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Structural Relationships Between Perceived Parenting Styles and Propensity for Addiction Among Upper Secondary School Students: The Mediating Roles of Mental Toughness and Self-Efficacy

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1. Round 1

1.1. Reviewer 1

Reviewer:

The paragraph stating that “Parental involvement is another central dimension” should distinguish parental involvement from parental monitoring with greater conceptual precision. The manuscript uses findings on monitoring to support the involvement construct, but monitoring includes parental knowledge, rule-setting, solicitation, and adolescent disclosure, whereas involvement may refer more broadly to emotional and practical participation. Because the administered questionnaire measures involvement rather than monitoring, the interpretation should not treat these constructs as interchangeable. The authors should define each concept and explain the extent to which evidence concerning monitoring is applicable to the measured involvement dimension.

In the paragraph beginning with “Mental toughness may be one such resource,” the authors should justify applying the mental-toughness construct to a general school population. Much of the foundational literature on mental toughness was developed in sport, military, and performance contexts, while the present participants were upper secondary school students from the humanities track. The manuscript should clarify whether mental toughness is viewed as a stable personality trait, a

multidimensional psychological resource, or a developable coping capacity, and it should explain why the MTQ-48 framework is theoretically appropriate for adolescent addiction research.

The paragraph stating that "Self-efficacy is another plausible mediator between parenting and addiction propensity" should clarify the level of specificity of the measured construct. The Sherer scale assesses generalized self-efficacy rather than substance-refusal self-efficacy, coping self-efficacy, or abstinence self-efficacy. The authors should acknowledge this distinction and explain why a general belief in personal competence is expected to predict addiction propensity. The Discussion should also avoid interpreting the findings as evidence of adolescents' confidence in refusing substances because that domain-specific capability was not directly measured.

The final paragraph of the Introduction, ending with "Accordingly, the aim of the present study was to examine the structural relationships," should be expanded to present explicit, directionally stated hypotheses. The manuscript should specify that favorable perceived parenting dimensions are expected to negatively predict addiction propensity, positively predict mental toughness and self-efficacy, and exert negative indirect effects through both mediators. Separate hypotheses should also be stated for the effects of mental toughness and self-efficacy on addiction propensity. This would improve alignment among the Introduction, structural model, Results, and Discussion.

In the Methods paragraph stating that "The present study was fundamental in purpose and employed a descriptive-correlational research design," the designation "fundamental" requires reconsideration. The study examines a practical educational and public-health problem and identifies potentially modifiable preventive variables, which may be more consistent with applied correlational research. At minimum, the authors should define what is meant by "fundamental in purpose" and explain how this classification corresponds to internationally recognized methodological terminology.

The paragraph describing the Sherer General Self-Efficacy Scale states that it contains 17 items and yields a total score, but the structural model treats initiative, effort, and persistence as three separate indicators. The authors should explain whether these are validated subscales or researcher-created parcels. If parceling was used, the item allocation procedure, conceptual basis, internal consistency of each parcel, and evidence of item-level unidimensionality should be reported. Parceling should not be used solely to improve model fit, because it can conceal localized measurement problems and inflate apparent construct reliability.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

The sampling paragraph reporting that "three public schools and one non-public school were randomly selected" does not provide sufficient detail to establish that the procedure was genuinely multistage cluster random sampling. The authors should report the number of eligible schools in Educational Districts 1 and 2, the mechanism used to select districts and schools, whether selection probabilities were proportional to enrollment size, and how boys' and girls' schools were represented. Because Iranian upper secondary schools are commonly sex-segregated, it is particularly important to clarify whether separate male and female schools were selected and how the reported sex distribution emerged from only four schools.

The sample-size paragraph stating that "a coefficient of 20 participants per observed variable was adopted" contains an apparent inconsistency. The text identifies 13 observed variables, yet the reported measurement model includes six parenting indicators, six mental-toughness indicators, three self-efficacy indicators, and two addiction-propensity indicators, for a total of 17 indicators. The authors should correct this discrepancy and recalculate the sample-size justification. A more rigorous approach based on anticipated effect sizes, model degrees of freedom, statistical power, or Monte Carlo simulation would be preferable to a simple participant-to-indicator rule.

The Methods paragraph stating that "All students enrolled in the selected classes were invited to participate" should be supplemented with explicit eligibility criteria. The manuscript does not report the permitted age range, minimum duration of school enrollment, literacy requirements, consent requirements, or whether students with psychiatric diagnoses, current substance-use treatment, cognitive impairment, or acute psychological distress were excluded. The authors should also describe

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the criteria used to remove questionnaires, including the threshold for missing responses and the operational definition of an invariant response pattern.

The ethical-procedures paragraph containing the sentence “Written informed consent was obtained before questionnaire administration” requires clarification because most participants were minors. The manuscript should specify whether written consent was obtained from parents or legal guardians and whether students provided assent. It should also indicate how confidentiality was maintained during classroom administration, whether teachers or administrators were present, whether participation had any academic consequences, and whether a referral protocol was available for students whose responses indicated substantial addiction risk or psychological distress.

The paragraph describing the Perceived Parenting Questionnaire should clearly identify the exact form used in this study. The manuscript states that the original instrument contains 42 items but later notes that the Persian analysis retained only 40 items. The authors should report whether they administered the 42-item original version or the 40-item Persian adaptation, identify any excluded items, describe reverse-scoring procedures, and provide the theoretical score range for each dimension. Sample-specific reliability coefficients should also be reported rather than relying exclusively on earlier validation studies.

The paragraph describing the Iranian Addiction Potential Scale is inconsistent with the Results and requires major correction. The Methods describe a 36-item instrument with three dimensions—tendency toward substance use, self-control, and risk-taking—and a total score range of 36–180. However, the Findings present active propensity and passive propensity, with scores ranging from 0 to 108. The authors must verify which instrument and scoring system were actually used, provide the original psychometric citation, describe all items and subscales accurately, and revise the Methods, descriptive table, correlation analysis, measurement model, and figure accordingly.

Authors uploaded the revised manuscript.

2. Revised

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

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