Reviewer’s report

Title: Mental health impacts of racial discrimination in Australian culturally and linguistically diverse communities: A cross-sectional survey

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Reviewer: Elizabeth Brondolo

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The authors have been partly responsive to the reviewers’ comments. However, even with only partial responsiveness, the paper is much improved and the findings are placed in a more detailed historical and sociopolitical context. This is very helpful and makes the contribution of the paper much clearer. The description of the immigration history of different groups and the specific experiences members of these groups have had in Australia makes the paper more interesting. The additional figures/tables are helpful.

The primary remaining difficulties included the concerns raised in the first review. The authors’ indicate that the purpose of the paper was to identify specific locations or types of racism. However, this purpose does not prevent the authors from conducting additional analyses which would be useful from a scientific perspective and would allow the reader to understand the unique contributions of certain settings or types of discrimination to mental health outcomes. The sample is large enough that it should be possible to determine if the effects of discrimination in public or in government agencies on mental health are significantly greater than other forms of discrimination. The authors describe the findings as if this is the case, but without specific tests of this hypothesis the conclusions are not warranted. Regression analyses with all locations entered simultaneously are needed.

The finding that public spaces are frequent sites of discrimination is consistent with the literature, and this should be noted. It is critically important in studies of racism to begin to document consistent findings and trends. Consistency in findings adds to the readers’ confidence in the results and adds to overall strength of the literature in this area.

The authors report that 11 of 12 types of coping are not significantly associated with reduced distress. This is consistent with the review by Brondolo et al (2009) that the evidence is weak linking any individual-level coping strategy to reductions in the effects of racism on depression. However, the authors of this paper are not truly testing the degree to which these coping strategies buffer the effects of exposure on racism. It would be more appropriate to test interactions of level of discrimination X coping on distress. It may be that certain types of coping strategies are more commonly used by people who have experienced high levels of racism and therefore, although the coping strategy may be helpful, the levels of distress are still relatively high.
The distinction between types of avoidance provided in the discussion is interesting and useful.

Some minor points:
Line 50 = should read “Data were” not data was. (There are also some other minor errors and some more careful proof reading would be helpful.)

Line 167: “To our knowledge, the current work is unique in the scope of data collected regarding racial discrimination experienced and its effects on mental health.” The authors’ project is very exciting and impressive, but this statement is probably not accurate as major population-based studies, including MESA in the US have collected data on discrimination and also include much more detailed assessments of physical and mental health on a much larger population.

Studies by Wiehe and colleagues also examine the relationship of discrimination in different settings and health outcomes. See Wiehe, S., et al (2010) Gender Differences in the Association Between Perceived Discrimination and Adolescent Smoking