

Comparison of the Effectiveness of Cognitive-Behavioral Therapy and Reality Therapy on Reducing Anxiety in Mothers of Children with Autism


Akram. Changizi¹, Akbar. Mohammadi^{2*}

¹ M.A., Department of Psychology, Garmsar Branch, Islamic Azad University, Garmsar, Iran



² Assistant Professor, Department of Psychology, Garmsar Branch, Islamic Azad University, Garmsar, Iran

* Corresponding author email address: psychic2006@gmail.com

Editor

José Aparecido Da Silva
Full Professor, Department of
Psychology, University of Sao
Paulo, Ribeirao Preto, Sao Paulo,
Brazil
jadsilva@ffclrp.usp.br

Reviewers

Reviewer 1: Roodabeh Hooshmandi
Department of Psychology and Counseling, KMAN Research Institute, Richmond
Hill, Ontario, Canada. Email: roodhooshmandi@kmanresce.ca
Reviewer 2: Zahra Asl Soleimani
Department of Clinical Psychology, University of Rehabilitation Sciences and Social
Health, Tehran, Iran. Email: z.soleimani@uswr.ac.ir

1. Round 1

1.1. Reviewer 1

Reviewer:

The sentence, “Autism Spectrum Disorder (ASD) is a neurodevelopmental disorder characterized by deficits in communication and social interaction,” could benefit from additional global statistics on ASD prevalence to provide a more comprehensive context (Introduction, paragraph 1).

You mention, “The control group received no training,” but it would be helpful to specify if any compensatory activities were provided to maintain participant engagement (Methods, Study Design and Participants).

While the ethical considerations section is thorough, including details about how confidentiality was ensured during data analysis would be useful for reinforcing the integrity of the research (Methods, Ethical Considerations).

The statement, “The results of the Kolmogorov-Smirnov test showed that the obtained z values for the research variables were not significant,” should specify the actual z values and p-values to support the statistical claims more transparently (Findings and Results, Normality Test).

In Table 2, please ensure that all significant results are discussed in the text. Additionally, clarify how effect sizes were interpreted to guide the reader on the practical implications of the findings (Findings and Results, Table 2).

The discussion mentions that “Reality Therapy helps individuals identify and pursue their needs in a realistic and practical manner,” but elaborating on how this theory specifically addresses the unique anxiety experienced by mothers of children with autism would deepen the analysis (Discussion, paragraph 3).

Authors revised and uploaded the document.

1.2. Reviewer 2

Reviewer:

When discussing "neurodevelopmental disorder," it would be helpful to explain briefly how neurodevelopmental factors specifically relate to the challenges faced by mothers (Introduction, paragraph 1).

In the sentence, “The sample consisted of 45 individuals selected through convenience sampling,” please elaborate on why convenience sampling was chosen over other methods and its potential impact on the study’s generalizability (Methods, paragraph 2).

The description of the Beck Anxiety Inventory is comprehensive, but explaining why this particular tool was chosen over others could strengthen the rationale (Measures, Anxiety).

The sentence, “The internal consistency of this scale is reported at 0.92,” could be expanded to discuss how this reliability compares to other tools measuring anxiety in similar populations (Measures, Anxiety).

The explanation of Reality Therapy includes practical details, but a clearer rationale for selecting Reality Therapy over other therapeutic approaches would be valuable (Intervention, Reality Therapy, Session 1).

The structured outline of both therapies is useful. However, consider providing a more detailed explanation of how session content was adapted to the unique needs of mothers of children with autism (Intervention, CBT and Reality Therapy).

The article would benefit from specifying the exact duration and frequency of each therapy session, as these are critical factors affecting therapy outcomes (Intervention, Reality Therapy).

The assertion that “Reality Therapy had a greater impact on improving anxiety” should include a theoretical explanation for why this might be the case, perhaps referencing the specific mechanisms of each therapy (Discussion, paragraph 4).

The statement, “Reality Therapy can be a more effective approach in reducing anxiety in mothers,” could be expanded to suggest specific settings or populations where this intervention would be most beneficial (Conclusion, paragraph 2).

Your suggestion to conduct longitudinal studies is strong, but consider specifying how future studies could address cultural differences or include fathers of children with autism (Limitations & Suggestions, paragraph 3).

Authors revised and uploaded the document.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.