Review comments-2:

The article not only discusses the academic research results of PM+, but also emphasizes its scalability at the government policy and institutional levels, which is of reference value to policymakers, researchers and service providers. The author creates an appropriate title.

Deficiencies and Suggestions for Improvement

1. Insufficient Data Visualization and Quantitative Analysis
➢ Although the article includes charts, it lacks an in-depth analysis of statistical data, such as comparisons of implementation success rates and acceptance levels across different countries.

Suggested Improvements:

(1) Incorporate quantitative statistics, such as the proportion of successful PM+ implementations in different countries and participant retention rates, to enhance persuasiveness.
(2) Compare the key findings of different research methodologies, highlighting the similarities and differences between RCTs and qualitative studies.
➢ Lack of Discussion on the Long-Term Impact of PM+

➢ The article primarily focuses on the implementation process and short-term effects, without exploring the long-term efficacy and sustainability of PM+.
   For low-resource countries, explore strategies for securing international funding or

Suggested Improvements:

(1) Include long-term follow-up data on PM+ outcomes, such as participants' mental health status six months or one year after completing the program.
(2) Examine whether PM+ contributes to reducing the need for formal medical interventions, such as lowering the use of antidepressants.
2. Limited Regional Comparisons and Cultural Adaptability Analysis
➢ While the article covers multiple countries, it does not explicitly compare PM+ adaptability and challenges across different cultural contexts.

Suggested Improvements:

(1) Analyze differences in PM+ acceptance between low-income countries (e.g., Pakistan) and high-income countries (e.g., the Netherlands).
(2) Investigate how cultural perceptions of mental health influence PM+ participation and effectiveness.
3. Lack of In-Depth Discussion on PM+ Digital Development
➢ Although the article mentions the digital transformation of PM+ during the pandemic, it does not explore the advantages and challenges of digital interventions in depth.

Suggested Improvements:

(1) Assess the feasibility and effectiveness of online PM+, including whether it can reduce cultural stigma and improve accessibility.
(2) Examine the impact of digital PM+ on volunteer training, remote supervision, and participant engagement.
4. Generalized Policy Recommendations Lacking Practicality

➢ The article discusses challenges in scaling PM+ at the governmental level but does not provide concrete policy recommendations.

Suggested Improvements:

(1) Include case studies demonstrating how PM+ has been integrated into public health systems in different countries.

leveraging support from non-governmental organizations (NGOs) to sustain PM+ implementation. References are sufficient.