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# Effectiveness of Acceptance and Commitment Therapy on Self-Care Behaviors and Internalized Shame in Women with Narcissistic Personality Disorder

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#### 1. Round 1

#### 1.1. Reviewer 1

Reviewer:

This claim is vague. Specify which domains or populations ACT was previously found effective in (e.g., shame, self-care, NPD traits).

This is a strong causal implication. Please provide empirical evidence or rephrase to reflect a correlational relationship unless causality is proven.

Consider presenting the eight-session ACT protocol in a table format. This would improve clarity and readability for clinicians seeking to replicate the intervention.



Given the small sample size, the Shapiro-Wilk test might offer greater sensitivity to deviations from normality. Consider reporting both.

Authors revised the manuscript and uploaded the document.

#### 1.2. Reviewer 2

#### Reviewer:

Consider referencing specific mechanisms from ACT theory (e.g., "cognitive defusion" or "self-as-context") to reinforce how ACT facilitates this outcome.

Provide a more nuanced distinction between Freud's classical notion of narcissism and the modern clinical definition of NPD per DSM-5.

This statement would be strengthened by linking it to the ACT process of "experiential avoidance" reduction.

Justify why this increase was deemed sufficient to improve generalizability despite the small total sample (N=30).

The sample does not include psychosomatic patients. Update the caption to reflect the actual population (e.g., "Descriptive Statistics for Women with NPD").

Clarify whether this refers to partial eta squared ( $\eta^2$ ) or another metric. Also, explain why this differs from the effect size listed in the table (.27 for group effect).

Consider expanding on how ACT mechanisms counteract the narcissistic defenses such as denial or projection, which are common in NPD.

Authors revised the manuscript and uploaded the document.

### 2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.

