





Comparing the Effectiveness of Sexual-Education Training and Sensory–Proprioceptive–Tactile Exercises on Anxiety in High-Functioning Autistic Children

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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, the manuscript states: “Global mental-health surveys indicate that anxiety symptoms commonly emerge early in life...”. While this is accurate, the paragraph lacks a clear linkage to ASD specifically. Please revise this paragraph so that the transition from general childhood anxiety to ASD-related anxiety is more explicit and supported early in the section.

In the paragraph beginning “Anxiety disorders appear with even higher prevalence among children with neurodevelopmental conditions...”, the sentence citing Majidpour et al. (2025) does not explain how deficits in cognitive flexibility or inhibition directly affect anxiety expression. Provide a more explicit mechanism—for example, how reduced inhibition leads to heightened physiological arousal.

In the paragraph starting “Another critical contributor to anxiety in this population is sensory-processing dysfunction...”, the manuscript asserts that sensory processing difficulties “trigger elevated anxiety and maladaptive behaviors.” Please

elaborate on whether anxiety is conceptualized as a primary response to sensory overload or as a secondary behavioral consequence, and cite which theoretical model informs this interpretation.

The Introduction repeatedly uses the term “high-functioning autistic children.” Because functioning labels are discouraged in contemporary clinical literature, consider clarifying whether this refers to cognitive ability, language level, or adaptive behavior—and provide justification for continued use of this terminology.

In Table 2 and accompanying text, large η^2 values are reported (e.g., .69, .56). However, the manuscript does not interpret these magnitudes. Add a brief interpretation referencing standard benchmarks (e.g., Cohen’s guidelines) to contextualize their meaning.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

In the paragraph beginning “Among the many contextual factors...”, the manuscript discusses cultural taboos in Iran but does not acknowledge potential variability in Iranian families or socio-religious contexts. Strengthen this section by briefly stating how cultural norms shape parents’ receptivity to sexual-education programs.

The paragraph starting with “The development of culturally and developmentally appropriate sexual-education programs...” presents useful descriptive information but lacks a theoretical explanation for how sexual education physiologically or cognitively reduces anxiety. Integrate developmental or cognitive-behavioral theory to clarify this mechanism.

In the paragraph: “Given the intertwined nature of emotional, cognitive, social, and sensory factors in ASD...”, the manuscript implies synergy between parent-training and child-training sexual education. However, no prior evidence or rationale is cited for implementing both simultaneously. Please add justification or clarify whether parent training was evaluated separately.

The statement “These approaches also improve children’s ability to modulate sensory input...” would benefit from explaining how modulation leads to increased autonomy or reduced avoidance behaviors. Expand with brief theoretical grounding (e.g., polyvagal theory or neural regulation frameworks).

Under Methods and Materials, the manuscript states: “The inclusion criteria... consisted of a diagnosis of anxiety, the presence of sexual curiosity as reported by parents...”. Sexual curiosity is developmentally normative. Please clarify why this was required as a criterion and how it was operationalized.

The sexual-education sessions include emotional-skills training (e.g., assertiveness, emotional identification). These elements may overlap with anxiety-reduction techniques. Discuss whether this overlap may confound comparisons with the sensory intervention.

In the Findings section, repeated-measures ANOVA is used, but no information is given about assumptions (normality, sphericity, outliers). Please state whether these assumptions were tested and met.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor’s decision: Accepted.

Editor in Chief’s decision: Accepted.