Resilience as a Mediator between Bullying Victimization and Mental Health in High School Students

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1. Round 1

1.1. Reviewer 1

Reviewer:

In "Evidence suggests that being targeted by peers is associated with a wide range of adverse outcomes, such as depression, anxiety, suicidal ideation, and reduced academic performance", it would be useful to also mention physical health impacts (e.g., psychosomatic symptoms) that are widely documented in bullying literature.

The definition, "Broadly defined, resilience refers to the capacity to withstand or recover from stress and adversity while maintaining or regaining psychological well-being", should also reference whether resilience is conceptualized here as a trait, process, or outcome, as this affects interpretation of mediation.

The statement "Interestingly, our results are also consistent with longitudinal and cross-sectional research" could be misleading because the present study is not longitudinal. The distinction between temporal designs should be highlighted.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

The statement "Several global studies confirm that both traditional and cyberbullying share similar negative consequences" would benefit from citing differences as well (e.g., anonymity and pervasiveness in cyberbullying), as this could contextualize resilience differently across bullying types.

In "cross-national evidence shows that bullying prevalence and its links to poor mental health are consistent across diverse cultures", the introduction would be stronger if specific prevalence percentages were provided for Taiwan or East Asia, aligning better with the study's context.

In "Beyond individual resilience, contextual factors such as school environment, family functioning, and social support networks significantly influence the relationship", the argument is convincing but could be expanded by clarifying how these were not included in the current study's model, emphasizing the study's scope and limitations.

The claim "bullying predicted lower resilience, which in turn predicted worse mental health outcomes" may give the impression of causality, whereas the design was cross-sectional. A clearer phrasing would be "bullying was associated with lower resilience…" to avoid overstating causality.

The text, "Our results, while focusing on individual resilience, are therefore consistent with evidence that resilience develops in interaction with supportive school and family contexts", is insightful but could acknowledge that these contextual variables were not measured, highlighting this as a limitation.

Authors uploaded the revised manuscript.

2. Revised

Editor's decision after revisions: Accepted.
Editor in Chief's decision: Accepted.