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Prediction of Identity Instability Based on the Quality of Object Relations: The Mediating Roles of Mental Pain and Emotion Regulation Difficulties in Adolescents with Self-Injurious Behavior

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the paragraph introducing object relations, the authors state that "when these representations are fragmented, insecure, or poorly integrated, continuity of the self may become vulnerable." This theoretical statement is appropriate, but the connection between the broad theory and the specific dimensions measured in the study needs to be developed more clearly. The manuscript should explain how alienation, insecure attachment, egocentricity, and social incompetence are theoretically expected to contribute to identity instability. It would also be useful to justify why a total object-relations disturbance score was used instead of examining the separate dimensions, because different dimensions may relate to identity instability through distinct psychological mechanisms.

In the paragraph introducing mental pain and emotion-regulation difficulties, the manuscript presents them as two parallel mediators, but the rationale for modeling them in parallel rather than sequentially is not sufficiently developed. Mental pain includes experiences such as emotional flooding, confusion, emptiness, helplessness, and loss of control, while emotion-regulation difficulties include problems in emotional clarity, impulse control, and access to adaptive regulatory strategies. These

constructs are conceptually related, and their strong empirical correlation further suggests substantial overlap. The authors should explain why the proposed model assumes two independent indirect pathways rather than a sequential pathway in which mental pain increases emotion-regulation difficulty or vice versa.

In the description of the object-relations measure, the manuscript uses both "object relations quality" and "object-relational disturbance" to refer to the same variable. This creates a potentially serious interpretive problem because higher scores represent poorer functioning. The terminology should be standardized throughout the title, text, tables, and figure. If higher scores indicate greater disturbance, the variable should consistently be labeled "object-relational disturbance." Alternatively, if the authors prefer the term "quality," the scores should be reverse-coded so that higher values clearly indicate better object relations.

In the Statistical Analysis section, the authors state that assumptions such as normality, linearity, multicollinearity, and independence of residuals were examined, but no actual diagnostic results are reported. The manuscript should present the criteria and statistics used to evaluate these assumptions. At minimum, the authors should report skewness and kurtosis, multicollinearity indices such as VIF and tolerance, residual diagnostics, and procedures for identifying outliers. Because mental pain and emotion-regulation difficulties were strongly correlated, evidence that multicollinearity did not compromise the structural estimates is particularly important.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

In the final paragraph of the Introduction, the sentence "fewer studies have tested how relational disturbance may be transmitted to identity instability through multiple internal affective mechanisms" identifies the research gap, but the novelty of the present study should be stated more precisely. The authors should distinguish what has already been established regarding object relations, identity instability, mental pain, emotion regulation, and self-injury and then specify exactly what has not previously been tested. The manuscript would also benefit from explicit, directional hypotheses for each direct and indirect path so that the statistical model can be directly linked to the theoretical rationale.

In the Methods section, the manuscript states that participants were students "who had a history of self-injurious behavior," but the operational criterion for this history is not reported. The authors should specify the exact screening threshold used to classify participants as engaging in self-injury. For example, the manuscript should indicate whether one lifetime episode was sufficient, whether a minimum number of episodes was required, whether the behavior had to occur within a specific recent time period, and whether frequency or recency criteria were applied. This information is necessary for reproducibility and for understanding the clinical severity of the sample.

In the sampling paragraph, the manuscript reports that schools were stratified by sex, eight schools were selected, and classes were randomly sampled, but the sampling process remains incomplete. The authors should report the number of schools in the initial sampling frame, the number of classes selected, the number of students screened, the number meeting the self-injury criterion, the number who declined participation, and the number excluded because of incomplete data. A participant flow description would make the sampling process much more transparent. The authors should also consider whether clustering of students within schools or classes could have affected the statistical independence of observations.

In the paragraph describing the data-collection procedure, the manuscript states that participants were informed about confidentiality and voluntary participation and that informed consent was obtained. Because the study involved adolescents with self-injurious behavior, the ethical procedures should be described in much greater detail. The authors should specify whether parental or guardian consent and adolescent assent were obtained, identify the ethics committee and approval code, and describe the procedure used when participants disclosed severe or potentially dangerous self-harm. The manuscript should also indicate whether a referral protocol or immediate psychological support pathway was available for high-risk participants.

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In the section describing the Inventory of Statements About Self-Injury, the manuscript states that the instrument was used to identify adolescents with self-injurious behavior. However, the exact scoring or classification procedure is not explained. The authors should report how responses were converted into eligibility decisions and whether the instrument was used only for screening or also for characterization of the severity and functions of self-injury. The linguistic and cultural adaptation of the instrument should also be described, including whether a validated Persian version was used and what psychometric evidence supports its use in Iranian adolescents.

In the paragraph describing the Identity Instability Scale, the manuscript reports that the instrument includes two dimensions, "self-disconnection and other-dependence," but the psychometric justification for using the total score is not fully presented. Because identity instability is the primary dependent variable, the authors should provide more information about factor structure, scoring range, translation and cultural adaptation, and evidence of reliability and validity in the current population. If possible, confirmatory factor analysis should be reported to demonstrate that the proposed two-dimensional structure is acceptable in this sample before the total score is used in the structural model.

Response: Revised and uploaded the manuscript.

2. Revised

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

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