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Therapists' Lived Experience of Empathic Fatigue and Professional Identity

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the Introduction, the paragraph starting with "Despite the evident emotional toll..." could benefit from a clearer theoretical bridge linking meaning-making to resilience. The term "meaning-making" should be conceptually defined, ideally with references to existential or narrative therapy literature.

The final paragraph of the Introduction begins with "Kenya offers a unique context..." and refers to systemic constraints. This section would benefit from citing specific policies, infrastructural challenges, or statistical shortages in the Kenyan mental health system.

In Methods and Materials, under "Study Design and Participants," the phrase "selected through purposive sampling" is vague. Please specify the purposive criteria—e.g., clinical setting, supervision access, region, or theoretical orientation—and justify their relevance.

In the Findings, under "Loss of Motivation," the quote "I used to look forward to sessions..." is impactful but lacks attribution to gender, years of experience, or practice setting, which would add interpretive depth.

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In "Burnout-Related Anxiety," the description of symptoms like "heart palpitations" should include a note about whether participants sought medical consultation. This would clarify whether these were psychosomatic expressions or medically verified symptoms.

The subtheme "Value Reconnection" mentions spiritual realignment. It would be valuable to know whether these references were religious, philosophical, or culturally specific—especially in the Kenyan context.

In the Discussion, the paragraph beginning "The study also uncovered a pattern of professional doubt and impostor syndrome..." could be enhanced by referencing recent empirical work on emotional labor and self-alienation among mental health professionals.

The Discussion section makes an important point about "resilience through client impact," but the concept of "compassion satisfaction" is underutilized. Consider integrating Stamm's Professional Quality of Life framework for a more rigorous theoretical anchor.

Authors revised and uploaded the document.

1.2. Reviewer 2

Reviewer:

The paragraph beginning with "The emotional toll of empathic fatigue is particularly pronounced..." would benefit from empirical specificity. For example, what is the prevalence of burnout or emotional exhaustion among Kenyan therapists based on national or regional data?

In the Introduction, the phrase "This phenomenon, akin to 'impostor syndrome'..." would be stronger if it were grounded in empirical evidence showing rates or correlates of impostor syndrome among therapists, preferably in similar cultural contexts.

In "Data Collection," the sentence "The interview guide included open-ended questions focusing on personal experiences..." should be followed by a few sample questions from the interview guide to demonstrate alignment with research aims.

In the Data Analysis section, the authors mention "reflexivity was maintained throughout the coding process." This is a crucial methodological claim but underdeveloped. Please specify how reflexivity was operationalized (e.g., memo writing, bracketing interviews, reflective journals).

The Findings section reports themes but lacks a table indicating the number of participants per theme or subtheme. Adding this would increase transparency and help assess saturation.

In the "Struggles and Resilience in Professional Identity" theme, the quote "Sometimes I don't know where I end and my role begins" is compelling. Consider linking this explicitly to identity theory (e.g., Erikson, Goffman) in the discussion.

The Results mention "Professional Doubt" and "Impostor Syndrome," but do not examine possible gender or experience-related trends. Did early-career therapists report this more frequently? Including this stratification would strengthen the analysis.

Authors revised and uploaded the document.

2. Revised

Editor's decision after revisions: Accepted. Editor in Chief's decision: Accepted.

