




Causes of Desire Suppression and Sexual Avoidance in Postpartum Couples: A Qualitative Exploration

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E d i t o r	R e v i e w e r s
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1. Round 1

1.1. Reviewer 1

Reviewer:

In the Introduction (paragraph 2: “Physiological recovery after childbirth is often a major determinant...”), the discussion is comprehensive but largely descriptive. Consider explicitly introducing a biopsychosocial or sexual adaptation theoretical framework to integrate physical, psychological, and sociocultural elements from the outset.

In Measures (paragraph 2: “All interviews were audio-recorded with participants’ consent and transcribed verbatim in Mandarin Chinese”), mention how translation and back-translation were managed to maintain meaning if analysis or reporting was done in English.

You note “Credibility was enhanced through member checking and peer debriefing” (abstract) and “member checking was conducted with several participants” (Methods). Consider quantifying — how many participants participated in member checking and how feedback was integrated — to increase auditability.

The Findings and Results section provides rich demographic details but could benefit from summarizing these in a concise table or chart (e.g., age, parity, delivery mode, breastfeeding) to improve readability and highlight sample characteristics.

In Theme 1 — Physical and Hormonal Changes After Childbirth, you integrate participants' quotes such as "Every time my husband touched me, I tensed up because I still felt pain where the stitches had been." Excellent use of direct quotes, but consider balancing male partners' perspectives; the fathers' voices are minimal and might provide valuable dyadic insight.

In the paragraph on sociocultural and external pressures, you write: "This stigma parallels observations from diverse cultural contexts..." It would help to compare Taiwan's cultural dynamics explicitly with other Asian contexts (e.g., Japan, China) to illustrate unique cultural nuances.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

In paragraph 1 ("Recent evidence shows that sexual well-being after delivery is not merely a private issue..."), you cite Figueiredo, 2025; Zaręba et al., 2025 but then say "Despite the importance..." without connecting these citations to the identified gaps. Strengthen the argument by linking these studies' limitations to the need for the present research.

In the Study Design and Participants section, you state: "Efforts were made to include diversity in terms of age, educational background, and socioeconomic status." Consider reporting specific inclusion/exclusion criteria (e.g., exclusion of couples with pre-existing sexual dysfunction, mental health disorders) to clarify sampling rigor.

Across the four themes, the interplay between "cognitive overload" and "communication challenges" is mentioned separately but appears interconnected. Consider explicitly describing inter-theme relationships (e.g., cognitive overload reducing sexual communication) to strengthen conceptual depth.

In Discussion and Conclusion, the sentence "Importantly, these physical and self-perceptual experiences were rarely discussed with healthcare providers..." suggests actionable insights. Expand on why healthcare providers fail to address sexual issues postpartum — structural barriers, lack of training — to strengthen clinical implications.

The Discussion emphasizes alignment with prior studies but less on novel contributions. For instance, you mention "cognitive overload emerged strongly" — highlight this as a distinctive finding with potential theoretical or practical value.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.