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REVIEWER'S REPORT

Manuscript No.: IJAR-52781 Date: 7/12/25

Title: To assess myths among the Attendants/Family members of the patient with Psychiatric Ailment.

Recommendation:	Rating	Excel.	Good	Fair	Poor
Accept as it is	Originality	$\sqrt{}$			
Accept after minor revision√	Techn. Quality				
Accept after major revision Do not accept (<i>Reasons below</i>)	Clarity			V	
Do not accept (Neusons below)	Significance	V			
	-				

Reviewer Name: DR azdeh Date: 13/07/25

Reviewer's Comment for Publication.

(*To be published with the manuscript in the journal*)

The reviewer is requested to provide a brief comment (3-4 lines) highlighting the significance, strengths, or key insights of the manuscript. This comment will be Displayed in the journal publication alongside with the reviewers name.

This qualitative study provides critical insights into cultural myths surrounding psychiatric illnesses in Pakistan, revealing six key themes of misconceptions that delay evidence-based treatment. Its strength lies in documenting locally prevalent beliefs (e.g., spiritual causes, preference for faith healers) and their impact on healthcare-seeking behavior. The findings are vital for designing culturally sensitive mental health interventions in low-resource settings.

Detailed Reviewer's Report

Structural Clarity:

Abstract: Expand to include key results (e.g., "60% attributed illness to supernatural causes") and explicit conclusions.

Tables/Figures:

Label Table 1 clearly and integrate into results (currently appears disconnected).

Remove placeholder text (e.g., "UNDER PEER REMEW IN WAR").

Methodology:

Clarify sampling strategy: "Convenient sampling" risks bias; justify why this was optimal.

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Specify interview tools: Attach the questionnaire (Appendix) as a supplement.

Results & Discussion:

Themes: Reconcile discrepancies (e.g., "Breadment" in Results vs. "Breach" in Table 1).

Contextualization: Compare findings more critically with cited studies (e.g., Indian myths in Kishore et al. 2011).

Limitations: Acknowledge single-site sampling and recommend multi-center follow-ups.

References & Formatting:

Correct formatting errors (e.g., duplicate "9." in references, inconsistent DOI links). Ensure all citations (e.g., [19], [20]) match references.

1.