

# Psychometric Properties of the Persian Version of the Autism Social Skills Profile

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## 1. Round 1

### 1.1. Reviewer 1

Reviewer:

The paragraph stating “Social skills are multidimensional constructs encompassing social interaction, social participation, communication abilities...” appropriately emphasizes the multidimensional nature of social functioning; however, the manuscript lacks a conceptual model explaining how these domains are theoretically represented in the ASSP factor structure. The authors are encouraged to include a clearer theoretical rationale linking the questionnaire dimensions to current ASD social-communication frameworks and DSM-5 conceptualizations.

In the final paragraph of the Introduction, the sentence “Existing assessment tools are often translated without comprehensive validation procedures” is an important claim, yet no empirical evidence or prior Iranian validation studies are cited to support this assertion. The manuscript would benefit from a brief review of previously adapted Persian autism assessment instruments and an explanation of their psychometric limitations that justify the necessity of the present study.

In the Findings section, the authors state that “the significance level for all variables is less than .05,” yet Table 3 reports significance values of .12 and .06 for some variables. This contradiction indicates either inaccurate interpretation or reporting error in the normality analysis. Furthermore, the conclusion that “all variables were non-normal” is statistically incorrect based on the presented results. The interpretation of the Kolmogorov–Smirnov test should therefore be revised carefully.

The sentence “appropriate nonparametric statistical methods were used to examine the research hypotheses” is inconsistent with the subsequent use of Confirmatory Factor Analysis (CFA), which is fundamentally a parametric modeling technique. The authors should explain how assumptions of multivariate normality were addressed in the CFA procedure, including whether robust estimation methods or bootstrapping techniques were applied.

In the paragraph interpreting the CFA results, the authors conclude that “because the RMSEA value is also less than 0.10, it can be concluded that the model has an acceptable fit.” However, contemporary psychometric standards generally recommend RMSEA values below .08, and preferably below .06, for good model fit. The manuscript would benefit from a more nuanced interpretation of fit indices grounded in updated SEM literature rather than relying solely on liberal cutoff values.

Authors revised the manuscript and uploaded the document.

## 1.2. Reviewer 2

Reviewer:

In the Methods section, the authors report that “a total sample of 400 participants was selected,” whereas the Findings section later states that “a total of 420 individuals participated.” This inconsistency in sample size is a serious methodological issue that affects the credibility of the analyses and statistical reporting. The authors should clearly explain whether additional participants were added after initial recruitment or whether one of the reported values is erroneous.

The paragraph describing cluster random sampling lacks sufficient procedural detail. Specifically, the sentence “clusters were randomly selected from rehabilitation centers, autism schools, support associations, and regular schools” does not specify the number of centers, provinces, schools, or clusters involved. Without this information, the representativeness and external validity of the sample cannot be adequately evaluated. The authors should provide a more transparent sampling framework and describe the cluster selection process in detail.

In the inclusion criteria paragraph, the phrase “absence of concurrent specialized therapeutic interventions during the data collection period” requires operational clarification. It is unclear whether participants receiving speech therapy, occupational therapy, ABA, pharmacological treatment, or educational interventions were excluded. Since such interventions can significantly affect social functioning, the authors should define precisely which treatments constituted exclusionary criteria.

The description of the Autism Social Skills Profile (ASSP) is generally informative; however, the manuscript does not report whether permission for translation and cultural adaptation was obtained from the original instrument developers. Since psychometric adaptation studies require ethical and copyright transparency, the authors should specify whether formal authorization for translation and validation was secured.

The back-translation procedure described in the sentence “Initially, two bilingual psychology specialists translated the original English questionnaires into Persian...” is methodologically appropriate, yet the manuscript does not report any quantitative or qualitative assessment of translation equivalence. The authors should report indices such as content validity ratio (CVR), content validity index (CVI), or expert agreement statistics to strengthen the rigor of the cultural adaptation process.

In the Data Analysis section, the authors indicate that “forms containing substantial missing responses, technical errors, or multiple responses to single items were excluded,” but the exact number of excluded questionnaires is not reported. This omission limits reproducibility and raises concerns regarding potential selection bias. The manuscript should include a participant flow description indicating initial recruitment, exclusions, and final analyzed sample size.

Table 1 contains a notable inconsistency regarding age distribution because the study inclusion criteria specify participants aged 6–17 years, yet the demographic table includes “18 years” as an age category. This inconsistency requires correction or explanation because it directly contradicts the predefined eligibility criteria described in the Methods section.

Authors revised the manuscript and uploaded the document.

## 2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.