




Development of a Family Therapy Package Based on the Integration of Structural–Systemic and Attachment-Based Therapy

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E d i t o r	R e v i e w e r s
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1. Round 1

1.1. Reviewer 1

Reviewer:

The paragraph beginning with “Systemic family therapy is grounded in the assumption...” provides a solid overview, yet it would be strengthened by explicitly distinguishing structural–systemic therapy from other systemic variants (e.g., Bowenian or Milan approaches) to clarify why Minuchin’s model is uniquely suited for integration.

The sentence “the therapist’s active and directive stance... may inadvertently minimize client agency” raises an important critique. Please consider citing concrete empirical or clinical examples (even briefly) to support this claim, as it currently reads as a generalized theoretical concern.

The tables listing attachment-based and structural sources include duplicate references (e.g., Diamond et al., 2016 appears twice; Minuchin, 2018 is repeated). This redundancy should be corrected, and the final corpus of analyzed texts should be clearly enumerated.

The description of the “structured text review guide” would benefit from including at least one example of an orienting question, allowing readers to better understand how abstraction and coding decisions were guided.

While utility, contextual completeness, and triangulation are discussed, the manuscript does not clearly address dependability or auditability. Please clarify whether an audit trail or documentation of analytic decisions was maintained.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

The paragraph starting with “Attachment theory offers such a framework...” is conceptually strong; however, the manuscript would benefit from clarifying whether the attachment model adopted is closer to ABFT, EFT, or a hybrid attachment framework, as different attachment-based therapies emphasize distinct mechanisms.

In the sentence “excessive focus on past attachment injuries may foster a sense of determinism,” the critique is important but somewhat abstract. The authors are encouraged to operationalize ‘determinism’ more precisely, possibly in terms of reduced agency, stagnation in present-focused change, or therapist over-interpretation.

The paragraph beginning “In response to these theoretical and practical challenges...” discusses integrative therapy broadly. To enhance rigor, the authors should differentiate integration from eclecticism, explicitly stating the criteria used to ensure theoretical coherence in their integration.

While the aim is clearly stated, it would be beneficial to explicitly specify the unit of analysis (e.g., couples vs. families) and the intended level of application (educational, clinical, or both) to avoid ambiguity later in the manuscript.

The justification for using Hsieh and Shannon’s conventional content analysis is appropriate; however, the claim that “all codes and categories were directly derived from the texts” requires clarification regarding how researcher reflexivity was managed to prevent theoretical confirmation bias.

The statement “data saturation occurred after five sources... but text selection was extended to ten sources” raises methodological questions. Please clarify the rationale for extending beyond saturation and how the additional texts contributed analytically rather than redundantly.

Response: Revised and uploaded the manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.