Reviewer’s report

Title: Bullying and sexual abuse and their association with harmful behaviours, antidepressant use and health-related quality of life in adulthood: A population-based study in South Australia

Version: 0 Date: 09 Aug 2018

Reviewer: Reviewer 2

Reviewer’s report:

PEER REVIEWER COMMENTS: To view the full report from the academic peer reviewer, please see the attached file.

REVIEWER COMMENTS FROM REPORT: This retrospective longitudinal study examined the association between victimization in childhood and adolescence (bullying and sexual abuse) and health outcomes in 2,873 Australian adults. It focuses on the relative contributions of different forms of abuse and their latencies to each outcome. Strengths of the study include its large and representative sample of adults and high-quality health assessments. The data analyses include weighting and adjustments for the sampling cluster design. The graphical presentation of regression results (predicted scores and prevalences) are clear and easy to interpret. The main results are presented in the paper and supplementary tables and figures are provided. Additionally, the text is well written and well organized. The cited literature is relevant and current.

The major limitation of the study is the design. Retrospective and uncorroborated accounts of early childhood abuse are subject to biases and omissions, especially in adults who suffer from depressive or alcohol-use disorders. There is no way to correct for this using retrospective data, which is why most studies in this area use a longitudinal (cohort) design that allows adolescent reports of abuse and other adversities and contextual factors to be linked to adult reports on health.

Other gaps in the study are the lack of information about the onset of health problems, whether they sought or received treatment, whether the health problems coincided or preceded the experience of victimization, and no control for socioeconomic conditions around the time the abuse was experienced (only adult socioeconomic position is controlled). Again, a longitudinal study might have provided these details and stronger support for a causal interpretation, which resonates very strongly in the text. The most that we can conclude from these findings is that adults with recollections of early-life abuse are more likely to experience health problems in adulthood. This may still be interesting to report on, but it is not the same as attributing risk of adult mental illness to early-life abuse.

REQUESTED REVISIONS:
The text should be revised to remove causal language and to acknowledge the design limitations of the study.

ADDITIONAL REQUESTS/SUGGESTIONS:

What is the percentage of missing data by variable and how was this handled in the analysis? Does the sample include only cases that provided 100% complete data on all variables? If so how many were excluded?

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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