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Commentary on "Exploring Secondary Traumatic Stress as a Post-Pandemic Challenge for Healthcare Workers Practicing in Saudi Arabia" [Response to Letter]

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Dear editor

We would like to express our gratitude to the scholars for their thoughtful comments on our study regarding secondary traumatic stress (STS) in healthcare professionals. Their insightful suggestions will undoubtedly inform our future research endeavors.

We deeply agree that expanding our study to include a more diverse sample of healthcare professionals from various regions and sectors would enhance the generalizability of our findings. However, due to organizational constraints, we were unable to include the private sector in this research. In the same token, it is important to note that Saudi Arabian healthcare workers employed in public hospitals are legally prohibited from working in private practice. Consequently, our participant pool was exclusively drawn from the public sector. We acknowledge the need to expand our research to encompass private healthcare providers in future studies to gain a more comprehensive understanding of the situation.

Furthermore, we appreciate the recommendation to refine our questionnaire to capture additional demographic information and factors that may influence STS. While ethnicity can be a relevant factor, it is important to note that most of the Saudi Arabian population identifies as Arab (approximately 90%). Therefore, we opted to categorize participants as Saudi or non-Saudi rather than using specific ethnic labels.

Regarding the response rate, our data collection methods encountered challenges from the Institutional Review Board (IRB), who deemed direct participant contact to be overly intrusive. We actively explored alternative survey dissemination methods to reach a broader audience, especially those facing technological limitations. However, we were required to adhere to the IRB's approved approach for contacting the target population. We also recognize the importance of achieving a more balanced gender representation in future studies.

The suggestion to implement a mixed-method approach is particularly valuable. Combining quantitative and qualitative data can provide a deeper understanding of the experiences of healthcare professionals and the factors contributing to STS.

We remain committed to conducting further research on this critical topic and will carefully consider the valuable feedback provided by the scholars. Thank you once again for your interest in our work.

Disclosure

The authors declare that they have no competing interests in this communication. The research reported in this paper was conducted in accordance with the ethical guidelines of the Institutional Review Board holding the National Registration number with NCBE-KACST, KSA: (H-02-J-002) based at Jeddah Health Affairs. The authors have no financial or other relationships that could inappropriately influence the interpretation of the data presented.

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