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Predicting Marital Intimacy Based on Infertility Stigma and Coping Strategies in Infertile Women

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1. Round 1

1.1. Reviewer 1

Reviewer:

The introduction outlines the impact of infertility well but could be enhanced by directly linking the biopsychosocial impacts mentioned to the specific hypotheses of the study early on. This would strengthen the reader's understanding of the study's direction.

Please provide more details on the rationale behind the choice of purposive sampling and its appropriateness for the study's aims, particularly regarding the representativeness of the sample for the broader population of infertile women in Tehran.

Expand the descriptions of the scales used (e.g., Marital Intimacy Scale, Perceived Infertility Stigma Scale). Specifically, discuss any cultural adaptations made to these scales to suit the Iranian context, if applicable, to strengthen the reliability and validity claims.

While the use of multiple regression is apt, the discussion on multicollinearity is brief. Consider providing a more detailed interpretation of the Variance Inflation Factor (VIF) and Tolerance values to substantiate the claim of no multicollinearity.

The link between stigma sub-scales and specific coping strategies could be better highlighted in the results section. A more detailed discussion on how different types of stigma uniquely influence coping strategies could add depth to the findings.

Enhance the discussion by comparing your findings with existing literature, particularly focusing on studies from similar cultural contexts. This will help in positioning your findings within the broader global research landscape.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

There seems to be a lack of a strong theoretical framework guiding the study. Consider adopting or discussing a specific psychological theory on stigma or coping to anchor your study's hypotheses and findings, which would help in providing a theoretical rationale for the observed relationships.

The measures used (e.g., Coping Strategies Scale and Infertility Stigma Scale) require a thorough discussion on construct validity, especially in the context of infertile women in Iran. Discuss how these constructs operate within the cultural nuances of the study population.

To enhance the robustness of the study, include a power analysis to justify the sample size. This would address potential concerns regarding the statistical power to detect the expected effects.

Expand on the ethical considerations by discussing how participants were ensured of the confidentiality and anonymity of their responses, especially considering the stigma associated with infertility.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.