

### Peer Review File

Article information: https://dx.doi.org/10.21037/mhealth-22-41

# Reviewer A

**Comment 1**. I congratulate the authors for this contribution. This is a timely and original work.

**Reply:** Thank you.

**Comment 2**. In measures or in a supplementary material, authors may consider providing the exact wording of questions they used to measure knowledge of safe abortion methods, contraceptive methods, abortion services, and clinic facilities that provide abortion services.

**Reply**: We now included the measures describing the exact wording of questions to measure knowledge of safe abortion methods, contraceptive methods, abortion services, and clinic facilities that provide abortion services. Given the length of these questions, we provide the documents in a supplementary material.

<u>Changes in text</u>: please see an enclosed supplementary material as part of this resubmission

**Comment 3**. Line 73: delete "use" from use contraceptive use.

**Reply:** We have modified the text and deleted "use" from use contraceptive use.

Changes in the text: see page 3, line 62

**Comment 4.** Lines 140-141: delete "based" from based phone interviews based on...

**Reply**: We have modified the sentence and deleted the word "based" from based phone interviews as you have advised.

Changes in the text: see page 6, line 129

**Comment 5.** Lines 212-212: it is not clear what sex worker context refers to. Does it refer to the venues? Perhaps this can be specified in the text as in the table-the association is not straightforward.

**Reply**: We are apologizing not being clear about this. It should be sex work duration, not sex work context. We have replaced sex work context by sex work duration.

Changes in the text: see page 6, line 223





**Comment 6.** Line 235: correct as engaging sex work "for" 1-5 years.

**Reply**: We revised the sentence to make it clearer.

Changes in the text: see page 10, line 241

## Reviewer B

This is an interesting paper that is interesting and makes a compelling argument. Some feedback on strengthening the introduction and discussion.

Thank you

#### Introduction

**Comment 1**. Some of the background information presented needs references to support the statements

Page 1, line 18 - the prevalence of violence at work among FSW

**Reply:** we have added more references to support the statement regarding the prevalence of violence at work among FSWs

Change in text: see page 1, line 20

<u>Comment 2:</u> Line 30 – clarify what these % refer to -- is it % of sex workers who have ever had an abortion, in a given time frame, or is the denominator the number of pregnancies? I checked the referenced article (by the same authors) and the statistics are not clear.

**Reply:** The % refers to the % of sex workers who reported having an abortion in the past one year or who reported ever had an abortion. We have revised the text to make it clear.

Change in text: see page 2; line 28-30

**Comment 3**: The Introduction needs to include some acknowledgment and discussion about the reasons why FSWs may not be able to use commonly available contraceptive methods such as condoms due to issues of power and limited autonomy.

Nguyen N, Londeree J, Nguyen LH, Tran DH, Gallo MF. Reproductive autonomy and contraceptive use among women in Hanoi, Vietnam. Contraception: X. 2019 Jan 1;1:100011.

Khan MR, Turner AN, Pettifor A, Van Damme K, Rabenja NL, Ravelomanana N, Swezey T, Jamieson D, Behets F. Unmet need for contraception among sex workers in Madagascar. Contraception. 2009 Mar 1;79(3):221-7.



**Reply:** Thanks to your suggestion. We expand the discussion about the reasons why FSWs may not be able to use commonly available contraceptive methods such as condoms due to issues of power and limited autonomy.

Changes in the text: see page 2, line 44-46

**Comment 4**: The rationale for the paper is strong and is clearly argued on page 4. Reply: thank you

#### Methods

**Comment 5**: Information needs to be provided about how participants were recruited. How was the initial online sample drawn, what were the methods for identifying.

**Reply:** We recruited FSWs in 3 rounds using online based-driven respondent sampling method. Each round consisting of 3 waives started with 2 peer educators-each of whom enrolled 3 FSWs (F0). Each of 6 F0 FSWs were asked to recruit other 18 FSWs (F1), who were then asked to enroll 54 FSWs (F2), who in turn were asked to recruit another 162 FSWs (F3). This sampling strategy was intended to enroll 234 FSWs in each round, totaling 702 FSWs in 3 rounds. Since not all F1, F2, and F3 FSWs were able to recruit all 3 FSWs as planned, the final sample consisted of 512 FSWs who agreed to participate in the study.

Changes in the text: see page 6, line 118-126

**Comment 6**: Line 138 – I think you mean "randomly selected to be interviewed" – what was the response rate among those who were selected?

**Reply:** As stated above, the interviews were administered to the first 284 FSW out of total 512 women at the time of enrollment. Since they agreed to join the study, all agreed to respond to the interviews.

Changes in the text: see Page 6, line 129-130

#### Discussion

**Comment 7**: The small number of participants in the IDIs and FGs should be acknowledged. The qualitative sample sizes were not large enough to achieve saturation of themes.

**Reply:** We have now acknowledged the limitation of the qualitative small sample size in the text.

Change in text: see page 18, line 392-394.

**Comment 8**: Line 388 – this sentence is not clear, needs to be reworded for clarity:



"This study focused on recruiting FSWs, so the results may be different to populations who were working as sex workers."

**Reply:** We apologize for being not clear. We have modified the sentence: As the study was conducted among FSWs in one city, the findings cannot be generalized to all FSWs in Vietnam. We have updated the text reflecting the change.

Change in text: see 18, line 389-390.

**Comment 9**: The paper needs to acknowledge that improving access to safe abortion is a stopgap measure in the presence of limited access of effective, safe and acceptable contraceptive care. This work must proceed hand in hand with other efforts to reduce unintended pregnancy among FSWs and promote reproductive justice.

**Reply:** Thank you. We have now added this important acknowledgment in the conclusion as advised.

Change in text: see 401-406

