







## Comparing the Effectiveness of Emotion-Focused Therapy (EFT) and Cognitive-Behavioral Couple Therapy (CBT) in Reducing Anxiety, Depression, and Improving Relationship Quality Among Couples with Childhood Trauma

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E d i t o r	R e v i e w e r s
Habib Hadianfar  Affiliation: Professor, Department of Psychology, Shiraz University, Iran hadianfd@shirazu.ac.ir	<b>Reviewer 1:</b> Mohammadreza Zarbakhsh Bahri  Associate Professor (Department of Psychology, Tonekabon Branch, Islamic Azad University, Tonekabon, Iran. Email: M.Zarbakhsh@Toniau.ac.ir) <b>Reviewer 2:</b> Farideh Dokanehi Fard  Associate Professor, Counseling Department, Roudehen Branch, Islamic Azad University, Roudehen, Iran. Email: f.dokaneifard@riau.ac.ir

### 1. Round 1

#### 1.1. Reviewer 1

Reviewer:

The description “8–12 weekly 60–90-minute sessions” is too broad. Please clarify whether the variability (8–12) was determined by clinical need, therapist decision, or participant availability.

The inclusion criterion “elevated but non-clinical levels of anxiety, depression, or relationship distress” lacks operational definition. Please specify the exact cutoff scores or clinical thresholds used.

In the sentence “The BAI measures anxiety as a unidimensional construct,” please reconcile this with the following sentence which mentions two-factor solutions (somatic and cognitive). The theoretical stance should be clarified.

Similar to EFT, these trauma-sensitive elements need concrete examples (e.g., cognitive trauma scripts, exposure elements, trigger mapping).

The sustained effects at 3-month follow-up are noted, but no statistical test for between-group maintenance differences is described. Please include appropriate follow-up comparisons.

Response: Revised and uploaded the manuscript.

### 1.2. Reviewer 2

Reviewer:

The manuscript should include confidence intervals for effect sizes to provide precision estimates.

While p-values are provided, mean differences are absent. Including the magnitude of change (pretest–posttest, etc.) would allow readers to evaluate practical significance.

Please integrate more direct linkage between your numerical results and the cited literature (e.g., compare effect sizes to those reported in previous trials).

The authors should expand on why EFT might outperform CBT for trauma-related cases, possibly referencing attachment dysregulation mechanisms more explicitly.

The discussion would benefit from acknowledging any CBT-specific limitations observed in the sample (e.g., smaller relational gains), not only strengths.

Response: Revised and uploaded the manuscript.

## 2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.