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Title	A qualitative, cross-sectional study of the mental wellbeing and coping strategies of Canadian adolescents during the COVID-19 pandemic
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Reviewer 1	Jean Hughes
Institution	Nursing, Dalhousie University, Halifax, NS
General comments (author response in bold)	This paper covers a critical issue and is well written. It provides a very clear overview of the rationale for the study, the methodology and findings. While only 2 questions of the survey were addressed, a holistic presentation of the findings justified the focus. **Response: Thank you for your time in reviewing this manuscript, we greatly appreciate this feedback.** 1. While only a few very negative experiences were identified (e.g., contemplating of suicide), I was surprised that family trauma also was not identified as I am very aware that it has increased. This suggests to me that a population who feel generally safe at home responded to the recruitment. Perhaps a reflection could be made regarding this point. **Thank you for your comment. A reflection of this has been made on this topic as a limitation of the study (page 11).** 2. The paper ended with a few suggestions for needed change in policy and practice. It would be helpful to include more discussion regarding specific changes that could be implemented right away to assist youth both now and as we move forward to the future. Given that this pandemic is not over yet ...& we need to expect others in the future...NOW is the time to learn from the experience and take positive action for the future. **Thank you for your comment. This has been addressed in the paper (page 11).**
Reviewer 2	Negin Riazi
Institution	
General comments (author response in bold)	I applaud the authors' work on this study. This study was clearly written, timely, and highlighted some very important points regarding adolescent experiences and mental wellbeing during the pandemic. Some suggestions for the manuscript are outlined below. **Thank you very much for this comment and the suggestions you provided.** Introduction Line 24: Perhaps adding an opening statement that acknowledges the worldwide/global impact on children/youth and introduces the rest of the paragraph. **Thank you for this suggestion. A sentence has been added to the beginning of the paragraph (page 3).** While the introduction covers relevant and recent literature on the effects of the pandemic, it may be strengthened by expanding more on coping strategies (e.g., perhaps work by Dr. Ellen Skinner) as this is one of the main sections of the results, as well as importance of social connections/social support and this is one of the main conclusions that's needed for supporting adolescents. **Thank you for this valuable suggestion. We have now incorporated the**

additional recommended literature around coping strategies (page 3) albeit briefly due to word limit constraints.

Methods
Line 50: It would be helpful to see some examples of social media utilized and youth-serving organizations (e.g., Instagram, Boys & Girls Club, etc.).
Thank you for comment, we have provided examples of social media utilized as well as the youth-serving organizations that we reached out to in attempt to promote the research study (page 4). Please see Appendix B for examples of social media posts and a larger list of organizations we reached out to in attempt to promote the research study.

Line 55: Considering that some participants were under the age of 18, did they not require parental consent for completing the survey? Please clarify.
Parental consent was not required to participate in this study. This decision was approved by Western University's Non-Medical Research Ethics Board. Further, it was believed that parent/guardian consent was not needed and indeed may have even been counterproductive for the following reasons. It was believed the requirement of parent permission would have drastically lowered response rates and seriously underestimated the prevalence rates around certain behaviours we are trying to capture in the survey. Given the subject, teens may not want to participate and/or may not want to give accurate responses to questions related to their well-being, behaviour and other health-related habits if parental/guardian permission was required.

Thank you for cataloguing number of responses in each stage (e.g., number of responses received, number after irrelevant data omitted)
Thank you for this comment.

Line 42: Twenty-two subthemes is rather a high number of subthemes. Can you please clarify what constituted a subtheme (e.g., were a certain number of responses needed?) and how this was undertaken in the analysis.
For this study, we followed Braun and Clarke's (2006) principles for thematic analysis, which do not call for any certain number of responses to be included as a subtheme. As mentioned by Braun and Clark (2006), there needs to be some flexibility when it comes to the number of themes. They note that; the 'keyness' of a sub-theme or theme is not necessarily dependent on quantifiable measures – but rather on whether it captures something important in relation to the overall research question. For this study, a sub-theme was created when we agreed it was important to the overall research question. This resulted in some of our subthemes being topics that came up frequently, while others were topics that we believed were important to the research question and needed to be included. We concluded that the 22 sub-themes we identified reflected the patterns and key ideas in our data, and we grouped these together into larger categorical themes (n = 5) that could meaningfully capture the relationships amongst them. We agree with authors such as Braun and Clarke, who emphasise flexibility when it comes to the number of themes.

Results

Perhaps shift lines 41-45 down to the results as the opening lines to the results section before jumping straight into themes.
Thank you for this helpful suggestion. This has been changed (page 4).

Line 14: the term 'uncovered' makes it seem like the answers were waiting to be discovered. It discounts the researcher's role in interpreting the data. Perhaps using another term like 'highlighted' or 'emphasized' would be more appropriate.
The word 'uncovered' has been removed and replaced with 'emphasized' (page 5).

For the subthemes of 'disconnection, loneliness, and isolation' and 'uneasy and distressed about the future' the number of participants is provided, I am wondering why this is not consistently done throughout this first theme? Perhaps in the opening paragraph of results section it can be noted that number of participants supporting each subtheme can be found in the boxes?
A sentence has been added to indicate that the number of participants supporting each sub-theme can be found in the boxes (page 5).

The boxes summarizing the themes and subthemes are great. Would it be possible to include age and gender, for example, for those quotes within the boxes to help humanize the participants? The age range from 13-19 years is quite large and it would be interesting to better understand who is saying/providing the quotes/responses.
We very much appreciate this point and discussed it at length amongst the research team. While we would generally include age and gender characteristics to humanize and contextualize participants, we feel it is more appropriate in this case to leave them out. Our primary reason is that we want to include some quotes from gender diverse participants, and the participant pool for this group (n=14) is very small. To fully protect anonymity, we feel it would be more appropriate to report the age/gender characteristics of the participants whose quotes we include in aggregate. We have added a sentence on page 6 at the end of the results section to describe the ages and genders represented in our highlighted quotes. We have also added unique ID numbers to each of the quote to show they are coming from various participants.

Line 57: this quote appears to be unrelated to TV/movie watching – does it belong under 'being outside'? The coping section was very interesting. I'm curious if any negative coping mechanisms were mentioned such as stress eating, substance use, increased screen time, etc.
That quote has been removed and replaced with the following appropriate quote: I have chosen to watch a lot of movies (page 10, Box 5).
We did not find that the participants mentioned negative coping mechanisms. There was no mention of stress eating or substance use to cope. We did have one participant mention "smoking weed", but otherwise we did not have any mention of substance use. Regarding increased screen time, although no direct quotes were mentioned about increased screen time, it could be argued that there were increases in screen time given that the participants mentioned video chatting, texting, gaming, and using social media more often as it was their only means of communication. However, the participants did not mention it as a negative component but rather as

something they were grateful to still be able to do.

Discussion
For the paragraph on recognition of positives lines 36-41, this appears to be summarizing the results more than providing discussion. Is there literature around self-reflection and self-care and associations with mental wellbeing (not just during the pandemic) that could be provided.
Thank you for your comment, we have added literature to support this point (page 11).

Limitations
The study used optional open-ended questions – does this perhaps present a limitation/bias? Would a certain portion of the population not fill it out if there was a language barrier? Or if participants were using negative coping strategies and did not want to disclose that information?
Thank you for your comment. We have noted that the open-ended survey questions had the following limitation: This study reports on the responses to two open-ended e-survey questions and thus was unable to capture the depth and nuance that more intensive qualitative methods, such as interviews or focus groups would provide (page 11).