





Comparison of the Effectiveness of Group Therapies “Emotional Freedom Techniques (EFT), Adolescent-Centered Mindfulness Therapy (ACMT) and Dialectical Behavior Therapy (DBT)” on the Emotion Regulation in Girl Adolescents with Disruptive Mood Dysregulation Disorder (DMDD)

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E d i t o r	R e v i e w e r s
Anela Hasanagic  Full Professor, Department of Psychology, Faculty of Islamic Education, University of Zenica, Bosnia and Herzegovina anela.hasanagic@unze.ba	Reviewer 1: Fahime Bahonar  Department of counseling, Universty of Isfahan, Isfahan, Iran. Email: Fahime.bahonar@edu.ui.ac.ir Reviewer 2: Mahdi Khanjani  Associate Professor, Department of Psychology, Allameh Tabataba'i University, Tehran, Iran. Email: khanjani_m@atu.ac.ir

1. Round 1

1.1. Reviewer 1

Reviewer:

In the first paragraph of the Introduction, the transition from normative adolescent emotional variability to clinical DMDD is abrupt. Please add one bridging sentence that conceptually distinguishes transient emotional instability from diagnostically significant dysregulation.

In Section 2.3.3, the numbering of subscales is inconsistent with APA style (e.g., “1. non-acceptance...”). Please convert this into a grammatically integrated sentence rather than a numeric list.

The paragraph beginning “The EFT sessions were conducted based on Greenberg et al.’s protocol” would benefit from specifying therapist training level and fidelity monitoring procedures to strengthen internal validity.

The session tables are detailed but partially redundant with the narrative text that follows each table. Please consider either shortening the textual repetition or explicitly referring readers back to the tables to reduce manuscript length.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

The sentence “In 2013, the American Psychiatric Association (APA) introduced...” would benefit from explicitly stating that DMDD was introduced to reduce the overdiagnosis of pediatric bipolar disorder, which strengthens the theoretical rationale.

The paragraph citing prevalence rates of 2–5% does not specify whether these figures refer to community or clinical samples. Please clarify the epidemiological context to improve precision.

While each intervention is well described, the Introduction lacks a comparative theoretical justification explaining why these three therapies were selected together rather than other emotion-regulation-based approaches (e.g., CBT). Please add a short integrative paragraph addressing this.

The phrase “all girls’ adolescents aged 15 to 18 years” is grammatically incorrect. Please revise to “all female adolescents aged 15–18 years” for clarity and professionalism.

In Section 2.2, participants were interviewed based on DSM-IV criteria, whereas the Introduction emphasizes DSM-5. This inconsistency is methodologically significant and must be justified or corrected.

The sentence “80 adolescents diagnosed with DMDD were randomly assigned...” should clarify whether randomization occurred at the individual or cluster level, and whether allocation concealment was implemented.

Inclusion and exclusion criteria are listed in sentence form but would benefit from clearer structure. Additionally, the criterion “Obtaining a score above the mean” is vague—please report the exact cutoff score or percentile.

Authors uploaded the revised manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.