

Article history: Received 03 December 2023 Revised 11 January 2024 Accepted 17 January 2024 Published online 11 February 2024

Journal of Adolescent and Youth Psychological Studies

Open peer-review report



E-ISSN: 2981-2526

Comparing the Effectiveness of Acceptance and Commitment Therapy (ACT) and Dialectical Behavior Therapy Skills Training (DBT-ST) on Self-Care and Psychological Well-being in Patients with Type 2 Diabetes

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1. Round 1

1.1. Reviewer 1

Reviewer:

The study clearly addresses an important clinical question. However, the paper could benefit from a more detailed explanation of the theoretical rationale behind choosing ACT and DBT-ST for comparison. This would help in grounding the research objectives within the broader context of psychological interventions for diabetes management.

The methodology section is generally well-described but lacks detail on the randomization process and how dropout participants were handled in the analysis. Clarifying these aspects would enhance the study's reproducibility and the validity of its findings.

The presentation of findings is clear but could be improved by incorporating more sophisticated statistical analyses to explore potential mediators or moderators of therapy effects (e.g., the duration of diabetes, baseline psychological distress levels). This could provide deeper insights into how and for whom these interventions work best.

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The discussion offers a good synthesis of the findings in the context of existing literature but could benefit from a more critical examination of the limitations of ACT and DBT-ST in the management of Type 2 diabetes. Including suggestions for integrating these therapies into standard diabetes care practices could enhance the paper's practical implications.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

While the study cites relevant literature, the review could be expanded to include a broader range of studies comparing ACT and DBT-ST across different chronic conditions. This would provide a stronger foundation for the study's hypothesis and its contribution to existing knowledge.

The limitations section appropriately acknowledges the study's constraints. However, it could be strengthened by discussing the implications of these limitations for clinical practice and future research, such as the need for longer-term follow-up studies and exploration of cost-effectiveness.

Authors uploaded the revised manuscript.

2. Revised

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

