




Effectiveness of Trauma-Focused Cognitive Behavioral Therapy on Post-Traumatic Stress Disorder and Psychological Empowerment (Cognitive and Emotional) in Children with a History of Sexual Abuse

Saeideh. Khani Zalan¹, Elahe. Mehrabian Parizi², Kamran. Pourmohammad Ghouchani^{3*}


¹ Department of General Psychology, Il.C., Islamic Azad University, Ilam, Iran

² Master of General Psychology, University of Zahedan, Zahedan, Iran



³ Department of Clinical Psychology, Ki.c., Islamic Azad University, Kish, Iran

* Corresponding author email address: Kamranpourmohammadghouchani@gmail.com

Editor

Shahrooz Nemati
Professor, Department of Educational Sciences, Faculty of Educational Science and Psychology, University of Tabriz, Iran
Sh.Nemati@Tabrizu.ac.ir

Reviewers

Reviewer 1: Elham Azarakhsh
Department of Psychology, Islamic Azad University, Qom Branch, Qom, Iran.
Email: elhamazarakhsh@qom.iau.ac.ir
Reviewer 2: Masoud Asadi
Assistant Professor, Department of Psychology and Counseling, Arak University, Arak, Iran.
Email: m-asadi@araku.ac.ir

1. Round 1

1.1. Reviewer 1

Reviewer:

In the second paragraph of the Introduction, the statement “psychological empowerment... has gained increasing attention as a protective factor” lacks a precise theoretical model or citation of a dominant framework (e.g., Zimmerman’s empowerment theory). The authors should explicitly define the construct dimensions (intrapersonal, interactional, behavioral) and justify the selection of “cognitive and emotional” components.

In the Measures section, the authors state that “cutoff score of 19 has been considered for both scales.” This contradicts earlier reported cutoffs (16 for CROPS and 19 for PROPS). This inconsistency should be resolved to ensure measurement accuracy.

The description of SEARS includes “the total score... range from 0 to 156,” yet the study appears to use only total scores without reporting subscale-level analysis. Given the conceptual focus on cognitive and emotional empowerment, subscale-level reporting would provide more precise insights.

In the Intervention section, the sentence “sessions were conducted once per week... 30 minutes allocated to the child and 30 minutes to the parent” suggests a rigid structure, whereas TF-CBT is typically flexible. The authors should justify this fixed allocation or discuss its implications for treatment fidelity.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

In the third paragraph, the description “PTSD in children is characterized by intrusive re-experiencing...” is accurate but descriptive; however, it lacks reference to DSM-5-TR diagnostic nuances for children under 12. The authors should refine this by specifying age-adapted symptom expression criteria and developmental differences in symptom manifestation.

In the paragraph discussing TF-CBT, the sentence “TF-CBT integrates cognitive-behavioral principles with trauma-sensitive techniques” is overly general. The authors are advised to explicitly reference the PRACTICE components model (Psychoeducation, Relaxation, Affective modulation, Cognitive coping, Trauma narrative, In vivo exposure, Conjoint sessions, Enhancing safety) to improve methodological transparency.

In the final paragraph of the Introduction, the research gap is stated as “relatively fewer studies have focused on its role in enhancing psychological empowerment.” This claim requires stronger justification through either a brief systematic synthesis or citation density demonstrating this gap empirically rather than rhetorically.

In the Methods – Study Design, the phrase “single-case experimental design with a multiple baseline staggered design” is appropriate, but the authors do not specify baseline length variability or criteria for phase change. This omission weakens internal validity; detailed procedural timing and decision rules should be reported.

In the same section, the sampling description “four schools... were randomly introduced” is ambiguous. It is unclear whether this refers to random selection or administrative assignment. The sampling strategy should be clarified to avoid misinterpretation of representativeness.

In the participant descriptions, particularly “Participant 1: Ghazaleh... experienced her father’s substance addiction, threats of death, and abandonment,” the narrative suggests multiple trauma types beyond sexual abuse. This raises a validity concern regarding sample homogeneity; the authors should clarify whether all participants experienced sexual abuse or mixed trauma exposure.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor’s decision: Accepted.

Editor in Chief’s decision: Accepted.