

# The Effectiveness of Mobile-Based Mental Health App on Anxiety and Cognitive Distortions

Seyed Ali. Darbani<sup>1\*</sup>, Leila Sadat. Mirseify fard<sup>2</sup>

<sup>1</sup> Assistant Professor, Department of Psychology and Counseling, ST.C., Islamic Azad University, Tehran, Iran

<sup>2</sup> PhD Student in Health Psychology, Department of General Psychology, Kish Branch, Islamic Azad University, Kish, Iran

\* Corresponding author email address: ali.darbani@iau.ac.ir

E d i t o r	R e v i e w e r s
Fereydon. Eslami Department of Psychology and Counseling, KMAN Research Institute, Richmond Hill, Ontario, Canada eslami@kmanresce.ca	<b>Reviewer 1:</b> Marlon Elías Lobos Rivera Universidad Tecnológica de El Salvador, El Salvador.Email: marlon.lobos28@gmail.com <b>Reviewer 2:</b> Sumaira Ayub Department of Applied Psychology, University of Management and Technology, Lahore, Pakistan.sumaira.ayub@umt.edu.pk

## 1. Round 1

### 1.1. Reviewer 1

Reviewer:

Consider rephrasing "no significant relapse" to "no statistically significant increase in scores" for greater scientific accuracy.

The statement that mHealth apps "transcend traditional barriers such as stigma, cost, and geographic inaccessibility" would benefit from further support or elaboration—perhaps including real-world access metrics or uptake rates.

Indicate whether this exclusion was self-reported or verified through clinical documentation. This clarification impacts internal validity.

You mention the Cronbach's alpha and test-retest reliability of the BAI. Please also report the internal consistency (alpha) of the BAI and CDS in your current sample.

The detailed session structure is commendable. However, consider briefly indicating whether participants had access to any support (e.g., chat feature, guidance) in case of distress during the 6-week app use.

The small sample size (n=15 per group) raises concerns about statistical power. Consider reporting confidence intervals for means to add interpretive clarity.

Good attention to assumptions. It would strengthen transparency to state how outliers were handled, if any were identified during assumption checking.

Authors revised the manuscript and uploaded the document.

### 1.2. Reviewer 2

Reviewer:

Consider briefly defining or providing an example of “irrational beliefs” to enhance clarity for interdisciplinary readers.

While McCall et al. (2023) is cited for cultural responsiveness, the manuscript would benefit from discussing whether the app in this study incorporated any cultural or demographic tailoring, particularly for Brazilian users.

Please clarify how mild-to-moderate anxiety levels were assessed in initial screening. Was the BAI administered pre-screening or post-enrollment?

Clarify whether the relaxation modules were standardized audio files or adapted in real time based on user input.

Findings and Results, sentence: “All participants reported daily smartphone use and no prior engagement with digital mental health tools.”

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## 2. Revised

Editor’s decision: Accepted.

Editor in Chief’s decision: Accepted.