Huamani-Cahua, J. C., Ojeda Flores, E. C., Chocano Rosas, T. J., Rivas Vargas, Ú., Bustamante Gamarra, M., Soncco Huilcahuamán, V., & Ojeda Flores, M. A. (2025). Psychometric analysis and factorial invariance of the Self-Report of Assertive Behavior (ADCA-1) in Peruvian adolescents. *Interacciones, 11*, e464. https://doi.org/10.24016/2025.v11.464

LETTER OF REVIEWERS

Reviewer A:
Recommendation: Revisions Required

Relevance: Moderated
Novelty: Moderated
Presentation and writing: Moderated

Comments for authors:
Title and Abstract
1. I suggest a more concise title to increase the citation potential of the study. For example: "Psychometric Analysis and Factorial Invariance of the Self-Report of Assertive Behavior (ADCA-1) in Adolescents: A cross-sectional study."
2. The abstract should follow a structured format: introduction, objective, method, results, and conclusion.
3. The final sentence in the abstract ("The need to continue improving the instrument...") is unclear. A more concrete and specific conclusion is recommended.

Introduction
4. The introduction is extensive and well-founded. However, we recommend reducing the length of the first half, focusing more on empirical background related to the ADCA-1 or similar instruments in Latin America, instead of reiterating the general benefits of assertiveness.
5. Include more specific psychometric background of the ADCA-1, with an emphasis on previous validations in international contexts.
6. The introduction omits an operational definition of "self-assertiveness" and "hetero-assertiveness." It would be useful to include these, as they are the main dimensions of the instrument.

Method
7. Some sections of the manuscript are written in Spanish and others in English. This is highly unusual. The entire manuscript must be written in English.
8. The Method section should include the following subsections: Procedure, Data Analysis, and Ethical Considerations.
9. Although purposive sampling is justified, the manuscript should specify inclusion and exclusion criteria and the period of data collection, as expected in studies with primary data.
10. The authors state: "The sample was selected through non-probabilistic purposive sampling (Otzen & Monterola, 2017), as factor analysis was used, and 5 to 10 participants per questionnaire item are considered adequate for sample size (Ferrando & Anguiano-Carrasco, 2010)." This does not replace an actual sample size calculation. Please conduct a proper sample size calculation using a standard calculator (e.g., https://wnarifin.github.io/ssc_web.html). Report the assumptions used to achieve a CFI of at least 0.95, such as the number of items per dimension, expected average factor loading, statistical power, and average latent correlation between dimensions.
11. In the instruments section, the authors report "rx-y = 0.58", but it is unclear what x and y represent. Please clarify.
12. The dataset and R code must be submitted as supplementary material to allow replication of the analyses and verification of the findings.
13. The use of a version adapted for Peruvian adolescents is appreciated. However, the manuscript should clarify whether this adaptation was only linguistic or also cultural.
14. In the instruments section, the ADCA-1 scoring structure should be described more clearly: What is the possible score range? How is a higher score interpreted?
15. There is no specific subsection for ethical considerations. The manuscript should report whether the study was approved by an ethics committee, include the approval code, and describe the type of informed consent obtained from minors and the assent process. Reporting the name of the ethics committee and the approval code is mandatory.

16. I suggest including an exploratory network analysis to reveal the structure of item relationships, both in the original version and across different models.

Results

17. CFA results are well presented. However, there is an inconsistency in the omega value for the self-assertiveness subscale: α = .749 and ω = .474, which seems suspicious. Please verify this value, as it is unexpectedly low.
18. Please clarify whether a multigroup CFA was conducted, or if analyses were performed separately by group.
19. The rationale for item removal in Model 2 is unclear. Please explain this clearly and concisely in the Methods section.
20. It is unclear how the decision was made to correlate the errors of items 6 and 12. Assuming error correlation requires strong theoretical justification. If such a model is used, it must be explicitly explained and justified in the Methods section.
21. Model 3 is the same as Model 2 but without the correlated error term. It is acceptable not to select the model with correlated errors as the final model, but it is unclear how the decision to eliminate those items was made. Item removal must be supported by empirical evidence. Please explain this.
22. Additionally, the manuscript should explain how the authors ensured that removing so many items did not result in a partial or incomplete assessment of the construct. Each item is an indicator; removing it implies it is no longer assessed. Please explain in detail how this was addressed.
23. The journal allows up to 5 figures and tables. However, given the complexity of the study, an exception may be made. We suggest adding a network analysis of the final model as additional evidence supporting the instrument.

Discussion

24. The discussion should critically reflect on the low omega value in one of the subscales.
25. Include methodological limitations, such as the use of non-probabilistic sampling, the single geographical location (Arequipa), and the relatively small sample size for subgroup invariance testing. Another limitation is that only internal validity evidence is presented, not external validity with other instruments (only sociodemographic variables). These should be acknowledged.
26. It is recommended to further develop how this instrument can be applied in clinical settings.
27. Future studies could explore cross-cultural invariance of the instrument or its relationship with external variables such as anxiety, depression, or social skills.
28. Consider adding subsections for limitations and strengths, clinical implications, and conclusions.

Typographical and Grammatical Errors

29. In the Participants section: “50.7% women and 43.9% men” – this percentage is inconsistent.
30. Some sentences are too long or contain confusing punctuation, particularly in the "Instrument" and "Data analysis" sections.

Huamani-Cahua, J. C., Ojeda Flores, E. C., Chocano Rosas, T. J., Rivas Vargas, Ú., Bustamante Gamarra, M., Soncco Huilcahuamán, V., & Ojeda Flores, M. A. (2025). Psychometric analysis and factorial invariance of the Self-Report of Assertive Behavior (ADCA-1) in Peruvian adolescents. *Interacciones, 11*, e464. https://doi.org/10.24016/2025.v11.464

RESPONSE LETTER

Arequipa, October 9, 2025
Editor
Interacciones Journal

Present.-
Subject**:** Response to comments on the manuscript *"Psychometric Analysis and Factorial Invariance of the Self-Report of Assertive Behavior (ADCA-1) in Peruvian Adolescents: Comparisons Based on Age and Gender"*
Dear Editor,
I am pleased to submit the revised version of the aforementioned manuscript, in which the observations made during the review process have been addressed. In cases where it was deemed appropriate to maintain certain aspects of the original text, a methodological or theoretical justification has been included to support this decision.
We sincerely appreciate the valuable suggestions and comments provided, which have contributed to improving the clarity and rigor of the manuscript.
Sincerely,
Julio Cesar Huamani Cahua

Title and Abstract
1. Suggestion: I suggest a more concise title to increase the citation potential of the study. For example: *"Psychometric Analysis and Factorial Invariance of the Self-Report of Assertive Behavior (ADCA-1) in Adolescents: A Cross-Sectional Study."*
Response: As suggested by the reviewer and the editor, the title was revised to *"Psychometric Analysis and Factorial Invariance of the Self-Report of Assertive Behavior (ADCA-1) in Adolescents: A Cross-Sectional Study."*

2. Suggestion: The abstract should follow a structured format: introduction, objective, method, results, and conclusion.
Response: The abstract was restructured.
Introduction: Assertive behavior in adolescence is important for well-being and socio-emotional functioning; therefore, having valid and comparable instruments among subgroups is essential. The Self-Report of Assertive Behavior (ADCA-1) is frequently used, but its structure and equivalence between gender and age in adolescent populations require further evidence.
Objective: To assess the psychometric properties and factorial invariance of the Self-Report of Assertive Behavior (ADCA-1) in adolescents.
Method: An instrumental design was used, with a purposive non-probabilistic sample of 229 students aged 14 to 17 years (M = 15.44; SD = .82), 50.7% male and 49.3% female. The instrument used was the Self-Report of Assertive Behavior (ADCA-1).
Results: Data were analyzed using a CFA for polychoric matrices and a WLSMV estimator, identifying a well-fitted two-factor model with 20 items: self-assertion and hetero-assertion. Internal consistency was adequate for both factors (self-assertion α = .749, ω = .747; hetero-assertion α = .782, ω = .783). Factorial invariance was also confirmed by gender and age, which allowed comparisons between groups. Significant gender differences were found, with higher scores among female adolescents. No differences were observed by age.
Conclusion: The findings support the validity and reliability of the ADCA-1 for its use in adolescents and in comparative studies; it is suggested to expand the evidence with convergent validity and temporal stability in more diverse samples.

3. Suggestion: The last sentence of the abstract ("The need to continue improving the instrument…") is unclear. A more concrete and specific conclusion is recommended.
Response: That last part was removed and replaced with the conclusion, as shown in the complete abstract.
Introduction

4. Suggestion: The introduction is extensive and well-grounded. However, we recommend reducing the length of the first half, focusing more on the empirical background related to the ADCA-1 or similar instruments in Latin America, instead of reiterating the general benefits of assertiveness.
Response: It was reduced and focused as indicated.

5. Suggestion: Include more specific psychometric background of the ADCA-1, with emphasis on previous validations in international contexts.
Response: No other international studies were found, but the national background was expanded.

6. Suggestion: The introduction omits an operational definition of "self-assertion" and "hetero-assertion." It would be useful to include these, since they are the main dimensions of the instrument.
Response: They were included as indicated.

Method
7. Suggestion: Some sections of the manuscript are written in Spanish and others in English. This is highly unusual. The entire manuscript must be written in English.
Response: Thank you for pointing this out. Due to a translation/export error in a previous version, some sections remained in Spanish. We carefully reviewed the manuscript, and now the entire text is in English.

8. Suggestion: The Method section should include the following subsections: Procedure, Data Analysis, and Ethical Considerations.
Response: We included: Design, Participants, Instruments, Procedure, Data Analysis, and Ethical Considerations.
Procedure: Authorization was obtained from the administration of the public school in Arequipa and from the teachers responsible for the selected grades, to whom the objectives, scope, and procedures of the study were explained. Subsequently, the selected students were informed about the purposes of the research, the voluntary nature of their participation, and the confidentiality of the information collected. Written informed consent was obtained (in physical format). The Self-Report of Assertive Behavior (ADCA-1), adapted for Peruvian adolescents, was administered collectively or individually in a single session. At the end, the physical questionnaires were collected and stored in a secure environment.
Ethical Considerations: The study was approved by the Ethics Committee of the Catholic University of Santa Maria (FAVORABLE OPINION 176 – 2025 CIEI-UCSM). In addition, all participants provided informed consent prior to the start of the study.

9. Suggestion: Although purposive sampling is justified, the manuscript must specify the inclusion and exclusion criteria and the period of data collection, as expected in studies with primary data.
Response: Inclusion and exclusion criteria and eligibility criteria were considered: Adolescents aged 14 to 17 years, of both sexes, with informed consent from the parent/guardian and student assent, who fully completed the instrument, were included. Students who were absent on the day of application, who submitted incomplete protocols (omitted items), or who, according to teacher report, had cognitive or emotional difficulties that prevented them from responding autonomously, were excluded. From the initial population of 250 students, after applying the eligibility criteria, 21 cases were excluded, leaving a final sample of 229 students.

10. Suggestion: The authors state: "The sample was selected through purposive non-probabilistic sampling (Otzen & Monterola, 2017), since factor analysis was used, and 5 to 10 participants per item are considered adequate for sample size (Ferrando & Anguiano-Carrasco, 2010)." This does not replace a real sample size calculation. Perform an adequate sample size calculation using a standard calculator (e.g., https://wnarifin.github.io/ssc_web.html). Report the assumptions used to achieve a CFI of at least 0.95, such as the number of items per dimension, the expected average factor loading, statistical power, and the average latent correlation between dimensions.
Response: We clarified that for the sample size calculation a CFI > 0.95 was not used, but rather CFI > 0.90 (based on previous studies). Using the calculator https://wnarifin.github.io/ssc_web.html, we

calculated: two dimensions with 20 and 15 items, factor loading of 0.50, average latent correlation of 0.30, α = 0.05 (two-tailed), power (1−β) = 0.80, and 10% attrition. With these parameters (df_model = 559, df_baseline = 595), the minimum estimated sample size was n = 236 (or n = 263 considering 10% attrition). The final available sample was n = 229.
In the article we included the following content:
"Furthermore, to calculate the sample size we used Arifin's (2025) calculator for confirmatory factor analysis, assuming expected CFI = 0.90, two factors with 20 and 15 items, average factor loading = 0.50, average latent correlation between factors = 0.30, α = 0.05 (two-tailed), power = 0.80, and 10% attrition. Based on these assumptions, the minimum estimated sample size was n = 236. Finally, 229 students participated."

11. Suggestion: In the instruments section, the authors report "rx-y = 0.58," but it is not clear what x and y represent. Please clarify. (Instruments section: line 12)
Response: It was clarified that x = self-assertion and y = hetero-assertion (rx-y) were subscripts.
The dimensions were self-assertion and hetero-assertion, and the correlation between these two dimensions was rx-y = 0.58. Therefore, only r = 0.58 was reported.

12. Suggestion: The dataset and the R code must be submitted as supplementary material to allow replication of the analyses and verification of the findings.
Response: They are attached.

13. Suggestion: The use of a version adapted for Peruvian adolescents is appreciated. However, the manuscript should clarify whether this adaptation was only linguistic or also cultural.
Response: Neither a linguistic nor a cultural adaptation was used. Instead, a psychometric validation was conducted in the Peruvian population, where content validity was established by expert judges who evaluated the items in terms of clarity, relevance, and pertinence. Internal structure validity was also confirmed. This is reported in the last paragraph of the instruments section.
The instrument used was the Self-Report of Assertive Behavior (ADCA-1) by García and Magaz (2011). It can be administered individually or collectively, is applicable from age 12 through adulthood, and evaluates two main aspects: self-assertion (20 items), which measures the level of respect and consideration toward one's own feelings, ideas, and behaviors; and hetero-assertion (15 items), which evaluates respect and consideration toward the feelings, ideas, and behaviors of others. Responses are based on a Likert-type scale: "Never" (4), "Sometimes" (3), "Frequently" (2), and "Always" (1). In this instrument, high scores in the self-assertion and hetero-assertion subscales, as well as in the total score, indicate greater assertiveness, while low scores indicate deficits in assertive skills. The ADCA-1 scores are interpreted according to normative tables by age and sex, developed from percentiles (García & Magaz, 2011). The instrument has content validity and discriminant validity (cited in García & Magaz, 2000). Internal consistency reliability was determined using Cronbach's alpha (self-assertion = .90; hetero-assertion = .85), and the correlation between both subscales was moderate and positive (r = 0.58).
In this study, the psychometric validation in the Peruvian adolescent population was employed, as conducted by Rodríguez Julca (2019) and Rosario Quiroz et al. (2020) with Peruvian adolescents aged 13 to 17 years in Lima, Peru, since the original version lacked evidence of internal structure validity.

14. Suggestion: In the instruments section, the scoring structure of the ADCA-1 should be described more clearly: What is the possible score range? How is a higher score interpreted?
Response: This was included. In this instrument, high scores in the self-assertion and hetero-assertion subscales, as well as in the total score, indicate greater assertiveness, while low scores indicate deficits in assertive skills. The ADCA-1 scores are interpreted according to normative tables by age and sex, developed from percentiles (García & Magaz, 2011).

15. Suggestion: There is no specific subsection for ethical considerations. The manuscript must state whether the study was approved by an ethics committee, include the approval code, and describe the type of informed consent obtained from minors and the assent process. It is mandatory to report the name of the ethics committee and the approval code.
Response: Consent and assent are included in the ethics committee report. A subsection on ethical

considerations was added. The study was approved by the Ethics Committee of the Catholic University of Santa Maria (FAVORABLE OPINION 176 – 2025 CIEI-UCSM). In addition, all participants provided informed consent prior to the start of the study.

Informed Consent and Assent

Informed Consent for Parents, Guardians, or Legal Custodians

Study Title:

Psychometric Analysis and Factorial Invariance of the Self-Report of Assertive Behavior (ADCA-1) in Peruvian Adolescents: Comparisons Based on Age and Gender

Dear Sir/Madam:

You are cordially invited to authorize the participation of your child or minor under your guardianship in a research study whose purpose is to analyze the psychometric properties and factorial invariance of the Self-Report of Assertive Behavior (ADCA-1) in Peruvian adolescents, as well as to examine possible differences according to age and gender.

Procedure:

Your child's participation will consist of individually and voluntarily completing a questionnaire called ADCA-1, which evaluates behaviors and attitudes related to assertiveness in social contexts. The application will take place in a single session, will last approximately 20 minutes, and will be carried out in an environment suitable for their comfort. Participation does not involve any physical or psychological risks. However, in case any discomfort arises, participation may be interrupted at any time.

Confidentiality:

All collected information will be treated confidentially and anonymously. The data will be used solely for academic and scientific purposes, in compliance with current ethical standards for research with human subjects.

Your child's participation is completely voluntary. You may withdraw your consent and your child may discontinue participation at any time without any negative consequences.

Contact:

For any questions or additional information, you may contact the research team at the following email: [huamanicahua@gmail.com].

Consent Statement:

I have read and understood the information provided, and I voluntarily authorize the participation of my child or minor under my guardianship in this study.

Name of parent, guardian, or legal custodian: _____

Signature: _____ Date: _____

Informed Assent for Adolescents

Study Title:

Psychometric Analysis and Factorial Invariance of the Self-Report of Assertive Behavior (ADCA-1) in Peruvian Adolescents: Comparisons Based on Age and Gender

Dear Participant:

You are invited to take part in a research study that aims to understand how adolescents act and behave in social situations.

What would you have to do?

You will be asked to answer a questionnaire called ADCA-1, which contains questions about how you act in different situations with other people. There are no right or wrong answers; you just need to indicate what you think or do. This will take about 20 minutes. If at any moment you do not wish to continue, you can stop participating without any problem.

What will happen with your information?

Everything you answer will be kept confidential, and your name will not appear in any report. Only the researchers will see your answers, and they will be used only for academic purposes.

Is participation mandatory?

No. You can decide whether or not to participate, and you can withdraw at any time without any negative consequences.

Assent Statement:

I have read and understood what has been explained to me. I know that I can ask questions and withdraw whenever I want. I give my agreement to participate in this study.

Full Name: _____

Signature: _____ Date: _____

16. Suggestion: I suggest including an exploratory network analysis to reveal the structure of the relationships among the items, both in the original version and in the different models.
Response: It is not possible to conduct a psychometric network analysis in this study due to the following reasons:

- With 35 items, up to 595 edges (partial correlations) would need to be estimated. With n = 229, the precision is insufficient: edge weights and centrality metrics would be unstable and inaccurate.
- Since the items are ordinal, the network would typically be based on polychoric matrices; with this sample size, such matrices may be unstable or nearly non–positive definite, worsening the problem.
- Under these conditions, it is very likely that the minimum stability criteria would not be met, making the interpretation UNRELIABLE.

Results

17. Suggestion: The CFA results are well presented. However, there is an inconsistency in the omega value for the self-assertion subscale: α = .749 and ω = .474, which seems suspicious. Please verify this value, as it is unexpectedly low.
Response: It was a drafting error, and it was corrected to α = .749 and ω = .747.

18. Suggestion: Please clarify whether a multi-group CFA was performed or if the analyses were conducted separately by group.
Response: Clarification (brief). A multi-group CFA (MGCFA) was performed (not separate analyses) to evaluate invariance by gender and age. This strategy was used to compare groups because it allows testing, within a single model specification, the sequence of configural, metric, scalar, and strict invariance, which is required for valid comparisons of latent relations and means. WLSMV was used due to the ordinal nature of the items, and invariance was judged using the criteria ΔCFI ≤ .01 and ΔRMSEA ≤ .015. This approach avoids biases that may arise from fitting models separately (Cheung & Rensvold, 2002; Chen, 2007).
Additionally, a multi-group CFA (MGCFA) was conducted to assess invariance by gender and age, which involves evaluating a series of hierarchically nested models to determine whether the instrument is stable across two or more groups (Byrne, 2016).

19. Suggestion: The justification for item removal in Model 2 is not clear. Please explain this clearly and concisely in the Methods section.
Response: The data analysis section was rewritten, and the contributions are specified:
Data analysis was performed using the free software JASP (JASP Team, 2018) and RStudio, with the following packages: lavaan (Rosseel, 2012), lavaan.survey (Oberski, 2014), semTools (Jorgensen et al., 2018), and semPlot (Epskamp, 2015). The demographic characteristics of the participants, item response percentages, and descriptive statistics (mean, standard deviation, skewness, and kurtosis) were analyzed. Since the items are ordinal in nature, they are not required to meet the assumption of normality (Li, 2016).
A CFA was carried out using the WLSMV (Weighted Least Squares Mean and Variance Adjusted) estimator, which is appropriate for categorical and ordinal items (Brown, 2015; Suh, 2015; Kline, 2015). The Comparative Fit Index (CFI) and the Tucker–Lewis Index (TLI) were evaluated, considering values ≥ .90 as adequate (Bentler, 1990; Mueller & Hancock, 2008). The Standardized Root Mean Square Residual (SRMR) and the Root Mean Square Error of Approximation (RMSEA) were also analyzed, accepting values ≤ .08 with a 90% confidence interval (Brown, 2015; Hair et al., 1999; Hu & Bentler, 1998).
Item removal was based on modification indices, considering significant the χ^2 values with expected parameter changes greater than 0.20 in the unstandardized estimates (Whittaker, 2012). Items were removed when they showed low factor loadings, semantic redundancy, or correlated errors, in order to optimize construct validity, parsimony, and overall model fit (Brown, 2015; Kline, 2015).
Models with correlated errors were not used, as they imply assumptions that are difficult to verify and may artificially inflate model fit indices (DeShon, 1998). Standardized factor loadings (λ) greater than 0.50 were considered appropriate (Johnson & Stevens, 2001).

A multi-group CFA (MGCFA) was also conducted to evaluate invariance by gender and age, which involves testing a series of hierarchically nested models to determine whether the instrument is stable across two or more groups (Byrne, 2016). Based on the CFA results, factorial invariance was analyzed progressively: configural invariance (no restrictions in the factorial structure); metric invariance (equal factor loadings); strong invariance (equal factor loadings and intercepts); and strict invariance (equal factor loadings, intercepts, covariances, and error variances) (Liengaard, 2024). Evidence of invariance was determined with ΔCFI < .01 and ΔRMSEA < .015 (Putnick & Bornstein, 2016; Chen, 2007).
Internal consistency reliability was determined using Cronbach's alpha (α) and McDonald's omega (ω), with values above .70 considered acceptable (Hayes & Coutts, 2020; McDonald, 1999).
Finally, since measurement invariance was achieved, it was assumed that comparisons between groups are valid (Putnick & Bornstein, 2016). Consequently, differences in self-assertion, hetero-assertion, and general assertiveness by sex and age were analyzed. Welch's t-test was used due to the nature of the data, heterogeneity of variances, and different sample sizes (Wilcox, 2003). Additionally, effect size was calculated using Cohen's d, with thresholds d > .30 (small effect), d > .50 (medium effect), and d > .80 (large effect) (Cohen, 1992).

20. Suggestion: It is not clear how the decision was made to correlate the errors of items 6 and 12. Assuming correlated errors requires a strong theoretical justification. If such a model is used, it must be explicitly explained and justified in the Methods section.
Response: It was explained in the Methods section as follows: No models with correlated errors were used, since they imply assumptions that are difficult to verify and may artificially inflate the model fit indices (DeShon, 1998).

21. Suggestion: Model 3 is the same as Model 2, but without the correlated error term. It is acceptable not to select the model with correlated errors as the final model, but it is not clear how the decision to eliminate such items was made. Item elimination must be supported by empirical evidence. Please explain this.
Response: Items 6 and 12 were not eliminated. In CFA, local independence is assumed: the error variances (residuals) of the items are not correlated once the factor(s) are controlled. Correlated errors (residual covariances) were therefore not retained.

22. Suggestion: In addition, the manuscript must explain how the authors ensured that eliminating so many items did not result in a partial or incomplete assessment of the construct. Each item is an indicator; eliminating it means it is no longer being assessed. Please explain in detail how this was addressed.
Response: This was included in the results section, in the interpretation of the table:
In the CFA, 15 items from the original instrument were removed due to low factor loadings and high measurement errors, resulting in a 20-item model with adequate fit indices and theoretical coherence. Furthermore, the section explains the following in detail:
Previous studies on the psychometric properties of the Self-Report of Assertive Behavior (ADCA-1) did not report satisfactory fit indices in versions applied in Peru (Rosario Quiroz et al., 2020; Rodríguez Julca, 2019; García Benites, 2019). Similarly, in the thesis by Vilchez Lizondro (2022), conducted with 1665 adolescents, limited fit values were found (CFI = 0.814 and TLI = 0.802), highlighting the need to optimize the internal structure of the instrument.
Therefore, in the present study, 15 items were eliminated based on psychometric and conceptual criteria. First, some items presented low factor loadings (< .40), indicating poor representativeness of the construct, while others showed high error variance or recurrent residual correlation suggestions in the modification indices, compromising the model fit. In addition, redundant or ambiguously worded items were identified, whose retention weakened the parsimony and clarity of the instrument.
The refinement of items allowed for a more robust model (CFI and TLI > .90; RMSEA and SRMR < .08), maintaining theoretical coherence and reinforcing the construct validity of the instrument (Brown, 2015; Kline, 2015).

23. Suggestion: The journal allows up to 5 figures and tables. However, given the complexity of the study, an exception can be made. We suggest adding a network analysis of the final model as additional evidence supporting the instrument.

Response: It is not possible to conduct a psychometric network analysis in this study due to the following reasons:

- With 35 items, up to 595 edges (partial correlations) would need to be estimated. With n = 229, the precision is insufficient: edge weights and centrality metrics would be unstable and inaccurate.
- Since the items are ordinal, the network would typically be based on polychoric matrices; with this sample size, such matrices may be unstable or nearly non–positive definite, worsening the problem.
- Under these conditions, it is very likely that the minimum stability criteria would not be met, making the interpretation UNRELIABLE.

24. Suggestion: The discussion should critically reflect on the low omega value in one of the subscales.
Response: The low omega value was due to a typographical error, which has been corrected in this new version; therefore, no further corrections were made regarding this.

25. Suggestion: Include methodological limitations, such as the use of non-probabilistic sampling, the single geographic location (Arequipa), and the relatively small sample size for subgroup invariance testing. Another limitation is that only evidence of internal validity is presented, not external validity with other instruments (only sociodemographic variables). This should be acknowledged.
Response: This was included as indicated.

26. Suggestion: It is recommended to continue developing the application of this instrument in clinical settings.
Response: This was included.

27. Suggestion: Future studies could explore the cross-cultural invariance of the instrument or its relationship with external variables such as anxiety, depression, or social skills.
Response: This was included.

28. Suggestion: Subsections should be considered for limitations and strengths, clinical implications, and conclusions.
Response: This was done as suggested.

Typographical and Grammatical Errors
29. In the “Participants” section: “50,7 % women and 43,9 % men”; this percentage is inconsistent.
Response: It was corrected.
“50,7 % men and 49,3 % women”

30. Some sentences are too long or contain confusing punctuation, especially in the “Instrument” and “Data Analysis” sections.
Response: It was corrected, confusing punctuation.