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Women's Experiences of Reproductive Coercion: Mental Health Outcomes

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1. Round 1

1.1. Reviewer 1

Reviewer:

The methods section outlines the recruitment of participants through social media and healthcare provider referrals. However, it lacks specific information on how participants were ensured to meet the inclusion criteria, especially concerning their experiences of reproductive coercion. A more detailed explanation of the screening process would strengthen the methodology's transparency.

While the paper mentions thematic analysis was used, it could benefit from a more thorough description of how codes were derived from the data, the process of theme development, and how disagreements between coders were resolved. This will enhance the replicability of the study.

The article briefly mentions the use of an interview guide but does not provide details on the questions or thematic areas covered. Including examples of interview questions or an appendix with the interview guide could provide readers with valuable context for understanding how data was collected.



The discussion on reflexivity mentions efforts to mitigate biases, yet it remains somewhat generic. Offering specific examples of potential biases identified by the researchers and how they were addressed during data analysis would fortify the study's rigor.

The coping mechanisms identified are broad. The paper could be improved by a deeper analysis of how these strategies differ across various demographics or personal circumstances of the participants, providing richer insights into the complexity of coping with reproductive coercion.

Integrating a more robust theoretical framework to guide the analysis and discussion could enhance the paper's depth. For example, applying theories related to power and control or trauma-informed care could offer a more comprehensive understanding of the findings.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

While the results section includes summaries of findings, direct quotes from participants would add depth and authenticity to the themes described. Incorporating quotes that exemplify key findings would enrich the narrative.

The discussion could be strengthened by more explicitly comparing the study's findings with existing literature on reproductive coercion. Highlighting both alignments and divergences would contextualize the study's contributions more clearly.

The paper could further discuss how its findings contribute to or challenge existing theories on reproductive coercion, intimate partner violence, and women's mental health. This would situate the study within broader theoretical debates and underscore its academic significance.

The paper mentions limitations related to sample diversity and generalizability. Expanding this section to discuss the implications of these limitations for interpreting the study's findings and for future research would be beneficial.

While the paper briefly touches on implications for healthcare providers, a more detailed discussion on practical recommendations for different stakeholders (e.g., policymakers, educators) based on the findings could make the paper more impactful.

The conclusion mentions the need for further research but does not specify areas where future studies could be most valuable. Identifying specific gaps in the current understanding of reproductive coercion that this study uncovers would guide future inquiries.

Expanding on the ethical considerations, especially how participants' safety and psychological well-being were ensured during and after the interview process, would underscore the study's ethical rigor.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.