

Designing Interventions for Behavioural Change

Psychological ownership of student mental health at Imperial. How can we encourage students to take ownership of a healthy coping strategy at university?

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Contextual Research

Brief

Going to university can be a challenging experience for many young people. Coping with a large amount of changes, meeting new people, managing finances, living somewhere new and dealing with an increased workload and exams. These are just some examples of factors that contribute towards students struggling with mental health issues during their time at university. In this project we intend to explore how the psychological ownership framework can be applied to help students manage their mental health more effectively and feel more confident tackling the problems they face.

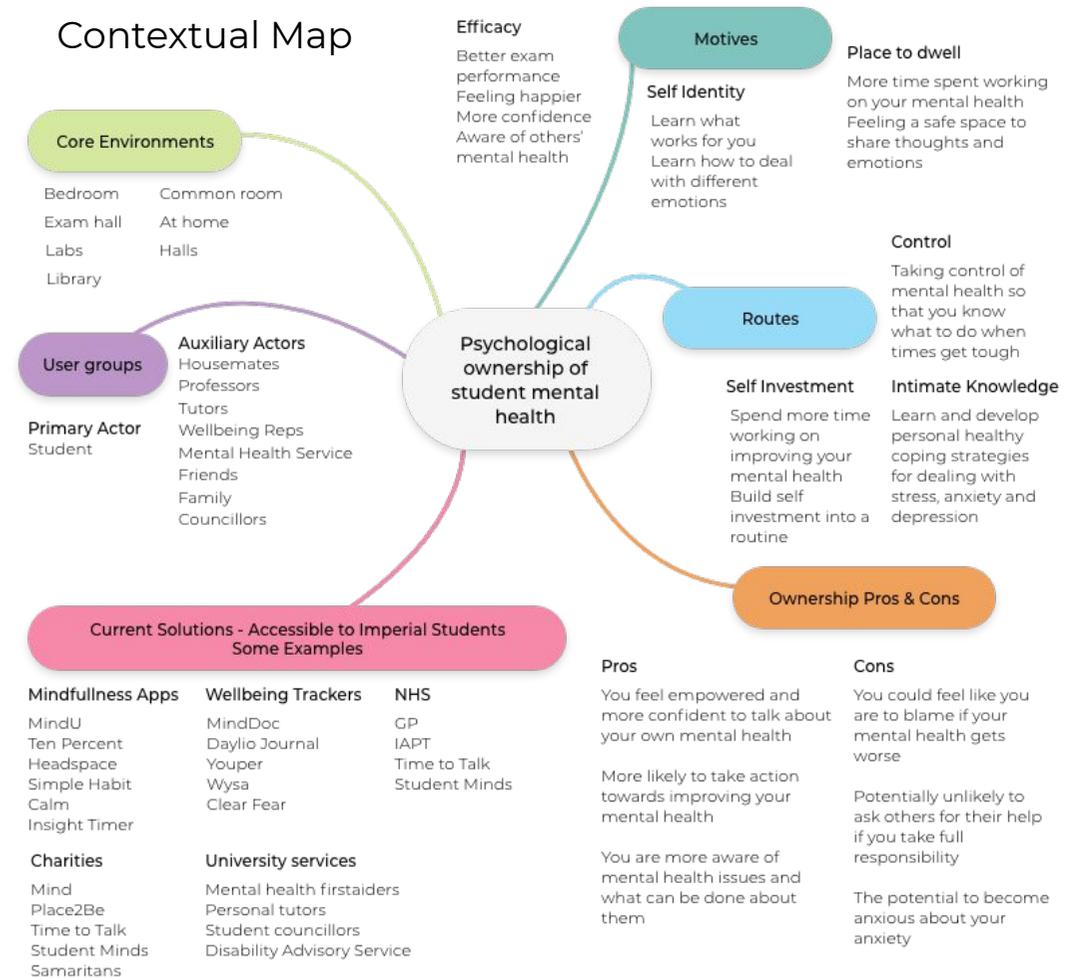
How might we give Imperial students a greater feeling of ownership over their mental health whilst at university?

Assumptions

These assumptions should be explored through primary and secondary research in order to discover insights and opportunities.

- If we are able to give students greater control over their mental health, they will be less likely to develop a serious mental health conditions whilst at university.
- If students invest more time into their mental health self management, they will have a healthier mind and increased productivity.
- Students can develop their self identity by developing an intimate knowledge of different healthy coping strategies and discovering what works best for them.

Contextual Map



Desired Research Outcome

Understand how psychological ownership theory can be applied to enact a meaningful intervention where the motives, routes, settings and user roles are carefully considered.



Primary Research- Plan

Target Users

We decided to focus our intervention on university students studying at Imperial College London, thus our selection criteria for primary research simply consisted of Imperial students. Each member of our team conducted 5 in-person or online interviews with a selection of Imperial students, giving us a total sample size of 20.

In addition to this we conducted a separate interview with Clarissa Gardner, an MSc student who is currently working on a project looking into psychological ownership of mental health in the black community.

Due to the potentially sensitive nature of our research in discussing mental health, we completed an Ethics approval form prior to the start of our interviews.

Discussion Guide

Prior to conducting our interviews with our target users, we set out a discussion guide to aid our conversations. These questions were not fixed but simply prompts for conversation.

We sorted our questions into the psychological ownership framework, specifically looking into motives and routes involved.

Mental health overview

- When you think about mental health, what is the first thing you think of?
- How important to you is your mental health?
- Do you feel a sense of personal responsibility for your health (physical and mental)?

Motives

- Are you motivated to maintain “good” mental health?
- If yes, what motivates you?
- What are the barriers stopping you from maintaining this?

Routes: Control

- What aspects of your health do you feel you can control?
- What would make you feel a greater sense of control and responsibility over your mental health?

Routes: Self-investment

- How much do you think about your mental health?
- How important to you is your mental health?
- How often do you think about your mental wellbeing during exam season?
- Have you tried anything in the past to support your mental health?
- Have you done this during exams?
- What coping strategies, if any, do you use during exam periods?
- Do you find your coping strategies actually help you?

Routes: Intimate Knowledge

- Do you know what mental health resources are available at Imperial?
- What (if any) mental health resources do you know of?
- Do you use them?
- If not, what is stopping you from using them?

Roles:

- What role does your family/ friends play in your mental health?
- What role (if any) does Imperial play in your mental health?
- How do these external roles impact your mental health?

Primary Research Interviews

Insights from Interviews

From our interviews undertaken, we have identified some key, recurring insights:

Mental health is individual

“You have to learn what’s best and how best to manage your own mental health’

People have a personal responsibility to look after one’s own mental health

“I think about other people but if you don’t look after your own mental health you’re not going to get very far”

Co-ownership of mental health:

“I think you are responsible for other people’s mental health through the way you act”

“I feel like everyone has a shared ownership for mental health, but at the same time I think you are in control”

“Workload is not only a personal responsibility- the university is inherently set up to promote it”

Mental health is often put on hold to prioritise work or social events

“It’s very difficult to focus on something important when you know its finite and going to be over so you can push prioritising yourself till after the exams are over”

People feel that they can control their own mental health

“You impact how you process things; it is your decision how you process what happens in your environment”

“I think people can control their mental state and can work on being able to control it”

University is when mental health starts to become a more prominent issue

“I only realised that i need to actively take care of my mental health at university”

Interview with Clarissa Gardner

Clarissa Gardner is a **Research Assistant** in the **Digital Health Team** at the **Institute of Global Health Innovation**. She was inspired by an event in the black community for mental health and became interested in mental health self-management. Currently she is working on a project which aims to apply psychological ownership theory to increase patient activation in the black and arabic communities (i.e. how involved people are with their mental healthcare decisions).



Insights from Interview

Zoning in on a specific target ownership is key

E.g. it is my responsibility to take my medication everyday

Co-ownership talks about a collective responsibility to look after each other

“Can you use the roles of others to influence one’s own ownership over their mental health?”

“However, must be careful not to burden people with a collective sense of ownership”

Must consider your target users views and access to digital tools

Students have a better chance of using a digital intervention effectively

Mental health is often not recognised until it becomes a serious problem

“There is a lack of appreciation in mental health to invest time and money, until it reaches a point where it gets so serious that it has the potential to harm oneself or others”

There is the potential to incorporate elements of human connectivity and ritual design as they overlap with psychological ownership

University is an important stage in one’s life and thus a key moment for an intervention

“Especially as a student you might be going through the transition into taking ownership of your own care”

There is a risk of giving advice to each other

“Mental health apps are not very well regulated. However there are things that can be done, like approved posters and moderators’

“If you don’t do it early, you’ll be worse off for it later”



Secondary Research

Ownership

One of the most influential recent researches in the psychological ownership field is Dr Jon L. Pierce. We took a look at his work to discover how he defines and utilises ownership.

Psychological ownership is the “state in which an individual feels as though a target if ownership or a piece of that target is theirs” (Pierce, 2001, p. 266)

“People come to find themselves tied to things as a result of their active participation with those things” (Pierce et al. 2003)

Yet, “there are times when feelings of ownership can lead an individual to feel overwhelmed by the burden of responsibility”

Therefore it is important that we define a target of ownership that increases self investment into one’s own mental health but maintains a shared ownership between the individual and other auxiliary actors, to reduce the risk of a compounding detrimental effect.

What types of interventions are most effective in engaging stewardardship behaviour through psychological ownership?

In a time where remote working has become a normality due to COVID 19, digital interactions and interventions have become popular. However it is evidenced that increased touch and tactile behaviours lead to increased sense of ownership (S. A Brasel et al.). This is shown when comparing the use of touchscreen devices to desktop computers leading to increase perceived ownership and magnifying the endowment effect.

How might we use this insight to increase tactile behaviour in relation to mental health? How can we get hands on with our mental health, instead of just thinking, reading or learning about it from a distance?

Mental Health

What is a coping strategy and how effective are they?

“Coping strategies refer to the specific efforts, both behavioural and psychological, that people employ to master, tolerate, reduce or minimise stressful events”. (S. Taylor 1998)

(G Pozzi et. al) explain the most common coping strategies for anxiety are searching for support, acceptance, changing perspective, problem solving, avoidance, religion and substance use.

Acceptance, problem solving and changing perspective were proven to have the greatest positive effect and these were enhanced by patients who underwent psychotherapy, providing support for the value of “psychosocial interventions”. (G Pozzi et. al)

Meanwhile emotion-focussed strategies such as avoidance, self-blame, venting and rumination are associated with a higher level of anxiety, depression and distress. (M Kelly et al. 2016).

Therefore how can we utilise this intimate knowledge of coping strategies and their effectiveness to encourage students to develop ownership of their own positive coping strategies whilst at university?

What makes people more likely to positively self manage their mental health?

Through autoethnography analysis of chronic illness patients, it was suggested “if patients keep a record of their illness experiences from their own perspective, this will enhance their sense of ownership”. In addition, it is also argued that behavioural change is more likely to be maintained when “integrated with a person’s sense of self”. (W Karnilowic. 2011).

How might we apply these insights to a mental health context, in particular for students?



Secondary Research - Cont

Students

The effect of mental health issues on students can be serious and can lead to consequences such as: academic failure, dropping out of education, poorer career prospects and in the worst cases suicide (S. Hubble et. al. 2020)

A recent survey found that 21.5% of UK students have a current mental health diagnosis and 33.9% had experienced a serious psychological issue for which they felt they needed professional help. (S. Hubble et. al. 2020)

What is causing this problem?

Students are highly susceptible to two types of anxiety:

State Anxiety: transitory emotional state brought on by a particular situation such as exam pressure, presentations, deadlines, workload, sudden changes in living arrangements or impact on finances.

Trait Anxiety: Stable tendency to experience negative emotions such as fears and worries brought on by anxiety of the future, preparing for work life, social pressures and private relationships.

Both state and trait anxiety can mutually occur and cause a compound effect. They can also be heightened by resulting behaviour such as reduced exercise, little or poor sleep, and lack of communication with others, creating a detrimental cycle and the onset of a more serious conditions. (N. S. Ozen et al.)

Without knowledge of effective healthy coping strategies and their importance, students are more vulnerable to suffering from mental health problems at university such as anxiety and depression.

University support services

At Imperial, students are given mental health advice through online channels such as the university website and social accounts as well as wellbeing sessions at the beginning of the year. They are advised to make use of the full range of student support services, such as personal tutors, wellbeing reps, mental health first aiders, student councillors, disability advisory service and more. The Imperial College instagram account recently published that “1 in 4 students experience a mental health condition in any given year, however only 1.56% disclose this to the university.” At Imperial, this would equate to roughly 5000 students with mental health problems but only around 300 accessing the support services. This can be associated with the perceived stigma of sharing mental health issues with the university.

How might we encourage students to take greater ownership of the support services available to them, allowing them to become a greater part of the student experience and inducing new social norms at university?

Other techniques for managing mental health

Imperial advises that when managing your mental health, the most important first steps is to consider talking openly with friends and family, exercising, meditating, doing a hobby, accepting who you are, eat healthily and drinking sensibly.

However there are some emerging techniques that can also help reduce anxiety particularly for students during exam periods. These aim to reduce” emotional (fear and panic), cognitive(loss of concentration) and neurovegetative reactions (perspiration / heart rate acceleration). (A. Grassi et al. 2011)

Stress Inoculation Training (SIT) is a well tested framework for reducing performance anxiety. It consists of three phases: conceptualisation, skills acquisition & rehearsal and application & follow through. A research project proved that virtual reality simulation and audio based training was effective in helping students manage their exam anxiety, and statistically reduced student state anxiety overall. (A. Grassi et al. 2011)



Primary Research - Coping strategies

Drawing on our personal experiences, coupled with insights gained from our primary and secondary research, we collated a series of escape mechanisms to help cope with state anxiety, that are applicable to university students.

We sorted these into how they correlate to the psychological ownership framework, specifically looking at the different motives and routes.

The vast majority of the coping strategies that were discussed in interviews can be grouped into **searching for support, changing perspective and problem solving**, all considered healthy coping strategies. However we also identified examples of substance use, avoidance and non-finalised activities (procrastination) which have been highlighted. It is important that our intervention would be able to identify these and explain the risks to students, providing alternative and better options.

Reflecting on these, we have been able to develop criteria for a healthy coping activity for a student at Imperial>

1. No detrimental impact on any other part of the students health, physical or mental.
2. Does not consume sufficient time to make completion of university work unachievable.
3. Increases motivation and encourages changing perspective.
4. Reduce immediate stress or anxiety.

Motives

Self-Identity



Efficacy and Effectance



Place to Dwell



Routes

Control



Intimate Knowledge



Self-Investment



Journey map

USER Imperial College students

TARGET OF OWNERSHIP Increased self investment into mental wellbeing before and during peak workloads at university.

A typical student year at Imperial College

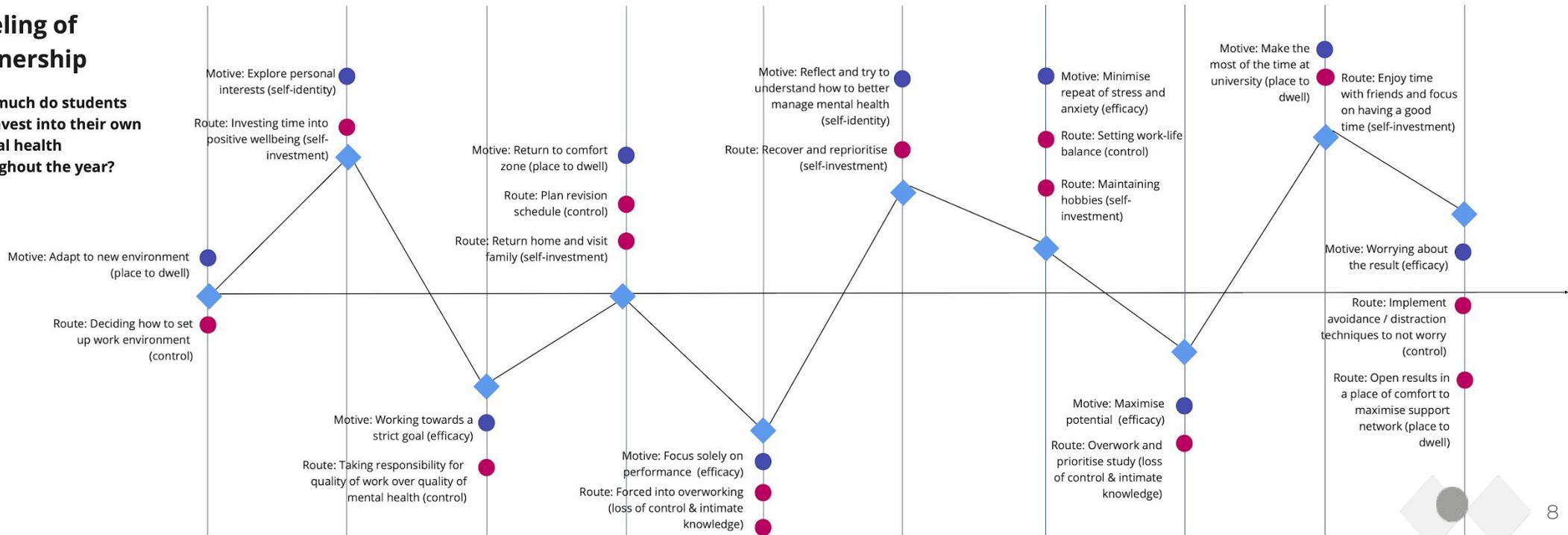
PHASES

Breakdown the key phases in the user's ownership journey.

	First Week	Autumn Term	December Deadlines	Christmas holidays	January Exams	Spring Term	Easter Holidays	Summer exams / deadlines	Post exams / coursework	Results - Aug
THINKING What might the person be thinking in this moment? How might this affect the feelings of ownership?	Am I going to enjoy the course? How clever is everyone else? What clubs should I join? Who am I going to be friends with? What will the workload be like and will I be able to cope with it?	Lets go and do something fun. What do I love doing and who can I meet that also loves doing that?	How am I going to achieve all of my deadlines without losing track of my lectures for January exams?	What do I need to do now in order to do the best I can in my January exams?	Come on, you can do this. Do I know everything that I need to know? What if I forget everything?	Thank goodness that's over, at least I can now try and enjoy university again.	I need to make this time really count.	This is it. This is going to define my academic year. Days are brighter so hopefully my mind will be too.	How did that go? Did I do everything that I could?	I really hope that I got what I want. What if I did really badly? Who am I going to tell?
DOING What might the person be doing in this moment? How might this affect the feelings of ownership?	Sorting out room. Socialising with people in halls. Going to first lectures. Freshers events.	Sports, music, art, games, other group activity	working in groups, staying up late, working in the night, eating worse	Planning revision, revising, spending time with family.	Last minute intense revision. Sitting exams.	Going to lectures. Doing society events. Going out with friends. More time for escape mechanisms.	Setting out revision schedule for summer exams. Going on holiday, looking back through material across the year, revising with friends	Sitting summer exams. Revising, staying up late, combining with escape mechanisms to manage mental health.	Recovering. Spending time with friends. Reflecting on how the exams went. Doing things you enjoy.	Waiting for results day. Opening results. Sharing news with family and friends
FEELING What might the person be feeling in this moment? Excited, stressed, disgusted, upset, fearful, tired, etc.	Excited, nervous, independent, missing home.	Happy, part of a community, welcome.	tired, overwhelmed, upset, under pressure	Increased anxiety due to anticipation, nervous, determined	Heightened anxiety. Uncomfortable being under pressure.	Happier, relieved.	Nervous but determined.	More experienced than in December. But still anxious that things might not go to plan.	Relieved. Excited for the summer.	Anxious, excited, nervous, optimistic. Very happy, content or disappointed and potentially very upset depending on the result.

Feeling of ownership

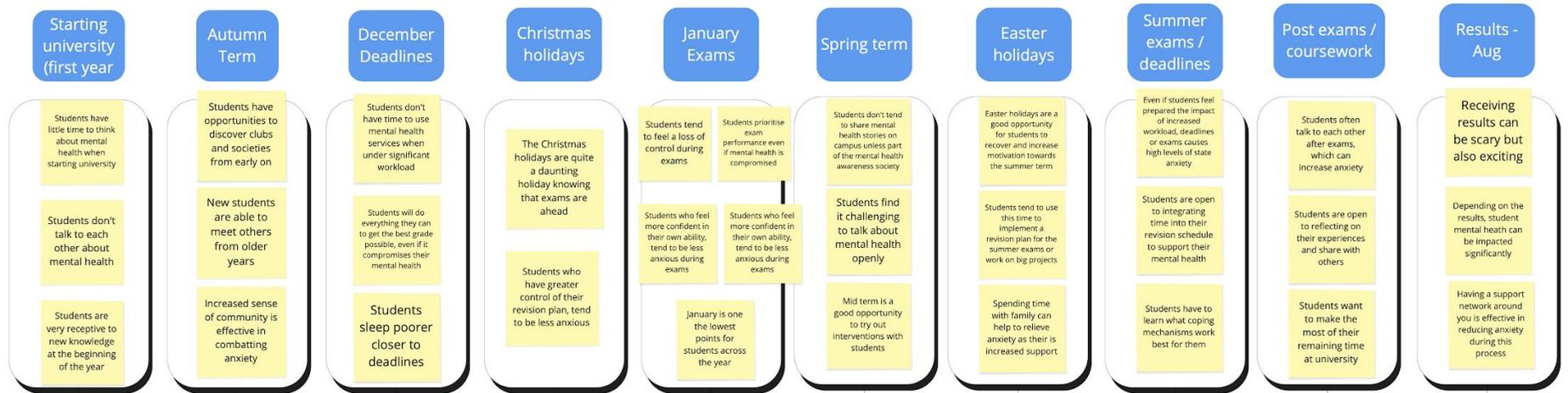
How much do students self invest into their own mental health throughout the year?



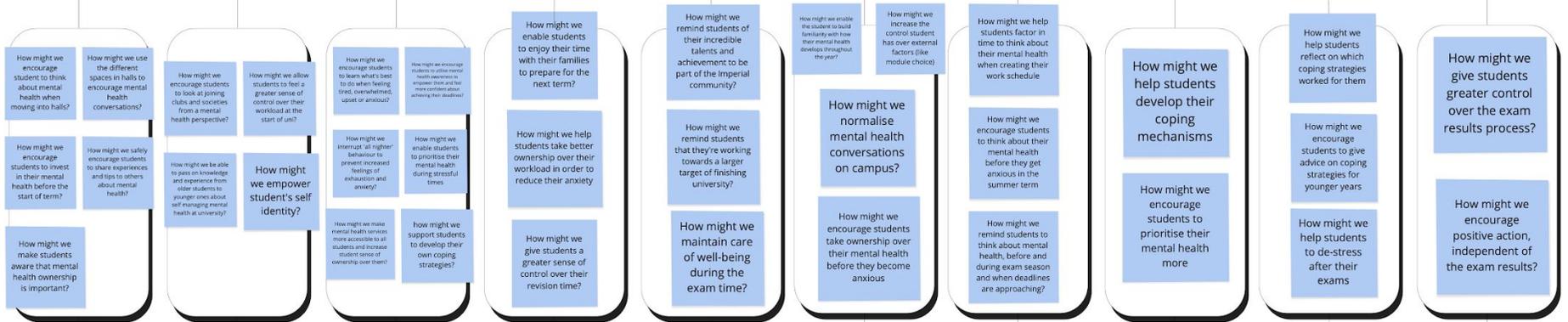
Journey map analysis

Using the journey mapping tool and inspired by our conversations with students, we were able to identify key insights into where students have increased and decreased ownership over their mental health throughout the year. From this, we were able to begin positioning 'how might we' objectives and therefore start to refine our **target of ownership**, that will influence the intervention outcome.

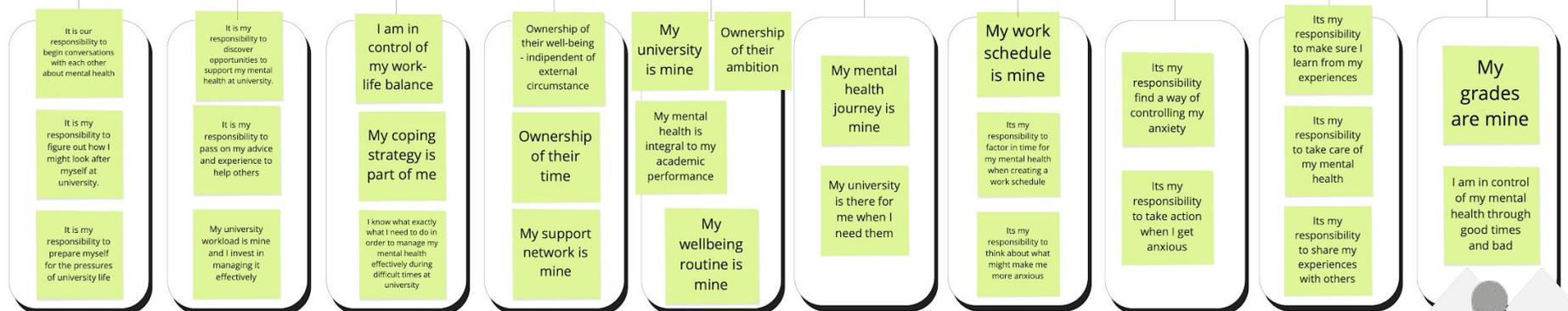
Insights



How might we?



Refining target ownership "It is my..."



Overall Insights

People have to learn themselves what is best for them in terms of mental wellbeing and how to best manage their own mental health.

'For me I had to learn that all nighters were just not worth it.'
'I have a bath to completely switch off from everything else going on in my life.'
'I go for a run, distract myself by watching a film or think about previous successes to regain confidence.'

Students consciously put their mental wellbeing 'on hold' during times of strenuous workloads. It is difficult to get into the normal routine afterwards.

'My mental health was definitely compromised, otherwise I wouldn't have got any work done.'
'It was not worth taking time for myself in the moment.'
'After my exams, I was destroyed. It was definitely difficult, I felt like I was pushing myself to my limit.'

Students do not consider their mental health enough to detect warning signs early enough to prevent issues from growing into mental health problems.

'I think we don't have enough of an appreciation to invest time and money in our own mental health, unless it gets so serious that you feel about harming yourself or others.'
'I contacted the uni counselor after I realised that I spent the last week unable to get out of my bed.'

Students are not aware of the consequences that stem from not taking care of mental wellbeing.

'I feel like mental health should be a lesson in school.'
'I kept postponing having a day for myself until assignments are over, anticipating I would feel better then, but I didn't.'

People are often keen to help other when they see them struggling but they do not know how, they are worried about accidentally making it worse.

'I think it is also important and it also benefits me to take some responsibility for other people's mental wellbeing.'
'I feel like everyone has a shared ownership for mental health but at the same time I think I am in control of it.'

Students are at the stage of life where they are going through the transition into taking ownership of their own care.

'I only started to realise that I need to actively take care of mental health at university.'
'My anxiety started over Christmas before exams, I felt like there wasn't enough time.'

The perceived barrier to getting help from NHS is high, the process is convoluted.

'I can't go to my GP just to say I feel more overwhelmed than normal.'
'To get immediate mental health from the national health services I have to express being suicidal.'

Opportunity

University work-related stress and pressure were identified as the main negatively contributing factor to student mental wellbeing. Abundance of work and lack of time are overwhelming, cause anxiety and force high-achieving students to disregard care for their mental health for prolonged periods of time.

Target of ownership:

Enable students to develop healthy coping strategies during stressful times to promote a healthy working experience at university.

- Focus on creating their own personalised coping mechanism for intrinsic motivation rather than extrinsic incentives
- Clears the mind and allows to come back to work feeling refreshed and keen to progress
- Emphasis on stopping, taking a moment to recollect thoughts and getting a sense of context
- Provide a sense of control over the immediate mental state, prevents feeling overwhelmed and unmotivated

Success Metrics

Qualitative

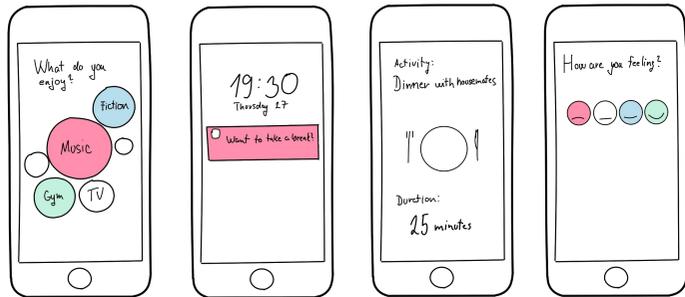
- Interview students about their wellbeing, pressure they feel under and if they feel comfortable taking time to enjoy themselves without feeling guilty.
- Conduct interviews to understand the effect of the intervention on the motives of ownership (Efficacy & Effectance, Self-Identity, Having a place to dwell)

Quantitative

- Measure time students take for themselves during exam and deadline times, compare to a control group
- Cost to the university to develop and maintain the intervention

Ideation & Evaluation

How might we enable students to develop healthy coping strategies during stressful times to promote a healthy working experience at university?



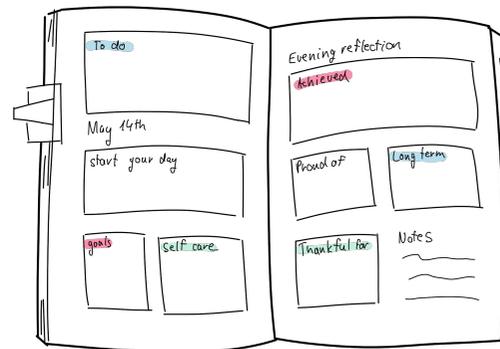
1: User inputs their interests, hobbies and how much time they have. The app gives recommendations for different coping strategies, the user rates how well these worked for them and this allows for further coping strategies to be recommended.



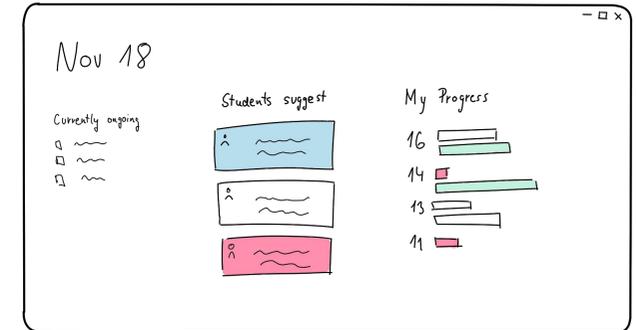
2: Uni work planner - app is linked to your timetable. It assesses busier times which may become more stressful and uses this to give tips, workload advice and coping strategies.



3: Wellbeing workshop - individuals attend a workshop where they can learn about different coping strategies, when they should try to use them and how to develop their own ways of coping with anxiety.



5: A journal that supports healthy practices, provides tips, enables students to pause and record self-reflection. The physical nature makes it easy to personalise and take ownership of.



4: Online platform where students can share how they cope with stress, rituals they do and how they developed these strategies. The user can track how much time they spent taking care of their wellbeing.

Idea Evaluation

Criteria crucial to success of the intervention were identified. The four members of the team then judged the five ideas based on these criteria.

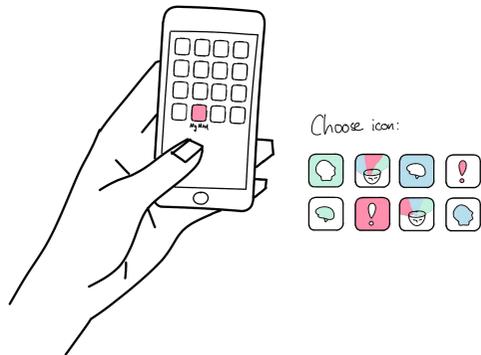
	Provides ability to personalise (route of control)	Possibilities for self investment	Enables students understand their behaviour better	Ease of adopting for students	Long term adherence	Potential to change behaviour	Financial cost to set up (5 the cheapest)	Cost to maintain (5 the cheapest)	Overall
Idea 1	4 4 4 4 16	3 3 3 3 12	1 2 3 1 7	5 4 4 5 18	2 3 3 3 11	4 4 4 4 16	3 3 3 3 12	2 3 2 2 9	101
Idea 2	3 2 2 3 10	2 3 2 2 9	2 2 2 1 7	4 5 4 5 18	4 2 3 5 14	3 2 3 2 10	2 4 3 3 12	3 4 4 3 14	94
Idea 3	2 2 2 3 9	2 2 3 2 9	4 5 5 5 19	3 3 3 4 13	2 2 2 2 8	2 4 2 2 10	3 4 2 4 13	2 2 3 1 8	89
Idea 4	4 3 4 3 14	3 4 3 3 13	4 3 4 4 15	5 4 3 4 16	4 3 3 3 13	3 4 3 3 13	2 3 3 3 11	3 3 2 2 10	105
Idea 5	4 5 4 4 17	4 3 3 2 12	2 1 1 1 5	4 4 3 3 14	3 1 2 3 9	2 4 3 2 11	2 1 1 3 7	4 5 4 5 18	93

Best in the category



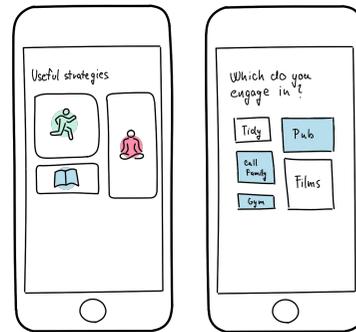
Development - My Mind

Tactile Experience



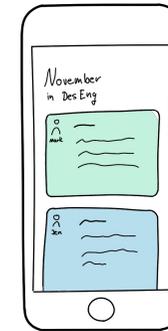
The initial idea was a website, this was reconsidered and an app will be developed instead. Tactile interaction on a touch screen enables higher levels of psychological ownership. The fact that it will live on the user's home screen, on a device that is always with them will add to the perception of an readily-available personal aid. An app was also determined to be easier to adopt (as seen in the evaluation section). To further emphasise the route of control - the user will be able to choose their icon for the app.

Interactive Onboarding



The app will first provide a quick onboarding to teach the user about healthy coping mechanisms. This will be done in an interactive way to actively engage the user in the process, as it increases retention of information.

Relevant Advice



Users will then be able to see other students' advice and suggestions about coping strategies. They will also be equipped to judge whether the strategies are suited for them. The advice could be made more impactful if it was from students from the same department as the user and posted at the same time of the year to maximise relevance.

Building Routine



The app could then allow the user to record and see what coping mechanisms work for them and how often they take time for themselves. This would utilise the route of building intimate knowledge about what works for them. Emphasis will be put on creating custom mechanisms through taking inspiration from other users. To encourage routine use, non-intrusive notifications could be sent few times a week.

Justification of Behavioural Design

The concept increases feeling of ownership over a coping strategy by utilising the three ownership routes defined by the Psychological Ownership Theory. The user firstly learns about benefits of healthy coping mechanisms and what healthy coping mechanisms are. They are then encouraged to create their own mechanisms based on this information. This gives the user **control** over what they want to do and is enhanced by the ability to transform the coping mechanism tab in the app to their liking. Ownership over the mechanism is promoted through **self-investment of time and effort** into coming up with a coping mechanism and also personalising it in the app. They are encouraged to state how they are feeling before and after the coping mechanism. Based on this the app calculates how effective the mechanism was. This provides the user with **intimate knowledge** about what works for them and to what degree. It prompts the realisation that their actions influence how they feel - they are in **control** of their immediate mental state.

User Validation

A rough initial prototype was shown to students to get their feedback before moving forward with the idea.

[The how are you feeling section] 'makes me think about what mood I'm actually in, which I often dismiss as stressed when I have lot of work.'
'Love the emojis. They make it feel mine'
'Seeing how my mood changes with the different activities would definitely remind me that I am the one in control, not the work that needs to be done.'
'I really like the reflections- it makes me actively think about how things make me feel'
'I like how i can personalise it to make it my own'

Final Concept

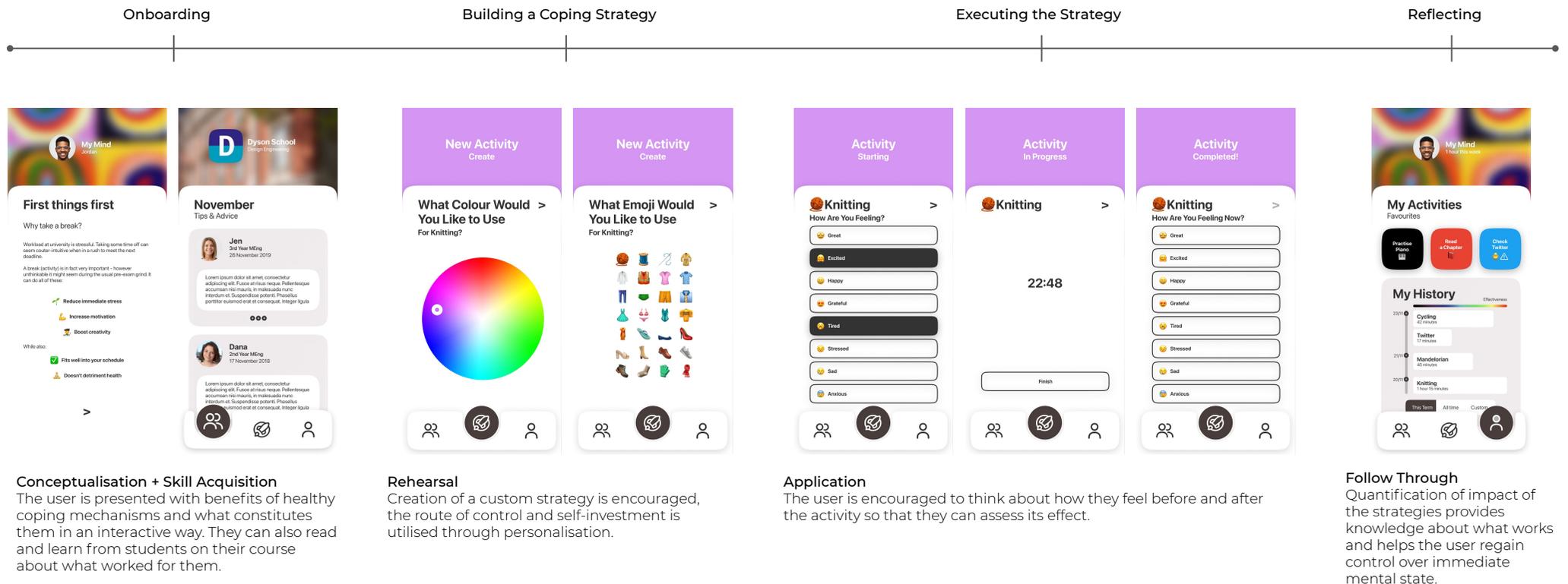
There are four main stages when using My Mind. The process is inspired by Stress Inoculation Therapy (SIT) that is intended to help people prepare themselves to handle stressful events with minimum of upset. It consists of three phases - Conceptualisation, Skill Acquisition and Rehearsal, Application and Follow Through. These stages are in practice it is used more generally, here they are focused specifically on creating and utilising coping strategies.

To minimise the negative connotations a 'coping strategy' has, it is referred to as an 'Activity' in the app.



[Test the app Concept here](#)

User Journey With The App



Validation

'I can definitely see this encouraging me to prioritise my mental health more during stressful times, but it might take time to remind myself to use it on a regular basis'

An interactive mockup was developed to test the app. 8 students were asked to try out the app and questions were asked at important points in the process about what they think and how it makes them feel. Some feedback suggested to avoid open-ended questions, as it was suggested that they would be left unanswered. The students enjoyed the process of creating new activities and liked the idea of a community sourced tips and tricks on how to handle stress. All students agreed that the app would try out new coping strategies and most stated that it would make it easier to pause and take a minute during a stressful time.

Refinement

The app does not currently assess the impact carrying out a strategy on the user's mood. To test and assess whether users feel increases control over their mental state this functionality should be implemented early in the testing process.

The onboarding process effectiveness should be tested further by getting unfamiliar testers to complete it and see how well they understand the information. Emphasis should be given to reducing the time required to complete it, while maximising knowledge retention.

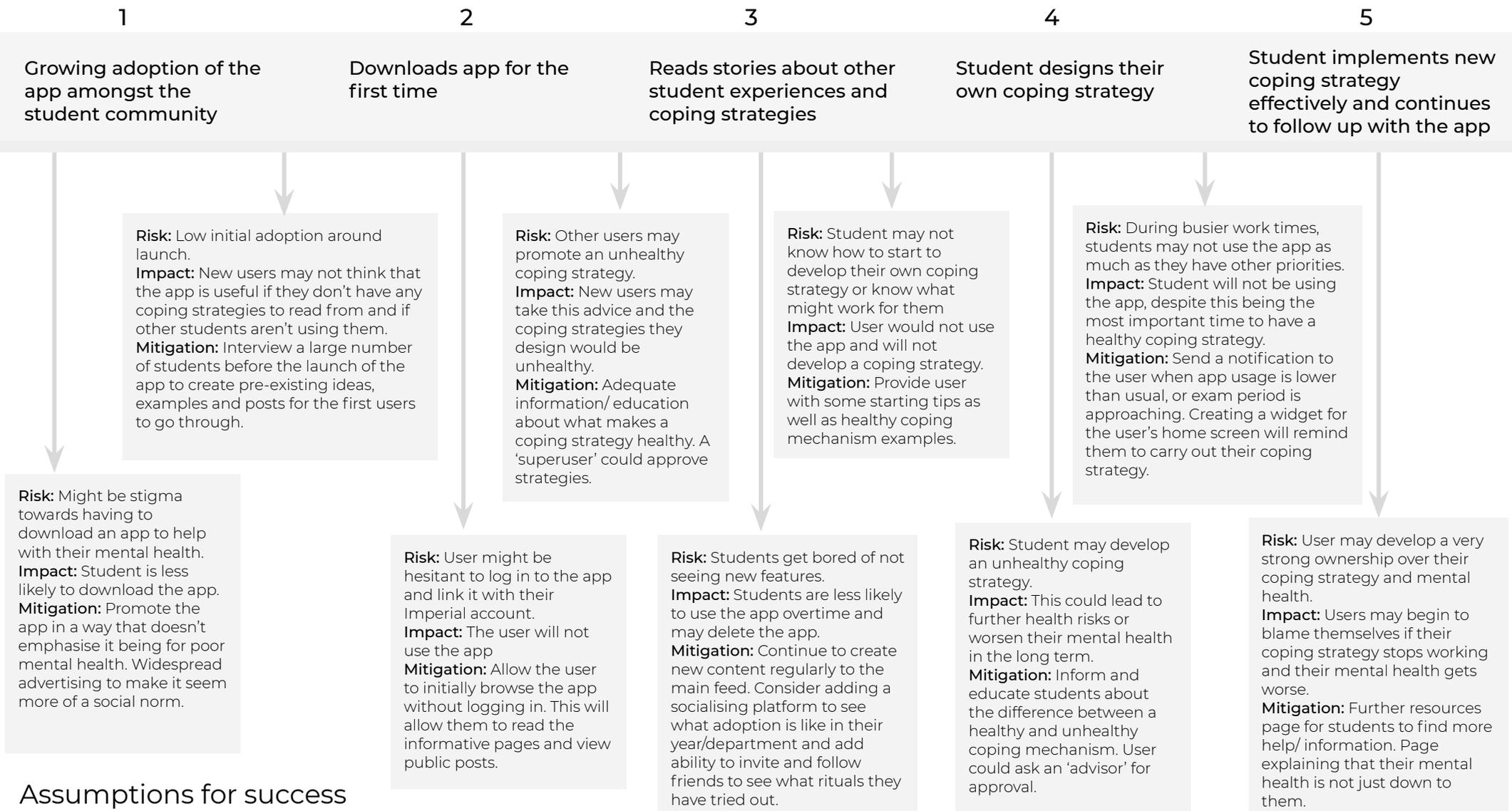
Future Development

- Development of the logic that assesses how effective a strategy is based on questions before and after the strategy.
- Running a larger trial against a control group to determine measurable ownership benefits
- Collecting tips and strategies from current students for the community section so that the app can be fully functional from day one.
- Onboarding refinement
- Interface refinement



Risk Analysis

Ideal User Journey - mitigating risks along the way



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