

1 **Review title**

2 Self-management, self-care, and self-help in adolescents with emotional problems: a scoping review
3 protocol

4 **Abstract**

5 **Objective:** The objective of this scoping review is to draw on existing literature to illuminate the ways
6 in which the concepts of self-management, self-care, and self-help are defined in the context of
7 adolescents with emotional problems. The aim is to describe and categorize the definitions of these
8 concepts as well as the strategies or techniques which have been proposed to facilitate self-
9 management, self-care, and self-help for this group, as this may have important implications for policy
10 and intervention development.

11 **Introduction:** There is evidence that emotional problems are rising amongst **adolescents**, while timely
12 access to specialist mental health treatment is limited to **adolescents** with greater severity of mental
13 health difficulties. Concurrently, self-management, self-care, and self-help strategies may be used by
14 **adolescents**. Owing to the overlap in existing definitions and lack of clarity around these concepts in a
15 youth mental health context, a scoping review of the literature is warranted.

16 **Inclusion criteria:** Studies involving adolescents aged 10-19 with symptoms of emotional problems
17 which reference self-management, self-care, or self-help will be included.

18 **Methods:** Medline, Embase, PsycINFO, Web of Science, CINAHL, Google Scholar, and Mednar will
19 be searched for English-language texts from the year 2000 onward. A map or typology of definitions
20 will be presented alongside a narrative summary of the results.

21

22

23 **Keywords:** emotional problems; self-care; self-help; self-management; **adolescents**

24 **Abstract word count:** 208

25 **Total manuscript word count:** 2710

26

27 Introduction

28 Epidemiological studies suggest that the onset of adolescence is associated with increased
29 depressive symptoms,¹ and NHS digital data indicates that emotional problems are on the rise
30 amongst **adolescents** in the United Kingdom (UK).² These problems can range from mild and sub-
31 clinical to severe and meriting a specialist diagnosis, and they include “panic disorder, generalized
32 anxiety disorder (GAD), separation anxiety, social phobia, specific phobias, OCD and depression”.³

33 As waiting lists to access UK specialist youth mental health services are lengthy and timely access is
34 becoming more challenging,⁴ particularly for **adolescents** with less severe symptoms,⁵ self-initiated
35 strategies are increasingly being acknowledged as having the potential to decrease reliance on
36 already overstretched services.⁶ This runs alongside the promotion and investigation of shared
37 decision making, patient empowerment, and choice in order to better meet the mental health needs of
38 **adolescents** and their families in the places they ordinarily go, suggesting that formal specialist mental
39 health treatment should not be a one-size-fits-all approach.^{7, 8} This shift is evident given that the
40 constructs of self-management, self-care, and self-help are appearing more frequently in published
41 research,⁹ good practice guidance,¹⁰ UK policy,¹¹ and reports.⁶ However, in the existing literature,
42 considerable overlap exists between these concepts in a youth mental health context, with no
43 universally accepted definition in existence which encompasses these related concepts.

44 Self-management, self-care, and self-help strategies could be employed by **adolescents** to manage
45 the existing symptoms of a mental health difficulty, to prevent the onset of a mental health difficulty, or
46 while waiting for an appointment for specialist treatment. As some strategies can be delivered online,
47 they have increased in popularity alongside other digital health interventions and e-health more
48 generally, which was first defined in 2001.¹² There is evidence that **adolescents** actively consume
49 health-related information online, including user-generated content such as online message boards.¹³
50 There is also some evidence that a number of strategies which are not online, such as going out or
51 being outside, are being promoted to **adolescents**.⁹ These strategies merit further investigation, as
52 there is a gap in understanding regarding what is being suggested to **adolescents** and what is actually
53 being used or done by them.⁶

54 This confusion may be exacerbated by disagreement around **which strategies or techniques** actually
55 make up self-management, self-care, and self-help. For example, one study argued that while self-
56 care should be considered a preventative strategy, self-management should be employed to address
57 the impact of a current difficulty or disease.¹⁴ However, other studies acknowledge crossover between
58 self-management and self-care strategies in mental health by creating overarching ways of describing
59 these related **techniques**, such as ‘strategies not accompanied by a professional’.⁹ A key task of this
60 scoping review will be to create a map or typology of the definitions of these concepts to further
61 illuminate their similarities and differences.¹⁵

62 In terms of Medical Subject Headings (MeSH), self-care has been defined as, “caring for self when ill
63 or positive actions and adopting behaviors to prevent illness.”¹⁶ Self-management has been defined

64 as an “individual's ability to manage the symptoms, treatment, physical and psychosocial
 65 consequences and lifestyle changes inherent in living with a chronic condition.”¹⁶ The MeSH term
 66 “self-help groups” is defined as “organizations which provide an environment encouraging social
 67 interactions through group activities or individual relationships”.¹⁶ None of these definitions specifically
 68 refer to **adolescents**, and despite clear overlap between each of these definitions, to-date they have
 69 not been adequately clarified in a youth mental health context.

70 In a review of the efficacy of strategies not accompanied by a professional in **adolescents'** mental
 71 health, self-initiated strategies have been described as non-professionally mediated interventions.⁹
 72 This is any kind of activity, intervention, or action a young person could engage in with the aim of
 73 improving their mental health without the need to involve a mental health professional.⁹ However, self-
 74 initiated strategies introduced to a young person by a professional (e.g., breathing techniques) could
 75 also be considered to contain elements of self-management, self-care, or self-help and merit further
 76 investigation in this review. For example, self or community approaches,⁹ unguided self-help
 77 interventions,¹⁷ and coping or emotion regulation strategies¹⁸ all appear to contain elements of self-
 78 help, self-care, and/or self-management. All of these concepts reference the ‘self’ and indicate a
 79 measure of agency which merits further exploration, specifically from the viewpoint of **adolescents**
 80 and their initiation of these **strategies or techniques**.

81 The aim of this scoping review is to draw on the literature to illuminate the ways in which the concepts
 82 of self-management, self-care, and self-help are defined in the context of **adolescents** with emotional
 83 problems. **The authors aim to describe and categorize the definitions of these concepts as well as the**
 84 **strategies or techniques which have been proposed to facilitate self-management, self-care, or self-**
 85 **help for this group.** A diverse range of studies will be included, covering both descriptive and
 86 experimental studies (e.g., qualitative and quantitative studies, clinical trials, population studies, and
 87 cohort studies). The concepts of ‘coping mechanisms’, ‘coping strategies’, and ‘emotion regulation
 88 strategies’ will also be added to this search in order to ensure that it covers adequate breadth of
 89 techniques which could be considered to contain elements of self-management, self-care, or self-
 90 help. A key task will be to explore and compare the existing definitions of self-management, self-care,
 91 and self-help in the context of **adolescents** with emotional problems (e.g., anxiety, depression), with
 92 the aim of further clarifying or creating a comprehensive definition of these terms in the context of
 93 youth mental health based on the existing literature. **These definitions will be explored narratively in**
 94 **terms of the strategies and techniques which have been proposed to facilitate each concept.** As very
 95 little research has been done previously to draw together this literature, this review has important
 96 implications for policy and intervention development for **adolescents'** management of their mental
 97 health on their own.

98 An initial search **using Google Scholar and the PsycINFO database (using the Ovid platform)** was
 99 conducted using related keywords to determine 1) if there are studies that have been published
 100 related to the review questions, and 2) that there are no existing scoping or systematic reviews which
 101 already address the review questions. **While there were some studies identified which related to these**
 102 **concepts (e.g.,^{9, 18}),** it was established that there are currently no systematic or scoping reviews

103 which focus broadly on self-management, self-care, and self-help for adolescents with emotional
104 problems.

105 **Keywords**

106 Adolescents; self-management, self-care, or self-help; and emotional problems.

107 **Review question(s)**

108 The objective of this scoping review is to locate and describe the existing published and grey literature
109 defining the concepts of self-management, self-care, and self-help as well as strategies or techniques
110 related to these concepts for **adolescents** with emotional problems, as to our knowledge this has not
111 been done previously and has important policy and intervention development implications.

112 Specifically, the review questions are:

- 113 1. How are the concepts of self-management, self-care, and self-help defined in the context of
114 adolescents with emotional problems?
- 115 2. What strategies or **techniques** have been proposed to facilitate self-management, self-care,
116 and self-help in adolescents with emotional problems?

117 **Inclusion criteria**

118 **Participants**

119 Participants will include adolescents aged 10-19 with emotional problems **(also referred to as**
120 **'emotional disorders')**, including those with subclinical or self-reported symptoms (e.g., low mood) and
121 those with a formal diagnosis (e.g., depression). **The World Health Organization explains, "in addition**
122 **to depression or anxiety, adolescents with emotional disorders can also experience excessive**
123 **irritability, frustration or anger. Symptoms can overlap across more than one emotional disorder with**
124 **rapid and unexpected changes in mood and emotional outbursts."**¹⁹ Emotional problems have been
125 associated with the onset of adolescence, which has been defined as the age range between 10 to 19
126 years.²⁰ Studies with younger or older participants will still be included if the age range overlaps with
127 10-19 years of age and 50% of the sample falls within this bracket. As stated above, emotional
128 problems **may include clinical or sub-clinical symptoms of** "panic disorder, generalized anxiety
129 disorder (GAD), separation anxiety, social phobia, specific phobias, OCD and depression,"³ and for
130 the purposes of this scoping review, these problems will not require a formal diagnosis and can be
131 based on self-report or **self-evaluation** measures, **which may include symptom-based descriptions of**
132 **emotional problems (e.g., the Strengths and Difficulties Questionnaire 'Emotional Difficulties' sub-**
133 **scale²¹).**

134 **Concept**

135 The concepts of interest are self-management, self-care, and self-help as described in adolescents
136 with emotional problems.

137 It has been noted that there is no universally accepted definition of self-management,²² and some
 138 descriptions of self-management use the term interchangeably with self-care or self-help, despite
 139 some papers describing self-management and self-care as discrete concepts.¹⁴ In a recent scoping
 140 review, self and community strategies were described as “non-professionally mediated,”⁹ and
 141 professionals were described as, “any person trained to use a treatment or intervention for the
 142 purposes of improving mental health or emotional wellbeing.”⁹ However, the aforementioned review
 143 only focused on anxiety and depression and excluded strategies which involved a professional’s
 144 input. In order to better understand the essential components of self-management, self-care, and self-
 145 help and to develop a typology of related definitions and strategies, this review will aim to further
 146 explore this concept as it is described broadly across the existing literature.¹⁵ **If overlap exists**
 147 **between definitions, or if terms are used interchangeably, this will be highlighted in the resulting**
 148 **typology table and discussed narratively.**

149 **Context**

150 Recent data suggests that anxiety and depression are the most prevalent emotional problems
 151 amongst **adolescents.**² **One in six young people aged five to 16** have a probable mental health
 152 disorder, **and the likelihood of a probable mental health disorder increases with age.**²³ The context of
 153 the literature to be included in this scoping review therefore includes anywhere where self-
 154 management, self-care, or self-help strategies or techniques have been introduced to or can be
 155 located or accessed by **adolescents** as a method for improving the symptoms of emotional problems.
 156 Specific contexts could include specialist mental health settings where these strategies are proposed
 157 as alternatives or correlates to specialist mental health treatments, in a school or community-based
 158 setting, or within the young person’s own home as they find information about or access a self-
 159 management strategy on a computer, phone, or tablet. A key issue will be determining if the help
 160 which may be professionally initiated is guided or unguided, as there some indications that unguided
 161 self-help may be less efficacious than guided self-help.¹⁷ Studies will be included regardless of if the
 162 strategy discussed is provided by a professional or if it is discovered independently by a young
 163 person.

164 **Types of sources**

165 This scoping review will consider all quantitative, qualitative, economic, and mixed methods studies
 166 and evaluations, as well as systematic, scoping, **and literature** reviews, for inclusion. Conference
 167 abstracts and presentations will not be included, but attempts will be made to contact authors of
 168 relevant conference abstracts or papers for additional literature which may be related to the research
 169 questions of this scoping review. **Commentaries and opinion pieces will not be included as they are**
 170 **not empirical studies.** In order to capture the full range of the literature, grey or unpublished literature
 171 (e.g., reports) will also be included and obtained by searching Mednar and Google Scholar.
 172 Reference **lists** from seminal articles will also be searched for any missing literature.

173 **Methods**

174 The proposed scoping review will be conducted in accordance with the Joanna Briggs Institute (JBI)
175 methodology for scoping reviews.²⁴

176 **Search strategy**

177 An initial search will be conducted using a selection of keywords on PsycINFO, Embase, and Medline
178 using the Ovid platform. The text words in the title and abstract of these publications will be analyzed
179 along with any relevant keywords and index terms. Additional keywords and index terms will be added
180 to this list resulting in a new list, which will be used to undertake a second search through all chosen
181 databases. **With the help of a research librarian**, the search strategy will be translated from the Ovid
182 **platform databases** to the **bespoke Web of Science platform** and **CINAHL's EBSCO platform**. The first
183 reviewer will review the reference lists of all studies from the second search which meet the inclusion
184 criteria for additional studies.

185 Studies published in English or with an accessible English translation will be considered for this
186 review. Only studies published from 1st January 2000 onward will be considered for inclusion in this
187 scoping review for two reasons: 1) The NHS Plan, published in 2000, was one of the first major policy
188 documents to reference self-care,¹¹ and 2) due to changes in technology and understanding of e-
189 health or digital health interventions around the millennium, which may have led to greater
190 proliferation of health-related resources online.¹²

191 **Information sources**

192 **Databases to be searched include PsycINFO, Medline, and Embase (using the Ovid platform); Web**
193 **of Science (using their bespoke platform); and CINAHL (using the EBSCO platform). Google Scholar**
194 **and Mednar will be used to search for unpublished studies and grey literature. Websites targeting**
195 **mental health for adolescents (e.g., <https://headspace.org.au/>, [https://www.annafreud.org/on-my-](https://www.annafreud.org/on-my-mind/self-care/)**
196 **mind/self-care/)) will also be searched for relevant literature.**

197 **Study selection**

198 Following the search, all identified records will be collated and uploaded into EndNote X9 (Clarivate
199 Analytics, PA, USA) and duplicates removed. To maximize the limited availability and resources of the
200 research team, the titles and abstracts of only the first 20% of the literature identified as result of this
201 search will be independently screened by the first and second reviewer for whether these data meet
202 the inclusion criteria of this scoping review. The interrater reliability between the reviewers will then be
203 calculated using the kappa statistic.²⁵ If the interrater reliability is 0.81 or above, the first reviewer will
204 continue to screen the remaining titles and abstracts, while if the interrater reliability is lower than
205 0.81, both reviewers will screen the remaining 80% of the articles.²⁵ Reasons for exclusion of full-text
206 papers that do not meet the inclusion criteria will be recorded and reported in the scoping review. Any
207 disagreements that arise between the reviewers at each stage of the selection process will be
208 resolved through discussion, or with a third reviewer. The results of the search will be reported in full

209 in the final scoping review and presented in a Preferred Reporting Items for Systematic Reviews and
210 Meta-analyses (PRISMA) flow diagram.²⁶

211 **Data extraction**

212 Data will be extracted from the papers identified by the title and abstract screening by two reviewers
213 using a draft data extraction grid which has been modified from a JBI data extraction tool (see
214 Appendix II).²⁷ To check that this tool is adequate, the first reviewer and the second reviewer will pilot
215 the grid by extracting data and charting results from the first five included papers to check that the
216 same data is extracted by each reviewer. If there is good agreement between the two reviewers, both
217 reviewers will then move on to extract data and chart results from up to 25 of the remaining full-text
218 papers, with the first reviewer extracting data and charting results from any remaining papers due to
219 the research team's resource constraints. The data extracted will include background information, a
220 description of the study (including the design, methodology, phenomena of interest, setting,
221 geographical location, and participants), and results of each study relating specifically to the review
222 questions. The draft data extraction tool may be modified and revised as necessary during the
223 process of extracting data from each included paper, and modifications will be detailed in the full
224 scoping review. Any disagreements that arise between the reviewers will be resolved through
225 discussion, or with a third reviewer. Authors of papers will be contacted to request missing or
226 additional data, where required.

227 **Data presentation**

228 Results will be presented as a map of the different definitions of self-management, self-care, and self-
229 help and may also include a typology of definitions and related strategies or techniques.¹⁵ This map
230 will be created by thematically analyzing the definitions of self-help, self-management, and self-care
231 across the different studies and tabulating these themes into a typology.¹⁵ The similarities and
232 differences between the ways in which self-management, self-care, and self-help are defined in the
233 existing literature will be discussed narratively in alignment with the objectives and scope of this
234 review, with examples of strategies relating to each definition given where possible. This typology or
235 map of the results will be refined iteratively by the reviewers throughout the review process, and it will
236 be used to discuss how the results of this scoping review respond to the original review questions.

237 **Conflicts of interest**

238 The authors declare no conflict of interest.

239 **References**

- 240 1. Dekker MC, Ferdinand RF, Van Lang NDJ, Bongers IL, Van Der Ende J, Verhulst FC.
 241 Developmental trajectories of depressive symptoms from early childhood to late adolescence: gender
 242 differences and adult outcome. *Journal of Child Psychology and Psychiatry*. 2007;48(7):657-666.
 243 2. NHS Digital. *Mental Health of Children and Young People in England, 2017: Behaviours, lifestyles*
 244 *and identities*. 2018.
 245 3. Ogundele MO. Behavioural and emotional disorders in childhood: A brief overview for
 246 paediatricians. *World J Clin Pediatr*. 2018;7(1):9-26.
 247 4. Moore A, Gammie J. Revealed: Hundreds of children wait more than a year for specialist help.
 248 *Health Service Journal*. 2018.
 249 5. Edbrooke-Childs J, Deighton J. Problem severity and waiting times for young people accessing
 250 mental health services. *BJPsych Open*. 2020;6(6):e118.
 251 6. de Silva D. Helping people help themselves. A review of the evidence considering whether it is
 252 worthwhile to support self-management. 2011.
 253 7. Hayes D, Edbrooke-Childs J, Town R, Wolpert M, Midgley N. Barriers and facilitators to shared
 254 decision-making in child and youth mental health: Exploring young person and parent perspectives
 255 using the Theoretical Domains Framework. *Counselling and Psychotherapy Research*. 2020;20(1):57-
 256 67.
 257 8. Wolpert M, Harris R, Hodges S, Fuggle P, James R, Wiener A, et al. THRIVE Framework for
 258 system change. 2019.
 259 9. Wolpert M, Dalzell K, Ullman R, Garland L, Cortina M, Hayes D, et al. Strategies not accompanied
 260 by a mental health professional to address anxiety and depression in children and young people: a
 261 scoping review of range and a systematic review of effectiveness. *The Lancet Psychiatry*.
 262 2019;6(1):46-60.
 263 10. National Institute for Health and Care Excellence. *Depression in children and young people:*
 264 *identification and management (NICE Quality Standard No. 134)*. 2019.
 265 11. Department of Health. *The NHS Plan: a plan for investment, a plan for reform*. 2000.
 266 12. Eysenbach G. What is e-health? *J Med Internet Res*. 2001;3(2):e20.
 267 13. Fergie G, Hunt K, Hilton S. What young people want from health-related online resources: a focus
 268 group study. *Journal of Youth Studies*. 2013;16(5):579-596.
 269 14. Clark NM, Becker MH, Janz NK, Lorig K, Rakowski W, Anderson L. Self-Management of Chronic
 270 Disease by Older Adults: A Review and Questions for Research. *Journal of Aging and Health*.
 271 1991;3(1):3-27.
 272 15. Mandara J. The Typological Approach in Child and Family Psychology: A Review of Theory,
 273 Methods, and Research. *Clinical Child and Family Psychology Review*. 2003;6(2):129-146.
 274 16. National Center for Biotechnology Information. MeSH 2020 [Available from:
 275 <https://www.ncbi.nlm.nih.gov/mesh/>.
 276 17. Bennett SD, Cuijpers P, Ebert DD, McKenzie Smith M, Coughtrey AE, Heyman I, et al.
 277 *Practitioner Review: Unguided and guided self-help interventions for common mental health disorders*

- 278 in children and adolescents: a systematic review and meta-analysis. *Journal of Child Psychology and*
279 *Psychiatry*. 2019;60(8):828-847.
- 280 18. Stapley E, Demkowicz O, Eisenstadt M, Wolpert M, Deighton J. Coping With the Stresses of Daily
281 Life in England: A Qualitative Study of Self-Care Strategies and Social and Professional Support in
282 Early Adolescence. *The Journal of Early Adolescence*. 2019;40(5):605-632.
- 283 19. World Health Organization. Adolescent mental health 2020 [Available from:
284 [https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-](https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health#:~:text=Emotional%20disorders%20commonly%20emerge%20during,excessive%20irritability%2C%20frustration%20or%20anger)
285 [health#:~:text=Emotional%20disorders%20commonly%20emerge%20during,excessive%20irritability](https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health#:~:text=Emotional%20disorders%20commonly%20emerge%20during,excessive%20irritability%2C%20frustration%20or%20anger)
286 [%2C%20frustration%20or%20anger](https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health#:~:text=Emotional%20disorders%20commonly%20emerge%20during,excessive%20irritability%2C%20frustration%20or%20anger).
- 287 20. Age limits and adolescents. *Paediatr Child Health*. 2003;8(9):577-578.
- 288 21. Goodman R. Psychometric properties of the strengths and difficulties questionnaire. *J Am Acad*
289 *Child Adolesc Psychiatry*. 2001;40(11):1337-1345.
- 290 22. Barlow J, Wright C, Sheasby J, Turner A, Hainsworth J. Self-management approaches for people
291 with chronic conditions: a review. *Patient Education and Counseling*. 2002;48(2):177-187.
- 292 23. Vizard T, Sadler K, Ford T, Newlove-Delgado T, McManus S, Marcheselli F, et al. Mental Health
293 of Children and Young People in England, 2020. NHS Digital; 2020.
- 294 24. Peters MDJ, Godfrey CM, Khalil H, McInerney P, Parker D, Soares CB. Guidance for conducting
295 systematic scoping reviews. *International Journal of Evidence-Based Healthcare*. 2015;13(3).
- 296 25. McHugh ML. Interrater reliability: the kappa statistic. *Biochem Med (Zagreb)*. 2012;22(3):276-282.
- 297 26. Tricco AC, Lillie E, Zarin W, O'Brien KK, Colquhoun H, Levac D, et al. PRISMA Extension for
298 Scoping Reviews (PRISMA-ScR): Checklist and Explanation. *Annals of Internal Medicine*.
299 2018;169(7):467-473.
- 300 27. Peters MDJ, Godfrey C, McInerney P, Baldini Soares C, Khalil H, Parker D, et al. Chapter 11:
301 scoping reviews. *JBI Reviewer's Manual [Internet]*. Adelaide: JBI; 2017.

302

303 **Appendix I: Search strategy**

304 PsycINFO (Ovid), Embase (Ovid), and Medline (Ovid) search conducted on June, 2020.

Search	Query	Records retrieved
#1	"self car*".ab,kw,ti.	50461
#2	"self help*".ab,kw,ti.	22835
#3	"self manag*".ab,kw,ti.	54349
#4	"adolescen*".ab,kw,ti.	852878
#5	"child*".ab,kw,ti.	3657450
#6	college.ab,kw,ti.	436853
#7	elementary.ab,kw,ti.	98672
#8	"emerging adult*".ab,kw,ti.	9416
#9	"high school*".ab,kw,ti.	138782
#10	junior high.ab,kw,ti.	11515
#11	"juvenile*".ab,kw,ti.	195204
#12	"kid*".ab,kw,ti.	1089328
#13	"middle school*".ab,kw,ti.	28883
#14	minor.ab,kw,ti.	500801
#15	"paediatric*".ab,kw,ti.	176555
#16	"pediatric*".ab,kw,ti.	744745
#17	primary school.ab,kw,ti.	28181
#18	pupil.ab,kw,ti.	37239
#19	secondary school.ab,kw,ti.	28497
#20	"student*".ab,kw,ti.	1094230

#21	"teen*".ab,kw,ti.	90000
#22	"tween*".ab,kw,ti.	21471
#23	"young adult*".ab,kw,ti.	252410
#24	young people.ab,kw,ti.	88534
#25	young person.ab,kw,ti.	3981
#26	"youth*".ab,kw,ti.	254875
#27	acute stress.ab,kw,ti.	19499
#28	anxiety.ab,kw,ti.	622332
#29	anxious.ab,kw,ti.	58522
#30	(anxious adj1 generally).ab,kw,ti.	66
#31	anxious in social situations.ab,kw,ti.	9
#32	(avoid* adj1 specific).ab,kw,ti.	509
#33	"avoid* going out".ab,kw,ti.	36
#34	"depress*".ab,kw,ti.	1313939
#35	emotional difficulty.ab,kw,ti.	243
#36	emotional disorder.ab,kw,ti.	1853
#37	emotional health.ab,kw,ti.	7141
#38	"emotional illness*".ab,kw,ti.	538
#39	"emotional issue*".ab,kw,ti.	1920
#40	GAD.ab,kw,ti.	26196
#41	generalised anxiety.ab,kw,ti.	2586
#42	generalized anxiety.ab,kw,ti.	24333
#43	internalising.ab,kw,ti.	1949
#44	internalizing.ab,kw,ti.	31248

#45	low mood.ab,kw,ti.	2623
#46	"major depress*" .ab,kw,ti.	148956
#47	mood disorder.ab,kw,ti.	18247
#48	obsessive compulsive disorder.ab,kw,ti.	43371
#49	OCD.ab,kw,ti.	32715
#50	"panic disorder*" .ab,kw,ti.	31762
#51	"panic*" .ab,kw,ti.	59026
#52	post traumatic stress.ab,kw,ti.	39350
#53	posttraumatic stress.ab,kw,ti.	71332
#54	PTSD.ab,kw,ti.	84238
#55	separation anxiety.ab,kw,ti.	6045
#56	social phobia.ab,kw,ti.	14303
#57	"social* anxi*" .ab,kw,ti.	22723
#58	stressor.ab,kw,ti.	42749
#59	"trauma*" .ab,kw,ti.	884146
#60	trauma disorder.ab,kw,ti.	432
#61	worried.ab,kw,ti.	11146
#62	worry.ab,kw,ti.	30554
#63	4 or 5 or 6 or 7 or 8 or 9 or 10 or 11 or 12 or 13 or 14 or 15 or 16 or 17 or 18 or 19 or 20 or 21 or 22 or 23 or 24 or 25 or 26	7586789
#64	specific phobia.ab,kw,ti.	2953
#65	27 or 28 or 29 or 30 or 31 or 32 or 33 or 34 or 35 or 36 or 37 or 38 or 39 or 40 or 41 or 42 or 43 or 44 or 45 or 46 or 47 or 48 or 49 or 50 or 51 or 52 or 53 or 54 or 55 or 56 or 57 or 58 or 59 or 60 or 61 or 62 or 64	2664089

#66	"coping strateg*".ab,kw,ti.	49476
#67	"emotion* regulation strateg*".ab,kw,ti.	4738
#68	"coping mechanism*".ab,kw,ti.	9115
#69	1 or 2 or 3 or 66 or 67 or 68	182037
#70	63 and 65 and 69	11056
#71	Limit to English language and year 2000 to present day	
#72	Remove duplicates	

305 **Appendix II: Data extraction grid**

Background information	
Reviewer (1 st or 2 nd)	
Date of data extraction	
Author	
Year	
Journal	
Record number	
Study description	
Study design (e.g., experimental, systematic or scoping review, qualitative, quantitative, etc.)	
Methodology	
Phenomena of interest	
Setting (e.g., school)	
Geographical location/country	
Participants <ul style="list-style-type: none"> - Age range (if applicable) - Gender identity - Specialist characteristics (if applicable, e.g., homeless, LGBTQ+) - Ethnicity - Emotional problems covered 	
Results or details extracted	
Self-care definition and/or related techniques/strategies (if applicable)	
Self-management definition and/or related techniques/strategies (if applicable)	

Self-help definition and/or related strategies/techniques (if applicable)	
Overlapping or new definitions and/or related strategies/techniques (if applicable)	
Findings from any empirical work conducted in relation to self-management, self-care, or self-help strategies	
Authors' conclusions	
Reviewer comments	

306

307