




# Comparison of the Effectiveness of Acceptance and Commitment Therapy and Emotion-Focused Therapy on the Resilience of Caregivers of Individuals with Dementia

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## 1. Round 1

### 1.1. Reviewer 1

Reviewer:

"Caregivers of elderly individuals with dementia face numerous challenges..." – Consider adding more recent studies to support the claim about the negative impact of caregiving on caregivers' health, particularly focusing on psychological well-being post-2022.

"Participants learn the difference between tolerance and acceptance..." – The description of this session could benefit from more specific examples or exercises used to facilitate this learning process.

"The 'empty chair' exercise is introduced..." – The effectiveness of the 'empty chair' exercise could be better contextualized by providing empirical evidence from past studies that support its use in EFT, especially for caregivers.

Consider including reliability and validity metrics for the Connor-Davidson Resilience Scale as applied to this specific population. Were any adaptations made for cultural relevance?

The use of MANCOVA is appropriate, but it is important to specify how missing data (if any) were handled. Were participants with missing follow-up data excluded from analysis, or were imputation methods used?

Consider expanding the results by adding effect sizes for all comparisons, particularly in the follow-up stages, to give a clearer picture of the practical significance of the findings.

Authors revised the manuscript and uploaded the document.

## 1.2. Reviewer 2

Reviewer:

The sentence "Studies have shown that over 80% of caregivers of dementia patients experience high levels of stress..." lacks proper citation. Ensure that all statistics are backed by accurate references.

While the introduction gives a broad overview, it lacks clear research gaps. Consider explicitly stating why comparing these two therapies (ACT and EFT) is essential, highlighting areas where previous studies have not explored.

"Reduced resilience leads to increased stress and decreased psychological well-being..." – Consider defining resilience more clearly in the context of caregiving, especially how it differs from other mental health constructs like stress tolerance.

The use of purposive sampling may introduce bias. Please provide more details on how this method was implemented to minimize potential bias in selecting participants.

"Participants must have at least a middle school education..." – This criterion needs further justification. Why is a middle school education considered sufficient for participants to engage in the therapies used?

It's mentioned that participants were selected from the Iranian Dementia Association in Tehran. It would be helpful to clarify how representative this sample is of the broader population of dementia caregivers in Iran.

The Bonferroni test results show significant differences between groups, but no confidence intervals are reported. It would strengthen the robustness of your findings to include these.

"The findings suggest that EFT had a greater impact..." – This conclusion could be strengthened by discussing the clinical significance of the difference between the two therapies, beyond just statistical significance.

The claim "no similar studies compare these two therapies..." seems a bit too strong. While no direct comparison may exist, there are numerous studies comparing ACT and other emotion-based therapies. A more nuanced discussion of the existing literature would improve this section.

Authors revised the manuscript and uploaded the document.

## 2. Revised

Editor's decision: Accepted.

Editor in Chief's decision: Accepted.