

Exploring The Psychological Impact of Miscarriage on Women

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1. Round 1

1.1. Reviewer 1

Reviewer:

The literature review would benefit from a more comprehensive analysis of previous studies, particularly focusing on contrasting findings related to the psychological impacts of miscarriage. For instance, integrating studies that examine longitudinal psychological effects to provide context on the duration of these impacts over time could enrich the discussion.

While the manuscript mentions the inclusion of diverse ages and socioeconomic statuses, it lacks a detailed breakdown of participants' cultural and ethnic backgrounds. Given the significant role of cultural context in shaping the experience of miscarriage, incorporating this information could add depth to the analysis.

The discussion on physical experiences post-miscarriage is valuable but could be deepened by exploring the intersection between physical and psychological recovery processes. Specifically, discussing how physical recovery experiences might exacerbate or alleviate psychological distress could provide a more holistic view of recovery.

Given the mention of seeking information and resources as a coping mechanism, elaborating on the role of technology (e.g., online forums, telehealth counseling) in providing support and information to women experiencing miscarriage could be a forward-looking addition to the paper.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

The methods section could be improved by including more detailed descriptions of the interview guide questions and the rationale behind the selection of these specific questions. This would offer readers insight into how the questions were aimed at uncovering the nuanced psychological impacts of miscarriage.

The findings highlight the importance of support systems, yet there is an opportunity to further dissect the types of support (emotional, informational, instrumental) and their respective impacts. This distinction could help in tailoring support mechanisms for women experiencing miscarriage.

The manuscript outlines various coping mechanisms but could be enhanced by discussing the effectiveness and accessibility of these strategies. Additionally, exploring any barriers to accessing professional support and how these might be overcome would be valuable.

The conclusion briefly touches on the need for healthcare providers to offer compassionate care. Expanding this section to include specific, evidence-based recommendations for healthcare practices could make the paper more actionable for practitioners.

The manuscript would benefit from explicitly connecting its findings to existing psychological theories or models on grief and loss. This could help in situating the study within a broader theoretical context, enhancing its scientific contribution.

While the focus on qualitative data is appropriate, the inclusion of any available quantitative data on the prevalence of psychological impacts or the effectiveness of different coping strategies could provide a more comprehensive view.

The discussion could be enriched by suggesting specific longitudinal study designs that could further investigate the long-term psychological impacts of miscarriage, potentially identifying critical periods for intervention.

The emotional response category covers a broad range of emotions. A deeper dive into the complex interplay between these emotions and how they evolve over time post-miscarriage could add valuable insights.

Consider comparing the findings with studies focusing on miscarriage impacts in different cultural or healthcare settings. This could highlight the universality or variability of experiences, contributing to a more nuanced understanding.

The manuscript could discuss how interdisciplinary approaches, integrating psychological, medical, and social work perspectives, could offer comprehensive support to women post-miscarriage.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.