

Review of: "Child and adolescent self-harm in a pandemic world: Evidence from a decade of data"

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Potential competing interests: No potential competing interests to declare.

Thanks for this opportunity.

The topic is interesting, as decadal trend of self harm is analyzed, with special focus on impact of the COVID-19 pandemic.

Some suggestions:

1. Please define self harm and non self harm as per the program
2. Some articles for references: a. [Self-harm in adolescents | Advances in Psychiatric Treatment | Cambridge Core](#) b. [Comparison of Self-harm or Overdose Among Adolescents and Young Adults Before vs During the COVID-19 Pandemic in Ontario | Adolescent Medicine | JAMA Network Open | JAMA Network](#) c. [The impact of the COVID-19 pandemic on presentations to health services following self-harm: systematic review | The British Journal of Psychiatry | Cambridge Core](#) d. [A potential increase in adolescent nonsuicidal self-injury during covid-19: A comparison of data from three different time points during 2011 – 2021 - ScienceDirect](#) e. [Prevalence and psychosocial risk factors of nonsuicidal self-injury among adolescents during the COVID-19 outbreak | SpringerLink](#)
3. Could you please use statistical test to identify risk factors (age group 14-15, female gender, ethnic groups, socio-economic status, place of residence, family support or broken families, etc or schooling , etc
4. any tests like chi square of trends to show if the increase or decrease in trends is of statistical significance?
5. Is there any data to outcome of referrals? What happened after they were referred to the CAAMHPP ?
6. To see impact of COVID -19 if micro analysis is done, eg did first referral increase in 2020-22 ? Did the age group or gender change in the pandemic time, or self harm types such as poisoning or injury or risk behaviour such as tattooing etc change ? If possible please disintegrate types of self harm and do analysis of the same.
7. Conclusions don't match the results
8. Discussion can be elaborated by comparing different studies accross the continent.
9. Calgary specific recommendations would help the program managers and policy makers.