Author's response to reviews

Title: Relationships between stress, coping and depressive symptoms among overseas pre-undergraduate Chinese students: a cross-sectional study

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Author's response to reviews: see over
Dear Editor:

We greatly appreciate that you and reviewers share your time and expertise for our manuscript. The comments are very helpful. What follows are our responses.

Revisions are written with underline in the manuscript:

1. Authors’ e-mails are provided.
2. Authors’ contributions are added.

Reviewer: Stuart Lancashire
Reviewer's report:

Major compulsory revisions
1. As the authors themselves acknowledge, a cross-sectional study can only demonstrate an association between variables and cannot be used to infer causality. However, a number of causal inferences do seem to be made in the discussion: e.g. page 10 lines 16-17 'Chinese pre-undergraduates' use of passive emotion-focused strategies significantly and directly increased the severity of their depressive symptoms'; page 11 lines 8-11 'The more serious a burden our respondents found the stress resulting from these circumstances to be, the more likely they were to adopt a passive problem-focused or emotion-focused strategy to cope with it. These strategies failed, in that they led to more severe depressive symptoms.'; page 12 lines 4-5 'In more frail Chinese students, the stress led to an increasingly depressive mood and a greater risk of suicide.' In fact, what the data demonstrate is an association between the type of coping strategy utilised and the concurrent severity of depression, but the causal direction cannot be demonstrated from the data.

Responses: Thank you very much. We agree that our study cannot provide causal inferences and we have carefully revised the words that imply causality as you specify. (1) page 10 lines 16-17. We revise the 'significantly and directly increased' to 'significantly associated with'. (2) page 11 lines 8-11. We revise the sentence ‘These strategies failed, in that they led to more severe depressive symptoms.’ to ‘These strategies failed, in that they accompany with depressive symptoms.’. (3) page 12 lines 4-5. We delete the sentence 'In more frail Chinese students, the stress led to an increasingly depressive mood and a greater risk of suicide.'.
Discretionary Revisions
1. The finding that depressed students were more likely to utilise passive coping strategies is clinically important, but a simple unidirectional causal model, in which poor coping leads to depression, is at odds with current cognitive models of depression, which suggest that depression is precipitated and maintained by a more complex set of interactions between mood, thinking, and coping behaviour. In particular, depressed people may be more likely to adopt passive or avoidant coping strategies as a consequence of the hopelessness and lack of self confidence that typifies depressive thinking. Any public health strategy designed to help vulnerable students adopt more effective coping would need to address the depressive cognitions that prevent them from utilising active and effective coping methods.

Response: Yes, we are aware of cognitive theories of depression. We put a limitation in this paper since we are not focusing on learned helplessness and thinking in this paper.

Reviewer's report
Reviewer: Mian-Yoon Chong
Reviewer's report:
This study employed structural equation model (SEM) to determine the relationship of stress, coping strategies and depressive symptomatology among 756 overseas Chinese students of a university preparatory program in Taiwan. The survey was conducted using a self-administered questionnaire with measurement of stress, corresponding coping strategies and CES-D for the evaluation of depression. The results showed that the students did not choose the active coping strategy in dealing with severe stress, while the passive strategies mediated the relation between stress and depressive symptoms. The method employing cross-sectional design with analysis of the association of the latent construct with multiple measures using SEM is plausible and valid. The results are clearly displayed except truncated words in the figures, and the discussion is relevant to the questions raised.

Response: Thank you.

Major Compulsory Revisions:
1. Study population: The sample was drawn from students of the school
previously called “National University Preparatory School for Overseas Chinese Students” which has been merged as an institution for college preparatory program at the National Normal University (p5). Since the term “pre-undergraduate students” is rather broad and also included the high school students, it is better to hold on to this old and more common term “university preparatory students” than “pre-undergraduate students” in order to avoid any ambiguity. The course is only lasted for a year, and most students therefore have been staying only for a few months and/or were new to Taiwan, and only very few of them have been residing in Taiwan since their high school. Perhaps the authors would like to make the background more informative to the reader, as the country of origin of these students and their length of stay in Taiwan differs greatly as well as their stresses they encountered.

Response: We change the “pre-undergraduate students” to the “university preparatory students” in the manuscript. We also added information regarding the respondents’ nationality and their length of stay in Taiwan (Page 7 Line 18-24).

2. Chinese by definition is the people of Chinese nationality, or one of several Chinese ethnicities. The school enrolls only overseas Chinese students whose country of original residency is not Taiwan and China. Under such circumstances, terms in page 3 “foreign Chinese students” and page 4 “Chinese who grew up in Taiwan” should be avoided and could be clearly defined as “overseas Chinese students in Taiwan” and “Taiwanese students” which could also indicate the differences in the environment where they were brought up. Likewise, the term Chinese students (p3), with no specification of where they come from, are generally regarded as students who are from China. But the description in page 3 might not be this and it could be referring to the overseas Chinese and not those from Mainland China. Consistent terms should be used throughout the paper and the authors need to explain the terms clearly.

Response: Thank you for correcting us. We made revisions throughout the manuscript regarding overseas Chinese students in Taiwan and Taiwanese students. We also define that our respondents did not include overseas Chinese students from Mainland China (page 5).

Minor Essential Revisions:
3. Words in the figures are truncated, please be corrected.

Response: Yes, we correct the figure (Page 20).

4. Discussion: Other than coping strategies, personality also plays an important role in the development of depression. Although it is not the focus in this study, it should be mentioned and discussed either in the discussion or limitation of the study design.

Response: Yes, We add sentences in the limitation session.

Discretionary Revisions:
5. The assessments and results: The CES-D is a self-report instrument that is used as a screening tool in the general population to assess the severity of depressive symptoms over the past 4 weeks. Its assessment is commonly based on threshold scores rather than the continuous scores. In applying structural equation modeling to test the association of stress, coping, and depressive symptoms, the authors had presumably predicted that the model to be linear. Perhaps the authors would like to explain why continuous rather than cut-off scores of CES-D were used (p7), since the scores of depressive symptoms in a general population are a skew and not a normal distribution. Besides, what is the average score of CES-D of this sample and were there any differences with the local Taiwanese adolescents or adults? In addition, what is the proportion of this sample being screened as depression?

Response: We did not choose the cut-off scores to categorize our respondents is because a study (Yang, Soong, Kuo, Chang & Chen, 2004) found that the cut-off scores of CES-D in Western studies may not be adequate for adolescents in Taipei.