

**Table 1. Summary table of included studies (n=37) and the self-sampling intervention evaluated.**

Reference	Study Design	Sample size	Country	Study population	Type of digital intervention	Sampling site	Intervention description
<b>Arias et al. 2016<sup>1</sup></b>	Cross-sectional DAS	189	Canada	Women who visited the youth street clinic or the abortion clinic	None	Vaginal	Participants were given the choice between self-sampling or conventional sampling by physician.
<b>Bernstein et al. 2011<sup>2</sup></b>	Cross-sectional DAS	480	USA	English-speaking MSM	None	Pharyngeal	Participants presenting to the clinic were tested using conventional testing and then asked to perform self-sampling without examiner present.
<b>Berry and Stanley 2017<sup>3</sup></b>	Cross-sectional DAS	1306	UK	Men visiting a sexual health clinic	None	Meatal	Participants were requested to provide a self-sampled swab and a urine sample for conventional testing.
<b>Camus et al. 2021<sup>4</sup></b>	Cross-sectional DAS	1028	France	Women visiting STI clinics	None	Vaginal	Women presenting with vaginal/cervical sampling indications were invited to participate to test the non-inferiority of self-sampling compared to conventional sampling by clinician.
<b>Chai et al. 2010<sup>5</sup></b>	Cross-sectional	501	USA	Men $\geq 14$ years	Website-based	Urine and urethral	Participants ordered free-sampling kits online and were provided with a questionnaire.
<b>Charin et al. 2021<sup>6</sup></b>	Cross-sectional	5061 returned kits	UK	Asymptomatic cisgender MSMs	Website-based	Rectal, pharyngeal and urine	Self-testing kits results were analysed from an administrative database to determine prevalence of extra-genital CT/GC.

<b>Chernesky et al. 2014<sup>7</sup></b>	Cross-sectional	562	Canada	Women attending a gynaecology clinic or youth health clinic	None	Vaginal and cervical	Participants were asked to self-sample a vaginal swab and two conventional swabs were taken.
<b>Chinock et al. 2020<sup>8</sup></b>	Cohort DAS	533	USA	Emergency department attendees (Spanish- and English-speaking)	None	Vaginal	Participants were given the option to provide a self-sample in addition to conventional testing.
<b>Conejero et al. 2013<sup>9</sup></b>	Cross-sectional	344	Chile	Women aged 18-25 who are sexually active and not pregnant or menstruating at the time of the study	None	Vaginal	Participants who attended the clinic were given a self-sampling test and surveyed.
<b>De Baetselier et al. 2019<sup>10</sup></b>	Cohort DAS	213	Belgium	MSM using PrEP	None	Urine	Participants were tested using conventional testing at 3 biological sites and asked to self-sample at home.

<b>Dukers-Muijers et al. 2020<sup>11</sup></b>	Cohort	4916	the Netherlands	Women, who were 18 years or older, diagnosed with a vaginal or rectal CT infection during the inclusion period, and negative for HIV, syphilis, and GC	Online questionnaire and text messages	Vaginal and rectal	Participants were communicated a website link to the study via a text message. They self-collected at home or at the clinic and received reminder texts during the length of the study.
<b>Estcourt et al. 2017<sup>12</sup></b>	Cross-sectional DAS	2143	UK	Anyone aged 16–24 years and able to read and understand English	Website and text	Urine (males) or vulvovaginal (females)	Participants were given the choice to access all care online or request in-person counselling/treatment at multiple steps of the pathway.
<b>Galvez et al. 2021<sup>13</sup></b>	Cohort	206	Peru	Women between 18 and 50 years of age	None	Endocervical	Participants conducted a self-sampled test and conventional test at the clinic. They were asked to fill a questionnaire.
<b>Grabert et al. 2022<sup>14</sup></b>	Cross-sectional DAS	399	Kenya	FSWs with and without HIV	None	Vaginal	Women who engage in sex work were randomized to using wet and dry brushes sampling methods compared to conventional sampling to determine test positivity.
<b>Grandahl et al. 2020<sup>15 16</sup></b>	Cross-sectional	1785	Sweden	Anyone over the age of 15	Website-based	Urine, vagina, cervix, rectum, throat, other	Participants ordered a free self-sampling kit and filled a questionnaire on demographics, behaviour and about their experience with the test.
<b>Habel et al. 2018<sup>11</sup></b>	Cross-sectional	3082	USA	Male and female university students	None	Urine (men), vaginal (women)	Students accessing the healthcare centre could request a self-testing option as opposed to conventional testing and were surveyed.

<b>Harvey-Lavoie et al. 2021<sup>17</sup></b>	Cross-sectional	1179	Canada	Cis- and trans-GBMs	None	Rectal, pharyngeal and urine	Respondent driven sampling was used to recruit GBM who self-sampled to detect CT/NG. Prevalence estimates of CT/NG, overall and by anatomical site were calculated and respondent-driven sampling-adjusted.
<b>Holland-Hall et al. 2002<sup>18</sup></b>	Cross-sectional	133	USA	Juvenile correctional facility detainees aged 12-17 years	None	endocervical	Participants were tested by conventional testing and/or invited to perform a self-test swab.
<b>Kanji et al. 2016<sup>19</sup></b>	Cross-sectional DAS	606	Canada	Female STI clinic attendees aged 15 to 52 years from three Alberta clinics	None	Urine and endocervical	Participants accessing the clinic were invited to self-collect a sample or by a nurse.
<b>Ladd et al. 2014<sup>20</sup></b>	Cross-sectional	205	USA	Women who returned rectal testing kits ordered through a website	Website-based	Vaginal and rectal	Participants ordered the rectal and vaginal free-sampling kits online and were provided with a questionnaire.
<b>Leenen et al. 2020<sup>21,22</sup></b>	Cross-sectional	129	Netherlands	Dutch-speaking HIV positive MSM 18 years of age or older	Text messaging	Oral, anorectal, urinal	Home sampling kits were offered to clinic patients and text-message reminders were sent. Results were communicated via text or phone call.
<b>Lippman et al. 2007<sup>15</sup></b>	RCT	818	Brazil	Low-income women	None	Vaginal	Participants were randomized to receive home-based collection kits or clinic based self collection and conventional testing.

<b>Lockhart et al. 2018</b> <sup>23</sup>	Cohort DAS	350	Kenya	Female sex workers	None	Cervicovaginal	Participants self-collected a sample and healthcare provider collected a sample.
<b>Mabonga et al. 2021</b> <sup>24</sup>	Cross-sectional	363	Uganda	People living with HIV 14 years and older	None	Vaginal and/or urine	Participants were asked to provide a sample and a questionnaire.
<b>Masek et al. 2009</b> <sup>25</sup>	Cross-sectional DAS	2000	USA	Anyone who accessed the website, no restrictions provided	Internet-based kit request and delivery of results	Vaginal	Self-sampling kits and questionnaires were ordered by participants through a website and shipped for testing and results were communicated by phone.
<b>McCartney et al. 2022</b> <sup>26</sup>	Cross-sectional	23	Brazil	Transgender women	None	Rectal, urethral, vaginal pharyngeal and urine	Consecutive potential participants from an existing cohort study were invited interview to determine the acceptability and practicability of mucosal STI screening.
<b>Nodjikouambaye et al. 2019</b> <sup>27</sup>	Cross-sectional DAS	251	Chad	Adult women	None	Vaginal	Participants randomized to a conventional testing with cervical swab or self-sampling with a veil.
<b>Perkins et al. 2013</b> <sup>28</sup>	Cross-sectional	514	USA	HIV negative adults	None	Urine, throat and/or rectal	Self-sample swabs were completed by participants, and they filled a survey.
<b>Platteau et al. 2022</b> <sup>29</sup>	Cross-sectional	154	Belgium	Male clients of sex workers	Online questionnaire and text message communication of results	Rectal and urine	Time Location Sampling was used to recruit clients of sex workers who were interested in getting tested for STIs to determine positivity.

<b>Rahib et al. 2022</b> <sup>30</sup>	Cross-sectional	3428	France	HIV negative MSMs	App-based recruitment, online recruitment and text message reminders	Rectal, pharyngeal and urine	Participants were recruited online to study the feasibility of a at-home screening program, the rate of positive test results, and the factors associated with positivity.
<b>Regimbal-Éthier et al. 2018</b> <sup>31</sup>	Cross-sectional	708	Canada	Anyone with access to the website	Online questionnaire	Not specified	Participants accessing the website completed a self-assessment and presented to the clinic for a self-sampling collection.
<b>Sambri et al. 2017</b> <sup>32</sup>	Cross-sectional	78	Italy	Employees of a private industry	None	Vaginal	Subjects were given two self-sampling diagnostic tools to conduct at home and a questionnaire.
<b>Schick et al. 2015</b> <sup>33</sup>	Cross-sectional	80	USA	WSWM	None	Oral, vaginal and/or anal	Participants were interviewed and performed self-sampling swab tests, notified of results by their method of choice and email.
<b>Sexton et al. 2013</b> <sup>34</sup>	Cross-sectional DAS	374	USA	MSM who had sex with a man in the previous 6 months	None	Pharyngeal and rectal	Patients requesting a STI test performed self-sampling kit after viewing written and pictorial instructions and were also screened by clinic staff.

<b>Shipitsyna et al. 2013<sup>35</sup></b>	Cross-sectional	1207	Russia	Sexually active attendees of a youth centre (15 – 25 years old)	None	Vaginal (female) and urine (male)	Participants were asked to provide a self-sample and a questionnaire.
<b>Silva et al. 2020<sup>36</sup></b>	Cross-sectional	680	Portugal	Women of childbearing age from 2010 to 2016	None	Vaginal	Participants were asked to provide a self-sample and fill a questionnaire.
<b>Sultan et al. 2016<sup>37</sup></b>	Cross-sectional	154	UK	Men and women	None	Not specified	Participants that had tested positive for a conventional test at the clinic were asked to provide a self-sample done at home.
<b>van de Wijgert et al. 2006<sup>38</sup></b>	RCT DAS	450	South Africa	Adult women	None	Vaginal	Participants were surveyed and asked to self-sample with one tampon, or two swabs observed by nurse and nurse collected three vaginal swabs.
<b>van der Helm et al. 2009<sup>39</sup></b>	Cross-sectional DAS	2394	the Netherlands	MSM and women who attended two STI clinics	None	Rectal	Participants were invited to test with self-sampling in addition to conventional testing and filled a questionnaire.
<b>Weng et al. 2022<sup>40</sup></b>	Cross-sectional	306	China	MSMs visiting an outreach centre	None	Rectal and urine	Rectal-self-collection was offered in 2 non-clinic settings to study prevalence of CT/GC and self-sampling acceptability.
<b>Wiesenfeld et al. 2001<sup>41</sup></b>	Cross-sectional	228	USA	Female high-school students	None	Vaginal	Participants were asked to self-sample for a STI test and surveyed.
<b>Wilson et al. 2020<sup>42</sup></b>	Cross-sectional DAS	1793	UK	Women and MSM 16 years of age or older	None	Pharyngeal, rectal, and first-catch urine (males)/vulvovaginal swabs (females)	Participants presenting to the clinic were tested using self-sampling in addition to conventional testing and filled a questionnaire.

<b>Wilson et al. 2020<sup>43</sup></b>	Cross-sectional DAS	1793	UK	Women and MSM 16 years of age or older	None	Pharyngeal, rectal, and first-catch urine (males)/vulvovaginal swabs (females)	Participants presenting to the clinic were tested using self- sampling in addition to conventional testing and filled a questionnaire.
<b>Wong et al. 2022<sup>44</sup></b>	Cohort	204	China	HIV negative MSMs	Website-based test ordering and text message reminder	Rectal, pharyngeal and urine	HIV-negative MSM aged 18 years or older made appointments on a designated website for baseline and follow-up visits at 3-monthly intervals to determine engagement with self-sampling program and prevalence of CT/NG and other STIs.
<b>Wood et al. 2014<sup>45</sup></b>	Cohort	30	UK	MSM attending a sauna	None	Pharyngeal, urine and rectal	Participants had the option of choosing a self-sampling kit at home, at the site of outreach or conventional testing at the site of outreach.

MSM: men who have sex with men; PrEP: pre-exposure prophylaxis; CT: *Chlamydia trachomatis*; HIV: human immunodeficiency virus; GC: *Neisseria gonorrhoeae*; STI: sexually transmitted infection; WSWM: women who have sex with women and men

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