



Prediction of Suicidal Ideation Based on Resilience, Self-Compassion, and Attachment Styles in Adolescent Girls

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E d i t o r	R e v i e w e r s
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1. Round 1

1.1. Reviewer 1

Reviewer:

In the first paragraph of the Introduction (“Suicide among adolescents has become a major global mental health concern...”), the problem statement is broad and global. The paragraph would be strengthened by more clearly articulating why adolescent girls in the local context under study represent a particularly high-risk group and how this motivates the need for the present investigation.

The final sentence of the Introduction (“Therefore, the aim of this study is to predict suicidal ideation...”) presents the aim abruptly. A stronger derivation would include a brief synthesis showing how prior studies indicate gaps in understanding these predictors among adolescent girls.

In the “Study Design and Participants” section, the manuscript states: “approximately 550 cases” were identified through screening, but the exact recruitment method and participation rate are not described. Clarifying how students were contacted, how many declined, and whether any protections against selection bias were used would improve methodological transparency.

In the description of the Revised Adult Attachment Scale, avoidant attachment includes “Items 2, 5, 14, 6, 7, 18.” However, item numbering overlaps with secure attachment items listed earlier. The authors should verify correct item mapping to subscales to avoid confusion in replication.

The manuscript reports that predictors explain 21% of the variance in suicidal ideation, but does not interpret whether this constitutes a small, moderate, or meaningful effect size. Providing context would help readers understand the importance of the model.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

In the paragraph beginning with “Another psychological factor increasingly recognized for its relevance...” the discussion becomes overly expansive, covering multiple populations (prisoners, adults, emerging adults). The introduction would benefit from tighter alignment of the literature to adolescent female populations specifically.

In the paragraph starting “Suicide research also highlights the importance of evaluating individual, relational, and contextual factors simultaneously,” several constructs (digital detection tools, randomized trials, comparative clinical studies) are mentioned without a clear thread connecting them. Consider reorganizing this section to present a coherent theoretical rationale for selecting resilience, self-compassion, and attachment styles as predictors.

The reported Cronbach’s alpha values for the current sample are acceptable, but the results section does not interpret whether alpha values such as .75 and .78 are sufficiently reliable for predicting high-risk clinical outcomes like suicidal ideation. Discussion of this issue would strengthen the rigor.

Although several scales have been validated in local populations, the manuscript does not describe whether additional cultural or developmental adaptations were implemented for adolescents. Explicitly addressing this gap improves measurement validity.

The regression analysis section states that VIF values up to 6.64 are acceptable. Many methodologists consider VIF values above 5 to be potentially problematic. The authors should justify why a higher threshold was considered acceptable in this study.

The sentence “none of the skewness or kurtosis values exceed ± 2 ; therefore, the distribution...was normal” should be revised. For psychological measures, normality is often assessed using more stringent criteria or complementary tests. The authors might consider adding tests such as Shapiro–Wilk or visual inspection.

Authors uploaded the revised manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.