical xenophobia | Healthcare services | Interviews, focus groups | Adult Zimbabweans | 100 Zimbabwean adult migrants | South Africa  | L/L |
| Legido-Quigley and McKee (2014) | To explore trust and tacit expectations of migrants with a choice of where to access health care (UK or Spain) | Healthcare services | Semi-structured interviews  | British retirees residing in Spain, aged from early 50s to >90 years | 35 women, 27 men | UK | H/H |
| Seffo et al. (2014) | To describe how Bosnian immigrants experience the healthcare system in Sweden | Healthcare services | Face- to face interviews  | Older immigrants from Bosnia-Herzegovina | 8 women, 7 men  | Sweden | H/H |
| Fang et al. (2015) | To explore health and health care experiences of asylum seekers  | Healthcare services | In-depth interviews and focus groups  | Somali and Iraqi asylum seekers | 56 Somali and 10 Iraqi asylum seekers | UK (England) | H/H |
| Alzubaidi et al. (2015) | To explore the decision-making processes and associated barriers and enablers in access and use of healthcare services  | Healthcare services | Face-to-face semi-structured individual interviews and group interviews | Older adult patients diagnosed with Type II diabetes of Arabic speaking or Caucasian background  | 60 Arabic-speaking and 40 English-speaking Caucasian persons | Australia | H/H |
| Lin et al. (2015) | To assess barriers to access and health care experiences in China | Healthcare services | Individual interviews, focus groups  | African migrants, 18 years and older | 10 women, 25 men | China | H/H |
| Czapka and Sagbakken (2016) | To explore barriers and facilitators to access to health care services in Norway | Healthcare services | Semi structured interviews | Polish migrants in Oslo | 11 women, 8 men | Norway | H/H |
| Krupic et al. (2016) | To investigate immigrants' experience with Swedish healthcare professionals | Healthcare services | Qualitative descriptive interview study  | Adult migrants from Bosnia and Herzegovina, Somalia and Kosovo | 9 women, 9 men | Sweden | H/H |
| Main (2016) | To compare narratives about medical treatments in different medical systems and cultures | Healthcare services | Case study interviews, participant observation | Adult, female polish migrants Barcelona (Spain), Berlin (Germany) and London (UK) | 8 women | Poland | H/H |
| Shaw et al. (2016) | To describe migrant patients’ experience and inform development of cancer care  | Cancer care | Focus groups and interview study | Chinese, Arabic and Macedonian -speaking patients or carers  | 18 participants | Australia | H/H |
| Suurmond, Rosenmoller, El-Mesbahi, et al. (2016) | To explore the barriers to access to home care services | Home care services | Semi structured interviews and focus groups | Ethnic minority elderly living in Amsterdam  | 50 participants (group interviews) 5 individual interviews | The Netherlands  |  H/H |

\* CASP score: 0-5 criteria= low, 6-10 criteria = high

**Table 1: Study characteristics**