

# Comparison of the Effectiveness of Acceptance and Commitment Therapy (ACT) and Emotion-Focused Therapy (EFT) on Cognitive Distortions and Emotion Regulation in Women with Social Anxiety Disorder

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## Editor

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## 1. Round 1

### 1.1. Reviewer 1

Reviewer:

In the paragraph beginning “Social anxiety disorder is recognized as one of the most prevalent...”, prevalence and gender-difference claims are asserted. While references are cited, the authors should clarify whether these gender differences are based on prevalence, symptom severity, or help-seeking behavior to avoid conceptual overgeneralization.

In the paragraph describing ACT (“ACT is grounded in functional contextualism...”), the authors state that ACT does not modify thought content. Given that later results show reductions in cognitive distortions, it would be helpful to clarify whether these reductions are interpreted as changes in content, function, or believability of thoughts.

The paragraph beginning “In contrast, Emotion-Focused Therapy (EFT) is rooted in experiential...” provides a solid overview. However, the authors should explicitly state how EFT is theorized to indirectly influence cognitive distortions, as this becomes central to interpreting later findings.

In the paragraph “Despite the growing evidence supporting both ACT and EFT…”, the research gap is well articulated. Nonetheless, the authors should more clearly specify whether the novelty lies in the population (women), the outcomes (mechanisms rather than symptoms), or the cultural context, rather than implying all three simultaneously.

In “The present study employed a quasi-experimental design…”, the term non-equivalent control group is used, yet participants were later “randomly matched and assigned.” The authors should clarify whether random assignment occurred and, if so, justify the quasi-experimental label.

In the paragraph following Table 4, the authors state that “ACT showed comparatively stronger cognitive restructuring effects”. This wording may be misleading, as ACT does not involve restructuring. Consider revising to “greater reductions in cognitive distortions via defusion processes.”

In the paragraph beginning “ACT demonstrated a stronger effect on the reduction of cognitive distortions…”, causal mechanisms are inferred without mediation analysis. The authors should explicitly frame these interpretations as theoretical explanations rather than empirical demonstrations.

The paragraph discussing women with social anxiety disorder is conceptually strong; however, the authors should acknowledge that gender was controlled rather than examined as a moderator, and therefore conclusions about gender-specific responsiveness should be stated cautiously.

Response: Revised and uploaded the manuscript.

## 1.2. Reviewer 2

Reviewer:

The paragraph starting “One of the central psychological mechanisms implicated…” would benefit from a clearer theoretical anchoring of cognitive distortions (e.g., Beckian vs. interpersonal-cognitive frameworks). Explicitly stating which theoretical tradition underlies the CDQ would strengthen conceptual precision.

In the paragraph beginning “Alongside cognitive distortions, emotion regulation deficits play a pivotal role…”, emotion regulation is discussed as a transdiagnostic construct. The authors are encouraged to explicitly link this conceptualization to the specific operationalization used later (Gross & John model) to enhance theoretical coherence.

In the paragraph describing diagnostic procedures (“From this pool, individuals who obtained a score higher than 40…”), it is unclear whether the DSM-5 interview was structured, semi-structured, or clinical judgment-based. This information is essential for assessing diagnostic reliability.

The use of purposive and volunteer-based sampling, described in the paragraph beginning “To determine the sample size…”, limits generalizability. The authors should explicitly acknowledge this limitation in the Discussion rather than only in the limitations subsection.

In the CDQ description, the misperception subscale originally shows low alpha coefficients (0.43). Although Iranian validation improved reliability, the authors should discuss potential measurement instability and justify continued use of this subscale.

In the ACT and EFT intervention descriptions, no information is provided regarding therapist training, supervision, or fidelity checks. Given the comparative nature of the study, this omission raises concerns about internal validity and should be addressed.

In the Data Analysis section, MANCOVA is justified statistically. However, the authors should also provide a conceptual justification for treating cognitive distortions and emotion regulation as a multivariate outcome rather than independent ANCOVAs.

In Table 1 and subsequent results, expressive suppression scores increase post-treatment. Since suppression is often considered maladaptive, the authors should clarify whether higher scores represent improved regulation or increased suppression tendencies.

Response: Revised and uploaded the manuscript.

## 2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.