I am pleased to review your article titled, "Teacher Preparedness Concerning Autism Spectrum Disorder (ASD) in the Jazan Region, Saudi Arabia: A Cross-Sectional Study." This is an interesting and valuable piece of research that contributes meaningfully to the existing body of knowledge on ASD awareness and preparedness in educational settings.

While the article is insightful, there are some areas that could be further strengthened to enhance its clarity, rigor, and overall impact. Below, I provide specific recommendations for improvement to help achieve these goals.

Abstract

- The abstract provides a concise overview of the study's purpose, methodology, and main findings. It effectively
 introduces the study's focus on teacher knowledge, attitudes, and practices concerning ASD in Saudi Arabia's
 Jazan region.
- The conclusion emphasizes the need for policy and training but could be strengthened by briefly recommending specific types of training or resources that may improve teacher preparedness.

Background

- The background section provides a thorough overview of ASD, emphasizing its rising prevalence and the importance of early identification and intervention. This context underscores the need for educators to be equipped to support students with ASD effectively.
- The background establishes a solid rationale by discussing teachers' critical role in supporting ASD students. The section highlights that teacher knowledge gaps impact intervention opportunities, supporting the study's aim. However, adding a specific statement on how teacher attitudes impact ASD students' educational experiences could strengthen the rationale for including attitudes and perceptions in the study.
- To strengthen the literature review and contextual understanding of teacher preparedness for Autism Spectrum Disorder (ASD), it is important for the authors to include findings from recent studies conducted in other regions. For instance, the study titled "https://link.springer.com/article/10.1007/s40688-024-00525-4. By incorporating findings from other studies can highlight shared trends or distinct differences across regions, which could enhance the discussion on cultural or systemic factors influencing teacher preparedness globally. Moreover, these comparisons could further underscore the necessity for tailored training programs suited to specific educational and cultural contexts, aligning well with the study's focus on the Jazan region.
- For clarity and accessibility to readers unfamiliar with ASD, defining terms like "social communication difficulties" and "early intervention" more clearly may be helpful. Providing examples of "teaching methodologies" specific to ASD students might help illustrate the study's focus for general readers.
- Ensure consistency in citation style throughout, as there seem to be some minor format inconsistencies in the background references. Additionally, updating any statistics to the latest available data would enhance the relevance and impact of the context provided.
- Although the background highlights the importance of teacher training, it could briefly mention how findings
 could inform policymakers in developing targeted ASD support resources and training programs for teachers
 in regions with similar challenges.

Materials & Methods

To enhance clarity, consider adding a brief introductory sentence before each major subsection to provide context for the information that follows.

The multistage cluster random sampling method is well-described and justifies the representativeness of the sample, covering different governorates, school types, and gender. This strengthens the study's external validity. In line 98,

adding specific reasons for choosing each governorate (such as their unique characteristics) would further justify the study design and provide additional context to readers.

The use of the Raosoft sample size calculator and the rationale for inflating the sample size to account for nonresponses is appropriate and strengthens the study's methodological rigor. It may be helpful to cite a methodological source to support the decision to increase the sample size for nonresponses. Ensure that Raosoft 2004 is included in the references list if it isn't already.

The development and modification of the interview-based questionnaire adapted from Alyami et al. (2022) are well-explained, showing thoughtful adaptation to the specific study context. However, including a brief description of the questionnaire's sections (e.g., demographic, knowledge, perceptions) would improve readability.

Consider expanding on the post hoc tests used after ANOVA to clarify how multiple comparisons were managed (e.g., Bonferroni correction), as this would add transparency to the statistical rigor.

Under ethical considerations, including specific information on how data will be stored post-study, such as duration and data disposal plans, would strengthen this section and align it with common data protection guidelines.

Results

Overall, the results section provides a thorough and well-organized summary of findings. With slight revisions for clarity, it will effectively convey the key insights on teacher preparedness and highlight areas for improvement in ASD training and awareness.

The statistical analysis using ANOVA and T-tests is appropriate for exploring demographic effects. However, the language can be more precise, especially when discussing the significance levels. For example, when stating "single teachers were having more knowledge," avoid using informal language like "were having"; instead, "single teachers demonstrated higher knowledge" would be clearer. Additionally, when the result is not significant, as with the marital status comparison (P = 0.222), emphasize the lack of significance to avoid confusion.

The phrasing in several sentences could be tightened for better readability. For example, "The last four points are confusing, but the inclusion of these points in the study added a commendable layer of depth..." could be rephrased to directly address the impact of exploring teachers' beliefs, without referencing confusion.

Discussion Section

The discussion provides a clear overview of the primary findings, highlighting deficiencies in teachers' understanding of autism spectrum disorder (ASD) and associated misconceptions, particularly in relation to causation, management, and the social implications of the disorder.

Including studies from regions with robust ASD awareness programs could provide insights into how similar educational deficits have been addressed elsewhere. For instance, examining teacher training efforts from countries with established ASD programs (e.g., the United States, the UK, or Japan) could provide comparative context and strengthen recommendations.

While the limitations section mentions the need for longitudinal studies, the discussion could be strengthened by expanding on the potential impact of implementing teacher training programs followed by longitudinal assessments to observe improvements over time. A longitudinal approach with intervention-based studies could evaluate the effectiveness of structured ASD training programs in enhancing teachers' knowledge, which would be valuable for other regions with similar gaps.

The discussion addresses prevalent misconceptions about ASD causation, such as the perceived links to vaccinations and family dynamics. The authors could underscore the harm these misconceptions may cause, particularly in delaying diagnosis and appropriate interventions for ASD children. It may be helpful to recommend specific educational strategies, like workshops or informational campaigns, to directly address these myths.

The recommendation to improve teacher training is strong, yet it could be enhanced by briefly outlining what such programs might include—like ASD-specific strategies, early signs recognition, and tailored support

Ensure that percentage data reported are consistent across the document, as minor inconsistencies (e.g., percentages with or without decimal points) may slightly affect readability and clarity.

the limitations mention the potential impact on generalizability, expanding on this limitation by considering other contextual factors (e.g., cultural beliefs or access to specialized health services) could provide readers with a clearer understanding of why findings may not apply universally.