

Latent Growth Curve Modeling of Rumination Subtypes and Suicidal Ideation in High-Risk Adolescents

Nikos. Papadakis¹, Angela. Villanueva^{2*}, Ágnes. Tóth³

¹ Department of Social Psychology, National and Kapodistrian University of Athens, Athens, Greece

² Department of Clinical Psychology, University of the Philippines, Quezon City, Philippines

³ Department of Clinical Psychology, Eötvös Loránd University, Budapest, Hungary

* Corresponding author email address: angela.villanueva@up.edu.ph

E d i t o r

Salahadin Lotfi

PhD in Cognitive Psychology & Neuroscience, UWM & Rogers Behavioral Health Verified, Lecturer at University of Wisconsin slotfi@uwm.edu

R e v i e w e r s

Reviewer 1: Zahra Yousefi 

Assistant Professor, Department of Psychology, Khorasan Branch, Islamic Azad University, Isfahan, Iran.

Email: yousefi1393@khusf.ac.ir

Reviewer 2: Mehdi Rostami

Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada.

Email: dr.mrostami@kmanresce.ca

1. Round 1

1.1. Reviewer 1

Reviewer:

The review thoroughly covers epidemiological and minority stress literature; however, there is limited theoretical integration. Consider explicitly anchoring the study in Response Styles Theory (Nolen-Hoeksema) or Interpersonal Theory of Suicide to provide a clearer theoretical framework linking rumination to suicidal ideation trajectories.

The statement “Few investigations employ advanced growth modeling frameworks...” would benefit from citation of prior LGCM or growth mixture modeling studies in suicidality. Without specifying what has been done methodologically, the novelty claim appears somewhat broad.

You mention sequential configural, metric, and scalar invariance testing but do not report ΔCFI or $\Delta RMSEA$ values. Please include a table summarizing invariance testing results to justify longitudinal comparisons.

You state that quadratic growth factors were tested “where indicated by significant non-linear trends.” Please clarify whether any quadratic terms reached significance and provide comparative fit statistics for linear versus quadratic models.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

You state that screening was conducted using “brief standardized measures,” but the specific instruments used for screening the initial 612 students are not named. This omission limits replicability and transparency regarding inclusion criteria.

The definition of “high-risk” includes multiple criteria (e.g., depressive symptoms, trauma, referral). Please clarify whether participants had to meet at least one criterion or multiple criteria, and report the distribution across categories to describe sample heterogeneity.

Although retention rates are reported (94.7%, 91.2%, 88.1%), no analysis of attrition bias is presented. Please conduct and report comparisons between completers and dropouts on baseline suicidal ideation and brooding to confirm missing-at-random assumptions.

The forward–backward translation process is described; however, no confirmatory factor analysis results for the Armenian-adapted RRS or SIQ-JR are reported. Given the cross-cultural adaptation, please provide CFA fit indices to support structural validity.

Authors uploaded the revised manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.