OPEN PEER REVIEW

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- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "A Correlational Study Between Attachment Behaviors and Spiritual Health with Stress in Pregnant Women Referred to Healthcare Centers in Qazvin, Iran, in 2015"

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Review Timeline:

Submit Date: 15 Sep 2018
Revised Date: 16 Feb 2020
Accepted Date: 1 Oct 2020

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (0) — 25 Nov 2018

Dear AE,
In the background of the abstract, it seems the authors want to present an intervention.
In general, it is really a neat and precise article and ready to publish.
Thanks.

REFEREE: Associate Editor | **Revision** (0) — 4 Feb 2019

Dear EIC,
Thanks for the submission.
There published studies that show similar or dissimilar trends that should be discussed.
Please add more relevant and recent references.
Thanks.

REFEREE: EIC | **Revision** (0) — 8 Feb 2019

Dear Author,

The paper has been evaluated by external peer reviewers. Please do your revisions according to the reviewers' comments. I appreciate you doing the revisions as soon as possible by using the track changes mode in MS Word and using colored text.

After revision authors are obliged to upload reviewers' comments word file in which they have replied to all comments one by one.

Besides, please pay attention to the word count limitation:

Word count limits are declared in this link: http://kowsarpub.com/en/index.php/services/for-authors/895-word-count.

Thanks.

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Q: *Reviewer 1 :*
In the background of the abstract, it seems the authors want to present an intervention.

R: Abstract (page 2 of manuscript)

Background: Prenatal stress has adverse consequences for the mother and fetus. Examining existing strategies for coping with prenatal stress is essential in reducing adverse maternal and fetal outcomes.

Q: ***Associate Editor's Comments:***

Associate Editor 1:
There published studies that show similar or dissimilar trends that should be discussed.
Please add more relevant and recent references.

R: Discussion: (page 6 of manuscript)

The present study was conducted to determine the correlation of maternal-fetal attachment and spiritual health with prenatal stress in pregnant women presenting to health centers in Qazvin in 2015. The results showed that a higher maternal-fetal attachment was associated with an increase in maternal stress and exacerbated stress in the domains of ‘other people's notion of the person’, ‘religion’ and ‘health’. An increase in the ‘giving of self’ subset of attachment increased prenatal stress. The study showed that a stronger maternal-fetal attachment causes a higher prenatal stress. This finding concurs with the results obtained by Chang et al. (2016), which showed that depression and maternal-fetal attachment are predictive factors of psychosocial stress in pregnant women (24). Moreover, Allison et al. (2011) showed that a high anxiety in pregnant women undergoing invasive prenatal diagnostic techniques is associated with high maternal-fetal attachment (25); however, it disagrees with the results obtained by Hee & Young (2015), Kwon & Bang (2011) and Moe et al. (2018), which showed that an increased maternal-fetal attachment reduces stress and anxiety (12, 26, 27). The difference between these results can be attributed to personal, social, cultural and care-related differences between the countries as well as the different inclusion criteria used; for instance, 17% of the participants in the present study had a poor and 58.5% moderate to poor financial status, and a poor financial status can probably be considered a factor contributing to stress; however, the participants in Hee & Young’s study did not have such conditions. Rossen et al. (2016) also showed that stress in pregnancy was inversely related to poorer mother-infant bonding 8 weeks postnatally (28). The present findings support the hypothesis that women with a greater fetal attachment experience greater stress and anxiety

about pregnancy and their unborn infant, while mothers with lower levels of attachment experience less prenatal anxiety and stress (29 and 30).

These results show that a higher spiritual health reduces stress in the financial and personal-family subsets in pregnant women. While the results obtained by Powers et al. (2007) showed that spirituality cannot predict any aspect of affective well-being (18), it seems that this contradiction can be seen in relation to the differences in the samples of the two studies. In the study of Powers et al., Participants included students who compared to pregnant women had a different level of stress and a different spiritual perspective, and it seems that pregnancy can be a better opportunity for submerging in spirituality or renewing spiritual connections. The present findings showed that religious health can predict prenatal stress, which agrees with the results obtained by Jung (2014) showed that an interaction effect between religious attendance and stress is observed for women (31). The results obtained by Lucero et al. (2013) also showed that spirituality is a strong predictor of reduced stress in pregnant women (32). Moreover, Goncalves et al. (2015) showed that spiritual interventions reduce stress (16). Zareipour et al. (2016) also showed that perceived stress is lower in women with high levels of spiritual health (17). Spiritual health, religious practices and behaviors such as praying to God, resorting to a greater power and saying prayers help adapt to the changes during pregnancy and reduce the stress they cause. The stress perceived by pregnant women and the spiritual dimension of health vary in different cultures, and this difference limits the generalizability of the results to other cultures.

Q: ***Ethical and Legal Considerations***

The authors should state the following at the end of the manuscript.

R:

2.4. Ethical considerations (page 5 of manuscript)

This research was carried out after obtaining a permission and letter of introduction from Qazvin University of Medical Sciences along with a code of ethical compliance (No. 116.636). The participants were briefed on the study objectives, confidentiality of the data and the right to withdraw from the study at any stage. After submitting their verbal consent, the participants completed the questionnaires in a self-report manner in a private setting under the guidance of the questioner.

Footnonts (page 8 of manuscript)

Ethical Approval: The study was approved by the Ethics Committee of Shahid Beheshti University of Medical Sciences. (No. 116.636, dated 11 June, 2014).

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Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (1) 28 Jul 2019

Dear AE,
Thanks for revising the manuscript, but I think some other revisions have to be done:
- First, you should mention the type of study design in the method (in the abstract and the manuscript body).
- Second, some of the keywords are not selected from MESH.
- Third, I think in the Background there is not coherency between dependent and independent clauses of the following compound sentence: "Identifying women who suffer from prenatal stress is vital since psychosocial factors cause obstetric and pregnancy complications such as nausea and vomiting"...
- Fourth, in the discussion, you asserted, "The study showed that a stronger maternal-fetal attachment causes a higher prenatal stress." while in this type of cross-sectional research, you can just say that they are correlated together. It means you cannot determine a cause-effective relationship.
It is better to clarify the direction of correlation between maternal_ fetal attachment and stress in conclusion. Also, you cannot conclude that spiritual health leads to improvement in certain subsets of stress because this kind of study can just show the correlation between those variables.
- In conclusion, due to these insufficiencies, my decision is a minor revision.
Truly yours,

REFEREE: Reviewer | **Revision** (1) 2 Nov 2019

Dear AE,
1: The second sentence of the introduction in the abstract needs to be edited.
2: In the method, the abstract and the results used as subset term that must be changed to a sub-scale.
3: In the final conclusion, note the importance of your findings to health policymakers.
4: Translation requires scientific edit.
Thanks.

REFEREE: Reviewer | **Revision** (1) 9 Jan 2020

Dear AE,
Thanks to the authors for revising the paper. Some of the necessary revisions have been

done, but, I think the manuscript needs some other revisions as below:
1- Study design type should be clarified in the "method". I suggest mentioning that the study has a cross-sectional design.
2- Some keywords are not selected from MESH.
3- Cross-sectional studies cannot be used to infer causality, thus some sentences such as " The study showed that a stronger maternal-fetal attachment causes a higher prenatal stress " and " These results suggest the importance of strengthening spirituality during pregnancy as an effective strategy for coping with the stress caused by maternal-fetal attachment and the significant protective effects of spirituality and attachment on maternal and fetal health" should be revised.
My decision: minor revision
Best regards

REFEREE: Associate Editor | **Revision (1)** 9 Jan 2020

Dear EIC,
Many thanks for revising " The correlation of maternal-fetal attachment and spiritual health with stress in pregnant women presenting to health centers in Qazvin, Iran, in 2015 ". I received comments from reviewers who believed that some of the necessary revisions have been done but some of them identified concerns and think that the manuscript needs some other revisions, thus I concluded the manuscript has the potential of consideration for publication after satisfactorily addressing reviewers' concerns. Therefore, I invite the authors to reply to all of the reviewer's comments and resubmit the revised manuscript for further review. If they choose to revise their submission please upload the revised manuscript and an annotated list addressing the reviewers comments and highlighting where changes have been made to the paper.
My decision: minor revision
sincerely yours

REFEREE: EIC | **Revision (1)** 16 Jan 2020

Dear Author,
Thank you for your recent revisions.
Your paper has now been evaluated again. According to the reviewers' and associate editor's comments it needs some more revisions. Please do your revisions according to these comments. I appreciate you to do the revisions as soon as possible by using the track changes mode in MS Word and using colored text.
Besides, please pay attention to the word count limitation.
Word count limits are declared in this link: http://kowsarpub.com/en/index.php/services/for-authors/895-word-count
We look forward to receiving your revised manuscript. Thank you for sending your work to the Iranian Journal of Psychiatry and Behavioral Sciences.
Thanks.

OPEN PEER REVIEW

Revision (2)

Reply to Reviewers

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You can read the authors' responses to the reviewers' comments in the next page.

Reviewers' Comments:

Reviewer 1:

#1: The second sentence of the introduction in the abstract needs to be edited.

Reply:

Abstract

Background: Prenatal stress has adverse consequences for the mother and fetus. Examining the strategies available for coping with prenatal stress is essential in reducing adverse maternal and fetal outcomes.

#2: In the method, the abstract and the results used as subset term that must be changed to a sub-scale.

Reply:

The mentioned changes were applied to all sections.

#3: In the final conclusion, note the importance of your findings to health policy makers

Reply:

4.2. Conclusion

The results showed that maternal-fetal attachment was correlated with prenatal stress, while spiritual health was not correlated with prenatal stress; however, spiritual health was able to predict certain subscales of stress. Therefore, since the mental health of pregnant women is one of the most important goals of prenatal care, health policymakers are recommended to pay further attention to maternal-fetal attachment behaviors (such as talking to fetus, naming baby early, reading a poem or song for the fetus) and spirituality alongside physical care in their provision of routine prenatal care.

#4: Translation requires scientific edit

Reply:

All sections of the article were reviewed and revised scientifically and in writing (The edited sections of the article are highlighted in **blue**)

Reviewer 2:

1- Study design type should be clarified in the "method". I suggest to mention that the study has cross sectional design.

Reply:

The mentioned changes were applied to all sections

Abstract

Methods: The present cross-sectional study was conducted on 200 pregnant women presenting to health centers in Qazvin.

2. Materials and Methods

The present cross-sectional study was conducted on 200 pregnant women presenting to health centers providing first-level services in Qazvin in 2015.

2- Some key words are not selected from MESH.

Reply:

Keyword: Pregnancy, Stress, Maternal-Fetal, Attachment, Spiritual.

3- Cross sectional studies cannot be used to infer causality, thus some sentences such as " The study showed that a stronger maternal-fetal attachment causes a higher prenatal stress " and " These results suggest the importance of strengthening spirituality during pregnancy as an effective strategy for coping with the stress caused by maternal-fetal attachment and the significant protective effects of spirituality and attachment on maternal and fetal health" should be revised.

Reply:

The sentence "The study showed that a stronger maternal-fetal attachment causes a higher prenatal stress" was deleted.

The second section was modified as follows:

4.2. Conclusion

The results showed that maternal-fetal attachment was correlated with prenatal stress, while spiritual health was not correlated with prenatal stress; however, spiritual health was able to predict certain subscales of stress. Therefore, since the mental health of pregnant women is one of the most important goals of prenatal care, health policymakers are recommended to pay further attention to maternal-fetal attachment behaviors (such as talking to fetus, naming baby early, reading a poem or song for the fetus) and spirituality alongside physical care in their provision of routine prenatal care

Reviewer 3:

1- *First, you should mention the type of the study design in the method (in the abstract and the manuscript body).*

Reply:

The mentioned changes were applied to all sections

Abstract

Methods: The present cross-sectional study was conducted on 200 pregnant women presenting to health centers in Qazvin.

2. Materials and Methods

The present cross-sectional study was conducted on 200 pregnant women presenting to health centers providing first-level services in Qazvin in 2015.

2- *Second, some of the keywords are not selected from MESH.*

Reply:

Keyword: Pregnancy, Stress, Maternal-Fetal, Attachment, Spiritual.

3- *Third, I think in the Background there is not coherency between dependent and independent clauses of the following compound sentence: "Identifying women who suffer from prenatal stress is vital, since psychosocial factors cause obstetric and pregnancy complications such as nausea and vomiting"...*

Reply:

In the Introduction, the mentioned section was rewritten as follows:

1. Background

Pregnancy is one of the most important and stressful periods in a woman's life that is associated with physiological and psychological changes (1). About 16.5% to 74% of women suffer from stress in their first pregnancy (2). In a study conducted by Salari et al. (2005), 16.7% of mothers suffered from severe stress and 13.6% from mild stress (3). According to the findings, prenatal stress causes epigenetic changes that have lasting effects on the mother’s and infant’s maternal health after pregnancy and childbirth (4). The theory of psychological stress holds that stressful

life events negatively impact people's mental and physical health and are correlated with some social factors (5).

4- *Fourth, in the discussion you asserted, "The study showed that a stronger maternal-fetal attachment causes a higher prenatal stress." while in this type of cross sectional research, you can just say that they are correlated together. It means you cannot determine a cause- effective relationship.*

Reply:

The mentioned sentence was deleted.

5- *Also you cannot conclude that spiritual health leads to improvement in certain subsets of stress, because this kind of study can just show the correlation between those variables.*

Reply:

The mentioned section was rewritten as follows:

Conclusion: The results showed that maternal-fetal attachment was correlated with prenatal stress while spiritual health was not correlated with prenatal stress; however, spiritual health was able to predict some of the subscales of stress.

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Revision (2)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (2) — 15 Jun 2020

Dear AE,
The points that needed to be revised have been corrected.
Thanks.

REFEREE: Reviewer | **Revision** (2) — 5 Sep 2020

Dear AE,
Thanks for revising the paper. I think necessary revisions have been done and the manuscript could be published in the journal.
My decision: accept
Best regards

REFEREE: Associate Editor | **Revision** (2) — 5 Sep 2020

Dear EIC,
Many thanks for revising "The correlation of maternal-fetal attachment and spiritual health with stress in pregnant women presenting to health centers in Qazvin, Iran, in 2015". I received comments from reviewers who believed that necessary revisions have been done. Therefore, I think the manuscript could be published in the Iranian journal of psychiatry and behavioral sciences.
My decision: accept
sincerely yours

Mehran Zarghami: EIC | **Revision** (2) — 1 Oct 2020

Dear Author,
We have completed our review of your manuscript and are pleased to inform you that it is considered for publication in the IJPBS. Note that the publication of your article will only be finalized upon your cooperation with the editorial processing.
Thank you for your fine contribution. On behalf of the Editors of IJPBS, we look forward to your continued contributions to the Journal.
Thanks.