






# The Effectiveness of Mindfulness-Based Cognitive Therapy on Social Anxiety and Psychological Hardiness in Depressed Adolescents

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## 1. Round 1

### 1.1. Reviewer 1

Reviewer:

The paragraph stating “A growing body of research emphasizes that emotional dysregulation functions as a transdiagnostic mechanism...” would benefit from a brief clarification of how MBCT specifically targets emotional dysregulation differently from standard CBT, rather than implying equivalence.

While psychological hardiness is well defined, the manuscript does not clearly explain why hardiness, rather than other resilience constructs, was selected as a primary outcome. A short comparative justification (e.g., versus resilience or distress tolerance) is recommended.

No information is provided regarding treatment fidelity or therapist training. Please clarify who delivered the intervention, their qualifications, and whether fidelity checks were conducted.

The authors state that ANCOVA assumptions were tested, but the exact statistical thresholds or test statistics (e.g., Levene’s F values) are not reported. Including these would enhance transparency.

In Table 1, the baseline means appear slightly different between groups. Although ANCOVA controls for this, the authors should explicitly state whether baseline equivalence was statistically tested.

Table 2 reports large effect sizes ( $\eta^2$ ), but the manuscript does not provide interpretive benchmarks (e.g., small/medium/large). Brief interpretation in text would aid readers.

The discussion attributes reductions in social anxiety to decentering and reduced avoidance; however, no process measures were collected. Please temper causal language or acknowledge this inferential limitation.

The claim that MBCT enhances the “challenge” and “control” components of hardiness is theoretically sound, but would benefit from clearer linkage to observed behavioral or cognitive changes, rather than conceptual inference alone.

Authors uploaded the revised manuscript.

## 1.2. Reviewer 2

Reviewer:

The sentence “Therefore, therapeutic approaches that simultaneously reduce anxiety symptoms and strengthen psychological hardiness may yield more durable outcomes” presents a strong claim. Please clarify whether this is a theoretical assumption or empirically established conclusion, and adjust wording accordingly.

In the paragraph beginning “Mindfulness-Based Cognitive Therapy (MBCT) represents an integrative therapeutic approach...”, the authors should clarify whether the protocol used in this study followed a standardized MBCT manual or an adapted adolescent-specific version.

The identified research gaps are relevant; however, the authors should more explicitly state how the present study advances beyond prior Iranian or regional studies, rather than implying novelty implicitly.

While psychometric properties are well reported, it would strengthen the Methods section to clarify whether internal consistency (Cronbach’s alpha) was recalculated for the current sample.

The manuscript reports score ranges (low, moderate, high hardiness) but does not indicate how these categorizations were used analytically, if at all. Please clarify whether analyses were purely continuous.

The Intervention description is generally clear; however, it would benefit from a session-by-session outline or thematic progression summary, even in narrative form, to improve replicability.

Authors uploaded the revised manuscript.

## 2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.