

Peer Review Report

Review Report on The parental and children report of the prevalence of depressive symptoms in children and adolescents amid the COVID-19 pandemic: a cross-sectional study from Oman

Original Article, Int J Public Health

Reviewer: Armando Basagoitia

Submitted on: 25 Jan 2022

Article DOI: 10.3389/ijph.2022.1604474

EVALUATION

Q 1 Please summarize the main findings of the study.

The main finding reported is the prevalence of depressive symptoms (13.9%) among children and adolescents from Oman during the COVID-19 pandemic.

On the other hand, the article reports the association of some variables with the occurrence of depressive symptoms in the study sample (increased food intake, longer use of smartphones, engaging in additional entertainment activities).

Q 2 Please highlight the limitations and strengths.

Limitations:

a) The study design does not allow causality assessment between the studied variables and depressive symptoms.

Strengths:

a) Relevant study to inform decisions about children's mental health during pandemic context.

b) Use of a validated instrument in the local language.

Q 3 Please provide your detailed review report to the authors. The editors prefer to receive your review structured in major and minor comments. Please consider in your review the methods (statistical methods valid and correctly applied (e.g. sample size, choice of test), is the study replicable based on the method description?), results, data interpretation and references. If there are any objective errors, or if the conclusions are not supported, you should detail your concerns.

a) It would be advisable to mention background on the relationship between lifestyles and depression, to better understand the inclusion of some variables considered in the study.

b) Lack of a detailed description of the sampling: the article states it included all the Omani students from 8 to 18 y.o., but later it mentions a probabilistic sample size of 453 (including 321 parents and 124 children). This description is not clear about the sample's reference population. In addition it does not state the sampling units (number of schools or other info about it).

c) Lack of detailed participants' recruitment strategy: It isn't clear if the sampling happened by inviting all schools in a certain area, or if a specific criteria was used (public - private, primary/secondary education; urban/rural area).

d) It's unclear if parents delivered the Google forms survey link to the students, or they got the invitations separately (and if so, could be important to describe how the parents approval was verified).

e) There is no information about the response rate.

f) The study's objective focuses on children and teenagers, using both: 1) children self report and 2) parents report on child. These two groups (parents and children) are described separately for some analysis and together for other analysis (i.e. depression symptoms analyzed by gender). This could lead to unnecessary confusion.

- g) It's not clear if children and parents answers were mixed together (i.e. depression symptoms analyzed by gender). If so, some concerns may arise about the possibility that one family could report a particular situation twice, or more if the family has many children participating in the study. The current description does not offer information to clarify this concern.
- h) Would be necessary to describe the sample used to perform the "Internal reliability and validity analysis", (i.e. only children answers, or correlated answers between parents and children or another option).
- i) It is necessary to clarify if any adjustment was used for the OR analysis or not.
- j) It would be necessary to include the Chi2, OR and CI data (numbers) in the tables, even if they were not significant.
- k) Possible selection and study reporting biases that may affect the results need to be discussed. Also to expand the limitations description.
- l) Could be important to address in the discussion section the possibility that some practices or lifestyle characteristics (i.e. increase food intake) could be consequences of depression.

PLEASE COMMENT

Q 4 → Is the title appropriate, concise, attractive?

The title could mention the parents report since they represent 72% of the study's population.

Q 5 → Are the keywords appropriate?

Could be necessary to consider include the keywords: children, symptoms.

Q 6 → Is the English language of sufficient quality?

The English language could be revised for improvement.

Q 7 → Is the quality of the figures and tables satisfactory?

Yes.

Q 8 → Does the reference list cover the relevant literature adequately and in an unbiased manner?)

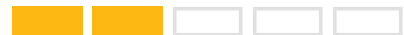
Yes. it does

QUALITY ASSESSMENT

Q 9 → Originality



Q 10 → Rigor



Q 11 → Significance to the field



Q 12 → Interest to a general audience



Q 13 → Quality of the writing



Q 14 → Overall scientific quality of the study



REVISION LEVEL

Q 15 → Please make a recommendation based on your comments:

Major revisions.

