

Assessment of Spiritual Vitality and Marital Satisfaction in Parents of Children Aged 6–12 Years with Autism Spectrum Disorder


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1. Round 1

1.1. Reviewer 1

Reviewer:

In the final sentence of the abstract, the authors state that the findings “highlight the necessity of designing holistic interventions focused on strengthening spiritual and communicational resources.” This recommendation is too strong for a descriptive-correlational, cross-sectional study that found no significant direct relationship between total spiritual vitality and marital satisfaction. The wording should be softened to reflect association rather than intervention efficacy; for example, the study may “suggest the potential relevance” of spirituality-informed and communication-focused support, but it cannot establish intervention necessity or effectiveness.

In the paragraph presenting Cochran’s formula, the actual formula and parameters are not reported in the manuscript excerpt, and the values used for confidence level, margin of error, estimated proportion, and finite population correction are not explained. A reader cannot verify the sample-size calculation. Please present the complete formula, parameter values, substitution steps, and rationale for the selected assumptions. If the final sample differs from the required sample, the authors should also provide a post hoc power discussion or minimum detectable effect size.

In the instrumentation paragraph, the authors state that the Afrouz Marital Satisfaction Questionnaire has 110 items and the Afrouz Spiritual Vitality Scale has 60 items, both scored on a five-point Likert scale. However, Table 1 reports spiritual vitality scores ranging from 20 to 180, which is inconsistent with a 60-item five-point scale, where the theoretical range would normally be 60–300 if scored 1–5. Please clarify the exact scoring system, number of items used, possible score range, reverse scoring, subscale composition, and interpretation thresholds. Without this correction, the descriptive statistics are not interpretable.

Authors revised the manuscript and uploaded the document.

1.2. Reviewer 2

Reviewer:

In the first paragraph of the Introduction, the discussion of genetic, epigenetic, neuroimaging, EEG, machine learning, and multi-criteria decision-making approaches to autism diagnosis is scientifically interesting but not sufficiently connected to the study's core variables of spiritual vitality and marital satisfaction. The paragraph should be revised to reduce diagnostic-technological detail and more directly establish the psychological and family-system burden of ASD caregiving. Otherwise, the introduction appears overly broad and partially disconnected from the research question.

In the Introduction paragraph beginning "One of the key relational outcomes affected by chronic caregiving pressure is marital satisfaction," marital satisfaction is defined broadly, but the authors do not connect this definition to the specific Afrouz Marital Satisfaction Questionnaire dimensions later analyzed in the study. Please revise this paragraph by explicitly linking theoretical domains such as communication, conflict management, parenting, leisure, financial management, and religious feelings to the questionnaire subscales used in the research. This would improve construct coherence between the literature review and measurement strategy.

In the Introduction paragraph beginning "Alongside psychological and relational resources, spirituality has received increasing attention," the manuscript defines spiritual vitality in a broad conceptual manner, but the operational definition remains unclear. Because the study uses the Afrouz Spiritual Vitality Scale, the authors should define spiritual vitality according to that instrument's dimensions, scoring logic, and theoretical foundation. The current description mixes spirituality, religious orientation, inner peace, meaning-making, resilience, and moral commitment without clarifying which aspects are actually measured.

In the Methods section, the paragraph stating that "the present study was applied in terms of purpose and quantitative in terms of methodological approach" is too generic and does not provide enough methodological precision. The manuscript should specify the exact design as a cross-sectional descriptive-correlational study, identify the unit of analysis, and clarify whether the 100 participants were analyzed as independent individuals or as 50 dyads. This is important because fathers and mothers from the same family are not statistically independent if they are paired couples.

In the Methods section, the manuscript states that "100 participants, including 50 fathers and 50 mothers" were selected, while the abstract refers to "100 participants (50 couples)." These are not equivalent unless each father and mother belonged to the same child/family unit. Please clarify whether the sample consisted of 50 matched couples or simply 50 mothers and 50 fathers. If the data are dyadic, the statistical analysis should account for couple-level dependency, for example through paired comparisons, dyadic correlation, or multilevel/dyadic modeling.

In the sample-size paragraph, the authors write that Cochran's formula yielded "approximately 169 participants," but "ultimately 100 participants" were selected due to access limitations. This is a major methodological weakness because the final sample is substantially below the calculated requirement. The authors should either recalculate sample size based on the final accessible population and expected effect size, or explicitly acknowledge the reduced statistical power as a limitation. The current presentation weakens confidence in the non-significant findings because the study may be underpowered.

Authors revised the manuscript and uploaded the document.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.