
Structural validation of a brief, multidimensional measure of psychological flexibility and inflexibility in adolescence

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2 Psychological Flexibility and Inflexibility in Adolescence

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Abstract**34 Background:**

35 Psychological flexibility and inflexibility (PF/PI) are increasingly targeted in clinical
36 and preventive interventions as processes relevant to both flourishing and distress.
37 However, brief multidimensional measures that assess both constructs and are
38 developmentally appropriate for children and younger adolescents remain scarce.
39 This study investigated the dimensionality of PF/PI in early and mid-adolescence, and
40 conducted a preliminary structural validation of a brief questionnaire for potential
41 use in school settings.

42 Methods:

43 Data were drawn from a cross-sectional sample of 1,289 Finnish lower secondary
44 school students in grades six, eight, and nine. Eighteen items adapted from the
45 Children's Psychological Flexibility Questionnaire (CPFQ) were administered before a
46 digital mathematics assessment. Both exploratory (EFA) and confirmatory factor
47 analysis (CFA) with tests of measurement invariance were conducted using a split
48 sample approach. Internal consistency was evaluated using alpha and omega
49 coefficients, and average inter-item correlations.

50 Results:

51 The iterative item retention process resulted in a three-factor nine-item solution
52 (CPFQ-9) that met predefined psychometric criteria and was replicated with CFA.
53 The model included two modestly correlated PF factors (1) committed action with
54 awareness, 2) acceptance and defusion) and one largely independent PI factor (3)
55 self-judgment and fusion). Configural, metric and partial scalar invariance were
56 supported across grade and gender. Subscale internal consistency were questionable

57 to borderline acceptable but average inter-item correlations were within
58 recommended range for shorter scales.

59 **Conclusions:**

60 Findings suggest that a brief, multidimensional measure can capture developmentally
61 relevant flexibility- and inflexibility-related processes in early and mid-adolescence.
62 Further work is needed to establish convergent, divergent, and predictive validity,
63 test-retest reliability, and applicability in younger age groups and contexts, before
64 the CPFQ-9 can be considered a robustly validated, developmentally sensitive
65 measure.

66 **Keywords:** Psychological flexibility; Psychological inflexibility; Children and
67 Adolescents; Acceptance and Commitment Therapy

68 **1 Background**

69 Psychological flexibility (PF) and its counterpart, psychological inflexibility (PI),
70 are key constructs in acceptance and commitment therapy (ACT) (1) that synthesize
71 processes for relating to internal psychological experiences, and behavior change. PF
72 is defined as the willingness to engage with unwanted thoughts and feelings while
73 behaving in ways that are consistent with one's values, whereas PI refers to the rigid
74 dominance of psychological reactions over chosen values and contingencies in guiding
75 behavior (2).

76 Although the literature on associations between PF/PI and relevant mental
77 health indicators is more limited for children and adolescents, a growing body of
78 evidence has begun to emerge. PF skills have been linked to better overall functioning,
79 prosocial behavior, well-being, reduced stress, and positive behavior change (3-6) .
80 Conversely, PI has been associated with a range of negative outcomes, including
81 various forms of psychopathology (7)

82 Promoting PF and preventing PI may therefore serve as a buffer for adaptation
83 during childhood and adolescence in supporting developmental tasks such as identity
84 formation, the identification of personal values, and the establishment of self-
85 regulatory capacities (3). That the ACT model includes specific skills training
86 procedures aimed at developing PF and preventing PI provides further reason for why
87 PF and PI have increasingly become targets in school-based mental health - promoting
88 efforts for children and adolescents (8-11).

89 Valid and reliable measurement of PF and PI in children and adolescents, that is
90 feasible in the school setting, is therefore essential, both for identifying protective and
91 risk factors for healthy development, for screening and research purposes, and for
92 monitoring mechanisms of change in PF/PI - focused interventions. To serve these
93 purposes, measures must 1) adequately capture the multidimensional nature of PF/PI
94 (12,13); 2) be sufficiently brief to allow for routine administration in classroom
95 settings, where time constraints due to school-day logistics, limited time for
96 psychosocial programs, and the use of multiple instruments are common (14,15), and
97 3) employ developmentally appropriate items that are comprehensible and
98 psychometrically adequate across different age groups (7,16).

99 *1.1 The Hexaflex Model and Structural Controversy*

100 The most commonly used structural representation of PF/PI is the “hexaflex” model
101 (1,17), that comprise six interrelated subprocesses, each with a PF and PI variant:
102 acceptance vs experiential avoidance, cognitive defusion vs fusion, present-moment
103 awareness vs inflexible attention, self-as-context vs self-as-content, values vs
104 disruption of values, and committed action vs inaction/impulsivity (see Table 1).

105 There is, however, a discrepancy between the hexaflex model, and empirical
106 findings regarding the structural organization of PF/PI (12). First, PF and PI do not
107 appear to represent opposite ends of a single continuum, rather, they function as

108 distinct constructs (7,12,18,19). Second, PF and PI are frequently operationalized
 109 using unidimensional instruments (20–22). In the child and adolescent literature, this
 110 is most evident in the widespread use of the Avoidance and Fusion Questionnaire for
 111 Youth (AFQ-Y) (21). Even though the AFQ-Y consists of exclusively PI items that load
 112 onto a single factor, interpreting high AFQ scores as a proxy for low PF, and vice
 113 versa, remains an occurring practice in the literature (23–25). Third,
 114 multidimensional instruments used with younger populations tend to collapse into
 115 more parsimonious structures than the six-process hexaflex. These include two-factor
 116 models in which PF and PI form distinct but correlated subdomains (12), or three-
 117 factor models that align theoretically with the so-called “triflex” model (13), which
 118 integrates the hexaflex processes into to the three broader functional domains; open
 119 (acceptance and defusion), active (values and committed action) and aware (present-
 120 moment awareness and self-as-context).

Table 1

Overview of the psychological flexibility and inflexibility processes in the hexaflex model.

Process	Psychological Flexibility (PF)	Psychological Inflexibility (PI)
Acceptance vs. Experiential Avoidance	Willingness to experience all types of thoughts and feelings.	Attempts to avoid and suppress unwanted thoughts and feelings.
Cognitive Defusion vs. Cognitive Fusion	Seeing thoughts as just thoughts, rather than absolute truths.	Interpreting thoughts literally and allowing them to control behavior.
Present-Moment Awareness vs. Inattention	Flexible and mindful attention to the present moment.	Distraction and entanglement with past or future events.
Self-as-Context vs. Self-as-Content	Viewing oneself as greater than transient thoughts, feelings, or roles.	Being overly attached to rigid self-stories or labels.
Values vs. Disruption of Values	Clarifying what truly matters to oneself.	Lack of clarity or awareness about what truly matters.
Committed Action vs. Inaction	Engaging persistently in behaviors that align with one's values.	Avoiding action, acting impulsively, or acting contrary to one's values.

122 *1.2 Brief Multidimensional PF/PI Measurement in Children and Adolescents*

123 In addition to the lack of consensus regarding the structural organization of
124 PF/PI, and how it may differ across developmental stages, there remains a shortage
125 of briefer, validated multidimensional instruments that assess both PF and PI
126 processes, and are appropriate for younger adolescents and children. Since the
127 promotion of PF and the reduction of PI appear to represent distinct intervention
128 targets (26), linked to different outcomes of wellbeing (27), it is essential to assess
129 both constructs in order to capture the full scope of PF/PI - focused interventions
130 (26).

131 A promising development is the youth version of the CompACT (CompACT-Y)
132 (13), which has been preliminary validated in a sample of adolescents aged 13-18 (M
133 = 16.25). Evidence for its structural validity remains, however, preliminary, relying
134 on a single study that employed exploratory factor analysis (EFA) without confirming
135 the model in a separate sample or testing measurement invariance across relevant
136 developmental subgroups, such as age and gender. With 19 items in its final form,
137 the CompACT-Y is also relatively lengthy for routine use in school-based
138 interventions, where brevity and feasibility are essential.

139 An instrument that offers a promising foundation for developing a
140 multidimensional, shorter PF/PI form suitable for routine classroom assessment
141 across different stages of development is the Children's Psychological Flexibility
142 Questionnaire (CPFQ) (28). The original CPFQ consists of 24 items that assess both
143 PF and PI variants of each hexaflex process, written in child-friendly language, with
144 the aim to be suitable for a wider range of young people. Evidence of convergent
145 validity and developmental appropriateness has been demonstrated in samples
146 ranging from 10-year-old children to adults over 50 (29,30). This age
147 appropriateness, together with its representative coverage of hexaflex processes,

148 provides a strong basis for investigating the dimensionality of PF/PI in younger
149 populations, and constructing a shorter multidimensional instrument.

150 Utilizing a large sample ($N = 1289$) of Finnish students from grades six (typically aged
151 12-13 years), eight (typically aged 14-15 years), and nine (typically aged 15-16 years),
152 this study has two aims, informing both theory and practice: 1) to investigate the
153 dimensionality of PF/PI in early and mid-adolescence, contributing to the discussion
154 regarding the structure of PF/PI in younger populations; and 2) to develop and
155 structurally validate a brief, multidimensional, and developmentally sensitive PF/PI
156 measure based on 18 items, derived from the Children's Psychological Flexibility
157 Questionnaire (CPFQ).

158 *1.3 The present study*

159 We employ a cross-sectional, split-sample design to conduct the structural
160 validation with the 18 items as the starting point: exploratory factor analysis (EFA) is
161 first used to identify a factor structure and employ an item reduction process that
162 optimally balances psychometric rigor and conceptual coherence, followed by
163 confirmatory factor analysis (CFA) and tests of measurement invariance (MI) across
164 grade levels and gender. Additionally, internal consistency is estimated.

165 To our knowledge, this is the first study to conduct a structural validation including
166 both EFA and CFA, as well as MI testing, of a multidimensional PF/PI measure
167 specifically developed for children and adolescents. Because CPFQ items have not
168 previously undergone factor analysis, and given that existing youth PF/PI measures
169 have yielded varying structural organizations, an exploratory approach is as an
170 appropriate starting point for identifying the most proper factor structure of a brief
171 CPFQ-derived instrument.

172 **2 Methods**

173 *2.1 Participants*

174 The sample consisted of 360 students from Finnish-speaking lower secondary schools,
175 571 sixth-graders (typically aged 12-13 years), 332 eighth- graders (typically aged 14-
176 15 years) and 386 ninth-graders (typically aged 15-16 years). Of these, 668 (51.8%)
177 were boys and 621 (48.2 %) girls.

178

179 To ensure a rigorous validation process, the total sample was divided into two
180 subsamples, of which the first was used to identify the latent structure of the item set
181 through exploratory factor analysis (EFA), and the second was reserved for
182 confirmatory factor analysis (CFA) and measurement invariance testing (MI).

183 The EFA subsample consisted of 360 students, including 166 eighth-graders and
184 194 ninth-graders (52% boys). The CFA subsample ($n = 929$, 51.8 % boys) included the
185 remaining eighth- ($n = 166$) and ninth-grade ($n = 192$) students together with the
186 complete set of sixth-grade students ($n = 571$).

187 The choice not to include sixth graders in the EFAs was to maximize the power
188 of the CFAs with MI testing and to investigate whether the identified factor structure
189 is generalized to an earlier stage of development.

190 *2.2 Data collection*

191 The study followed the Finnish law, the ethical guidelines of the Finnish National
192 Board on Research Integrity (TENK), and the Declaration of Helsinki. Research
193 permissions were obtained from the participating municipalities. Guardians were
194 informed, and all the students participated anonymously and voluntarily. A passive
195 consent procedure was used, allowing students to decrease the usage of their data.

196 Data were collected in April 2025, as part of the DigiEva project, which assessed
197 mathematical abilities at the end of the school year across grades 3, 6, 8, and 9 in
198 Finnish- and Swedish-speaking schools in Finland.

199 Assessments were completed electronically via the ViLLE digital platform (31),
200 with the 18 items embedded in a set of socio-emotional background questionnaires
201 completed prior to the test tasks.

202 *2.3 Measure*

203 2.3.1 Children's Psychological Flexibility Questionnaire - 18 Item Version

204 Our items were derived from The Children's Psychological Flexibility
205 Questionnaire (CPFQ) (28), which is a 24-item self-report measure that covers each
206 process in the hexaflex model: present moment awareness, acceptance, cognitive
207 defusion, self-as-context, values, and committed action. Each subscale includes both
208 positively and negatively worded items and thus hold the potential to assess both PF
209 and PI variants of each hexaflex process, even though the original CPFQ scoring
210 procedure aggregates subscale scores into a single overarching PF score.

211 Each subscale contains four items (two positively and two negatively worded).
212 Responses are recorded on a five-point Likert scale, ranging from "never" (0) to
213 "always" (4). Subscale scores are summed to form the total PF score, ranging from 0
214 to 96.

215 Due to time constraints before the mathematics test, the item pool was reduced
216 to 18 items, selecting three items per subprocess to subscale to ensure complete
217 coverage of both PF and PI variants of each hexaflex process and since three items per
218 dimension is often regarded as the minimum to achieve stable factor modeling. This
219 pragmatic reduction also aligns with one of the study aims, which is to develop a brief
220 PF/PI instrument suitable for routine use.

221 The item set consisted of nine positively worded items and nine negatively
222 worded items. For the statistical analyses, the negatively worded items were reverse
223 scored, such that higher scores indicate low levels of PI, whereas higher scores on the

224 positively worded items indicate higher PF. The total score of the 18-item set ranges
225 from 0 to 72.

226 The selection of the 18 items was conducted by two of the authors, both trained
227 clinical psychologists. For each subprocess, one item was removed, selecting items
228 whose content showed greatest overlap with another item in the subscale or whose
229 wording was deemed as less comprehensible compared to other items in the subscales.
230 See Appendix A for the item order of the original CPFQ 24-item pool and the
231 inclusion/exclusion decisions made for the 18-item version.

232 When constructing the reduced form, three items were simplified for clarity: 1)
233 “If I lose I try again right away to do better” to “If I fail, I try again right away to do
234 better”; 2) I notice my thoughts and feelings but that is not me” to “I notice my thoughts
235 and feelings”; and 3) “I miss seeing stuff happen or hearing what people say” to
236 “Sometimes I don’t notice what’s happening or what people say”. The item order was
237 adjusted based on comprehension difficulty, progressing from easier to more
238 challenging, as judged by the authors with backgrounds in clinical psychology.

239 The translation into Finnish was done through collaboration between two
240 authors fluent in both English and Finnish. To ensure semantic consistency in item
241 content, a back-translation procedure was employed, with a third author translating
242 the items back into English. The back-translation was consistent with the original
243 English items without any problematic deviations appearing. See Appendix B for the
244 output of the translation process.

245 *2.4 Data analysis*

246 2.4.1 Descriptive Statistics

247 Means and standard deviations for each item and the total score of the full 18-
248 item scale were calculated separately by grade level and gender.

249 2.4.2 Exploratory Factor Analysis

250 To explore the underlying structure of the items, we conducted exploratory factor
251 analysis (EFA) using principal axis factoring (PAF), using direct oblimin rotation, as
252 the factors were assumed to be correlated (32,33). Although CPFQ responses are
253 technically ordinal, we treated them as continuous and used Pearson's correlation
254 instead of polychoric correlation, which is an acceptable procedure for scales with five
255 or more response categories (33–35). PAF was chosen for its robustness to
256 nonnormality and its suitability for uncovering latent structure (32,33).

257 Prior to analysis, data suitability was assessed through univariate skewness and
258 kurtosis (thresholds ≥ 2.0 and ≥ 7.0), histograms and Q-Q plots. Bartlett's test of
259 sphericity and the Kaiser–Meyer–Olkin test (KMO) (36) were used to confirm
260 factorability, with a KMO $\geq .50$ required (33). The determinant of the correlation
261 matrix was checked for multicollinearity.

262 Following best-practice guidelines (33), we determined the number of factors
263 using multiple methods and made an integrative decision based on scree plot analysis
264 (37), parallel analysis (38) and the Minimum Average Partial (MAP) (39) test. When
265 these methods indicated different factor structures, our decision was based on a
266 compromise between the alternatives, taking into account parsimony, factor stability
267 (a minimum of three items per factor) (33), and the communalities among the items
268 assigned to each factor.

269 Item retention decisions were made through iterative rounds in which items
270 were flagged for removal based on four criteria. Three criteria (C1-C3) regarded factor
271 loadings, following Howard's ".40, .30, .20 rule" (40) which integrates best-practice
272 recommendations by applying cut-offs of ≥ 0.40 for primary loadings (C1), < 0.30 for
273 secondary loadings (C2), and a minimum difference of 0.20 between the two (C3). In

274 addition, a fourth criterion (C4) was applied, specifying a minimum acceptable
275 communality of .30.

276 In each round, the item that showed the most severe violation of the criteria was
277 deleted, with concurrent violations of C1 and C4 considered most severe, followed by
278 an evaluation of the number and magnitude of cross-loadings. Once the model had
279 been refined by removing psychometrically unacceptable items, theoretical
280 considerations guided further decisions regarding borderline-performing items. These
281 considerations included the item's conceptual alignment with PF/PI theory and
282 potential content overlap with other, better-performing items. The refinement process
283 continued until a satisfactory solution was achieved that reached our psychometric
284 criteria, balanced with conceptual coherence.

285 The internal consistency of the factors was assessed using Cronbach's alpha (41)
286 and McDonald's omega (42).

287 2.4.3 Confirmatory Factor Analysis

288 We continued to treat the variables as continuous due to the presence of five
289 response categories (35), conducting the CFAs with maximum likelihood estimation.
290 Item-level missingness, univariate and multivariate normality, were assessed to
291 determine the suitability of the data and whether a robust maximum likelihood
292 estimation method was required. Missing data were handled using full information
293 maximum likelihood (FIML).

294 Following established guidelines (43), model fit was evaluated using
295 Comparative Fit Index (CFI), Standardized Root Mean Square Residual (SRMR), Root
296 Mean Square Error of Approximation (RMSEA) and the Tucker-Lewis Index (TLI),
297 applying the following cutoffs for acceptable fit, found in the literature (44,45): CFI
298 $>.95$ (good fit) or $>.90$ (acceptable fit), TLI $>.95$ (good fit) or $>.90$ (acceptable fit),

299 SRMR $<.08$, and RMSEA $<.06$ (good fit) or $<.07$ (acceptable fit). The Chi-Square test
300 of model fit is also reported with a statistical non-significant ($p > .05$) result indicating
301 good fit. However, because this test is highly sensitive to sample size, it was not used
302 as a primary indication of model fit in our analyses (44). Modification indices were
303 examined to determine whether conceptually justifiable correlations between residuals
304 could be included to improve model fit.

305 Internal consistency was estimated with Cronbach's Alpha and McDonald's
306 omega. In addition, average inter-item correlations (AIIC) were calculated for each
307 factor, as this estimate is by some scholars considered more useful than Cronbach's
308 alpha for short scales (46). According to guidelines in the literature, an AIIC between
309 $.15$ and $.50$ indicates an appropriate balance between internal homogeneity and lack
310 of item redundancy (46).

311 2.4.4 Measurement Invariance

312 Configural, metric, and scalar invariance were tested across grade levels and
313 gender. In the configural invariance model, all parameters were freely estimated
314 across groups. Metric invariance was tested by constraining factor loadings, and model
315 fit indices were compared to the configural invariance model. The scalar invariance
316 model further constrained both factor loadings and item intercepts, with model fit
317 indices compared to the metric invariance model. As noted in Putnick and Bornstein's
318 state-of-the-art summary of guidelines (47), the literature lacks universally accepted
319 criteria for determining acceptable model fit when comparing different levels of
320 invariance. We therefore followed the guidelines found in the PF/PI literature (48),
321 according to which at least two of the following criteria must be met to support
322 invariance: ΔCFI and $\Delta TLI \leq .01$, and $\Delta RMSEA \leq .015$.

323 Descriptive statistics, EFA, CFA and MI tests (configural, metric, and scalar
324 invariance models) were conducted using the jamovi software (49). Simulated

325 eigenvalues, the MAP test, partial scalar invariance models, the path diagram, and
326 average inter-item correlations were generated in R, using the psych (50), lavaan (51),
327 semPlot (52), and semTools (53) packages.

328 **3 Results**

329 *3.1 Descriptive Statistics*

330 Item and order and descriptive statistics (M, SD) for each item and for the total
331 score, stratified by age and gender using the full sample, are presented in Table 2.

332 *3.2 Exploratory Factor Analysis*

333 3.2.1 Missing Data and Descriptive Statistics

334 Complete data on all 18 items were available for 315 participants (87.5 %). Item-
335 level missingness was low (0-7 per item) and Little's MCAR indicated that the data
336 were consistent with MCAR ($X^2 [317] = 309.699, p = .605$), justifying pairwise deletion.

337 3.2.2 Evaluation of Data Suitability for Factor Analysis

338 Univariate skewness and kurtosis indicated that no items exceeded thresholds
339 for problematic non-normality. While histograms showed some deviations, factor
340 analysis was conducted using Pearson's correlations, due to principal axis factoring's
341 robustness to moderate nonnormality, and the large sample size.

342 Bartlett's test of sphericity was significant ($P < .001$) and the Kaiser-Meyer-Olkin
343 measure was .75 (item range .54 - .81), exceeding the recommended .50 threshold and
344 supporting the suitability of the data for factor analysis

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Table 2*Item Order in the 18- CPFQ Item Set and Descriptive Statistics*

Item	Grade 6	Grade 6	Grade 8	Grade 8	Grade 9	Grade 9
	Girls	Boys	Girls	Boys	Girls	Boys
1. I try really hard every day.	3.07 (0.78) ^a	2.99 (0.83)	2.82 (0.76)	2.50 (0.88)	2.91 (0.75)	2.63 (0.83)
2. If I fail. I try again right away to do better.	2.67 (0.89)	2.75 (0.88)	2.29 (0.93)	2.29 (0.94)	2.50 (0.88)	2.47 (0.88)
3. There are things I really care about.	3.39 (0.80)	3.20 (0.95)	3.34 (0.86)	2.92 (1.08)	3.34 (0.91)	3.38 (0.80)
4. I notice my thoughts and feelings.	3.04 (0.89)	3.02 (0.88)	2.95 (0.89)	2.72 (0.96)	3.07 (0.89)	3.05 (0.80)
5. I give up when things are too hard.*	2.38 (1.03)	2.47 (1.06)	2.09 (1.14)	2.40 (0.93)	2.13 (1.05)	2.36 (0.99)
6. Nothing matters that much to me.*	3.32 (0.93)	3.18 (1.04)	3.16 (0.98)	3.08 (1.00)	3.26 (0.97)	3.27 (0.96)
7. It's OK to be scared.	2.83 (1.12)	2.27 (1.30)	2.76 (1.11)	1.93 (1.35)	2.64 (1.08)	2.14 (1.18)
8. If I think something. that doesn't mean it's true.	2.48 (1.08)	2.63 (1.13)	2.60 (0.99)	2.45 (1.14)	2.55 (0.98)	2.60 (1.02)
9. Sometimes I don't notice what's happening or what people are saying.*	1.78 (1.02)	1.98 (1.13)	1.58 (1.02)	2.08 (1.10)	1.76 (1.15)	1.89 (1.06)
10. My thoughts don't make me do what I do.	1.94 (0.94)	2.11 (1.14)	1.82 (1.03)	1.96 (1.02)	1.92 (1.02)	2.11 (1.00)
11. It's OK to feel mad.	2.99 (1.00)	2.90 (1.07)	3.04 (0.92)	2.63 (1.06)	2.97 (0.97)	2.84 (0.95)
12. If I do something bad. then I'm a bad person.*	2.47 (1.12)	2.70 (1.14)	2.48 (1.16)	2.52 (1.10)	2.56 (1.14)	2.75 (1.10)
13. I worry a lot about stuff I did or need to do.*	1.55 (1.15)	2.20 (1.08)	1.39 (1.03)	2.12 (1.15)	1.17 (1.08)	1.86 (1.06)
14. I notice when my body feels different.	2.43 (1.05)	2.28 (1.19)	2.64 (1.02)	1.99 (1.17)	2.53 (0.97)	2.33 (1.15)
15. If I get angry. it means I messed up.*	2.42 (1.15)	2.71 (1.05)	2.26 (1.16)	2.83 (1.06)	2.40 (1.14)	2.82 (0.97)
16. My thoughts and feelings tell me what to do.*	1.85 (1.02)	2.06 (1.14)	1.69 (0.90)	2.10 (1.09)	1.70 (0.87)	1.93 (0.99)
17. I am what other people say about me.*	2.38 (1.16)	2.76 (1.15)	2.48 (1.07)	2.56 (1.06)	2.58 (1.03)	2.60 (1.08)
18. Grown-ups tell me what is important to me.*	2.21 (1.22)	2.11 (1.30)	2.64 (0.98)	2.45 (1.26)	2.64 (1.12)	2.46 (1.13)
Total Score	45.00 (6.77)	46.50 (7.09)	44.20 (6.83)	43.60 (5.98)	44.30 (1.12)	45.6 (6.77)

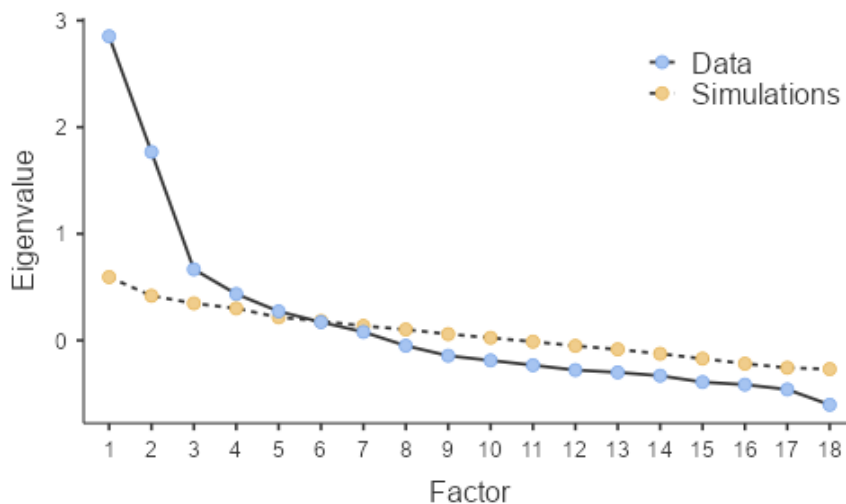
Note. * = reverse-scored items, ^a = M (SD)

355 3.2.3 Factor Retention

356 All three factor retention criteria indicated different numbers of factors. The MAP test
 357 indicated a 2-factor structure, while the scree plot indicated three factors and the
 358 parallel analysis five (see Figure 1 for parallel analysis scree plot and Appendix C for
 359 exact initial and simulated eigenvalues). The two-factor solution appeared somewhat
 360 noisy, with numerous items showing problematically low communalities (11 items <
 361 .30), whereas the five-factor model included three two-item factors (primary loadings
 362 > .40), contributing with instability to the structure. Accordingly, we selected the
 363 three-factor model as the basis for the subsequent item-reduction process.

364 **Figure 1**

365 *Parallel Analysis Scree Plot*



366

367 *Note.* Data = Initial Eigenvalues, Simulations = Simulated Eigenvalues

368 3.2.4 Item Retention

369 The three-factor model explained 32.7% of the variance but displayed a
 370 somewhat messy structure, with several items showing cross-loadings and low
 371 communalities. The iterative item retention process proceeded in nine rounds, during

372 which eight items were removed based on a combination of low primary loading and
 373 low communality, in the following order: 10, 16, 14, 9, 17, 18, 6, and 5 (see Table 3 for
 374 item content). In the final refinement round, item 3 was removed due to a cross-loading
 375 difference of less than .10 and poor conceptual fit with its primary factor, despite
 376 having a primary loading that approached .40 and adequate communality. See
 377 Appendix D for the output from each round of the item retention process.

378 The final nine-item model produced a clean and interpretable structure (Table
 379 3), with each factor including three items and the model explaining 46.5 % of the
 380 variance. The retained items met all inclusion criteria except for item 12, that had a
 381 communality ($h^2 = .27$), slightly below the threshold. This item was retained because
 382 it met all criteria related to factor loadings (C1-C3), aligned theoretically with Factor
 383 3, and contributed to maintaining a stable structure of three items per factor.

384 This shorter form was labeled CPFQ-9, including the following factors: FA 1)
 385 committed action with awareness (items 1, 2, and 4); FA 2) acceptance and defusion
 386 (items 7, 8, and 11), and FA 3) fusion and self-judgement (items 12, 13, and 15).

Table 3

Items and Factor Loadings for the CPFQ-9

CPFQ Item	FA 1	FA 2	FA 3	h^2
1. I try really hard every day.	.64			.42
2. If I fail, I try again right away to do better.	.86			.72
4. I notice my thoughts and feelings.	.48			.38
7. It's OK to be scared.		.61		.43
8. If I think something, that doesn't mean it's true.		.52		.37
11. It's OK to feel mad.		.75		.53
12. If I do something bad, then I'm a bad person.			.51	.27

13. I worry a lot about stuff I did or need to do.	.61	.45
15. If I get angry, it means I messed up.	.81	.65

Note. FA 1 = Committed Action with Awareness; FA 2 = Acceptance and Defusion; FA 3 = Fusion and Self-Judgement; h^2 = Communality.

387

388 3.2.5 Inter-Factor Correlations and Internal Consistency

389 Factors 1 and 2 were modestly correlated ($r = .38$), while correlations between
 390 Factor 1 and Factor 3 ($r = .06$), and Factor 2 and Factor 3 ($r = -.09$) were low,
 391 suggesting different constructs and supporting the use of oblique rotation. Reliability
 392 analyses showed acceptable or borderline internal consistency for the different factors:
 393 $\alpha = .71$ (Factor 1), $\alpha = .68$ (Factor 2), and $\alpha = .68$ (Factor 3). The full scale showed
 394 questionable internal consistency ($\alpha = .60$), indicating that interpretation is more
 395 appropriate at the subscale level. To complement alpha, we also computed McDonald's
 396 ω total. The results were consistent with α , with ω being .73 for Factor 1, .68 for Factor
 397 2, .69 for Factor 3, and .65 for the full scale.

398 3.3 Confirmatory Factor Analysis

399 In the CFA sample, complete data on all 18 items were available for 781
 400 participants (84.0 %) and item-level missingness was low (3-25). Little's MCAR test
 401 indicated that the data were consistent with MCAR ($X^2 [105] = 108.624, p = .385$).
 402 All items showed skewness below .2 and kurtosis below .7, indicating no severe
 403 violations of univariate normality. However, Mardia's tests for skewness and kurtosis
 404 were both significant ($p < .001$), suggesting deviations from multivariate normality
 405 and justifying the use of robust maximum likelihood estimation (MLR).

406 We proceeded to model the nine-item three-factor model, using the full CFA
 407 sample. All factor loadings were statistically significant, ranging from .42 to .78, with
 408 eight of the nine items loading above .50. The chi-square test indicated a statistically

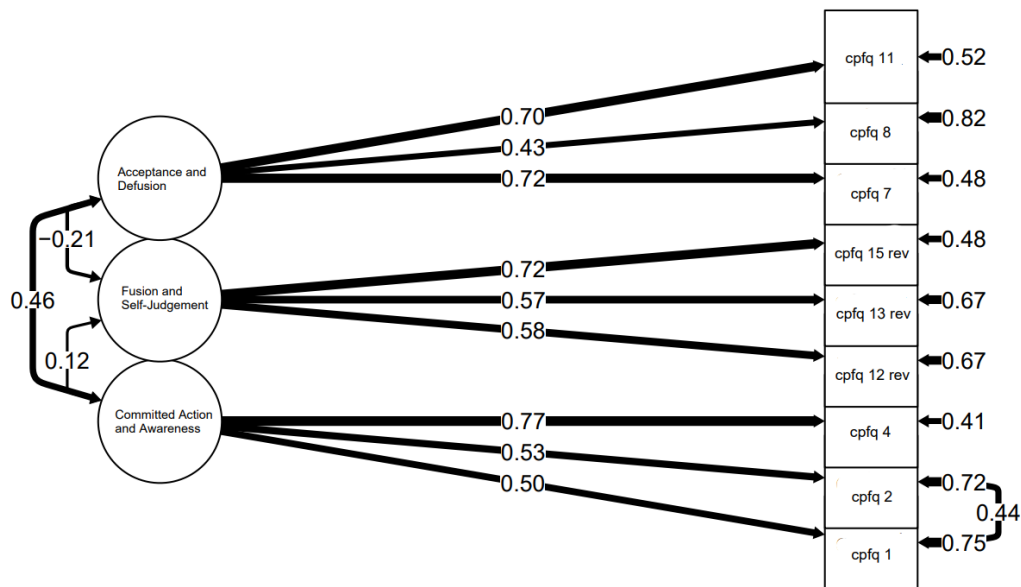
409 significant ($p < .001$) model misfit, and the TLI (.882) was slightly below the cutoff
410 for acceptable fit. However, RMSEA (.069), SRMR (.057), and CFI (.921) were all
411 within the acceptable range. Examination of the modification indices suggested that
412 adding a residual covariance between items 1 and 2 would improve model fit
413 substantially (MI = 27.8). As these items overlap in content and load on the same
414 factor (Factor 1), allowing the residual correlation was theoretically justified.

415 A revised model was therefore tested with this residual covariance included.
416 Although the Chi-Square test continued to be statistically significant, all other fit
417 indices suggested acceptable model fit and a clear improvement compared to the
418 more constrained model (see Table 4). All factor loadings remained statistically
419 significant, ranging from .43 to .77 (see Figure 2). The inter-factor correlations
420 indicated a moderate positive correlation between Factors 1 and 2 ($r = .46$), a weak
421 positive correlation between Factors 1 and 3 ($r = .12$), and a weak negative
422 correlation between Factors 2 and 3 ($r = -.21$).

423 The average inter-item correlations were .45 for Factor 1, .37 for Factor 2, and
424 .38 for Factor 3, indicating sufficient homogeneity without redundancy. Estimation of
425 internal consistency using Cronbach's alpha indicated borderline-to-acceptable
426 reliability for Factor 1 ($\alpha = .71$), Factor 2 ($\alpha = .63$) and Factor 3 ($\alpha = .65$). The omega
427 total coefficients were .57 for Factor 1, .66 for Factor 2, and .66 for Factor 3. The
428 lower omega value for Factor 1 reflects that omega accounts for the specified
429 measurement model, including the residual covariance.

430 **Figure 2**

431 *Confirmatory Factor Analysis Model of the CPFQ-9*



432

433 *3.4 Measurement Invariance*

434 Measurement invariance testing was conducted using multi-group CFAs across
 435 grade and gender at three levels: configural, metric, and scalar. Model fit indices for
 436 all models are presented in Table 4. The models assessing configural and metric
 437 invariance met the established criteria for both grade and gender. However, full
 438 scalar invariance was not supported in either grouping variable, indicating that some
 439 item intercepts were not equivalent across groups. To achieve partial scalar
 440 invariance, item intercept constraints were released sequentially, beginning with
 441 those that contributed most to model misfit. This procedure was continued until an
 442 acceptable level of partial invariance was obtained, ensuring that no more than one
 443 intercept per factor was freely estimated. For the grade variable, partial scalar
 444 invariance was achieved by freeing the intercept of item 4, whereas for the gender
 445 groups, the intercepts of items 2, 7, and 13 were freed.

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Table 4*Measurement Invariance Model Fit Indices Across Grade and Gender Groups*

Group	Model	X^2	df	CFI	Δ CFI	TLI	Δ TLI	SRMR	RMSEA	Δ RMSEA	90 % CI
Total sample	Constrained model	128.480***	24	.917		.875		.057	.069		[.058, .069]
	Adjusted model ^a	100.179***	23	.939		.904		.051	.060		[.049, .060]
Grade	Configural	144.526***	69	.939		.904		.055	.060		[.047, .060]
	Metric	159.474***	81	.937	.002	.915	.011	.060	.056	.003	[.044, .056]
	Scalar	211.544***	93	.904	.033	.889	.026	.067	.064	.008	[.053, .067]
	Partial scalar ^b	186.585***	91	.923	.014	.908	.007	.063	.058	.002	[.047, .058]
Gender	Configural	115.179***	46	.944		.912		.053	.057		[.045, .057]
	Metric	131.752***	52	.935	.009	.911	.001	.058	.058	.001	[.046, .058]
	Scalar	213.864***	58	.874	.061	.843	.068	.068	.076	.018	[.066, .076]
	Partial scalar ^c	142.413***	55	.929	.055	.907	.064	.060	.059	.017	[.047, .059]

Note. X^2 = Chi-Square Test, df = degrees of freedom, CFI = Comparative Fit Index, TLI = Tucker Lewis Index, SRMR = Standardized Root Mean Square Residuals, RMSEA = Root-Mean-Square Error of Approximation, CI = Confidence Interval.

Mean Square Residuals, RMSEA = Root-Mean-Square Error of Approximation, CI = Confidence Interval.

^a Residuals of items 1 and 2 correlated.

^b Intercept of item 4 freed

^c Intercepts of items 2, 7, and 13 freed

* $p < .05$. ** $p < .01$. *** $p < .001$.

462 **4 Discussion**

463 This study aimed to inform both theory and practice by investigating the
464 structure of psychological flexibility (PF) and inflexibility (PI) in early- and mid-
465 adolescence, and by providing a preliminary validation of a brief, multidimensional
466 measure for use in a school setting, the CPFQ-9. Using a large sample spanning from
467 early to mid - adolescence, this is, to our knowledge, the first structural validation of
468 a multidimensional PF/PI- measure specifically developed for younger populations that
469 employs both exploratory and confirmatory factor analyses, with tests of measurement
470 invariance across relevant groups. Through an iterative, exploratory item-retention
471 process, we identified a parsimonious 9-item, three-factor structure, which was
472 replicated in a split sample and demonstrated configural, metric, and partial scalar
473 invariance across different ages and gender.

474 *4.1 Theoretical Considerations*

475 The resulting structure consisted of two PF dimensions (Factor 1 and 2) and one
476 PI dimension (Factor 3). Although the items are factors are derived from a PF/PI
477 framework, the results can also be interpreted through a broader developmental lens,
478 with conceptual parallels to other regulatory and vulnerability constructs. Specifically,
479 the CPFQ-9 factors align conceptually with three widely recognized domains of
480 functioning: behavioral regulation, emotional regulation, and negative affect.

481 Factor 1, labeled committed action with awareness, reflects a PF domain
482 characterized by sustained engagement in goal-directed behavior, even in the face of
483 difficulties or setbacks. Conceptually, this aligns with the “active” component of the
484 triflex model (54,55). In contrast to related measures (7,13), the items in this domain
485 describe sustained persistence in goal-directed behaviors without incorporating the
486 component of value congruence. This may reflect differences in item wording: in the
487 CPFQ item set, committed action and values are represented by separate items,

488 whereas other instruments combine these constructs within the same items (7,13). In
489 our analyses, the “pure” values items – which describe insight into what is important
490 to oneself – did not load on this domain of overt behavior. Instead, the factor suggests
491 a functional connection between attentional awareness and committed action. As early
492 and mid-adolescents are still in the process of clarifying their personal values, the
493 attentional capacity for noticing may serve as a more potent resource for regulating
494 goal-directed behavior, before the establishment of the reinforcing function of
495 personally chosen values. The aspects of persistence and goal-directed behavior
496 reflected in this factor correspond theoretically to developmentally relevant models of
497 behavioral regulation. Such models include temperament theories of effortful control
498 (56) as well as executive function frameworks that describe the gradual maturation of
499 prefrontal cortical systems supporting sustained attention and flexible goal
500 maintenance across adolescence (57). The component of attentional awareness
501 included in the factor aligns with literature indicating a link between mindfulness skills
502 and behavioral regulation (58,59), as reflected in the concept of “acting with
503 awareness”, which is described as a core facet of mindfulness (5). Considering these
504 convergent theoretical aspects, the factor could be conceptualized through the lens of
505 a broader attentional-behavioral regulatory system, rather than just the narrower
506 PF/PI construct of committed action.

507 Factor 2, labeled acceptance and defusion, represents a PF domain
508 characterized by a non-judgmental and flexible stance toward internal experiences.
509 This factor is a clear reflection of the “open” dimension that has emerged in other
510 multidimensional PF/PI measures (7,13). However, it differs from dimensions in related
511 instruments in that it consists of positively worded items capturing the PF variant of
512 the dimension, instead of negatively worded items that align with the PI processes of
513 fusion and experiential avoidance. More broadly, this factor is consistent with
514 developmental models of emotion regulation, which suggest that strategies such as

515 acceptance, cognitive distancing and reappraisal become progressively more
516 prominent as individuals move from childhood into adolescence - a typical
517 developmental trajectory in which emotion regulation gradually transitions from
518 reliance of external sources to the development of internally guided regulatory
519 capacities (60,61).

520 Factor 3, labeled fusion and self-judgment, represents a PI domain characterized
521 by rigid entanglement with negative self-evaluations and a narrowing of attentional
522 processes. The factor appears to reflect a broad dimension of tendency for negative
523 affect marked by worry, rumination, and self-criticism, aligning it with established
524 vulnerability constructs such as neuroticism (62). Interestingly, this factor emerged
525 independently of the two PF, "regulatory" factors - a pattern consistent with evidence
526 demonstrating the relative independence between flourishing and distress (63), as also
527 reflected in the largely orthogonal relationship that has been demonstrated between
528 PF and PI (12,26).

529 These findings parallel the dual-factor model of mental health, which
530 conceptualizes well-being and distress as partially independent dimensions (64). PF-
531 related factors may capture self-regulatory skills that operate as upstream
532 mechanisms, helping explain why flourishing and distress can cooccur (e.g.,
533 "symptomatic-but-content" profiles). Such a model underscores the importance of
534 monitoring PF and PI processes in parallel during screening and intervention
535 evaluation, given that strategies that influence one (eg. PF) do not necessarily
536 influence the other (eg. PI).

537 Moreover, regulatory dimensions such as Factors 1 and 2 may represent more
538 meaningful operationalizations of intervention focus in preventive contexts, where
539 evaluations are often constrained by floor effects on symptom measures (65). From
540 both developmental and intervention-science perspectives, an interesting future

541 direction for research is to examine interactions between the two PF factors and the
542 PI factor as facilitators for intervention progress. For example, whether the
543 developmental trajectories of these three systems moderate the effectiveness of PF/PI
544 interventions. A related question of interest is whether more advanced behavioral and
545 emotional regulation capacities serve a scaffolding function when learning ACT
546 principles, or whether heightened vulnerability to negative affect functions as a barrier
547 to such development.

548 *4.2 Developmental Considerations*

549 As noted by Petersen et al. (2024) (3) there is a need for empirical validation of
550 the hexaflex model in younger populations, as PF/PI subprocesses may not be as
551 discretely separated as the model suggests. Our study is in line with a growing body of
552 research (7,12,13) suggesting that PF/PI processes may be better represented by more
553 parsimonious models. This is not necessarily only a statistical artefact, but may reflect
554 the developmental trajectory of PF/PI processes. As others have pointed out, it is likely
555 that not all PF/PI processes are equally salient at all stages of development (3), and
556 that some processes only become fully available at later stage of maturation. For
557 example, the perspective-taking capacity described in the self-as-context process, or a
558 non-literal, defused stance toward thoughts, requires well-developed metacognitive
559 and linguistic resources, whereas the concept of personally chosen values may become
560 more strongly and contingently linked to overt behavior towards the end of
561 adolescence, when identity formation and value clarification become central
562 developmental tasks.

563 On the other hand, unidimensional measures of only PF or only PI appear as too
564 narrow to represent the broader PF/PI constructs. Interventions for children and
565 adolescents may therefore benefit from targeting a smaller number of functional
566 clusters, rather than being structured around each separate hexaflex process (3,66).

567 For example, PF/PI intervention procedures may be most effective when they are
568 explicitly targeted toward the three dimensions found in these results. Committed
569 action and present-moment awareness may support the development of behavioral
570 regulation, acceptance and defusion techniques may strengthen the “emotion
571 regulation system”, and targeting fusion, rigid self-judgment, and inattention may help
572 reduce vulnerability to negative affect. This dual-factor perspective where PF and PI
573 represent concurrent constructs of both protection and vulnerability, also highlights
574 the importance of multidimensional assessment within youth-focused PF/PI
575 interventions. The use of multidimensional measures in youth intervention studies is
576 currently strikingly rare and the vast majority of PF/PI evidence in intervention studies
577 is still relying on the unidimensional AFQ (blinded reference, manuscript in
578 preparation).

579 *4.3 Preliminary Validation of the CPFQ-9: Contributions and Remaining Questions*

580 4.3.1 Structural Validity and Measurement Invariance

581 This study provides structural evidence for the CPFQ-9 as a brief and
582 multidimensional PF/PI measure that is designed specifically for children and
583 adolescents. Its brevity makes it suitable for routine use in time-constrained
584 environments such as school settings. The factor structure was first identified using
585 established criteria in EFA and then replicated with CFA across ages ranging from
586 early to mid-adolescence. Structural validity is further supported by evidence of
587 configural, metric, and partial scalar invariance across grade levels and gender.

588 Given the partial scalar invariance demonstrated in the present study, the comparison
589 of latent means between genders and grade levels is warranted using the less
590 constrained model. However, such comparisons should be interpreted with appropriate
591 caution until additional evidence is available regarding construct validity. This includes
592 convergent validity with established PF/PI measures and divergent validity with

593 theoretically related but distinct constructs. Furthermore, evidence regarding the
594 CPFQ-9's concurrent and predictive validity is needed to clarify how the subscales are
595 associated with relevant PF/PI-related outcomes, such as symptomatology and
596 indicators of positive well-being.

597 It should also be noted that although the CPFQ items are intended to be "easy
598 to understand" and "child-friendly" (30) and suitable for different age groups, the
599 validity of this measure would benefit from assessing the comprehensibility of the
600 individual items. Such refinement of the item content and wording could, for example,
601 be carried out through cognitive interviews, similar to the procedure adopted during
602 the development of CompACT-Y (13).

603 4.3.2 Reliability

604 Estimates of internal consistency for the subscales indicated questionable to
605 borderline acceptable reliability. The most notable concern was observed for Factor 1,
606 whose omega value declined from .73 to .57 when the residual covariance between
607 Items 1 and 2 was included in the CFA model. Low internal consistency is, however,
608 common for short subscales (46,67,68) . Some scholars therefore recommend
609 examining average inter-item correlations as an index of within-subscale homogeneity
610 and redundancy (46). On this metric, all CPFQ-9 subscales, including Factor 1, fell
611 within the acceptable range of .15-.50. Nevertheless, the current evidence suggests
612 that the CPFQ-9 is not necessarily sufficiently reliable for making inferences at the
613 individual level. Rather, it appears more appropriate for research purposes or for use
614 at the group level. Further evidence is also required regarding other forms of
615 reliability, including test-retest reliability, and sensitivity for change in intervention
616 contexts.

617 4.3.3 Contributions and Advantages of the CPFQ-9

618 Although the CPFQ-9 shows conceptual and structural overlap with related
619 measures, particularly the CompACT-Y, it offers several contributions that may
620 advance the youth PF/PI literature. First, as stated, this is, to the best of our knowledge,
621 the first multidimensional PF/PI instruments for younger populations whose structure
622 has been validated using both EFA and CFA, as well as measurement invariance testing
623 across age and gender. Second, its short length represents a distinctive strength, as
624 existing multidimensional measures are longer and therefore less feasible in applied
625 or intervention contexts where time is limited. Third, our sample had a younger mean
626 age (6th graders majority in the CFA subsample) than the validation sample of the
627 CompACT-y (13). Our items were adapted from a parent instrument whose
628 appropriateness has been demonstrated in even younger children. This provides a
629 promising basis for the CPFQ-9 to be a suitable measure for younger age groups as
630 well. However, the structural validity of the CPFQ-9 requires replication in samples
631 that include younger children in order to provide evidence for the developmental
632 generalizability of the measure. Lastly, the CPFQ-9 comprises two factors consisting
633 of positively worded items that capture the *presence* of strategies that are in line with
634 two core developmental regulatory systems (behavioral and emotional) and a third
635 factor that reflects a general tendency toward worry and negative affectivity. This
636 broader coverage of adaptive behaviors may therefore make it even more relevant for
637 use in universal interventions, where the primary focus is on the strengthening of
638 adaptive functioning rather than the reduction of symptomatology.

639 4.3.4 Contextual Considerations

640 Contextual factors need to be accounted for when interpreting the validity
641 evidence. Since the scale was administered right before a mathematics assessment,
642 the resulting factor structure may reflect context-specific self-evaluations rather than
643 more global PF/PI responses. For example, Factor 1 includes two items related to

644 persistence under difficulty, which could be considered a self-regulatory stance likely
645 influenced by the exam setting and participants' beliefs about their academic abilities.
646 Cross-cultural and contextual validation is required to generalize finding beyond the
647 current sample. Also, translation effects and comprehension difficulties may influence
648 responses, and should be evaluated before to generalizing to linguistic groups other
649 than Finnish-speaking students.

650 4.3.5 Implications for the Original CPFQ

651 Lastly, although the CPFQ-9's items were based on the original 24-item CPFQ,
652 these results should not be considered as direct validation evidence for the 24-item
653 version. We used only a subset of items, reworded several items, and altered the order
654 of presentation; all of which can affect the structure of an item set. Future validation
655 work on the full 24-item CPFQ may still benefit the continued development of the
656 CPFQ-9. For example, some of the six excluded items that we excluded from the 24-
657 item set may improve our model, such as the item "I know what I want to work for
658 today", which could shed further light on the relationships between behavioral
659 persistence, value clarification, and present-moment awareness.

660 5 Conclusions

661 The present study contributed to the literature on the structure of
662 psychological flexibility and inflexibility (PF/PI) in early and mid-adolescence by
663 providing structural evidence for a brief, multidimensional questionnaire with
664 potential applicability in time-constrained environments, such as the school context.
665 Our model included two PF dimensions, committed action with awareness and
666 defusion and acceptance, reflecting mindful and persistent engagement in goal-
667 directed behavior and an open and non-judgmental stance towards internal
668 experiences. The single PI dimension, labeled fusion and self-judgment, reflected
669 narrowing of attention and entanglement with negative self-concepts. This structure

670 corresponds to two developmentally relevant regulatory systems – behavioral and
671 emotional regulation – as well as one vulnerability factor, conceptually aligned with
672 constructs of negative affectivity. The structure parallels the dual-factor model of
673 mental health, in which adaptive functioning and distress are regarded as
674 independent dimensions.

675 The structural validation of the CPFQ-9 provides a promising foundation for
676 brief multidimensional PF/PI assessment in youth. However, further work is needed
677 regarding validity, reliability, and generalization to earlier developmental stages
678 before the instrument can be considered a genuinely developmentally sensitive, and
679 ready-for-use measure.

680 **6 List of Abbreviations**

681 AAQ-II = Acceptance and Action Questionnaire-II

682 ACT = Acceptance and Commitment Therapy

683 AFQ-Y = Avoidance and Fusion Questionnaire for Youth

684 AIIC = Average Inter-Item Correlation

685 CFA = Confirmatory Factor Analysis

686 CFI = Comparative Fit Index

687 CI = Confidence Interval

688 CompACT-Y = Comprehensive Assessment of Acceptance and Commitment Therapy -
689 Youth

690 CPFQ = Children's Psychological Flexibility Questionnaire

691 d = Cohen's d

692 df = Degrees of freedom

- 693 EFA = Exploratory Factor Analysis
- 694 FA = Factor
- 695 KMO = Keiser-Meyer-Olkin (measure of sampling adequacy)
- 696 M = Mean
- 697 MAP = Minimum Average Partial
- 698 MCAR = Missing Completely at Random
- 699 MI = Measurement Invariance
- 700 N = Sample size
- 701 p = p-value
- 702 PAF = Principal Axis Factoring
- 703 PF/PI = Psychological Flexibility / Psychological Inflexibility
- 704 RMSEA = Root Mean Square Error of Approximation
- 705 SD = Standard Deviation
- 706 SRMR = Standardized Root Mean Square Residual
- 707 TLI = Tucker-Lewis Index
- 708 α = Cronbach's alpha
- 709 ω = McDonald's omega

710 **7 Declarations**

711 *7.1 Ethical approval and informed consent statements*

712 Ethical review was not required, as the data collection did not include elements that,
713 according to the Finnish National Board on Research Integrity (TENK), necessitate

714 an ethical statement. All participants and their guardians were informed about the
715 study and participated voluntarily. A passive consent procedure was used, in which
716 each participant had the opportunity to decline participation in the study.

717 *7.2 Consent for publication*

718 Not applicable.

719 *7.3 Availability of Data and Materials*

720 The data supporting our findings in this study are not publicly available due to data
721 privacy laws protecting the personal information of the participants. However,
722 anonymized data can be obtained upon reasonable request from Katarina Alanko
723 (katarina.alanko@utu.fi).

724 The 18-item Finnish version of the Child Psychological Flexibility Questionnaire
725 (CPFQ) is available upon request from the corresponding author
726 (jakob.b.langenskiold@utu.fi).

727 *7.4 Declaration of conflicting interest*

728 The authors declared no conflicting interest with respect to the research, authorship,
729 and/or publication of this article

730 *7.5 Funding*

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734 *7.6 Authors' contributions*

735 Jakob Langenskiöld - Conceptualization, Visualization, Formal Analysis, Writing -
736 original draft, Writing - review & editing

737 Pekka Räsänen - Writing - review & editing

738 Prince Das Adhikary - Formal analysis

739 Rosa Salmela - Visualization, Writing - review & editing

740 Mikko-Jussi Laakso - Project administration, Funding Acquisition

741 Katarina Alanko - Investigation, Conceptualization, Project administration, Writing -
742 review & editing

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