

Ranking Determinants of Therapy Dropout Among Women

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1. Round 1

1.1. Reviewer 1

Reviewer:

Expand this section by specifying prevalence data for therapy dropout among women globally or in China to contextualize the research gap.

The paragraph presents valuable insights but relies heavily on descriptive interpretation. Consider integrating meta-analytic or longitudinal evidence supporting the link between expectancy mismatch and dropout to enhance academic robustness.

Provide clearer operational definitions for “emotional vulnerability” and “self-stigma,” perhaps referencing validated psychological scales or frameworks (e.g., Self-Stigma of Seeking Help Scale).

The manuscript should include exact alpha values (e.g., $\alpha = .87$) to validate the internal consistency of the ranking questionnaire.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

Strengthen this paragraph by including culturally specific examples or regional studies from East Asia or China to increase the paper's contextual relevance to the surveyed population.

This section would benefit from linking to established theoretical models such as Bordin's (1979) working alliance theory or attachment theory to ground the relational analysis conceptually.

Consider merging overlapping content to streamline narrative flow and avoid repetition about empathy, validation, and power imbalance.

The discussion is strong but slightly outdated. Including recent studies (2024–2025) on hybrid therapy adherence would update and modernize the argument.

Clarify how purposive criteria were defined—for example, whether dropout duration, type of therapy, or socioeconomic status were considered inclusion variables.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.