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The Effectiveness of Psychodynamic Therapy on Frustration Tolerance and Psychological Hardiness in Iranian Immigrants

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1. Round 1

1.1. Reviewer 1

Reviewer:

The discussion of frustration tolerance on page 2 states that "Frustration is not limited to humans but is also observed in animals." While this is scientifically accurate, its relevance to psychodynamic therapy in Iranian immigrants is unclear. Consider either expanding on how this finding informs the study or removing this detail.

The discussion states that "immigrants who frequently face identity and cultural challenges may struggle with emotional regulation and maintaining self-esteem." Given the focus on Iranian immigrants, discuss specific cultural challenges they face compared to other immigrant groups.

The discussion section emphasizes the effectiveness of ISTDP but does not compare it to other therapeutic approaches, such as cognitive-behavioral therapy (CBT) or emotion-focused therapy (EFT). Including a brief comparison would provide greater context.

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The conclusion states, "It is recommended that this therapeutic approach be utilized to improve the mental health of immigrant individuals." However, no practical recommendations for clinicians or policymakers are provided. Consider adding guidance on how this therapy can be implemented in real-world settings.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The study uses the Frustration Scale by Gilbert and Allen and the Psychological Hardiness Scale by Kobasa. However, no discussion of their validation in the Iranian immigrant population is provided. Address whether these scales have been validated in a similar demographic or whether any adaptation was required.

In Table 2, the reported effect sizes for frustration (71%) and psychological hardiness (77%) are very high. These should be contextualized with previous studies to determine if they are unusually large, possibly indicating overestimation.

The therapy followed Davanloo's ISTDP model, but no fidelity checks (e.g., therapist adherence rating) are mentioned. Were sessions recorded and rated for adherence, or were therapists trained to maintain consistency?

The limitations mention "the lack of control over variables such as personality type, personality organization, and motivation for seeking therapy." Expand on how these factors could have influenced the results and whether future studies should include additional screening measures.

The references include older sources such as "Abbass et al. (2009)" and "Leichsenring & Rabung (2008)." Given that the study was published in 2025, incorporate more recent literature to reflect the latest advancements in ISTDP research.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.

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