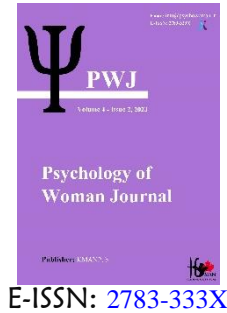




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The Effectiveness of Mindfulness-Based Sex Therapy on Multidimensional Sexual Issues and Sexual Distress in Women with Erotophobia Disorder


Milad. Rahmani¹ , Mehryar. Anasseri^{2*} 

¹ M.A Personality Psychology, Department of Psychology, Ashtian Branch, Islamic Azad University, Ashtian, Iran



² Assistant Professor, Department of Psychology, Ashtian Branch, Islamic Azad University, Ashtian, Iran

* Corresponding author email address: dr.anasseri1969@gmail.com

Editor

Seyed Hadi Seyed Ali Tabar 
Department of Psychology and
Counseling, KMAN Research
Institute, Richmond Hill, Ontario,
Canada
halitabar@kmanresce.ca

Reviewers

Reviewer 1: Zohreh Zadhan 
Department of Psychology and Counseling, KMAN Research Institute, Richmond
Hill, Ontario, Canada. Email: zohrehzadhan@kmanresce.ca
Reviewer 2: Parichehr Mehdi Abadi 
School of Psychology, University of East London, London, UK
Email: Parichehr.ma@aol.com

1. Round 1

1.1. Reviewer 1

Reviewer: This article presents an interesting exploration into the role of mindfulness-based cognitive sex therapy for women with erotophobia. However, there are several aspects that could be improved:

Methodological Rigor: The quasi-experimental design is appropriate, but the study would benefit from a larger, more diverse sample to enhance external validity.

Detailed Analysis of Results: While the study reports significant improvements, a more nuanced discussion of the findings, including potential confounding factors and the specific aspects of sexual issues impacted by the therapy, would be beneficial.

Comparative Analysis: The lack of an active intervention for the control group limits the ability to conclusively attribute improvements to the mindfulness intervention alone.

Ethical Considerations: The study appears to adhere to ethical guidelines, but a more detailed discussion of ethical considerations, especially given the sensitive nature of the topic, would strengthen the paper.

Future Research Directions: Suggestions for future research, including exploring different demographic groups and long-term impacts of the therapy, would be valuable.

Authors revised the manuscript.

1.2. Reviewer 2

Reviewer: The study addresses an important topic in sexual health, specifically the impact of mindfulness-based cognitive sex therapy on women with erotophobia. While the research question is relevant and the study design (a quasi-experimental pre-test post-test with a control group) is sound, there are several areas for improvement:

1. **Expand Sample Size and Diversity:** Increase the sample size and include participants from varied demographic backgrounds to enhance the generalizability of the findings.
2. **Implement Randomized Controlled Trial:** Transition from a quasi-experimental design to a randomized controlled trial to strengthen the study's internal validity.
3. **Longitudinal Follow-up:** Incorporate long-term follow-up assessments to evaluate the enduring effects of the therapy.
4. **Blind Assessments:** Employ blinded assessors to evaluate outcomes, minimizing biases inherent in self-report measures.
5. **Alternative Control Group Interventions:** Use an active control group receiving a different type of therapy to provide a comparative analysis of treatment efficacy.
6. **Detailed Statistical Analysis:** Provide more detailed statistical analyses, including effect sizes, to better understand the magnitude of the intervention's impact.
7. **Qualitative Data:** Include qualitative interviews or case studies to add depth to the understanding of individual experiences.
8. **Ethical Considerations and Consent:** Clearly outline ethical considerations, including how informed consent was obtained and how participant confidentiality was maintained.
9. **Broader Theoretical Context:** Situate findings within a broader theoretical context, discussing how the results align with or challenge existing literature.
10. **Interdisciplinary Perspectives:** Consider integrating insights from related fields, such as psychology, medicine, and sexology, to provide a more comprehensive understanding of the intervention's effects.

Authors revised the manuscript.

2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.