

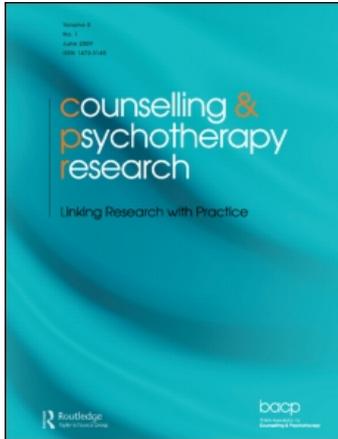
This article was downloaded by: [The University of Manchester]

On: 4 April 2011

Access details: Access Details: [subscription number 932319487]

Publisher Routledge

Informa Ltd Registered in England and Wales Registered Number: 1072954 Registered office: Mortimer House, 37-41 Mortimer Street, London W1T 3JH, UK



## Counselling and Psychotherapy Research

Publication details, including instructions for authors and subscription information:

<http://www.informaworld.com/smpp/title~content=t713734893>

### Understanding the online therapeutic alliance through the eyes of adolescent service users

Terry Hanley<sup>a</sup>

<sup>a</sup> University of Manchester, Manchester, UK

First published on: 01 April 2011

**To cite this Article** Hanley, Terry(2011) 'Understanding the online therapeutic alliance through the eyes of adolescent service users', *Counselling and Psychotherapy Research*, First published on: 01 April 2011 (iFirst)

**To link to this Article:** DOI: 10.1080/14733145.2011.560273

**URL:** <http://dx.doi.org/10.1080/14733145.2011.560273>

PLEASE SCROLL DOWN FOR ARTICLE

Full terms and conditions of use: <http://www.informaworld.com/terms-and-conditions-of-access.pdf>

This article may be used for research, teaching and private study purposes. Any substantial or systematic reproduction, re-distribution, re-selling, loan or sub-licensing, systematic supply or distribution in any form to anyone is expressly forbidden.

The publisher does not give any warranty express or implied or make any representation that the contents will be complete or accurate or up to date. The accuracy of any instructions, formulae and drug doses should be independently verified with primary sources. The publisher shall not be liable for any loss, actions, claims, proceedings, demand or costs or damages whatsoever or howsoever caused arising directly or indirectly in connection with or arising out of the use of this material.

# Understanding the online therapeutic alliance through the eyes of adolescent service users

TERRY HANLEY\*

University of Manchester, Manchester, UK

## Abstract

*Aims:* The therapeutic alliance is a concept that has received a great deal of attention within face-to-face counselling. Furthermore, links have been made between the creation of strong alliances and successful therapeutic outcomes. This study examines the therapeutic alliance when counselling services are offered online to young people. *Method:* Fifteen young people took part in online interviews (utilising synchronous and asynchronous methods), and Grounded Theory techniques were utilised to analyse the data. *Findings:* A core category of 'Client-Service Match' and three subcategories pertinent to the individuals' experiences of creating good quality relationships with the counsellors were identified: (1) initial engagement, (2) developing rapport, and (3) establishing control. *Discussion:* The themes elicited are all relevant to the matching process and viewed as a chronological process similar to face-to-face counselling. However, unlike face-to-face work, specific nuances related to the online work arise that counsellors should be mindful of, including the rationale behind each individual's choice to approach services online, their own computer-mediated communication skills, technical hurdles, and the perceived 'power' of the counsellor.

**Keywords:** online counselling; therapeutic alliance; online methods; Grounded Theory; user consultation

## Introduction

This paper begins with a composite story of a young woman who chooses to access online counselling in the UK. Although the story is fictional, it illustrates many of the issues that the young people involved in this study identified as important to them.

### Jane's story: Part 1

*Jane is a 17-year-old woman who lives in a small town in the UK. In recent months she has become increasingly anxious about her imminent exams at college. As her anxiety increased she noticed that she was cutting her arms more often than usual and was concerned about where this behaviour may lead. With this in mind, she looked around for available support. She was aware of the college counselling service but was reluctant to approach them because: (1) she didn't want her class mates seeing her accessing the service; and (2) she did not know how they would react if she told them that she had harmed herself. A poster was displayed on the wall in the library for an online counselling service called Kooth*

*(www.kooth.com). She discussed the site with her friends who said it's OK, and then looked at it on her computer when she arrived home. After reading the general information Jane decided to register on the site and find out more.*

#### Initial engagement

*When Jane registered with the website she was reassured by the limited amount of information she had to provide. She created an account, noting the following information:*

- User ID: 'jellykid3'
- Age: 17
- Sex: Female
- Ethnicity: White British
- Location: Cheshire, UK

*She selected a password for her account with the site. Although there was the potential to give more information, she chose not to provide any.*

*Once registered with the website, Jane had the option to request real time one-to-one support using a chat room,*

\*Email: terry.hanley@manchester.ac.uk

*asynchronous support using an internal messaging system (similar to email), and she could read forum posts from other users about a wide variety of personal issues. There were no counsellors available for a chat at the time she accessed the service, and so she sent a short internal message to a counsellor called John, noting that she thought counselling might be useful for her.*

*The next day Jane logged onto the website and found a response from John. This was relatively brief and mainly covered practical things, such as when he would be available to meet in the chat rooms. After a few internal messages in which Jane described the exam stress she was feeling, within a week it was agreed that they should arrange a time to meet in real time.*

I will revisit and continue Jane's story later on.

#### *Literature review: Placing Jane in context*

In placing Jane's story in context it is necessary to reflect on the changing health-seeking behaviour of young people in today's society. Commonly, young people are reluctant to request support about personal health (e.g. Ackard & Neumark-Sztainer, 2001), and the Internet may provide an alternative avenue for finding information. This seems particularly appropriate to consider given the prevalence of the Internet in young peoples' lives (e.g. Livingstone & Bober, 2005); however, studies examining adolescent health-seeking behaviours are less certain. For example, one study noted that 7% of people questioned would access support online (Balmer, Tam, & Pleassance, 2007), another gave a figure of 25% (Livingstone & Bober, 2005), and another 49% (Borzekowski & Rickert, 2001). There seems no definitive answer about the ways in which young people will access support; one constant is that the Internet will prove a point of access for some.

If young people are gravitating towards the Internet for therapeutic support, there is a need for counsellors working in these environments to develop appropriate skills (Hanley, 2006). A major question revolves around the ability of counsellors to establish relationships of a sufficient quality to create psychological change online. For the purposes of this project the pan-theoretical concept of the therapeutic alliance, as described by Bordin (1994, 1979), was utilised to reflect good quality therapeutic relationships. This theoretical position has received a great deal of attention in the research literature, and has been convincingly linked to positive therapeutic outcomes (e.g. Horvath & Bedi, 2002).

Although there is an increasing body of research literature supporting the development of online counselling (e.g. Barak et al., 2008), to date there has been little work conducted which explicitly examines the online therapeutic alliance. A recent review of the quantitative research with adult clients only found five studies (Hanley & Reynolds, 2009). This review noted work in this medium shows 'great promise', and that each study identified reported positive findings on par with face-to-face equivalents. Complementing these findings are a number of qualitative reports outlining the successful creation of significant relationships from the perspective of a counsellor (e.g. Day & Schneider, 2000; Fletcher & Vossler, 2009) and client (Ainsworth, 2002).

Only a handful of studies have investigated the online therapeutic alliance with young people. Such a gap in the literature is indicative of the 'neglect' of the alliance in youth counselling in general (Green, 2006), but also reflects the newness of such provision. To date, much of this focus has developed in the UK and Australia. Within the UK there are reports of strong alliances being formed in single case work (e.g. Roy & Gillett, 2008), and a quantitative element to the study reported here found that 76% of 46 young service users reported the quality of alliance to be medium or high in quality (Hanley, 2009). In Australia, the youth organisation Kids Help Line (KHL) has been at the forefront of such work. As indicated within UK-based services, findings from studies of KHL have shown the alliance to be of a good quality in single session counselling (King, Bambling, Reid, & Thomas, 2006). It is, however, noteworthy that within the same KHL study, alliances over the telephone were found to be of a slightly higher quality. Additionally, in a further study, there were indications that the therapeutic process may also differ in online work, with counsellors spending more time building rapport online than accomplishing tasks (Williams, Bambling, King, & Abbott, 2009). Such studies therefore suggest that fruitful alliances can be developed online, however they also indicate that the processes may differ from face-to-face or telephone work.

A final but important strand is the developments in the literature that focus on conducting research with young people. Increasingly it is acknowledged that the adolescent voice can play a substantive role in youth service provision (e.g. Kirby, 2004). It is particularly notable that qualitative work examining the therapeutic alliance in work with young people

has also emphasised the richness of information provided by this client group (Everall & Paulson, 2002). In considering such findings, young people can be viewed as active players in the development of youth services and informed commentators on the quality of the therapeutic alliance.

In contemplating the newness of the territory in question, and the potential difference between work online and other media, this paper reflects upon the nuances of the online therapeutic alliance. It utilises the views of young people who have used an online counselling service to attempt to shed light on this. This paper sets out to explore the key features of the therapeutic alliance young people report after experiencing online counselling.

## Method

This paper reports one element of a larger mixed methods study (Hanley, 2008). It reflects on a qualitative element of the work with a view to gaining detailed overviews of young service users' experiences of developing relationships with counsellors online.

### *Participants*

This project worked with Kooth.com, an online youth counselling service. This service provides 11–25-year-olds in certain regions of the United Kingdom online counselling and support that is free at the point of access. All individuals who accessed the service during an 18-month period (August 2006–January 2008) were provided with information about the project. This included when they completed evaluation questionnaires for the website, and having a regular visible presence on the website. Only those who were judged able to provide informed consent were recruited into the study (i.e. they had received prior information about the project and did not contact the researcher with the view that he or she would be offering counselling).

In total 15 individuals took part in the study. All participants were female with three potential male users ruled out due to the brevity of the dialogues. The mean age of the participants was 15 whilst the mode age was 17. This age range proved slightly older than the usual user of the service in question, which generally falls into the category of 11–15-year-olds.

### *Online interviews*

The participants were all invited to take part in semi-structured online interviews. These were conducted using the same online platform in which counselling is offered (using both real time chat facilities and internal messaging), and lasted between 15 minutes and one hour; all of the longer interviews included a break period. In a number of instances the interview process continued beyond one contact, with participants requesting further meetings or sending messages through the website. With this in mind, it is worth noting that the process of interviewing online has received a limited but thought provoking amount of attention within the literature (e.g. Bampton & Cowton, 2002; Kivits, 2005; Mann & Stewart, 2000).

### *Data analysis*

A grounded theory approach to data analysis was adopted (see McLeod [2001] for a discussion of this method). Such an approach works with a 'bottom up' view of the data and aims to 'build rather than test theory' (Strauss & Corbin, 1998, p. 13). More practically it provides a systematic framework for dismantling the data in a rigorous way, then bringing it back together into a useful format. The data were analysed using a line-by-line open coding process, linking to examples grounded in the transcripts (e.g. the quote '\*waves\* goodbye' was classified as the open code: 'Written non-verbal'). These simple open codes were then brought together using axial codes that acted as a hinge to make sense of the groups of smaller open codes (e.g. the open codes 'Written non-verbal', 'Abbreviated Language', 'Acronym' and others were linked together under the axial code 'Written Compensatory techniques'). Unlike most grounded theory projects, the analysis also included an additional layer reflecting major subcategories that emerged from the data. Finally, an overarching core category was identified, under which all the subsequent codes could be related. The subcategories and the core category are described within the findings section in more detail.

### *Ethical considerations*

The University of Manchester Research Ethics Committee granted approval for this study and it adhered to the British Association for Counselling and Psychotherapy's (BACP) ethical framework for

good practice (BACP, 2007). It was informed by the BACP's guidelines for researching counselling and psychotherapy (Bond, 2004) and the British Psychological Society's guidelines for conducting ethical research online (BPS, 2007). A major consideration in this project was the inclusion of individuals below the age of legal consent without parental agreement. Factors influencing the decision to work in this way included: (i) the online counselling organisation's own policy of not obtaining information from the young people except in exceptional circumstances; (ii) the view that young people are able to provide informed consent to take part in complex activities in certain circumstances (e.g. young people are often viewed as competent to access counselling and other healthcare interventions (see Daniels & Jenkins [2010] for a further discussion on this); and (iii) precedents in the research literature noting it to be appropriate not to obtain parental consent in instances where research topics may place the individual in a difficult situation if they were known to be taking part (e.g. Dent et al., 1997). In responding to these factors, extra caution was taken when recruiting individuals to ensure they were appropriately informed about the implications of participating. Additionally, clarification was sought that individuals did not want to withdraw their contributions following the interviews.

## Findings

Following the analysis of the data, the core-category 'Client-Service Match' was elicited from the data. This category refers to the processes that individuals encounter when accessing and utilising the Kooth service. Three elements are viewed as core to this process: initial engagement (related to gaining access); developing rapport (related to communication skills utilised); and establishing control (related to consensus between the counsellor and client). Within this model the overall quality of the alliance

is influenced by how much there is a match between client and counsellor in these areas. For example, service users may find the site unattractive, competence in computer-mediated communication may vary greatly between client and counsellor, or clients may have differing hopes from the service than offered. Where matching does not occur, or there are hurdles to overcome, potential ruptures in the alliance may happen and the therapeutic relationships may suffer as a consequence.

Table 1 outlines the core category, the three subcategories and the number of instances that each axial code within the subcategories occurred in the transcripts.

To consider how each of these areas impact upon the different stages of therapy, Figure 1 provides an overview of the process in question.

As is evident in Figure 1, the matching process consisted of two major phases, divided by the perforated line. In summarising the key aspects of the findings, Jane's story will be further referred to. This narrative attempts to reflect a majority of the concepts identified in a way that encapsulates the energy in the comments of the young people that have taken part in the work.

### *Initial engagement*

The first of these phases relates to the initial engagement that young people have with the service. Unsurprisingly, as a major rationale for the development of online counselling services is the potential to access different client groups, this subcategory underpins the subsequent themes reported here. This period includes issues to do with the physical environment in which individuals access the service ('environmental issues'), the specific wants and needs that the client may have prior to approaching the counselling service ('user profile'), and any challenges that individuals may have

Table I. Table summarising the categories identified.

Core Category: CLIENT-SERVICE MATCH = 10 Axial & 371 Open Codes*					
Subcategory 1: Initial engagement		Subcategory 2: Developing a rapport		Subcategory 3: Establishing control	
Environmental issues	21	Compensatory techniques	121	Issues of control	14
User profile	42	Negative technical occurrences	38	Intervention type	38
Accessibility issues	15			Duration & regularity of support	8
				Referring to other services	14
				Evaluation of Kooth	21

\*+ 39 Meta Narrative Codes (these reflected the research process and are not discussed in this paper)

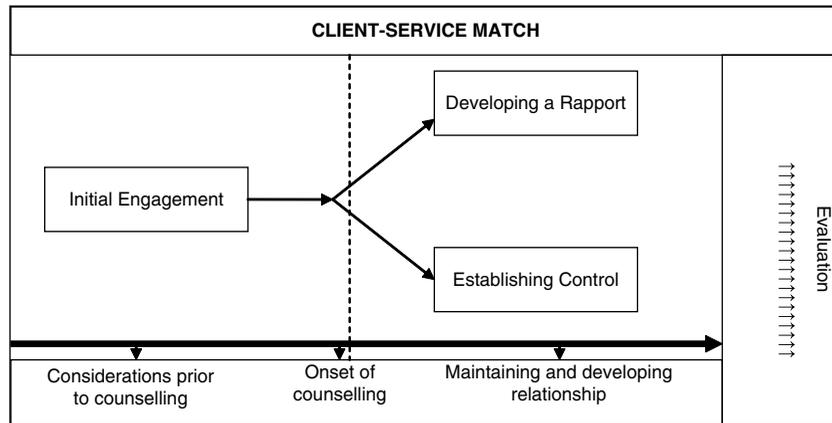


Figure 1. Representation of the client-service matching process in action.

encountered whilst contacting a counsellor ('accessibility issues'). Each of these is reflected upon within Part 1 of Jane's story presented at the beginning of the paper.

#### *Developing rapport*

As reflected in Figure 1, the initial engagement phase leads into, and directly impacts on, the following two stages; the first is 'developing a rapport'. This subcategory reflects the competency both individuals have at communicating effectively online. This particularly involves the ability to communicate online by being mindful of 'netiquette' (etiquette whilst using the Internet), and enriching conversations by utilising text-based skills such as emoticons ('compensatory techniques'). In addition to these computer-mediated communication skills are the technical problems encountered that hindered the creation of relationships. These included technical glitches in which conversations froze and hardware failures mid conversation on behalf of the young person ('negative technical occurrences').

#### **Jane's story: Part 2**

Jane met with John eight times over a 10-week period. These meetings lasted approximately 50 minutes, but some were shorter as Jane could not find a private space in which to use a computer. Two meetings were missed due to unpredicted events and Jane was unable to find a computer to inform John.

During the meetings Jane opened up very quickly about the issues that were causing her distress. She mentioned within the first session that she had cut herself when she was feeling really down. From this point

onwards most of the conversations explored the thoughts and feelings behind this behaviour.

As Jane was a competent computer user she utilised a variety of compensatory text-based techniques to help develop a rapport with John. These included using acronyms such as 'lol' (laughs out loud) and 'brb' (be right back), and abbreviated language such as 'u' (you) and 'ppl' (people). In addition to this a number of non-textual events were also observable. For example, at times her responses were slower than usual:

*John: u still there?*

*jellykid3: yeahnsorry*

*John: no probs just checkin*

*jellykid3: side tracked by the tele*

*Or the end of the session was rushed:*

*John: hi*

*jellykid3: rite wat were we talkin bout?*

*John: mmm – gud question...*

*jellykid3: g2g bibi*

*[jellykid3 has left the chat room.]*

In contrast to the techniques that were used to support the development of the relationship, a number of factors directly hindered the process. To begin with a number of technical hurdles got in the way. For instance, at times the conversations froze mid-way through the chat session and took some time to be resolved. Jane also wished to meet with John more often than once a week. In relation to both of these issues, Jane shared her annoyance with John and reported her discontent with very frank messages on the website feedback forms.

*Establishing control*

Running alongside competency at developing a rapport online was the issue of control. This was collated in the third subcategory, ‘establishing control’, and related to the varied nature of the tussles between the counsellor and client to control the nature of the interactions. These included very broad conversations about who controlled the sessions (‘issue of control’), and more specific areas such as the differing intervention types offered by counsellors (‘intervention type’), the regularity of meetings (‘duration and regularity of support’), and the want to refer to other services (‘referring to other services’). Each of these potentially caused friction between the service and the young person in question. Finally, each element of this process impacted upon how individuals evaluated the service they received (‘evaluation’).

***Jane’s story: Part 3***

*While meeting with John, Jane greatly valued the anonymous nature of the online communication system that Kooth provides. She felt that the lack of physical presence enabled her to open up more than she would have been able to face-to-face with a counsellor:*

*jellykid3: oh yea part my life would never been discussed if was not for online work*

*jellykid3: words you can’t always say face-face to people*

*John: that makes sense – do yo find you talk about different stuff online to face-to-face*

*jellykid3: i cried online before better noone can see you*

*jellykid3: noone needs to know your crying and don’t know unless you say*

*Jane also liked that she could control the tempo of the sessions. Rather than feeling led by John, she felt much more in control of the pace of their meetings:*

*jellykid3: i can control online chat*

*jellykid3: whereas face to face is harder to control*

*However, despite all of the benefits of online work Jane felt undermined and became irritated with John when he raised the issue of referral to a face-to-face service.*

*jellykid3: he messaged me saying he was worried about me and wanted me to have face to face counselling with one of the counsellors*

*jellykid3: which isn’t why i came to kooth*

*For Jane, John had misunderstood the informed decision she had made to approach a service online. Although numerous others may find a referral to another service useful, this was far from what Jane had wanted. Fortunately, the anonymous nature of the Internet also meant she was able to put in writing her unease with the suggestion. The meetings continue . . .*

**Discussion**

The findings of this study help to build on existing research focusing on the online therapeutic alliance. They support similar studies noting how alliances sufficient to facilitate psychological change appear possible online (e.g. Hanley & Reynolds, 2009; King et al., 2006); they shed light on potential answers to the research question that was initially posed – ‘What are the key features of the therapeutic alliance that young people report after experiencing online counselling?’; and help identify recommendations for service providers and potential research avenues to develop.

The ‘initial engagement’ phase, a major component in the matching process between client and service, is not a major facet within formulations of adult counselling. For instance, within Bordin’s (1979, 1994) original formulation of the alliance, the key components were ‘bond’, ‘tasks’ and ‘goals’. Each of these components is reflected within the themes derived within the project, however the importance of what led individuals to therapy in the first place, and the subsequent impact on alliance formation, is paid little attention. In contrast, within youth counselling such a phenomenon is noted. The work of French, Reardon, and Smith (2003) notes that the initial engagement period can prove pivotal in the ultimate engagement of hard-to-reach young people. Such a phenomenon also links to the notion of creating ‘youth friendly’ counselling services (e.g. Pope, 2002), the ethos of which is to develop services that prove more accessible to this client group than traditional clinical formats. Thus, online counselling services may enable specific groups of

young people to access support who ordinarily would not do so.

Once a counselling relationship had been established, the two following themes came into play – ‘developing rapport’ and ‘establishing control’. On reflection, these areas show similarities to the more relational and technical components within Bordin’s pan-theoretical model. In particular, the ‘developing a rapport’ subcategory encapsulates many of the issues related to developing a ‘bond’, whilst the ‘establishing control’ element displays the importance of consensus between the ‘goals’ and ‘tasks’ of therapy. Where these concepts differ from Bordin’s original conceptualisation generally relates to the type of service being examined.

First, the rapport created is greatly influenced by both party’s computer-mediated communication skills and any technical hurdles encountered. Second, issues of control may arise due to the anonymous nature of online communication; for instance, the power dynamic may shift greatly in comparison to face-to-face counselling relationships. Clients may therefore feel more confident to openly challenge decisions made by the counsellor (e.g. the therapeutic approach adopted or the need to refer on), or choose not to return to the website. Such implications highlight the need for counsellors to be competent in online counselling skills, as advocated in recent texts (e.g. Evans, 2009; Jones & Stokes, 2009) and noted in the BACP’s guidelines for online practice (Anthony & Goss, 2009), and to be mindful of specific issues related to working with young people in this medium as partly considered within this paper.

It is noteworthy that the accumulation of positive findings, such as those reported here, may eventually have broad implications for adolescent health services. For instance, as the Internet becomes more engrained into the lives of young people, health seeking behaviours are likely to change significantly too. Thus, although young people presently appear appropriately wary of accessing support online (e.g. Balmer, Tam, & Pleassance, 2007; Livingstone & Bober, 2005), as competence develops more individuals may look towards the Internet. Reassuringly, studies such as this one are beginning to indicate that such a move will not be insurmountable and that services can provide high quality healthcare interventions online.

### *Recommendations*

Based on the findings from this study, two major recommendations are made. These are:

1. Service developers/managers should consider the Internet as a potential medium for increasing access to adolescent counselling services.
2. Counsellors working in this area need appropriate training to work with adolescents online.

The first of these is a relatively modest recommendation reflecting the growing body of evidence suggesting that relationships of a sufficient quality to create psychological change can be created online. This is in no way recommending that online services replace face-to-face services, but highlights that they may prove relevant to certain groups of young people (e.g. those preferring anonymity, wanting to stay in control of the pace of therapy etc), thus complementing them. The second responds to the specific skills practitioners need, and the awareness that is necessary for working in this environment with this client group.

### *Limitations and future areas of research*

As with any qualitative piece of research, the findings of this work reflect a limited group of individuals. This is particularly noteworthy as all of the interviewees were female and slightly older than the average client using the Kooth service. Additionally, this paper reflects work with one online counselling service Kooth.com, which at the time of researching solely offered text-based interventions. These nuances indicate the need for more projects to focus on the complexities of online therapy in other settings and with different client groups. Additionally, researchers and counsellors need to remain mindful of technological developments. What is hoped here is that many of the generic factors that have been identified may have some resonance to the ongoing and future work of others.

### **Conclusion**

In considering the limitations of this work and thinking towards future developments, it is evident that the young people involved in this project proved to be an incredibly rich resource. Such a reflection echoes the views expressed by others (e.g. Kirby,

2004) and it is recommended that researchers and service developers do not ignore this resource where relevant in future work.

### Acknowledgements

I particularly wish to acknowledge the support of Kooth throughout this project and the young people who very kindly gave up their time to take part in the study. Additionally, I would like to thank colleagues at the University of Manchester (Liz Ballinger, Clare Lennie and William West), and Aaron Sefi for reading through drafts of this paper.

### References

- Ackard, D., & Neumark-Sztainer, D. (2001). Health care information sources for adolescents: Age and gender differences on use, concerns, and needs. *Journal of Adolescent Health, 29*, 170–176.
- Ainsworth, M. (2002). My life as an e-patient. In R. Hsiung (Ed.), *E-therapy: Case studies, guiding principles, and the clinical potential of the Internet* (pp. 194–215). New York: Norton & Co.
- Anthony, K., & Goss, S. (2009). *Guidelines for online counselling and psychotherapy*, 3rd edn. Rugby: BACP.
- BACP. (2007). *Ethical framework for good practice in counselling and psychotherapy*. Rugby: BACP.
- Balmer, N., Tam, T., & Pleasance, P. (2007). *Young people and civil justice: Findings from the 2004 English and Welsh Civil and Social Justice Survey*. UK: Youth Access.
- Bampton, R., & Cowton, J. (2002). The e-interview. *Forum Qualitative Social Research, 3*(2). Retrieved June 21, 2007, from: <http://www.qualitative-research.net/fqs-texte/2-02/2-02b-amptoncowton-e.htm>
- Barak, A., Hen, L., Boniel-Nissim, M., & Shapira, N. (2008). A comprehensive review and a meta-analysis of the effectiveness of internet-based psychotherapeutic interventions. *Journal of Technology in Human Services, 26* (2/3/4), 109–160.
- Bond, T. (2004). Ethical guidelines for researching counselling and psychotherapy. *Counselling and Psychotherapy Research, 4* (2), 10–19.
- Bordin, E. (1994). Theory and research on the therapeutic working alliance: New directions. In A. Horvath & L. Greenberg (Eds.), *The working alliance: Theory, research, and practice* (pp. 13–37). New York: Wiley.
- Bordin, E. (1979). The generalizability of the psychoanalytic concept of the working alliance. *Psychotherapy: Theory, Research and Practice, 16*, 252–260.
- Borzekowski, D., & Rickert, V. (2001). Adolescent cybersurfing for health information. *Archives of Pediatric Adolescent Medicine, 155*, 813–817.
- BPS. (2007). *Guidelines for ethical practice in psychological research online*. Leicester: BPS.
- Daniels, D., & Jenkins, P. (2010). *Therapy with children: Children's rights, confidentiality and the law*, 2nd edn. London: Sage.
- Day, S., & Schneider, P. (2000). The subjective experiences of therapists in face-to-face, video, and audio sessions. In J.W. Bloom & R.G. Walz (Eds.), *Cybercounseling and cyberlearning: Strategies and resources for the new millennium* (pp. 203–218). Alexandria, VA: American Counseling Association.
- Dent, C., Sussman, S., & Stacey, A. (1997). The impact of a written parental consent policy on estimates from a school based drug use survey. *Evaluation Review, 21*, 698–712.
- Evans, J. (2009). *Online counselling and guidance skills: A practical resource for trainees and practitioners*. London: Sage.
- Everall, R., & Paulson, B. (2002). The therapeutic alliance: Adolescent perspectives. *Counselling and Psychotherapy Research, 2* (2), 78–87.
- Fletcher, L., & Vossler, A. (2009). Trust in online therapeutic relationships: The therapist's experience. *Counselling Psychology Review, 24* (2), 24–33.
- French, R. Reardon, M. & Smith, P. (2003). Engaging with a mental health service: Perspectives of at-risk youth. *Child and Adolescent Social Work Journal, 20*(6), 529–548.
- Green, J. (2006). Annotation: The therapeutic alliance – a significant but neglected variable in child mental health treatment studies. *Journal of Child Psychology and Psychiatry, 47* (5), 425–435.
- Hanley, T. (2009). The working alliance in online therapy with young people: Preliminary findings. *British Journal of Guidance and Counselling, 37* (3), 257–269.
- Hanley, T. (2008). *Youth friendly online counselling*. Unpublished PhD Manuscript, University of Manchester.
- Hanley, T. (2006). Developing youth friendly online counselling services in the United Kingdom: A small scale investigation into the views of practitioners. *Counselling and Psychotherapy Research, 6* (3), 182–185.
- Hanley, T., & Reynolds, D. (2009). Counselling psychology and the internet: A review of the quantitative research into online outcomes and alliances within text based therapy. *Counselling Psychology Review, 24* (2), 4–13.
- Horvath, A., & Bedi, R. (2002). The alliance. In J. Norcross (Ed.), *Psychotherapy relationships that work: Therapist contributions responsiveness to patients*. New York: Oxford University Press.
- Jones, G., & Stokes, G. (2009). *Online counselling: A handbook for practitioners*. London: Palgrave.
- King, R., Bambling, M., Reid, W., & Thomas, I. (2006). Telephone and online counselling for young people: A naturalistic comparison of session outcome, session impact and therapeutic alliance. *Counselling and Psychotherapy Research, 6* (3), 175–181.
- Kirby, P. (2004). *A guide to actively involving young people in research: For researchers, research commissioners and managers*. Hampshire: Involve.
- Kivits, J. (2005). Online interviewing and the research relationship. In C. Hine (Ed.), *Virtual methods: Issues in social research on the internet* (pp. 35–50). Oxford: Berg.
- Livingstone, S., & Bober, M. (2005). *UK children go online: Final report of key project findings*. Retrieved January 9, 2008, from: <http://www.children-go-online.net>
- McLeod, J. (2001). *Qualitative research in counselling and psychotherapy*. London: Sage.
- Mann, C., & Stewart, F. (2000). *Internet communication and qualitative research: A handbook for researching online*. London: Sage.
- Pope, P. (2002). Youth-friendly counselling. *Counselling and Psychotherapy Journal, February*, 18–19.

- Roy, H., & Gillett, T. (2008). E-mail: A new technique for forming a therapeutic alliance with high-risk young people failing to engage with mental health services? A case study. *Clinical Child Psychology and Psychiatry*, 13 (1), 95–103.
- Strauss, A., & Corbin, J. (1998). *Basics in qualitative research: Techniques and procedures for developing Grounded Theory*, 2nd edn. London: Sage.
- Williams, R., Bambling, M., King, R., & Abbott, Q. (2009). In-session processes in online counselling with young people: An exploratory approach. *Counselling and Psychotherapy Research*, 9 (2), 93–100.

## **Biography**

**Terry Hanley** is joint programme director of the Doctorate in Counselling Psychology at the University of Manchester. He is also the research lead for the British Psychological Society's Division of Counselling Psychology and Editor of *Counselling Psychology Review*.