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OPEN PEER REVIEW

Identifying Economic Resistance Components in COVID-19 Pandemic: The Case of Iranian Health System

Erfan Kharazmi, Jamshid Bahmaei, shima bordbar, Gholamhossein Mehralian, Peivand Bastani

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

2 comments · 25 Sep 2021 – 26 Sep 2021

Referee 1 Reviewer

MAJOR REVISION 25 Sep 2021

The subject is "Economic Resistance Components in the COVID-19 Pandemic", which is interesting and applicable. However, it will be suitable for publication if its shortcomings are addressed. In my view, the manuscript (presentation of the study) has several conceptual shortcomings, as follows:
1. Two concepts, resistance and resilience, are used interchangeably in the manuscript, although they differ in meaning and criteria. The resistant economy is a domestically generated concept with a specific definition provided by Iranian politicians. The authors mentioned in the topic and method that they were going to "identify Economic Resistance Components"; however, in the first line of the discussion part, they mentioned "This study aimed to identify the economic resilience components." This confusion has led to misconceptions and misformulation of data collection and analysis.
2. Simplification of the concepts is another shortcoming of the study. When we talk about data saturation, it means that all properties of the resulting codes have been clarified. I would ask the authors what privatization means and what its criteria would be. Because there has been no successful experience of privatization in Iran, general advice would not be helpful. Another example: what do you mean by the Establishment/development of domestic industries for drug production (esp. vaccines) and medical equipment? As we know, very general concepts are not saturated and need to be developed further through in-depth or probing questions. How did they believe Iran could improve its pharmaceutical and medical equipment industries while Iran is under severe sanctions and has not had enough money even to maintain the existing factories? It seems that the participants were asked about economic resistance and answered in very general terms.
The manuscript has shortcomings and, except for very general advice, has nothing to present to the reader.
3. In the discussion part, the authors claimed "Aiginger, described economic resilience as a part of the economic resistance model". I read the referenced paper and have not found the term economic resistance anywhere in it.
In sum, this manuscript needs some clarification regarding the above-mentioned comments. The discussion should be improved by taking a more analytical approach to the findings and comparing them with other studies, whether in the domain of resilience or resistance.

Associate Editor

MAJOR REVISION 26 Sep 2021

Dear editor-in-chief of Shiraz E Medical Journal,
This is a qualitative study. The authors try to identify the economic resistance components of the Iranian health system during the COVID-19 pandemic. The study sample consisted of 30 health system experts. Despite the authors' great efforts to design and implement the study within a correct methodological framework, it seems that they are confused in their analysis because "economic resistance" is a concept specific to the Iranian context and is not defined in this way in other parts of the world. The lack of focus in this field has resulted in an inadequate discussion. I would like to draw your attention to the reviewer's comments.
Reviewer reports:
The subject is "Economic Resistance Components in the COVID-19 Pandemic", which is interesting and applicable. However, it will be suitable for publication if its shortcomings are addressed. In my view, the manuscript (presentation of the study) has several conceptual shortcomings, as follows:

1. Two concepts, resistance and resilience, are used interchangeably in the manuscript, although they differ in meaning and criteria. The resistant economy is a domestically generated concept with a specific definition provided by Iranian politicians. In the title and methods, the authors mentioned that they were going to "identify Economic Resistance Components"; however, in the first line of the discussion section, they mentioned "This study aimed to identify the economic resilience components." This confusion has led to misconceptions and problems in the formulation of data collection and analysis.
2. Simplification of the concepts is another shortcoming of the study. When we talk about data saturation, it means that all properties of the resulting codes have been clarified. I would ask the authors what privatization means and what its criteria would be. Because there has been no successful experience of privatization in Iran, general advice would not be helpful. Another example: What do you mean by the establishment/development of domestic industries for drug production (esp. vaccines) and medical equipment? As we know, very general concepts are not saturated and need to be developed further through in-depth or probing questions. How did they believe Iran could improve its pharmaceutical and medical equipment industries while Iran was under severe sanctions and did not have enough money even to maintain the existing factories? It seems that the participants were asked about economic resistance and answered in very general terms.
Given these shortcomings, and apart from very general advice, it has nothing to present to the reader.
3. In the discussion section, the authors claimed "Aiginger, described economic resilience as a part of the economic resistance model". I read the referenced paper and have not found the term economic resistance anywhere in it.
In sum, this manuscript needs some clarification regarding the abovementioned comments. The discussion should be improved by taking a more analytical approach to the findings and comparing them with other studies, whether in the domain of resilience or resistance.
Decision:
Major revision

2

Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Comments	Action taken
Two concepts, resistance, and resilience are applied alternatively in the manuscript while they are different in meaning and criteria. The resistant economy is a domestic generated concept with a specific definition by Iranian politicians. The authors in the topic and method mentioned that they were going to "identify Economic Resistance Components" however, in the discussion part, the first line, they mentioned "This study aimed to identify the economic resilience components. This confusion has led to misconception and mis- formulation of data collection and analysis.	Two different concepts have been used in this paper; Economic Resistance and Economic Resilience. The paper has been thoroughly edited in this regard.
Simplification of the concepts is another shortcoming of the study. When we talk about the saturation of the data it means that all properties of the resulted codes are clarified. I would ask the authors that what does privatization means and what would be its criteria. Because in Iran there is no successful experience of privatization, so general advice would not be helpful. The other example; what do you mean by the Establishment/development of domestic industries for drug production (esp. vaccines) and medical equipment. As we know very general concepts are not saturated and need to develop more by deep or probing questions. How they believed Iran can improve its pharmaceutical and medical equipment industries while Iran is under severe sanctions and has not had enough money even for maintaining the existing factories. It seems that the participants were asked about economic resistance and they answered very general.	Currently, a majority of health services in Iran are provided by the private sector; for instance, about 17 percent of hospital services are managed by the private sector. *Alimohammad Mosadeghrad, Ghasem Janbabaei, Behzad Kalantari, Alireza Darrudi, Hamed Dehnavi. Equity in distribution of hospital beds in Iran. SJKU 2020; 24 (6): 12-36.* Reports show the private sector accounts for that more than 50 percent of pharmaceutical market. The main purpose of this paper was to identify how we can achieve an efficient healthcare system particular during the crisis. Amongst them, privatization has been recognized as one of factors associated with Economic Resistance. In other words, the findings in this study put more emphasis on the antecedents of Economic Resistance rather than how they have already operationalized in the real practice. .
n the discussion part the authors	

claimed "Aiginger, described economic resilience as a part of the economic resistance model". I read the paper in reference and have not found the term economic resistance entire it.	You are completely right, and we apologize for this mistake. This citation has been corrected by adding a suitable reference. *Yousefi M, Moosavi Nezhad M. The role and place of economic growth in the resistive economy of the Islamic Republic of Iran. Quarterly Journal Scientific Research of Strategic Defence Studies. 2019;17(78):179-202.*
In sum, this manuscript needs some clarification about the abovementioned comments. Discussion should be improved by a more analytical approach to the findings and compare them with other studies whether in the domain of resilience or resistance.	Despite the fact that the concept of Economic Resistance has been rarely utilizing in other countries and is largely subject to the context, we did our best to enrich the discussion. We hope the changes made in this revision could satisfy you. All changes have been highlighted in the manuscript.

2 Revision 1

2 comments · 17 Nov 2021 – 20 Nov 2021

Referee 1 Reviewer

ACCEPT 17 Nov 2021

Thanks for choosing this interesting and applicable topic. Considering the changes made to the manuscript based on my comments, it is suitable for publication.

Associate Editor

ACCEPT 20 Nov 2021

Based on the changes made to the manuscript in response to the reviewer's comments, the manuscript is suitable for publication.