

Peer Review Report

Review Report on Implementation of the Community Component of the Mental Health Gap Action Programme (mhGAP): A Scoping Review

Review, Public Health Rev.

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EVALUATION

Q 1 Please summarize the main theme of the review.

No answer given.

Q 2 Please highlight the limitations and strengths.

Thank you for the opportunity to review this interesting manuscript on an important subject. I regret that I cannot recommend it for publication in its current form. I outline specific points below but overall, the scoping review methods are unclear, with some inconsistencies. The focus on community mhGAP implementation is not clearly explained given that the mhGAP-IG is a tool designed for community implementation. Having conducted two systematic reviews (cited in this paper) there is a large relevant literature and it is not clear why only these five papers met eligibility criteria. Finally, the stated focus on implementation does not link to the implementation science literature or any frameworks which could help to scaffold the findings. I hope these comments and those below help the authors to review the manuscript for the future.

Q 3 Please provide your detailed review report to the authors, structured in major and minor comments.

TITLE

Having read the title and abstract it is not clear what is meant by the community "component" of mhGAP.

ABSTRACT

If the authors are referring to the mental health gap action programme intervention guide (mhGAP-IG) it would be clearer to say so.

Please specify the names of the databases searched and the dates on which this was done.

What were the inclusion criteria?

Which data were extracted?

The findings are unclear. What do "strategy availability" and "monitoring/sustainability" mean?

INTRODUCTION

What commitments are being referred to in the first sentence and what is the relevance of culture here?

Parts of the Introduction are difficult to follow e.g. line 57.

Line 69 – it is not clear what articulating these actions with a community component means.

Line 70: what are community mhGAPs? It would help to be very specific here.

The terms transdisciplinary and interdisciplinary are both used about the distinction that is intended.

In general, the Introduction needs to be more specific because the reader is left unclear about what is meant by community mhGAPs – do the authors mean community specific plans or do they mean implementations of the mhGAP-IG? Nor what the implementation gaps being referred to are.

METHODS

The terms "overview review", scoping review and "panoramic review" are all used; consistency would help. Please justify why a scoping review was conducted rather than a systematic review.

Consulting the grey literature is not typical for a scoping review.

Line 100: the authors first say they searched for "community mental health AND mhGAP" but then go on to say that "implementation" was also a search term. Also in that sentence, "community mental health" itself does not seem to have been a search term on its own, contradicting the previous sentence.

Lines 116–118: the PCC descriptions are difficult to understand. What does people accompanied by the programme mean? What does Central components of the justification of the mhGAP and the implementation variables mean? Why is the Context "community psychosocial recovery interventions"? Recovery has not been mentioned anywhere else so far.

Line 119–120 the review questions could be clearer. What do the authors mean by "what is the need"? Do they mean "what gaps would community implementation of the mhGAP–IG address?" Likewise, what is meant by implementation variables or characteristics? Do the authors mean "which implementation outcomes have been evaluated in existing literature"?

86% agreement seems a bit low. Were the disputed papers then reviewed by discussion or by a third author?

Line 128–130: which critical appraisal tools? The described process of inclusion based on "quality" and 70% "positive evaluation" is not how risk of bias is conventionally operationalised and a certain quality of study is also not specified in the inclusion criteria.

Lines 131–132: title and abstract screening is described twice.

Line 142: what is meant by conventional content analysis? Why was this needed in a systematic review?

Line 144: fell into multiple categories: categories of what? Categorisation has not been described so far.

Although the paper is presented as a scoping review, the methods seem more like a systematic review. Can the authors clarify in what way this is a scoping review? If in fact it is a systematic review, then PRISMA should be used and the PROSPERO or other registration number reported.

RESULTS

Line 148: predominant cross-sectional review methodology – what is that?

Google Scholar is the primary source of results in Figure 1 but is not mentioned in the abstract or methods as having been searched. Results from the grey literature are not listed in Figure 1.

Lines 153–165: I really struggle to understand much of what the authors are saying about their results here, especially in the latter part of this paragraph. For example, why does the authors framing strategies in contextual social determinants "reiterate the precept of maintaining the link between mhGAP implementation and PHC"?

I am not clear how the three studies grouped under Education as a bridge... link to each other or how they form a sub-component of the "need" theme. Especially the study on ADHD training: there are dozens of mhGAP studies of this type – I am not clear why this paper met inclusion criteria but the others of this type (see previous mhGAP systematic reviews) did not.

Similarly, other studies have been conducted culturally adapting mhGAP; why were they not eligible?

I also struggled to understand what the implementation variables section was really conveying about the breadth of the evidence. The diversity of research contexts is not summarised or commented on and study designs are only cursorily mentioned. No implementation frameworks or other relevant aspects are described. Stigma is brought up but its relevance to the research questions is unclear.

The Tables are not clearly linked to the Results and it is not clear how the table 2 columns were chosen.

DISCUSSION

Many studies have evaluated mhGAP in community settings. I remain unclear about how the authors have drawn the opposite conclusion.

The discussion is quite general and limitations of this study itself are not discussed.

PLEASE COMMENT

Q 4 Does the reference list cover the relevant literature adequately and in an unbiased manner?

No

Q 5 Does this manuscript refer only to published data? (unpublished data is not allowed for Reviews)

Yes.

Q 6 Does the manuscript cover the issue in an objective and analytical manner

No.

Q 7 Was a review on the issue published in the past 12 months?

No.

Q 8 Does the review have international or global implications?

Yes

Q 9 Is the title appropriate, concise, attractive?

See above

Q 10 Are the keywords appropriate?

Not entirely. Recovery is not the focus.

Q 11 Is the English language of sufficient quality?

As indicated, in areas I struggled yo understand the authors' meaning.

Q 12 Is the quality of the figures and tables satisfactory?

No.

QUALITY ASSESSMENT

Q 13 Quality of generalization and summary



Q 14 Significance to the field



Q 15 Interest to a general audience



Q 16 Quality of the writing



REVISION LEVEL

Q 17 Please take a decision based on your comments:

Major revisions.