

## Summary of Changes for Camera-Ready Version (submitting 17-Aug-2018)

### 1AC Comments:

#	Feedback	Authors Comments
1	Concerns regarding whether the paper does enough to fully unpack the multi-faceted issues (i.e., health vs stigma) that people living with HIV face.	We have updated the introduction to address this point. We do start the paper by acknowledge the benefits of disclosure, but we have now been more explicit in the intentions of the research, which is to understand how these systems can support those marginalised who may feel unable to disclose, especially those recently diagnosed. E.g we have added: "In this paper, we explore whether these disclosure fields support marginalised groups who may feel unable to publicly disclose their status, especially in the early stages of accepting the diagnosis [7] where people require support and positive interactions [58]. Around half of MSM who live with HIV in the UK reported feeling of shame, guilt, and low self-esteem in relation to their HIV status in the 12 months post diagnosis [56]. Systems should be designed in such a way that neither disadvantages nor stigmatises any group of users [9]. Therefore, these marginalised users should be in control over when they choose to disclose potentially stigmatising personal health information"
2	The paper also needs to acknowledge the limitations of its data sources and tone down what it could infer from the data.	We have changed 'several important contributions' to 'several contributions' from the start of contributions section (Introduction). We have removed the term 'evaluate' in relation to the conceptual designs we have developed, instead stating that these designs are developed to "provide a first look at how these limits could be applied in design" (Introduction), and to explore "the potential benefits and restraints of using these unraveling limits in this context" (Discussion - Section 5.4). We have recognise the need for a further study to determine the external validity of our findings: "Finally, we propose an observation study to explore the external validity of our findings which, currently rely on self-reported data." (Further Work)

### 2AC Comments:

#	Feedback	Authors Comments
1	I do think the paper needs some toning down its claims of value of the contributions. [...]The paper need not claim contributions beyond this specific,	1AC.2

	much needed attention to a marginalised group of people.	
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### 3AC Comments:

#	Feedback	Authors Comments
1	Does not use the term content analysis	We performed a thematic analysis on our data, and have provided a reference to the methodology used.
2	change the overly complex language in the introduction, the first paragraph is almost incomprehensible because the authors are trying to be precise in a few sentences. Using whilst twice after another just makes it sound pretentious. It is a goal of academic papers to also be easily readable. I found the rest of the paper better. BHOC should also be explained, who are they? what do they do?	We have addressed the overly complex language at the start of the paper, removing overuse of 'whilst' and also added a footnote to provide additional detail about BHOC.

### R1 Comments:

#	Feedback	Authors Comments
1	the authors overstate their findings in the abstract, conclusion, and elsewhere. The authors make causal and behavioral claims with no evidence that the online comments they analyzed correlate in any way with participants' actual disclosure behaviors, or acknowledgement of this threat to validity.	See 1AC.2
2	I continue to find that the paper lacks focus and clear contributions. This has been tightened somewhat, but the purpose of the paper (understanding user attitudes) and the privacy framing could be better integrated.	See 1AC.1
2	is also a bit confused in that it doesn't really wrestle with the underlying issue of how to solve the major health issue here. The start of the paper implies that disclosure is a potentially important step in this process, but the discussion appears to focus on helping users avoid stigma/disclosure without regard to the health consequences. This would all be stronger if it grappled more directly with the tension between a public health crisis and threats to individual privacy/the potential for individual stigma.	See 1AC.1

### R3 Comments:

#	Feedback	Authors Comments
1	there are excessive claims regarding the analyses and importance that are clearer upon re-review	See 1AC.2
2	The caption for Figure 3 should say what "NW" and "PF" stand for. In 3.2 - "multiple search engines" with only two named - please either state all searched, or say only two were searched - "multiple keywords" - please provide a complete list. This can be a footnote if needed. Also be clear if the quotes	These have been corrected.

	<p>around the keywords describe a phrase searching strategy.</p> <p>-lease state how many websites were reviewed to determine if they met inclusion criteria, but did not meet those criteria</p> <p>-typo on page 5: "less obviously" should day "less obvious"</p>	
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