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Effects of a Yoga-Based Intervention on Self-Compassion, Depression and Loneliness in Obese Adolescents

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1. Round 1

1.1 Reviewer 1

Reviewer:

This statement could benefit from being supported with a recent systematic review or meta-analysis to verify the gap. The cited literature already includes works on emotional outcomes.

The research objective is clearly stated but would be stronger with a rationale for why these three particular psychological constructs were chosen.

The intervention design is well-structured but lacks detail about the specific asanas or pranayama techniques used. A supplemental table or appendix would enhance reproducibility.

This detail is appreciated. However, was lighting or ambient sound also controlled? These environmental factors can influence intervention outcomes in mindfulness-based studies.

Given that the posttest score was lower than the pretest (Table 2), please clarify whether higher or lower scores are considered better outcomes. There seems to be an inconsistency.

The use of CVR and CVI is commendable, but it's unclear how the experts were selected and whether they were blinded to the study aims.

This is a compelling point but could benefit from direct linkage to the measures used (e.g., was emotional regulation assessed or inferred from changes in depression scores?).

Consider adding limitations regarding the reliance on self-report measures, potential selection bias, and the absence of long-term follow-up beyond mentioning gender generalizability.

Author revised the manuscript and uploaded the updated document.

1.2 Reviewer 2

Reviewer:

Please justify the decision for using a quasi-experimental rather than randomized controlled design. Were there ethical, logistical, or practical constraints?

Provide more detail about how "similar socio-economic and cultural backgrounds" were assessed. Was any standardized index or tool used?

Was medication use self-reported or verified via medical records? Please clarify to enhance reliability of exclusion criteria.

Table 2 suggests the self-compassion decreased in the intervention group post-intervention (from 69.68 to 55.36). This contradicts the text and conclusion. Please clarify.

The reporting of ANCOVA is appropriate. However, please confirm that assumptions of homogeneity of regression slopes were tested and met.

This claim contradicts Table 2 unless the scoring direction has been misunderstood. Please verify and revise as needed.

This section is somewhat overgeneralized. Consider grounding claims in specific references and discussing effect sizes or practical significance of observed changes.

Author revised the manuscript and uploaded the updated document.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.