




Effectiveness of Existential Group Therapy on Event Impact and Self-Monitoring in Parents Experiencing Anticipatory Disabling Grief Related to Their Child

Efat. Ataie¹, Mehryar. Anasseri^{1*}

¹ Department of Psychology, Ash.C., Islamic Azad University, Ashtian, Iran

* Corresponding author email address: dr.anasseri1969@iau.ac.ir

E d i t o r	R e v i e w e r s
Monika Szczygieł  Department of Psychology, Jagiellonian University, Krakow, Poland monika.szczygieł@uj.edu.pl	Reviewer 1: Sara Nejatifar  Department of Psychology and Education of People with Special Needs, Faculty of Educational Sciences and Psychology, University of Isfahan, Isfahan, Iran. Email: s.nejatifar@edu.ui.ac.ir Reviewer 2: Kamdin. Parsakia  Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada. Email: kamdinarsakia@kmanresce.ca

1. Round 1

1.1. Reviewer 1

Reviewer:

The first paragraph begins with “The loss of a family member or friend is a painful experience for everyone.” (Introduction, p.2). This is overly general and could be framed more academically by referencing empirical studies on grief rather than a universal statement.

The paragraph discussing duration of mourning (Introduction, p.3) claims that mourning varies “from four weeks to one year depending on cultural and religious background.” This is an important point, but sources beyond deMontigny (2017) and Salloom (2017) should be integrated, since these mostly focus on Western contexts.

The last paragraph of the introduction (Introduction, p.4) states the aim: “to investigate the effect of existential group therapy on the continuum of the need for closure, the impact of the event, and self-monitoring in parents experiencing anticipatory disabling grief.” However, “need for closure” is not adequately introduced in the literature review before this point. Please explain the construct and why it is clinically relevant.

The conclusion states: “These results confirm the effectiveness of existential group therapy in reducing trauma-related distress and enhancing self-regulatory capacity in this population.” (Discussion, p.13). Given the small sample (N=16), this should be toned down, e.g., “preliminary evidence supports...”

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The introduction describes stages of grief (shock → denial → anger → depression → acceptance) (Introduction, p.2). This closely follows Kübler-Ross’ model but is not directly cited. A proper scholarly citation is necessary to avoid the impression of oversimplification.

The section on depression (Introduction, p.3) distinguishes between “grief-related depression” and “clinical depression.” The discussion would benefit from citing DSM-5-TR criteria for Persistent Complex Bereavement Disorder or Major Depressive Disorder, to strengthen the psychiatric basis.

The description “to maintain equivalency between the experimental and control groups, a number of participants equal to the dropout... were randomly removed from the control group as well” (Methods, p.5) raises concerns about internal validity. Please justify this unusual approach and explain its statistical rationale.

In Table 2 (Results, p.10), ANCOVA results include eta-squared, but effect sizes are only briefly interpreted in the discussion. Please also provide confidence intervals for effect sizes in the results section, to strengthen statistical transparency.

The discussion begins with: “A statistically significant difference was observed in the scales of Need for Closure, Impact of Event, and Self-Monitoring...” (Discussion, p.12). However, “Need for Closure” was not presented in the results section or tables. Either report these findings or remove the claim.

Response: Revised and uploaded the manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.