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Response to the letter to the editor regarding Women's and healthcare providers' experiences of contraceptive counselling: A qualitative systematic review

Dear Editor-in-Chief of Sexual & Reproductive Healthcare,

We thank Mr Muhammad Taufan Umasugi for his interest in our publication [1] and appreciate the opportunity to respond. While we welcome constructive scholarly critique, the points raised concern methodological aspects already addressed in the review, namely in the Methods, Implications for practice, policy and research, and Strengths and limitations sections.

Convenience sampling is widely recognised as appropriate in qualitative research exploring lived experiences, where analytical depth is prioritised over statistical generalisability. In qualitative inquiry, transferability depends on the provision of sufficiently rich contextual information to enable readers to judge relevance across settings [2]. The restriction of eligibility criteria to high-income countries was a deliberate choice to enhance conceptual coherence and comparability across healthcare contexts, while reducing potential confounding related to structural and resource disparities, as documented in the *a priori* protocol [3].

With respect to self-reported data, participants' accounts constitute the most appropriate data source for qualitative research on sensitive topics such as contraceptive counselling. Potential social desirability bias was addressed through rigorous methodological appraisal. Included studies were critically assessed using the Joanna Briggs Institute (JBI) Critical Appraisal Checklist for Qualitative Research, and confidence in the synthesised findings was evaluated using the JBI ConQual approach [4]. Appraisal outcomes are reported in Table 2 and Appendices C and D of the review. As the publication is currently available only as a journal pre-proof [1], these materials have not yet been publicly accessible nor reviewed in final proof form by the authors, which may limit interpretation at this stage.

The synthesis explicitly addresses power imbalances, provider bias, and systemic constraints within the shared decision-making framework, integrated across multiple analytical themes and consistent with established literature on client-provider interactions in contraceptive counselling. Overall, the findings reflect a coherent and methodologically grounded qualitative evidence synthesis. We trust that these clarifications adequately address the points raised and reaffirm the robustness and coherence of the methodological approach adopted.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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