

Comparison of Social Education Training and Brain-Based Parenting on Adaptability and Social Loneliness in Mothers of Children with Attention-Deficit/Hyperactivity Disorder

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the introduction, the sentence “Parenting adaptability refers to the parent’s capacity to respond flexibly to the child’s developmental needs...” is useful, but the manuscript should provide a more formal conceptual definition of parenting adaptability based on the measurement model used in the study. Since the Parenting Adaptability Questionnaire includes concern, control, curiosity, confidence, and commitment, the introduction should briefly define these dimensions and explain how they theoretically apply to mothers of children with ADHD.

In the introduction, the paragraph discussing social loneliness states that mothers “may gradually withdraw from family gatherings, school-related interactions, or community activities.” This claim is theoretically plausible, but the manuscript should strengthen it by distinguishing social loneliness from emotional loneliness and by explaining why social loneliness,

rather than general loneliness or parenting stress, was selected as the outcome variable. This distinction is especially important because the loneliness instrument includes romantic, family, and social components.

In the introduction, all references from the provided list are cited, but several citations are only loosely connected to the specific argument being made. For example, references on play therapy, child-centered mindfulness, visual perception exercises, and neurofeedback are cited as broad support for psychosocial intervention, but the manuscript should more carefully explain how these child-focused interventions justify mother-focused social education and brain-based parenting. The literature review would be stronger if the authors explicitly categorized prior studies into child-focused, parent-focused, neurocognitive, social-emotional, and mindfulness-based intervention evidence.

In the intervention protocol paragraph for social education training, the content is presented clearly but remains largely descriptive. The authors should explain the theoretical basis of the social education program and specify whether the protocol was adapted from an established intervention model, developed by the researchers, or validated by experts. Without this information, it is difficult to judge the intervention's scientific foundation and reproducibility.

In the intervention protocol paragraph for brain-based parenting, the sentence "This protocol was based on the program introduced by Motavalli et al. (2025) and derived from Karimi et al. (2024)" requires correction and documentation. The reference list provided in the manuscript introduction does not appear to include these sources, and the methods section should either add them to the reference list or remove unsupported attribution. The authors should also provide enough information about the original protocol to allow replication.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

In the final paragraph of the introduction, the sentence "The aim of the present study was to compare the effectiveness of social education training and brain-based parenting..." is appropriate, but the study would benefit from explicit hypotheses before the aim statement. For example, the authors should state whether they expected both interventions to outperform the control group and whether they hypothesized any difference between social education and brain-based parenting. This would improve the logical connection between the rationale, design, and statistical comparisons.

In the methods section, the paragraph "The present study employed a quasi-experimental design with a pretest-posttest control-group structure and a 45-day follow-up phase" should be revised for consistency with other parts of the manuscript, where the follow-up is sometimes described as one month and sometimes as 45 days. The authors should select one precise follow-up interval and use it consistently throughout the abstract, methods, findings, discussion, and tables.

In the methods section, the participant description states that children "showed symptoms of attention-deficit/hyperactivity disorder," but it is not clear whether ADHD was formally diagnosed or only screened through school health records and a behavioral subscale. The authors should clarify whether participants met diagnostic criteria, had a clinical diagnosis, or were identified as having ADHD symptoms. If no clinical diagnosis was made, the title and manuscript should avoid implying confirmed ADHD diagnosis and instead refer to "children with symptoms of ADHD."

In the methods section, the inclusion criterion "obtaining an above-average score on the hyperactivity subscale of the behavioral disorders measure developed by Achenbach (1998)" requires more methodological detail. The authors should identify the exact form of the Achenbach measure used, report the cutoff score or criterion used to define "above average," specify who completed the scale, and provide evidence of reliability or validity for the version used in the present sample.

In the methods section, the paragraph describing random assignment states that participants were "randomly assigned to two experimental groups and one control group," but the randomization procedure is not described. The authors should specify whether randomization was performed through simple random allocation, block randomization, drawing lots, computer-generated numbers, or another method. This information is necessary to evaluate the internal validity of the quasi-experimental design.

In the Data Collection Tools section, the Parenting Adaptability Questionnaire is described as originally developed by Yousefi et al. and later adapted to parenting by Mirzaei et al., but the adaptation process is not sufficiently explained. The authors should report how the items were modified, whether expert review was conducted, whether content validity indices were calculated, and whether the adapted version is appropriate for mothers of children with ADHD specifically.

In the Data Collection Tools section, the statement “the questionnaire scores showed a positive correlation with parenting self-efficacy and a significant association with parenting stress” is incomplete because the direction of the correlation with parenting stress is unclear. If parenting adaptability is theoretically adaptive, one would expect a negative correlation with parenting stress. The authors should report the exact correlation coefficients, significance levels, and directions of association to avoid conceptual confusion.

In the Data Collection Tools section, the Social Loneliness Questionnaire is described as assessing “adults’ social and emotional loneliness,” but the study outcome is called “social loneliness.” The authors should clarify whether they used the total score, only the social loneliness subscale, or a composite of multiple loneliness dimensions. This is essential because the instrument includes romantic, family, and social loneliness, and using the total score while labeling it social loneliness may be psychometrically inaccurate.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor’s decision: Accepted.

Editor in Chief’s decision: Accepted.