Reviewer #1:

Scientific Quality: Grade D (Fair)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Major revision

Specific Comments to Authors: The scoping review article `Significance of Fostering the Mental Health of Patients with Diabetes through Critical Time Intervention` is a well written article which provides insight in the mental health issues pertaining to diabetes mellitus. However, the article needs many revisions as pointed out under various headings Title The title seems to be appropriate as it highlights all important aspects that are discussed in the article Abstract This part of the review needs revision.

Reviewer; A comprehensive picture of Critical Time Intervention (CTI) needs to be highlighted in the abstract.

Authors' Response: A comprehensive highlight of CTI has been added in the background.

Reviewer: Key words Patients as key word is not justified Background This part of the review needs major revisions.

Authors' response: Patient keywords has been integrated in the background

Reviewer: The part is stretched too lengthy without providing much information. Pathophysiology of two major types of diabetes (T1DM and T2DM) is not presentable and needs to be rectified.

Authors response: this section has been totally revised to include two major types of diabetes with detailed explanation.

Reviewer: Method seems to be appropriate but needs more elaboration regarding exclusion criteria.

Authors response: Method section has been elaborated to accommodate more studies.

Reviewer: Results Only 3 studies were included in the review and all of them from the same region which makes it too weak a review.

Authors response: sixteen other studies have been added which cut across other countries.

Discussion The conclusions that males were mainly included as participants because of the reasons given doesn't seem to be logical.

Authors response: this section has been revisited based on the findings from included studies.

Drawing conclusions from few studies doesn't seem to be appropriate. Homelessness is per se risk factor for mental health disorders which may be a confounding in drawing conclusions

Authors' Response: Conclusion has been revisited

Quality of the review There are many grammatical mistakes in all the portions of the review article and the quality of language needs improvement.

Authors' Response: English editor has edited the whole documents.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: This study addresses a crucial research gap and presents novel findings that contribute to the advancement of the field. The manuscript offers new insights into various aspects, including the demographics of the populations most commonly receiving CTI based on gender and age, as documented in the limited existing literature. Furthermore, it provides evidence supporting the positive impact of CTI on housing and service engagement outcomes for individuals with comorbid diabetes and mental health conditions. Additionally, the study supports CTI as an effective therapeutic approach for managing mental health in diabetic patients. The scoping review methodology employed and the synthesis of available research make a significant contribution to the field. Prior studies have rarely examined the role of CTI in this specific comorbid population. Regarding quality and importance, the manuscript introduces new concepts that shed light on the unique challenges faced by homeless individuals with diabetes and mental illness. It also emphasizes the need for more rigorous empirical investigations into the clinical effectiveness of CTI across diverse settings and countries.

Several limitations should be acknowledged, including the small number of included studies, which hinders the ability to draw definitive conclusions.

Authors' response: Some exclusion criteria were improved and more studies were included. Hence, definitive conclusion has been drawn

Additionally, the variability in populations and measures across studies limits direct comparisons. Moving forward, larger trials are necessary to validate the benefits of CTI and to identify the specific components that drive positive outcomes. Research should also explore potential moderators of treatment response. Furthermore, studies involving women and younger adults can help address current gaps in knowledge.

Overall, this manuscript provides valuable new perspectives that can stimulate further investigation, thereby contributing to the improvement of integrated care for individuals with multiple health conditions. With some revisions to strengthen specific aspects, it has the potential to be published in a leading journal.