
Online peer help: Its quality in an online service for adolescents

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✎ **ABSTRACT.** Internet è la principale fonte di informazioni sulla salute per adolescenti e giovani adulti ed è possibile trovare online diversi gruppi, forum o comunità di adolescenti e giovani adulti che offrono aiuto tra pari. Un aspetto problematico legato a questo tipo di aiuto è la sua valutazione, non solo in termini di esito, ma anche in termini di processo. Utilizzando una metodologia mista (quantitativa e qualitativa), questo studio cerca di migliorare la comprensione delle dinamiche dell'aiuto online tra adolescenti, valutando quali sono i principali problemi degli utenti e la qualità del sostegno offerto tra pari. 82 chat tra adolescenti in un servizio online di aiuto tra pari, chiamato Youngle, vengono analizzate in termini di qualità dell'aiuto offerto. Gli adolescenti cercano aiuto online soprattutto per i problemi relazionali e la qualità complessiva dell'aiuto tra pari è elevata. Tuttavia, alcuni aspetti relativi alla capacità conversazionale richiedono interventi di miglioramento. Ad esempio, i pari sembrano usare modelli di comunicazione più frequentemente negativi quando si parla di sessualità. I risultati suggeriscono l'utilità dell'aiuto online tra pari per argomenti generici che riguardano l'adolescenza, come quelli relazionali, ma anche la necessità di fornire un aiuto specializzato per questioni specifiche che sembrano essere estremamente complesse per gli adolescenti, come quelle legate alla sessualità.

✎ **SUMMARY.** Internet is the primary source of health-related information for adolescents and young adults and it is possible to find online several groups, forums or communities of teenagers and young adults that offer peer help. A problematic aspect related to this kind of help is its evaluation, not only in term of outcome but even in term of process. Using a mixed methodology (quantitative and qualitative) this study tries to improve our understanding of dynamics of online help among teenagers, by evaluating which are the principal users' problems and how is the quality of support offered by peers. 82 chats between adolescents in an online peer help service, called Youngle, are analyzed in term of quality of offered help. Adolescents seek online help most of all for relational problems and the overall quality of peer-help is high. However, some aspects related to conversational ability require improvement interventions. For example, peers seem to use more frequently negative communication patterns when talk about sexuality. Results suggest the utility of peer help for generic topics that concern adolescence, such as the relational ones, but even the need to provide specialized help for specific issues that appear to be extremely complex for adolescents, such as sexuality.

Keywords: Online peer help, Adolescents, Peer help quality, Conversational skills

INTRODUCTION

Online help and adolescents

The Internet is the primary source of health-related information for many people (Fergie, Hilton & Hunt, 2016), especially for adolescents and young adults. Internet sites offer young people valuable information about health, healthy behavior, risky behavior, sexual issues, drug abuse, stress, and mental illness, as well as the tools to address these issues (Wartella, Rideout, Montague, Beaudoin-Ryan & Lauricella, 2016). Many adolescents who experience emotional problems don't seek help from mental health professionals. Indeed, Gulliver, Griffiths and Christensen (2010) found that adolescents and young adults with mental disorders often face many barriers in attaining face-to-face support, including embarrassment, perceived stigma, underestimation of symptoms, and a preference for self-reliance. Sweeney, Donovan, March and Forbes 2016 similarly argue that access to several therapy tools increases in an online context. In fact, they claim that 70% of adolescents opt for online therapies when seeking out support for their problems (Sweeney et al., 2016). This helps to explain why so many support, therapy, and help services have been created online in recent years (Spence, Donovan, March, Kenardy & Hearn, 2017; Stasiak et al., 2016). Securing access to information, advice, support, and treatment increases the chance that a teenager will seek help (Myers & Vander Stoep, 2017). Moreover, several studies have attempted to assess the efficacy of specific treatments in online environments (Andersson et al., 2014; van der Zanden, Kramer, Gerrits & Cuijpers 2012).

Online peer help

A subgroup of services based on self-help, peer help, and professional help is also available online. In fact, it is possible to find several groups, forums, and online communities in which teenagers and young adults share information, establish goals, and offer support to their peers on a wide range of topics (e.g. somatic diseases or psychopathology).

Different studies have evaluated the efficacy of online peer support for young people. First, this form of peer help was evaluated for online group related to cancer care (e.g.

Dickerson, Boehmke, Ogle & Brown, 2006; Lieberman, 2005). Recently, Nicholas and colleagues (2009) have highlighted the benefits and challenges related to the use of online peer help for adolescents with chronic kidney disease. Authors suggest the relevance of this medium to share information, obtain emotional reinforcement and reduce social isolation but pointed out the desire of many participants to meet face-to-face the other users, with some relevant worries about the possibility to maintain the safety and the confidentiality of participation to these groups. Even Horgan, Byrne and Brand (2013) have analyzed the use of a web site to offer online peer support for depression in young people: web site provide the possibility to offer and receive emotional and informational support.

Online peer help seems to have several benefits, including a greater tendency to share goals, reach difficult targets (due to geographical or physical factors), lower prices, and obtain information about symptoms and treatment. For all these reasons, online peer help can improve the problem-solving and decision-making skills of its users (Greiner, Chatton & Khazaal, 2017). However, it is also necessary to emphasize some of its more problematic aspects. Kim, Weinstein and Selman (2015) have explored, for example, the communication strategies used by online helpers for romantic relationships difficulties in online forum. They underlined a massive use of direct judgement. In 2004, for instance, Eysenbach and colleagues highlighted how difficult it was to assess the effectiveness of online peer help, arguing that it was often part of wider treatments involving several different types of professionals. In addition, studies that have focused on the modalities and quality of online peer help often focus on groups of adults who are considered peer because they share the same medical condition and not because of age. These groups are often studied by examining evaluation methods, motivations, and the efficacy of various teaching methods (McGee, Windes & Torres, 2017; Mostert & Snowball, 2013). Unfortunately, little is known about the support offered to address both physical and mental health problems. Ali, Farrer, Gulliver and Griffiths (2015), in their recent review, have similarly shown that little is known about the quality and type of support offered online, even though the characteristics, benefits, and risks associated with this information have been largely studied. Authors highlight that for psychological problems only one study have directly investigated the efficacy of online peer help between young people and it didn't show promising results.

Aim of the study

Since online peer help is especially important to both adolescents and young adults - not to mention the fact that the modalities and quality of support are rarely addressed in the scholarly literature - it is important to investigate the various communications that are aimed at peers.

For these reasons, the first aim of our study is to describe the main topics proposed by adolescents on a specific online service of peer to peer help. Secondly we want to evaluate the quality of the help offered. The specific aims of our study include:

- describing the main topics addressed by peers;
- evaluating the quality of peer help provided online;
- examining the social support and communication abilities of peer counsellors;
- investigating the quality of online help and its relationship to the specific topics being discussed.

METHODS

Youngle: the selection of chats

In January 2013 a municipality of central Italy, with other important stakeholders - as a Region government - founded a Facebook page aimed to provide online peer help for adolescents and young people. In this online environment, people between 13 and 22 years of age can find help by interacting with trained peers, all of whom are between 14 and 19 years of age. For two days a week (between 9 pm and 11 pm) young people can chat anonymously with a trained peer, who is in turn supported by two psychologists. If a peer considers a user's problem to be critical in nature, he or she can suggest to the user chat with one of the project's psychologist or to see him or her in person. Peers are trained to suggest always a contact with a psychologist in the case of presence of suicide intentions.

We choose to enroll this service in our study because for two main reasons: (1) the high structured features of the service; (2) the fact that it is specifically constructed and intended for young people but does not provide for pre-defined discussion topics.

Informed consent was obtained by Youngle ("Youngle. Zona di Sopravvivenza", n.d.; "Youngle. Social Net Skills", n.d.) team; they contacted school's headmasters to present the

project. Then the school council needs to give a preliminary approval and both students and parents are informed by a letter presenting the Youngle service and the informed consent for the research. Only the students who accept to participate were included.

All chats between users and peers are recorded and saved in an electronic archive. Anonymity is maintained by substituting the user's name with a numerical code. The archive features 251 chats that were carried out between January 2013 and December 2015 by 81 different users (62 females, 12 males, and 7 users whose gender is unknown). The ages of these users ranged from 13 to 25 years old ($M = 17.23$; $SD = 2.31$). We selected 82 chats from the archive, featuring 24 different users (20 females and 4 males). The age of these users ranged from 13 to 22 years old ($M = 14.75$; $SD = 1.82$). The inclusion/exclusion criteria shown in Table 1 was used to select all 82 chats. Because of the focus of our paper is on the quality of peer help we choose to exclude chats conducted by psychologist.

These 82 conversations resulted in 4899 conversational "turns," as below.

Youngle: Let's try together to find a solution!

User A: I'd really like to...

INSTRUMENTS

Quality of help

To evaluate the quality of help in each chat, we adapted a coding scheme that was used in a content analysis of Share in Trust, a Danish project (Fukkink, 2011; Fukkink & Hermanns, 2009a; Fukkink & Hermanns, 2009b). The interventions in this instance were evaluated using the following qualitative criteria: the peer offers an adequate support (*Offer Support*, OSu); the peer suggests an effective solution (*Offer Solution*, OSo); the peer considers seriously the user's problem (*Take Young Person Seriously*, TYPS); the peer puts the user at ease (*Put Young Person at Ease*, PYPE), the peer uses a comprehensible language (*Comprehensible*, Com); the peer organizes the conversation in a structured manner (*Structured Progress*, SPPr); and the peers stimulate the user to think through his or her problem (*Stimulate Thinking*, ST). All seven dimensions were evaluated using a 5-point Likert scale, ranging from 1 (the criterion is absent) to 5 (the criterion

Table 1 – Inclusion/exclusion criteria for the chat selection process

Inclusion criteria	f
Chats between January 2013 and December 2015	251
Exclusion criteria	
Chats off-hour	21
Chats of users who contact Youngle just one time	34
Chats about information on Youngle or topics that are inappropriate for the service	68
Chats to offer feedback on received support	8
Chats between trained peers (i.e. internal communication)	13
Chats conducted by a psychologist	10
Chats interrupted by connection problems	13
Youngle welcomes a new user to the community	2
Total chats	82

is fully present), as shown in Table 2. The cut-off for every observed variable is 3: chats that obtained a score less than 3 are considered unsatisfactory.

Social support

The classification proposed by Cutrona and Suhr (1992) and adapted by Braithwaite, Waldron and Finn (1999) was used to assess the social support offered in online chats.

This approach is organized into five categories and several subtypes of social support, including: information support (Advice, Referrals to experts, Situation appraisal, and Teaching); tangible assistance (Perform direct task, Perform indirect task, Active participation, and Express willingness); esteem support (Compliment, Validation, Relief of blame, and Reassurance); network support (Access, Presence, and Companions); and emotional support (Relationship, Physical affection, Confidentiality, Sympathy, Understanding or empathy, Encouragement, Prayer, and Self disclosure). The assessment consisted of evaluating the presence (= 1) or absence (= 0) of each subtype.

Communication abilities: conversational skills and negative communication patterns

Inspired by Fukkink (2011), we created five categories in order to evaluate the conversational skills of Youngle's peers: Opening the conversation (e.g. "Hey how u doin"); Conclusion ("Bye"); Stimulating the other person to talk ("Can you tell me more about that?"); Asking for more information about the situation ("Did you tell her how you feel about that?"); and Talking about disruptions ("Hi, are you still there?").

Considering the common factors that negatively influence help (Corey, 2018) we considered the negative aspects of helper/helped communication. Particularly, we identified five negative communication patterns, inspired by Jones' Psychotherapy Process Q-Sort adapted by Sirigatti (2007) and referred to therapist's action and attitudes. Judges had to evaluate every item as characteristic (1) or not characteristic (2) of every conversational turn. We chose some items related to therapist' behavior to evaluate the presence of 1) negative judgement (the peer conveys a sense of acceptance

Table 2 – Criteria for Quality of Peer Help Evaluation

Dimension QC	Likert Scale				
	1	2	3	4	5
OSu	Peer doesn't understand the request/reverse the roles	Peer tries to understand the request but fails to do that	Peer understands the request but partially fails to offer support	Peer offers support in a directive way	Peer offers support in a cooperative way
OSo	Peer doesn't propose solutions	Peer proposes solutions, but they aren't workable for user	Peer offers solutions in a very confused way	Peer offers solutions in a directive way	Peer offers solutions in a cooperative way
TYPS	Peer doesn't let the user explain the problem: he/she discredits it or underestimates it openly	Peer let the user explain the problem, but he/she doesn't try to deepen it or is impatience with respect to the problem	Peer doesn't underestimate or discredit the problem but makes no attempt to understand it more	Peer shows understanding but tries to ironize the situation to lighten it	Peer understands the situation and follows the user in his narrative
PYPE	Peer gives negative judgments or criticism explicitly	Peer Gives Negative judgments or criticism indirectly	Peer doesn't criticize but he/she doesn't facilitate the user neither	Peer attempts to facilitate the user by reassuring him	Peer facilitates the user by validating and showing understanding
Com	Peer is incomprehensible or offensive to the user	Peer is comprehensible but too confusing	Peer appears neutral, technical and detached	Peer is comprehensible but user still needs to ask for clarification	Peer uses a language completely in line with the user and he/she is appropriate to the context
SPr	Peer wanders constantly producing a derailment of the conversation	Peer makes attempts to direct the conversation but loses or abandons it	Peer follows the user's stream without trying to influence it	Peer follows the user's flow and attempts to bring it back to the theme but undeliberated	Peer follows the user's flow but tries to bring it back to the theme to maintain consistency
ST	Peer doesn't stimulate reflection and is too directive	Peer doesn't stimulate reflection in an effective way	Peer leaves room for the user to exhibit his reflections but doesn't actively stimulate them	Peer stimulates reflections in a directive way	Peer stimulates reflections by providing alternative points of view

Legenda. OSu = Offer Support; OSo = Offer Solution; TYPS = Take Young Person Seriously; PYPE = Put Young Person at Ease; Com = Comprehensible; SPr = Structured Progress; ST = Stimulate Thinking.

without judgment vs peer's comments express criticism or communicate that user's personality is unpleasant or disturbed; e.g. "You are so wrong!" or "That's not the way to behave!"); 2) appeal to guilt ("Come on, tell me or I will be sad" or "Do it for me"); 3) infantilization (the peer behaves like a teacher, in a didactic way or he/she is condescending and treats the patient with superiority; e.g. "Oooh good boy!" or "Poor baby!"); 4) competition (the peer is competitive; "Ah, so you play the guitar! Do you know I'm a pro guitar player!?!"); and 5) tactlessness (the peer is cold, detached or tactless, his/her comments seem to be pronounced to be perceived by the user as disparaging or offensive).

DATA ANALYSIS

Each chat was coded separately by five impartial trained judges, graduated with a bachelor's degree in Psychological Science and Technique. To guarantee accuracy and ensure that the variables were assessed in an independent manner, three judges were asked to assess the quality of help, and two judges were asked to assess the Social Support, Conversational Skills, and Negative Communication Patterns. The judges were all graduates in science and psychological techniques, specializing in clinical psychology, enrolled on a voluntary basis and trained for evaluation; they had followed a short course (4 hours) on the procedures and the grids to be used. Considering the presence of three judges for the assessment of quality of help, we decided to calculate the Interclass Correlation Coefficient (ICC) of the "mean of k raters" type (Koo & Li, 2016). In the case of two judges, the evaluation concerned dichotomic variables, so the interrater reliability is assessed calculating the Cohen's Kappa (Banerjee, Capozzoli, McSweeney & Sinha, 2008). Kappa values less than .2 indicate poor agreement, values between .2 and .4 modest agreement, values between .41 and .60 moderate agreement, values between .61 and .80 good and values above .81 excellent agreement. Descriptive statistics were calculated for the collected data.

RESULTS

The chats focused on six main topics: 1) Relational Problems (RP), which involve difficulties building and maintaining good relationships with friends and colleagues;

2) Family Problems, which involve difficulties building and maintaining good relationships with family members (FP); 3) Self-Acceptance (SA), which involves confidence in one's body, self-esteem, and the ability to recognize one's abilities and strengths; 4) Health Problems (HP), which focus on chats about physical or mental disorders, suicidal ideation, and self-harm; 5) School Problems (SP), which involve problems in school performance or choosing an academic career; and 6) Sexuality (Sex), which encompasses chats about sexual orientation/identity, sexual performance, and fears of sexual transmitted diseases and/or unintended pregnancy.

Relational Problems are most common ($f = 32$), followed by Self-Acceptance ($f = 17$), Family Problems ($f = 13$), Health Problems ($f = 8$), School Problems ($f = 6$), and Sex ($f = 6$). The quality of help was assessed by applying inter-rater reliability tests to several categories (see Table 3).

In terms of the quality of peer help, we found that 54.88% of the chats were excellent, 39.02% were good, and only 6% were merely sufficient. Insofar as possible solutions were concerned, 93.90% of the chats were considered excellent-good. User consideration is either good or excellent in 96.30% of the chats and a similar number (96.34%) used comprehensible language. Conversational structure and support of autonomous thinking was good-excellent, as 89.02% and 87.80% of chats (respectively) met this standard. However, as Table 3 illustrates, some chats did receive unsatisfactory scores, especially the ability of peers to encourage reflection among users ($f = 8$).

For what concern offered support, frequencies of conversational turns identified as Social Support by the two judges are reported in Table 4.

Of the 4899 conversational turns, 676 are coded as a form of informational support by the two judges and so this form of support is the common form offered by peers. The second most common type of support is emotional support, showing up in 449 conversational turns. However, some types of social support are absent or rarely present. For example, the two judges are in agreement on the absence of perform indirect task and access as form of social support in conversational turns.

The assessment of the two judges about conversational skills and negative strategies are reported in Table 5.

Asking for more information was most common conversational skill used by peers ($f = 519$) followed by stimulating the other person to talk ($f = 124$). The ability to open the conversation in an adequate manner is identified in only 73 conversational turns.

Table 3 – Evaluation of quality of peer help

Quality of peer help	ICC	M	SD	Unsatisfactory chats (M<3)
OSu	.75	4.43	.67	4
OSo	.65	4.39	.65	2
TYPs	.75	4.80	.61	1
PYPE	.70	4.32	.78	4
Com	.86	4.83	.60	3
SPr	.80	4.29	.91	2
ST	.81	4.27	1.05	8
Average Score	–	4.47	.42	2

Legenda. ICC = Interclass Correlation Coefficient; OSu = Offer Support; OSo = Offer Solution; TYPs = Take Young Person Seriously; PYPE = Put Young Person at Ease; Com = Comprehensible; SPr = Structured Progress; ST = Stimulate Thinking.

The use of negative strategies is an interesting aspect of these exchanges because it concerns only three chats about sexuality. Peers used rarely these strategies: infantilization is identified in 6 conversational turns and judgement in 4. These strategies seemed to emerge when the peer either thought that the user's problem was unimportant or when he or she believed that they had just provided solutions to fix the problem:

Peer: Oh miss...tell me... do you want to hear something in particular? I'll tell you what I've already told you, guys with a girlfriend should be left alone.

Peers don't use negative strategies as appeal to guilt and competition.

DISCUSSION

The research presented here identifies the main issues addressed in a peer-oriented online help service (Youngle) and evaluates the quality of its services.

Among the problems proposed by adolescents, the relational ones are certainly the most present: the difficulties in building and maintaining functional relationships with other boys and girls or with adults seem to be the main motivation that encourages these young people to seek the support offered by this online service. It seems interesting to note that even family problems and self-acceptance are often discussed with the helpers and that only a small portion of users seek support regarding aspects related to physical health. It can be hypothesized that those who recognize themselves as people with a certain pathology are more inclined to enroll in specific support groups for the disease itself.

Regarding the focus of this research, the quality of peer help, the interventions of the helpers are, in most cases, positive and they demonstrate good management skills. Users presents heterogeneous types of problems, but many of these concern relationships, as suggested by Ali et al. (2015). In summary, relational problems are most common, especially ones relating to the user's ability to manage and modulate their personality in order to successfully maintain

Table 4 – Evaluation of social support

Supratypes	Subtypes	Cohen's k	Conversational turns identified by the two judges
<i>Information support</i>		.60	676
	Advice	.70	256
	Referrals to experts	.71	36
	Situation appraisal	.38	382
	Teaching	1.00	2
<i>Tangible assistance</i>		.47	56
	Perform direct task	1.00	1
	Perform indirect task	–	0
	Active participation	1.00	1
	Express willingness	.46	54
<i>Esteem support</i>		.44	215
	Compliments	.42	61
	Validation	.44	94
	Relief of blame	.60	16
	Reassurance	.44	44
<i>Network support</i>		.56	68
	Access	–	0
	Presence	.42	39
	Companions	.45	29
<i>Emotional support</i>		.52	449
	Relationship	.56	26
	Physical affection	1.00	1
	Confidentiality	.50	6
	Sympathy	.44	49
	Understanding	.57	37
	Encouragement	.53	185
	Prayer	.57	16
	Self-disclosure	.69	129

Table 5 – Conversational skills and negative strategies

Supratypes	Subtypes	Cohen's k	Conversational turns identified by the two judges
<i>Conversational Skills</i>			
	Opening the conversation	.55	73
	Stimulating the other person to talk	.45	124
	Asking for more information	.56	519
	Talking about disruptions	.71	49
	Conclusion	.41	91
<i>Negative Strategies</i>			
	Judgement	1.00	4
	Appeal to guilt	–	0
	Infantilization	.71	6
	Competition	–	0
	Tactless	1	2

their personal relationships. The second most common problem involves self-acceptance issues, as teenagers often search online for reassurance about personal characteristics that they are struggling to manage or accept. Interestingly enough, health and sex-related problems are the least common issues being addressed by Youngle. This is probably because several other websites are available to young people that offer information on sex-related pathologies, sexual identity, and other issues associated with sexuality.

Peers at Youngle were more likely to offer informational and emotional support to users. They not only suggested effective solutions for their users' problems, but they were able to do so in a sympathetic manner, one that focused on their peer-patients' emotional status.

Critical aspects concern the dysfunctional peer help intervention related to the use of negative communication

patterns. Negative communication strategies are used only when the topic addressed is that of sexuality. In this case the helpers use interventions that involve negative judgments and a strong infantilization with the result of a devaluation of the other. As suggested by Kim et al. (2015) in these cases, the helpers, failing to use an empathic modality with the other, openly judge in a negative way the behavior or attitude presented and use a paternalistic approach to the problem.

This indicates that, although the peers do not feel the need to postpone the issue to psychologists, their ability to provide support is not enough. A lack of training and the presence of personal prejudice seems to negatively affect these types of exchanges, which in turn increases the likelihood that the relationship between user and peer will be contaminated.

In summary, adolescents can manage the requests for help that come from their peers. However, some aspects of

this process require additional training. For starters, the conversational skills of peers need to be improved. Moreover, training peers on the importance of cooperation could help them overcome some of the moralistic attitudes that emerge when relationship and sexuality issues are being addressed.

The most relevant limits of this study concern the absence of information about the users: to maintain the anonymity Youngle doesn't collect personal information about their users so they can provide even false data.

Furthermore, exchanges occur only via chat: users and peers cannot have face-to-face interaction and they have to maintain the visual anonymity. The use of a write form of communication can substantially influence the strategies used by peers to handle the problem presented by users.

Further studies should increase the number of chats to allow a comparison of quality of online help between topics, using quantitative instruments to evaluate the perception of service quality in peers and users.

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