Reviewer’s report

Title: "The investigation of stressful life events as significant predictors on depressive symptoms among Cypriot University students: a cross-sectional descriptive correlational study"

Version: 1 Date: 25 June 2013

Reviewer: Daniel Johnson

Reviewer’s report:

I appreciate the opportunity to review the manuscript “The investigation of stressful life events as significant predictors on depressive symptoms among Cypriot University students: a cross-sectional descriptive correlational study.”

The manuscript describes a study examining the association between depressive symptoms and stressful life events in a large sample of Cypriot college students. The methods used are appropriate for the study, as is the analytic approach. The manuscript is generally clear, succinct, and well written. I feel as though this study makes a nice contribution to the literature on stress and depression. With that said, I have some revisions listed below that I feel need to be addressed before the manuscript is to be accepted for publication.

1. Major Revisions

   1a. From my perspective, the use of the term “depressive symptoms” throughout the report does not capture the construct the authors are examining. As the analyses you report focuses only on participants who scored above the clinical cutoff (>22), why not use “clinically significant symptoms” or even “clinically depressed” or “depression”? True, the CESD cutoff does not constitute a diagnosis of MDD, but the use of “depressive symptoms” in the literature generally refers to the presence of depressive symptoms, which is approximately normally distributed in the population. From a clinical and intervention standpoint, the mere presence of depressive symptoms and having a CESD score >22 are very different things. Furthermore, the link between life stress and depression is likely stronger for those who score above this cutoff on the CESD, compared to those who score in the subclinical range. I believe this needs to be clarified in the report to more clearly present the findings. This would also strengthen the link the authors make to prevention/intervention efforts.

   On a related note: why not just use the continuous score from the CESD? Or also include individuals with moderate symptoms (16-22 on the CESD) in the analysis?

   1b. The vast majority of the report discusses the link between stress and depression as unidirectional: greater stress leads to greater depression. Though you have a sentence in the discussion about depression leading to greater stress, I feel that this point needs to be expanded upon. There is a substantial literature supporting “stress generation”, the hypothesis that those who...
experience depression/depressive symptoms are more likely to be exposed to stressful environmental contexts (see Hammen, 2005 for a review). This link is especially true for clinically depressed individuals, which likely makes up the majority of individuals included in your analysis. Please incorporate the discussion of a bidirectional association between stress and depression in your introduction/discussion.

1c. In the Methods section, a rationale (either theoretical or statistical) should be provided for categorizing the Life Events Scale for Students. How is one category different than the other? Why not leave the LESS as continuous for the analysis? Implications of the results may be limited if the categories used are arbitrary. Also, please present the correlations for the continuous LESS scores (number of events and severity) with the continuous depression scores in the paper. This provides an important “baseline” for further analyses.

1d. There is a considerable literature on the limitations of self-report of stressful life events (e.g. Hammen and Shih, 2008). For example, individuals who are depressed may be more likely to recall negative events and more likely to report them as severe, compared to nondepressed individuals. Also, in general, people’s report of stressful events over the course of a year is not very reliable. This should be included in the Limitations section.

1e. If I am reviewing Table 5 correctly, there were only 13 individuals with more than 16 events in the past year, and of those, only 6 who scored >22 on the CESD. If that is accurate, I think the discussion of the results about this group needs to be attenuated. These findings are for 6 individuals out of a sample of 1,500 and I think that generalizing to larger samples or populations (e.g. depressed individuals, Cypriot students) should be done cautiously, with the recognition of a very small N.

2. Minor revisions

2a. The link between your results and intervention/prevention efforts needs to be expanded upon (Background: final paragraph, and in the abstract). You discuss the importance of screening for depression, but the results are presented such that reducing stress/managing stress may be the more appropriate target for intervention. Your conclusions in the discussion follow more logically from the results you present, but it’s less clear how your paper speaks to increased need for depression screening (rather than, say, stress reduction/intervention or preventative efforts). I would suggest either expanding on this point or removing it. If you choose to expand on it, this may be a nice place to discuss stress generation.

2b. It seems to me that there are considerable discrepancies between the Cypriot student ratings of severity of life events, as compared to the original sample for the LESS (Table 1). For example, there are differences of 15-20+ points for eight of the LESS items. I may have missed it, but do you discuss why these ratings are discrepant in the different samples? Could this influence your results?

2c. There are several spelling mistakes and awkwardly worded sentences in the manuscript, particularly in the discussion. For example, the reference to
Kendler’s paper is a bit unclear (discussion: 3rd paragraph) and the first few sentences of the paragraph starting with “Finally,” (discussion: 4th paragraph) could use some revision.

2d. Please include more discussion of the null findings for number of life events. This is of particular interest, given the comparison to relatively robust findings for the severity score on the LESS. Why might there be such disparities between the number of events and the severity ratings?

3. Discretionary revisions
3a. In the Background (2nd paragraph) you discuss that college students experience “unique” stressors, but then list stressors that are universal to individuals in this age group, regardless of education (e.g., transition to adulthood, adaptation, individuation). It makes most sense to remove these that are not unique to college students, or to rearrange the paragraph.

3b. In the discussion (4th paragraph), you describe results from other studies looking at specific types of events. Because you do not address the impact of specific event categories in your analysis, I would suggest removing these sentences.

3c. You reference a “small but growing literature” examining depression and life events (Discussion: final paragraph), but there is a large literature examining these constructs. There are several nice reviews that you could cite to acknowledge the work that has been done in these fields (e.g. Kessler, 1997; Hammen, 2005).

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests