Reviewer's report

**Title:** Could a brief assessment of negative emotions and self-esteem be used to screen for current and future risk of self-harm in adolescents in the community? A prospective cohort analysis.

**Version:** 2  **Date:** 11 March 2013

**Reviewer:** Paul L. Plener

**Reviewer's report:**


This paper reports on the assessment of self-harm in a prospective school based sample. Number of participants (aged 12-16 years) was 5030 at baseline assessment with relatively high retention rates, allowing for the assessment of 4140 adolescents after 12 months, of which 3262 were included in the prospective analysis. The aim of the study was to identify factors and items of other scales, that would allow an indirect assessment of self harm, without explicitly asking for self harm. Six month prevalence for self harm was reported to be 9.6%. After adjustment for self harm and self harm thoughts at baseline, personal failure, physical symptoms of anxiety and depression (boys) and low self-esteem (girls) were associated with future self harm.

Strengths of this study include the large sample size and the prospective design with a high retention rate. A huge weakness includes the fact, that the authors did not assess the items they identified in a separate approach to test, whether they would identify self harm accurately or not. Although the authors state, that often school representatives have problems, handing out questionnaires including self harm items, explicit identification of self harm could also be seen as a way to name a problem and create consciousness about a problem and thus may enhance self seeking. Overall, I’m not convinced that this form of assessment presents an advantage over the already existing measures for self harm, that have been studied with regards to validity and reliability. The major problem with the manuscript is, that the authors did not use the items they proposed in a separate scale to directly compare the scale against a validated self harm measure. Given this point, that was adequately identified and addressed by the authors in the “strengths and Weaknesses” section, I think that this paper is of limited value to inform future research or clinical practice. Even with regards to the length of assessment, I doubt that it is an advantage, to use 14 items instead of 1 item. However, there might be a readership, for which the provided details are of interest. Given this, I would recommend to re-evaluate this manuscript after the following issues were addressed.

Minor issues:
Introduction: Typo: last sentence: two dots.

Methods:
Authors state that adolescents gave their assent and consent was required from the child’s parents. Please specify if here was written assent/ consent and how this was acquired.

Was the assessment anonymous? If not, the authors need to discuss, how this might have impacted their findings.

How did the authors address safety measures? Was there an intervention if a participant reported self harm?

The authors reported that the self harm questions they used, were adapted from the Avon Longitudinal Study of parents and children. They need to address issue of reliability and validity. Are the questions single items taken from a larger scale? Since the whole study is built on the comparison against the self harm items(s), they need to be described in full detail.

Discussion: The authors should also include other screening approaches for self harm, such as, e.g. the “How I deal with stress questionnaire” (Ross & Heath, 2002).

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

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