Reviewer’s report

Title: Acceptability, Feasibility and Utility of a Mobile Health Family Planning Decision Aid for Postpartum Women in Kenya

Version: 0 Date: 25 Feb 2019

Reviewer: Tigest Tamrat

Reviewer's report:

The methods and rationale for this paper are clearly described. However, at times there seems to be a conflation on whether this tool and research study focused on the women or the health workers, particularly as it seems like more questions were asked to health workers than the women themselves. The feasibility of FP mobile decision aids on health workers has been studied previously, and the key added value of this paper seems to be the client/woman facing aspect of the decision support tool (at least the title only mentions for PP women). I think the results section should emphasize more clearly that this research is primarily on the client/woman side perspectives. The authors may consider separating the results section so that the differences in the client/woman perspective vis a vis health workers is clearly detailed. It otherwise just seems to be a decision support tool for health workers that takes into account their client's preferences for shared decision making, but not necessarily a "patient-facing decision aid."

It should also be emphasized within the results and discussion whether the iMACC is to be used at the facility when a woman comes in or if this is something that women can operate at home to look up information, etc. This point of who is the primary user needs to be clarified (is it a decision aid tool that is used during a consultation with a health worker, in which case the health worker will also be operating it), or is this something that women do on their own? The process by which women access and interact with the iMACC should be made clear, especially if the selling point is that this is a patient facing tool.

Consider including the following publications as these have already studied the use of FP mobile decision aid among health workers, and I didn't see them referenced.


If possible, it would be good to describe the standard practice--how were women previously obtaining FP counselling material and what is the added value of digitizing this content/interaction since it seems they have to come to a facility to use the iMACC.

Just a point of semantics--the FP world prefers not to refer to people seeking contraception as "patients." Authors may consider saying "clients" or "women" instead of patient.
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