

Predicting Aggression Among Adolescents Based on Parental Psychological Control and Self-Compassion: The Mediating Role of Emotion Dysregulation

Kareem. Mohammed¹, Wakil. Asekun^{2*}, Andrea. Ugalde³

¹ Department of Behavioral Sciences, University of the West Indies, St. Augustine, Trinidad and Tobago

² Department of Psychology, University of Lagos, Lagos, Nigeria

³ Department of Health Psychology, University of Costa Rica, San José, Costa Rica

* Corresponding author email address: waksekun@unilag.edu.ng

Editor

John S. Carlson¹
Distinguished Professor of the
Department of Educational
Psychology, Michigan State
University, East Lansing, MI,
United
carlsoj@msu.edu

Reviewers

Reviewer 1: Fahime Bahonar¹
Department of counseling, Universty of Isfahan, Isfahan, Iran.
Email: Fahime.bahonar@edu.ui.ac.ir
Reviewer 2: Mahdi Khanjani¹
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:

The manuscript should provide a clear ethics statement containing verifiable institutional information. The current sentence, “The study was conducted in accordance with the ethical principles for research involving human participants ... and permission to conduct the study was obtained from the relevant educational and institutional authorities,” is too generic. Because most participants were minors, the manuscript should identify the approving institutional review board or research ethics committee, approval number and date where applicable, procedures for parental/guardian consent and adolescent assent, and how confidentiality was maintained during school-based administration. The authors should also clarify whether adolescents aged 18 provided consent for themselves and how refusal was handled in classroom-based recruitment to minimize perceived coercion.

The measurement section requires exact bibliographic and psychometric information for every instrument. For example, the manuscript refers to “the Psychological Control Scale–Youth Self-Report,” “the Self-Compassion Scale developed by Neff,” “the Difficulties in Emotion Regulation Scale,” and “the Buss–Perry Aggression Questionnaire,” but does not identify the

original authors and publication years consistently, nor does it report the exact response options and score ranges for every scale. The final manuscript should provide the original source for each instrument, number of items, subscales, response anchors, scoring procedure, possible score range, interpretation, and prior reliability/validity evidence. Instrument descriptions should be sufficiently precise for another researcher to reproduce the scoring procedure.

The cultural and linguistic validity of the instruments in Nigerian adolescents must be addressed. The Methods currently state that eligibility required “sufficient proficiency in English to comprehend the questionnaire items,” but this does not establish measurement validity. The authors should indicate whether the English versions had previously been validated among Nigerian adolescents or comparable African populations. If they had not, the manuscript should explain whether expert review, cognitive interviewing, pilot testing, content-validity assessment, or adaptation procedures were conducted before full administration. Given that constructs such as psychological control, self-compassion, emotional regulation, and aggression may have culturally contingent meanings, evidence of measurement appropriateness is necessary before interpreting structural relationships.

The operationalization of self-compassion requires reconsideration and clearer justification. The manuscript states that “Items representing self-judgment, isolation, and over-identification were reverse-scored before computation of the overall self-compassion score.” Contemporary psychometric debate has questioned whether a single total score formed by reversing uncompassionate self-responding dimensions always represents a psychometrically coherent self-compassion construct. The authors should justify use of the global Self-Compassion Scale score, report whether its factor structure was evaluated in this sample, and ideally present evidence from confirmatory factor analysis or at least discuss whether a total-score interpretation is empirically defensible in Nigerian adolescents. This is particularly important because self-compassion is a central predictor in both the conceptual and mediation models.

The data-analysis strategy should be aligned more closely with the nested structure of the sampling design. Adolescents were sampled within classes and schools, yet the manuscript analyzes all 412 observations as statistically independent. The statement that “Pearson product-moment correlation coefficients were calculated” and subsequent use of ordinary least-squares mediation may underestimate standard errors if meaningful clustering exists at the classroom or school level. The authors should calculate intraclass correlations for aggression and emotion dysregulation and assess the design effect. If clustering is non-negligible, multilevel modeling or cluster-robust standard errors should be considered. If clustering is negligible, this should be documented rather than assumed.

A second statistical issue concerns the simultaneous mediation specification. The manuscript states that “Aggression was treated as the principal outcome variable, parental psychological control and self-compassion were entered as predictor variables, and emotion dysregulation was specified as the mediator,” while also stating that “PROCESS Model 4” was used. The authors should explain exactly how the two predictors were handled. If two separate Model 4 analyses were run, the indirect effects for each predictor may not represent effects adjusted for the other predictor unless the other was entered as a covariate. If a single model simultaneously estimated both X variables, the analytical implementation needs to be described precisely because standard PROCESS Model 4 is typically parameterized around one focal X. The manuscript should report whether each predictor was entered as a covariate in the other model or whether an alternative regression/SEM specification was used. This clarification is essential for interpreting the alleged unique indirect effects.

Authors uploaded the revised manuscript.

1.2. Reviewer 2

Reviewer:

The treatment of demographic covariates is unclear and risks introducing a data-driven adjustment strategy. The Methods state, “Where relevant, demographic variables showing meaningful associations with aggression were included as covariates to reduce potential confounding,” yet the reported mediation and regression tables do not identify any covariates. The authors should predefine which demographic variables are theoretically justified as confounders and report them consistently in the analyses. Selecting covariates solely because they are statistically associated with the outcome can produce biased or unstable

estimates. The manuscript should therefore specify whether age, gender, school type, family structure, or socioeconomic variables were included, provide the rationale for each, and make clear whether the reported coefficients are adjusted or unadjusted.

The preliminary assumption testing reported in the Findings is insufficiently documented. The manuscript states that “No serious violations of normality, linearity, homoscedasticity, independence of residuals, or multicollinearity were detected” and that “variance inflation factor values were below 2.00,” but no corresponding statistics are provided. The authors should report the actual VIF range, tolerance values, residual diagnostics, and the method used to identify influential observations. Because mediation inference relies heavily on regression assumptions for individual paths, the authors should also clarify that bootstrapping was used to address non-normality of indirect-effect sampling distributions rather than treating normality of raw variables as sufficient evidence of model adequacy.

Table 1 should be revised to provide a more rigorous psychometric and descriptive foundation for the structural analyses. The current table reports means, standard deviations, ranges, skewness, kurtosis, Cronbach’s alpha coefficients, and correlations, which is useful, but the observed score ranges should be distinguished from theoretically possible ranges. For example, the Self-Compassion Scale is presented with $M = 3.06$ and range 1.35–4.73, whereas the other measures are presented as summed scores. This mixture of mean-item and total-score metrics should be made explicit in the table note and instrument descriptions. In addition, 95% confidence intervals for correlations would strengthen precision reporting, and McDonald’s omega should be considered alongside Cronbach’s alpha because alpha alone does not establish scale reliability under multidimensional measurement conditions.

The manuscript contains a serious numerical inconsistency between Tables 3 and 4 that must be resolved before publication. Table 4 reports the parental psychological control total effect as $B = 0.63$, the direct effect as $B = 0.29$, and the indirect effect as $B = 0.40$. In a simple linear mediation decomposition, the total effect should equal the direct effect plus the indirect effect; however, $0.29 + 0.40 = 0.69$, not 0.63. The same problem occurs for self-compassion: the reported direct effect is $B = -5.39$ and the indirect effect is $B = -6.93$, implying a total effect of -12.32, whereas Table 4 reports -11.22. These discrepancies are not trivial rounding errors. The authors must return to the original PROCESS output, verify the a, b, c, and c’ paths, and reconstruct Tables 3 and 4 from the actual estimates. All inferential statements in the abstract, Results, figure, and Discussion should then be checked against the corrected values.

Authors uploaded the revised manuscript.

2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.