

Exploring the Lived Experience of Families with a Cancer Patient in the Face of COVID-19: A Phenomenological Study with an Emphasis on the Role of Women

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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:

The sentence "caregiving for cancer patients during the pandemic involved a paradoxical war on two fronts" is compelling but would benefit from clarification or a supporting citation to define what is meant by a "paradoxical war" in caregiving contexts.

Consider elaborating on how "entrenched gender roles" function in Iranian society specifically. This would strengthen the cultural grounding of the study's context.

The breadth of the interview questions is commendable. However, you may consider indicating if the questions were pilot tested or validated in previous studies to improve methodological transparency.

The description of Corbin and Strauss's method is thorough, but the paper would benefit from including an example of how one raw data segment was coded into a concept and eventually into a category.

While the table is comprehensive, it lacks column labels. For example, consider explicitly labeling each column as "Category," "Subcategory," and "Concepts" for clarity.

The section following Table 1 offers rich qualitative insights, but it could be strengthened by providing the age and role (mother, wife, etc.) of the quoted participants to give more depth and context.

You discuss financial burden, but do not specify whether any participants received governmental or NGO aid. This would enrich understanding of external support structures.

The quote beginning with "After our patient caught COVID-19..." is powerful. Consider linking this directly to the literature on COVID-related stigma in caregiving (e.g., Lebni et al., 2022).

The phrase "with a specific focus on women who primarily assumed caregiving responsibilities" could be analytically stronger if the discussion included reflections on how these findings support or challenge feminist caregiving theories.

The comparison with international literature (e.g., Dikobe et al., Hyeon & Moon) is a strength. However, it could be helpful to note whether Iranian women had unique support systems not found in other countries.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

You state, "Digital transformation and the rise of telehealth were met with ambivalence." This could be expanded with participant quotes or additional references to illustrate the emotional or relational gaps perceived by caregivers.

The claim that "traditional caregiving expectations were both a source of strength and a burden" is insightful. However, consider citing Iranian sociocultural research or providing a brief example to illustrate this duality.

Consider clarifying whether the emotional toll reported by participants was persistent (chronic stress) or episodic (acute episodes during crises), as this has implications for intervention design.

You mention spirituality as a coping strategy. Consider exploring how specific religious practices (e.g., prayer times, rituals) played a role, especially in Iran's Islamic cultural context.

The mention of "emotional numbness or indifference" as a coping mechanism would benefit from discussing whether this was adaptive or maladaptive in the longer term, according to existing caregiving research.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.