Reviewer’s report

Title: Social Determinants of Psychological Wellness for Children and Adolescents in Rural NSW

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Reviewer: Matthew Fisher

Reviewer's report:

Reviewer comments on 'Social Determinants of Psychological Wellbeing for Children and Adolescents in Rural NSW'.

The article uses data from the Australian Rural Mental Health Study, specifically parent reports of mental health status of their children under 18 years old using Goodman's Strengths and Difficulties Questionnaire (SDQ) measure. Participants were parents/families in regional, rural and remote areas of New South Wales, Australia. 539 children from 294 families were included in the study. Data were assessed against a normative Australian sample, and in relation to: personal factors (sex and age); family factors (employment status, household income and sense of community of responding parent); community SES and rurality. The research reports significant findings relevant to understand health inequities affecting children and adolescents living outside Australia's major cities, and determinants of child and adolescent mental health in these regions. In particular the research found that children included in the study had generally worse mental health status that the Australian norm, according to SDQ scores. Within the study sample, male gender, younger age, membership of a family with lower SES, and a parent with a lower sense of community were associated with worse mental health status relative to others. These findings are broadly consistent with other research on determinants of child and adolescent health, and determinants of health in non-urban adult populations. They do provide some useful insights into determinants of health for Australian children and adolescents in non-urban areas, especially the importance of family SES status and parental sense of community. However, I struggle to agree with the author's self-assessment that the importance of their findings 'cannot be underestimated' (p. 21).

Specific points:

1. The introduction would be improved with some reference to some of the wider public health literature on social determinants of mental health, and literature on the crucial role of chronic stress as a mediator of the adverse impacts of certain social stimuli on mental health (e.g. Fisher and Baum 2010, ANZ J of Psychiatry).

2. The study refers to age and gender as 'personal predispositional factors' in some places and as 'personal factors' in others. Without qualification, the term 'predispositional' suggests an assertion that genetically structured features of being male, or being a younger child, predispose individuals with those features to greater risk of poor mental health. I don't think the authors are in a position to make this claim, and on pg 6 they concede that, 'Some Australian studies place age and sex as more predictive of mental wellbeing scores than rurality or community and family SES levels. However, the mechanisms that underlie the reasons for these individual level
3. A significant concern is that the article claims in the title and throughout to being investigating social determinants of child and adolescent 'psychological wellbeing' (or 'metal wellbeing' or 'psychological wellness'). However, the SDQ measures the research draws on bear little relation to the large body of literature on wellbeing, which posits and purports to measure positive psychological or behavioural attributes of wellbeing: the work of Ryff and Singer being one example among many. On the contrary, four of the five scales of the SDQ explicitly measure (in this case parental assessment of) PROBLEMS; and (as the authors acknowledge) these are combined to produce a 'total problem score'. It is findings on these scales in particular that support the paper's main's claims. So, for the life of me, I can't see how this has anything to do with investigating determinants of child and adolescent wellbeing. It seems to me what the authors are assessing is determinants of mental health status according to one validated but nevertheless limited measure. I recommend the authors revise their terminology throughout.

4. The authors say '…more than a decade since rates of mental illness in rural and remote communities were reported as being similar to urban populations and up to five times higher (2, 3)' (p. 3). The AIHW reference cited reports higher levels of mental health problems for males, which is worth mentioning because it relates to a key finding of the research. Also the statement could do with some explanation; namely that these findings present an inconsistent picture of what is going on.

5. In Table 2, p. 13 titled 'Participant demographic characteristics', some lines in the table refer to characteristics of children in the study (including I assume those on gender), some refer to characteristics of adults. It would be useful to make this clear within the table.

6. 'After controlling for personal and family factors, community SES did not significantly contribute to the variance for the SDQ scores' (p. 15). This is an interesting finding. Perhaps, taken with findings on the significance of family/household SES, it suggests socioeconomic inequalities within communities are more significant that socioeconomic differences between communities, although as you go on to say later, the finding that community SES had little effect should be taken with caution.

7. The conclusions and recommendations for action are weak and give little thought or attention to one of the fundamental stances within the body of research on social determinants of health, which is that, to improve population health, it is just as important to improve social, economic and environmental conditions, as it is to provide health services or other interventions intended to treat or 'improve' individuals. You say that 'There is very little research on the role that parental sense of community plays directly in child psychological wellbeing and how to enhance parental sense of community to benefit children' (p. 20). The first part may be so, the second part has completely individualised, and in a sense pathologised the issue. Surely the appropriate policy response to your findings is to support social and economic processes of community empowerment that create the conditions for parents to experience a sense of...
community, and there is plenty of research to cite on that. Have a look for the work of Glenn Laverack for example.

8. A few very poor sentences sprinkled throughout. A careful proof read is requir

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If not, please specify what is required in your comments to the authors.

Yes

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