

Predicting Fear of Emotional Intimacy Based on Childhood Trauma: The Mediating Role of Interpersonal Emotion Regulation Among Student Couples

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1. Round 1

1.1. Reviewer 1

Reviewer:

In the paragraph beginning with “One of the most influential factors associated with fear of intimacy is childhood trauma,” the authors summarize prior findings linking trauma to relational dysfunction. However, the discussion would benefit from a more nuanced treatment of trauma dimensions. Emotional abuse, physical abuse, sexual abuse, emotional neglect, and physical neglect may exert differential effects on adult intimacy patterns. The authors should justify why childhood trauma was modeled as a global construct rather than testing the unique contributions of each trauma subtype.

The paragraph discussing attachment-based explanations states that “individuals who experience abuse or neglect during childhood frequently learn that close relationships are associated with pain.” While theoretically persuasive, this section lacks integration with established attachment theory models. The manuscript would be strengthened by explicitly linking childhood trauma to attachment insecurity and then explaining how attachment processes may interact with interpersonal emotion regulation in predicting fear of emotional intimacy.

In the Measures section, psychometric properties are primarily derived from previous studies, yet the manuscript does not report Cronbach's alpha coefficients or composite reliability estimates calculated from the present sample. Because reliability is sample-dependent, the authors should report internal consistency indices for each instrument and, ideally, for each subscale within the current dataset.

The Data Analysis section indicates that path analysis was conducted using AMOS; however, no rationale is provided for the chosen analytical strategy. The authors should explain why path analysis was preferred over structural equation modeling with latent variables. Given that all constructs were measured using established multi-item scales, latent-variable modeling would have reduced measurement error and strengthened the validity of the findings.

In the Findings section, participants ranged in age from 22 to 68 years. This age range is unusually broad for a student sample and may indicate substantial heterogeneity in developmental stage and marital experience. The authors should justify the inclusion of older participants and consider conducting subgroup analyses or statistical controls to determine whether age influenced the observed relationships.

Table 1 presents descriptive statistics and correlations, yet the manuscript reports only skewness and kurtosis values. Additional diagnostic statistics should be reported, including variance inflation factors (VIFs), tolerance indices, and normality assessments for residuals. These indices are particularly important because the study relies on path analysis and mediation testing.

Response: Revised and uploaded the manuscript.

1.2. Reviewer 2

Reviewer:

In the section introducing emotion regulation, the authors define emotion regulation broadly and then shift toward interpersonal emotion regulation. However, the conceptual distinction between intrapersonal and interpersonal emotion regulation remains underdeveloped. Since interpersonal emotion regulation is the mediating variable in the proposed model, a more detailed justification is necessary regarding why interpersonal regulation was selected instead of more extensively studied constructs such as emotion dysregulation, emotional intelligence, or general self-regulation.

The literature review repeatedly cites studies demonstrating that emotion regulation mediates trauma-related outcomes; however, there is insufficient discussion regarding why interpersonal emotion regulation specifically should mediate the relationship between childhood trauma and fear of intimacy. The manuscript would benefit from a dedicated theoretical subsection proposing explicit psychological mechanisms, such as support-seeking behavior, emotional disclosure, reassurance seeking, or co-regulation processes within intimate relationships.

The authors conclude the Introduction by identifying gaps in the literature and stating the study aim. Nevertheless, no formal hypotheses are presented. Given that the study uses path analysis and tests a mediation model, explicit hypotheses should be stated, including the expected direction of relationships among childhood trauma, interpersonal emotion regulation, and fear of emotional intimacy. This omission reduces theoretical precision and makes evaluation of model testing more difficult.

In the Methods section, the authors describe the study as employing "convenience random sampling." These sampling strategies are methodologically distinct and potentially contradictory. Convenience sampling is non-probabilistic, whereas random sampling implies probabilistic selection. The authors should clarify the exact sampling procedure, explain how participants were recruited, and accurately label the sampling method.

The manuscript states that questionnaires were distributed through WhatsApp and Telegram groups affiliated with Islamic Azad University branches in Tehran. This recruitment strategy raises concerns regarding sample representativeness and potential self-selection bias. The authors should discuss how they addressed the possibility that students with greater psychological awareness or higher interest in relationship issues may have been more likely to participate.

In the participant description, the inclusion criteria specify that participants had to be married students residing in Tehran. However, important demographic variables such as duration of marriage, number of children, socioeconomic status, and field

of study were not reported. These factors may substantially influence emotional intimacy and emotion regulation. The authors should provide additional demographic information and consider their potential confounding effects.

The description of the Childhood Trauma Questionnaire indicates that responses with minimization/denial scores above a specified threshold may be invalid. However, the manuscript does not report whether any participants exceeded this threshold, how many questionnaires were excluded, or whether data screening procedures were performed. This information is essential for evaluating data quality and should be included in the Methods section.

Response: Revised and uploaded the manuscript.

2. Revised

Editor's decision after revisions: Accepted.

Editor in Chief's decision: Accepted.