




# Comparison of the Effectiveness of Short-Term Psychodynamic Therapy and Mentalization-Based Therapy on Rejection Sensitivity in Individuals with Borderline Personality Structure

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E d i t o r	R e v i e w e r s
Seyed Hamid Atashpour  Associate Professor, Department of Psychology, Isfahan (Khorasgan) Branch, Islamic Azad University, Isfahan, Iran hamidatashpour@gmail.com	<b>Reviewer 1:</b> Masoud Asadi  Assistant Professor, Department of Psychology and Counseling, Arak University, Arak, Iran. Email: m-asadi@araku.ac.ir <b>Reviewer 2:</b> Stephen C. L. Lau  Professor (Assistant) at Washington University in St. Louis, United States. Email: lauc@wustl.edu

## 1. Round 1

### 1.1. Reviewer 1

Reviewer:

The phrase “Individuals with borderline personality structure often experience intense fears of abandonment...” would benefit from a citation differentiating borderline personality structure (BPS) from borderline personality disorder (BPD) in DSM-5-TR terminology to avoid conceptual ambiguity.

The paragraph describing “The cultural adaptation of these therapeutic approaches in Iranian clinical settings...” is valuable, but the authors should elaborate on how cultural factors (e.g., collectivism, gender norms) may moderate therapy outcomes. Consider expanding with cross-cultural adaptation methodology.

The concluding sentence “Therefore, the present study aims to compare...” should briefly include the hypothesis statements (e.g., “We hypothesized that both STPT and MBT would significantly reduce rejection sensitivity compared to control, with no significant difference between the two.”) to improve clarity and alignment with results.

The inclusion criterion “not present severe comorbid psychological disorders or significant social or environmental disruptions such as unemployment or family crises” could lead to a biased sample. Consider discussing how this affects ecological validity and generalization.

The explanation “Rejection sensitivity scores are computed by subtracting the expectation of acceptance...” is thorough, but it should specify whether raw or standardized scores were used in analysis, as this affects comparability with international studies using RSQ.

The description “The sixth session... participants learned about rejection sensitivity, its impact on interpersonal relationships...” could be enriched by clarifying whether psychoeducation was manualized and whether therapist adherence was assessed (e.g., via MBT Adherence Scale).

The phrase “Assumptions of normality, homogeneity of variance, and sphericity were verified...” should specify which tests were applied (e.g., Shapiro–Wilk, Levene’s test, Mauchly’s test) and the criteria for assumption satisfaction.

The authors write, “The persistence of therapeutic gains at the follow-up assessment provides further evidence for stability of treatment effects.” Consider tempering this claim, as two months is a relatively short interval for personality structure change.

Response: Revised and uploaded the manuscript.

## 1.2. Reviewer 2

Reviewer:

The statement “Empirical studies have supported the utility of STPT...” cites {Niknejad et al., 2023} and {Yousefi & Hosseini, 2022}, but it is recommended to include Western comparative data (e.g., Davanloo’s original or Leichsenring meta-analyses) to situate Iranian findings in a global context.

The claim “Dysregulation in this network contributes to the exaggerated rejection sensitivity typical of borderline pathology...” could be strengthened by referencing recent neuroimaging meta-analyses linking rejection sensitivity to default mode and salience networks.

While descriptive statistics are provided, confidence intervals or standard error bars are not discussed. Including these would aid in visualizing effect stability over time.

The sentence “The between-subjects main effect of group was not statistically significant ( $p = 0.320$ )” should be followed by a discussion of potential Type II error or low statistical power given the modest sample size ( $n=15$  per group).

The phrasing “In contrast, the control group exhibited a slight but significant increase in rejection sensitivity...” may indicate measurement artifacts rather than true change. Discuss potential influences like testing effects or expectancy bias.

The statement “The comparable efficacy of the two interventions suggests...” should be nuanced by acknowledging that the small sample size may conceal minor but clinically relevant differences in mechanisms of change.

Response: Revised and uploaded the manuscript.

## 2. Revised

Editor’s decision after revisions: Accepted.

Editor in Chief’s decision: Accepted.