

Comparing the Effectiveness of Barlow's Unified Transdiagnostic Treatment and Acceptance and Commitment Therapy on Cognitive Emotion Regulation and Psychological Flexibility in Women Bereaved by COVID-19

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E d i t o r	R e v i e w e r s
Manijeh Daneshpour ^{id} Department of Couple and Family therapy, Alliant International University, California, United States of America mdaneshpour@alliant.edu	Reviewer 1: Zahra Yousefi ^{id} Assistant Professor, Department of Psychology, Khorasgan Branch, Islamic Azad University, Isfahan, Iran. Email: yousefi1393@khuif.ac.ir Reviewer 2: Kamdin. Parsakia ^{id} Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada. Email: kamdinarsakia@kmanresce.ca

1. Round 1

1.1. Reviewer 1

Reviewer:

The sentence "As a result, they became highly vulnerable to mood and anxiety disorders..." is too general. Consider citing specific prevalence statistics on bereavement-related psychopathology during COVID-19 to support this claim.

The summary lacks information about how fidelity to the protocol was monitored. Please state whether a treatment manual, therapist supervision, or session recordings were used to ensure protocol adherence.

There is a discrepancy between the means reported for posttest positive emotion regulation (ACT = 69.81) and follow-up (ACT = 68.43), yet the discussion suggests sustained improvement. Please statistically test and interpret these changes explicitly.

The sentence "No prior study comparing these two interventions specifically on psychological flexibility was found" requires stronger support. Was a database search conducted? Which keywords and databases were used?

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The explanation of psychological flexibility lacks theoretical depth. Expand on the six processes that constitute psychological flexibility, as defined in the ACT model, to anchor this construct conceptually.

The sentence "One such treatment developed in recent years..." oversimplifies the history of Unified Protocol. Please revise to acknowledge its earlier iterations and conceptual foundation in CBT, possibly dating back to Barlow's work in the 1990s.

You state, "no research to date has compared the effectiveness of Barlow's Unified Transdiagnostic Treatment and Acceptance and Commitment Therapy..." This is a strong claim. Please include a systematic literature review or database search to justify this assertion.

The ACT vs. UTT comparison for psychological flexibility is significant ($p = .041$), yet the effect size is not reported. Please include Cohen's d or partial eta squared for between-group differences to inform clinical relevance.

The statement "Through mindfulness practices, individuals become aware of their mental processes..." is appropriate, but it may be strengthened by citing a neuropsychological or longitudinal study demonstrating the effect of mindfulness on emotional reappraisal or distress tolerance.

The phrase "transdiagnostic interventions such as cognitive reappraisal training" should clarify that cognitive reappraisal is typically a CBT strategy and may not be a core mechanism in ACT, to avoid theoretical conflation.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.