



My Circle: Development and Evaluation of an
Online Social Networking Platform for Clinically
Guided Peer-to-Peer Support for Young People
with Mental Health Concerns

Brad Ridout, Krestina Amon, Rowena Forsyth and
Andrew Campbell

EasyChair preprints are intended for rapid
dissemination of research results and are
integrated with the rest of EasyChair.

September 6, 2024

My Circle: Development and evaluation of an online social networking platform for clinically guided peer-to-peer support for young people with mental health concerns

Brad RIDOUT^a, Krestina L. AMON^a, Rowena FORSYTH^a and
Andrew J. CAMPBELL^{a,1}

^a*The University of Sydney, Cyberpsychology Research Group, Biomedical Informatics and Digital Health Theme, School of Medical Sciences, Faculty of Medicine and Health, New South Wales, Australia.*

ORCID ID: A/Professor Brad Ridout <https://orcid.org/0000-0001-8067-0490>,
Dr Krestina L. Amon <https://orcid.org/0000-0003-3890-4171>, Dr Rowena Forsyth
<https://orcid.org/0000-0001-5597-7263>, A/Professor Andrew J. Campbell
<https://orcid.org/0000-0002-2217-2589>

Abstract. Supporting the mental wellbeing of young people is critical, as half of all lifetime mental illnesses develop before age 14 and 75% before age 25. Despite this, many young people lack access to care due to safety and accessibility barriers, increasing the risk of chronic mental health disorders. As internet-connected mobile devices have become ubiquitous, young people increasingly seek mental health support online, particularly through social media. However, this can expose them to inaccurate information and hostile comments. To address this, yourtown and The University of Sydney developed My Circle, a safe, anonymous, and clinically guided peer-to-peer support platform for young people. My Circle is moderated by clinical professionals to ensure safe, respectful conversations based on accurate information. It aims to validate experiences, reduce stigma, and educate users. It is integrated with yourtown's Kids Helpline for 24/7 support. The My Circle platform was evaluated over a 36-week mixed-method study involving 2,791 young people aged 13-25, 63% of whom identified as women/girls. The evaluation showed that My Circle users experienced improved mental wellbeing and reduced psychological distress, reduced stigma, and increased coping skills and willingness to seek help. Those who entered the service with the most severe psychological distress reported smaller changes in distress levels over time but were more engaged with the service. My Circle demonstrates the efficacy of custom-built online social networking platforms in supporting young people's mental health, offering a scalable model of care for other vulnerable groups.

Keywords. Social Media, Online Counselling, Mental Health, Youth

1. Introduction

From 2017 to 2023, five evaluation phases gathered extensive data and insights into the value and role of Kids Helpline's My Circle as an online social networking platform for youth mental health support. My Circle provides young Australians aged 13-25 with a

¹Corresponding author: A/Professor Andrew J. Campbell, Cyberpsychology Research Group, Biomedical Informatics and Digital Health Theme, Room 115 RC Mills Building, School of Medical Sciences, Faculty of Medicine and Health, The University of Sydney, Camperdown NSW 2006 Australia. Email: andrew.campbell@sydney.edu.au

safe space to anonymously connect with peers, access accurate wellbeing information, and link to mental health services [2]. In Phase 1, Kids Helpline Circles (later renamed My Circle) on the open-source Elgg platform attracted youth seeking peer connection and participation in 8-week online psychoeducation modules, but faced high disengagement, partly due to platform usability issues [2]. Phase 2 transitioned to the HumHub platform, showing strong user satisfaction, symptom reduction, and improved coping skills [3]. Phase 3's qualitative analysis highlighted positive peer support but noted technical and engagement challenges, as well as a desire from users for ongoing open discussion forums [4]. Following the participatory action research findings of Phases 1-3, the service operating model for the platform was reconceptualized and rebranded as My Circle, featuring separate sub-forums called 'Circles', where users congregate to discuss specific topics related to mental well-being (selected based on user feedback). Phase 4 trialed this reconceptualized operating model following other implemented changes including a streamlined entry process, briefer feedback surveys, and platform functionality updates [4]. User feedback was very positive, with higher engagement and significant reductions in psychological distress reported. The current study, Phase 5, involved a 36-week naturalistic evaluation of the newly established operating model for My Circle, which was relaunched following further technological and service enhancements based on user and moderator feedback from the Phase 4 trial. The Phase 5 evaluation measured user experience, satisfaction, and engagement, and changes in psychological distress over time.

2. Method

Between February 2022 to October 2022, all My Circle users (self-selected Australian youth aged 13 – 25) were asked to complete a pop-up survey upon signing in to the My Circle social network. This survey included a mandatory Kessler Psychological Distress Scale (K10) questionnaire [5] that provided baseline data. Demographic data was obtained from information already collected when users created their My Circle profile upon signing up to the platform. Non-mandatory follow-up surveys (also pop-ups within My Circle) that included the K10, and user experience and satisfaction questions, were presented to users when they logged in to My Circle at a monthly cadence.

3. Results

3.1 Demographic

There were 2,900 respondents to the My Circle baseline survey. Removal of unusable data (e.g., incomplete surveys, and surveys returned that were 'straight-lining' answers), resulted in a baseline sample of N=2,791 for analysis. The mean age at baseline was 15.36 years ($SD=2.26$), with the sample skewed towards younger participants (64.1% were under 16 years, and only 3.0% were over 21 years). Most of the sample identified as women/girls (62.7%), with only 12.4% as men/boys. Gender-diverse, non-binary and custom gender responses (combined for analysis and referred to collectively from here as 'gender-diverse' [6]) made up 16.7% of the sample, with 8.2% either not declaring or missing input for gender identification. Most participants (72.2%) resided in major cities, 21.2% in regional areas and 1.4% in remote areas, with 5.2% not declaring their postcode. Gender-diverse individuals were more highly represented outside of major

¹Corresponding author: A/Professor Andrew J. Campbell, Cyberpsychology Research Group, Biomedical Informatics and Digital Health Theme, Room 115 RC Mills Building, School of Medical Sciences, Faculty of Medicine and Health, The University of Sydney, Camperdown NSW 2006 Australia. Email: andrew.campbell@sydney.edu.au

cities, in particular remote locations (26.5%), and were significantly younger on average ($M=14.8$ years, $SD=1.78$) compared to cis-gender participants ($M=15.48$ years, $SD=2.33$; $t(2551)=6.66, p<.001$), suggesting that My Circle may be particularly appealing to young gender-diverse individuals.

3.2 Psychological Distress at Baseline

At the relaunch of My Circle in February 2022, 70% of users reported severe psychological distress, indicating a high likelihood of severe mental disorders. The average distress levels among My Circle users at baseline were notably higher than those reported in face-to-face studies of young people seeking mental health support [7]. Gender-diverse users reported significantly higher distress ($M=36.57, SD=7.09$) compared to women/girls ($M=33.23, SD=8.04$; $p<.001$), who in turn reported higher distress levels than men/boys ($M=31.21, SD=8.51$; $p<.001$).

3.3 Psychological Distress Over Time

Figure 1 shows a breakdown of K10 scores according to how many follow-up surveys participants completed. Though not significant, there was a general trend in which the more follow-up surveys participants completed, the higher their K10 scores were at baseline on average. Users who initially reported higher levels of distress tended to remain engaged with My Circle and its follow-up surveys for a longer duration. Over time, there was a significant linear increase in K10 scores among users who demonstrated maintained engagement with My Circle for at least six months by completing 5 or more follow-up surveys ($F(1,89)=4.38$; $p<.05$; $\eta^2=.047$). This increasing and ongoing distress may have contributed to their sustained engagement with the platform.

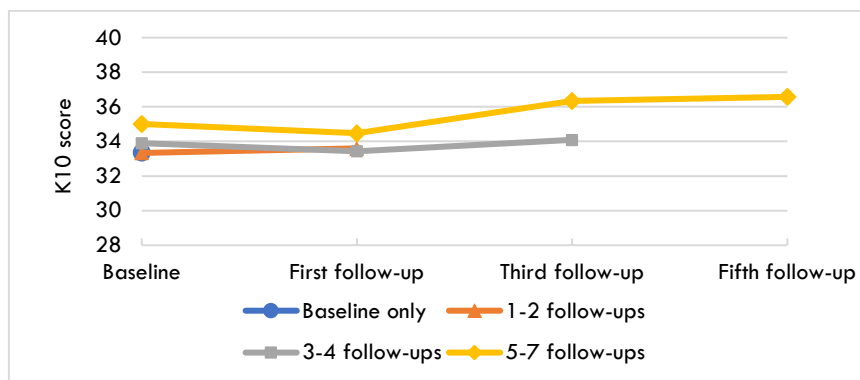


Figure 1. Mean psychological distress scores (K10) at different time points by number of follow-ups completed.

3.4 User Experience and Satisfaction

The introduction of technological and service improvements in Phase 5 led to significant increases in user experience and satisfaction scores. Despite no significant overall changes in psychological distress scores on the K10, more than half of My Circle users felt their overall mental health had improved due to the platform (56.0%). Users who remained engaged for at least three months were more likely to report mental health improvements at their first follow-up (67.3%) compared to their third follow-up (51.1%; $t(203)=3.27, p<.01$). This finding reflects the increased distress reported by this sub-

¹Corresponding author: A/Professor Andrew J. Campbell, Cyberpsychology Research Group, Biomedical Informatics and Digital Health Theme, Room 115 RC Mills Building, School of Medical Sciences, Faculty of Medicine and Health, The University of Sydney, Camperdown NSW 2006 Australia. Email: andrew.campbell@sydney.edu.au

sample over time but may also indicate changing perceptions as users became longer-term participants. Longer engagement was also associated with increased feelings of safety, acquisition of new coping skills, reduced stigma around seeking help for mental health issues, and greater awareness of mental health services (full results published in Ridout et al. [4]).

3.5 User Engagement

During the 36-week evaluation period, there were 16,849 user posts (average of 468 posts per week). There were 1,470 unique posters, representing half of all registered users. Additionally, there were 25,204 comments (700 per week) and 24,379 likes (677 per week). The average session length was 15:28 minutes, during which users viewed an average of 6.75 pages. The most active Circles in terms of posts and comments were 'Mental health', 'Suicidal thoughts and self-harm', and 'The Vibezzz'. Posts in the 'LGBTIQAP+' Circle received the most engagement, with around two comments per post and 0.75 likes per comment/post. Engagement dropped during school holidays and increased with the resumption of the school term.

In addition to the 'discussion board' format Circles, self-help courses similar to the psychoeducation modules in Phases 1 and 2 were also available. These courses received lower engagement in terms of comments and likes in comparison to the Circles but saw high engagement with poll question activities. The most engaged self-help courses were 'Managing Anxiety', 'Dealing with depression', and 'Family relationships and conflict'.

There were 906 private message conversations between clients and moderators, averaging 25 per week. Half of these private messages were 'follow-up of risk' messages initiated by moderators to check on users who were identified as potentially at risk based on their posts or comments. The second most common reason for sending private messages was to address rule breaches, accounting for 21% of these conversations.

4. Discussion

My Circle aims to improve the social and psychological wellbeing of young Australians by offering clinically supervised anonymous peer-to-peer support, access to accurate wellbeing information, and referrals for individuals in distress. Phase 5 showcases the success of these goals through participatory action research, involving collaboration with young people, stakeholders, and experts to ensure safety, accessibility, and inclusivity.

4.1 Safety

My Circle provides a safe online space where young people can share experiences without judgment. Users found it safer and more positive than other social media platforms. Clinical moderators screened new accounts, assisted distressed members, and ensured strict anonymity. Despite some requests from users for private messaging with other users, all user-to-user communication remains restricted to open conversations within 'Circles' for better monitoring. Further safety improvements implemented following launch included a 'post quarantine' feature to flag posts containing high-risk keywords for moderator review before they are published and tracking of potentially at-risk users and duplicate accounts from banned members.

¹Corresponding author: A/Professor Andrew J. Campbell, Cyberpsychology Research Group, Biomedical Informatics and Digital Health Theme, Room 115 RC Mills Building, School of Medical Sciences, Faculty of Medicine and Health, The University of Sydney, Camperdown NSW 2006 Australia. Email: andrew.campbell@sydney.edu.au

4.2 Accessibility

My Circle addresses major barriers to mental health support, such as confidentiality, stigma, cost, and accessibility. It is a free service, available 24/7, and offers a clinician-supervised alternative to public social networking sites. Evaluation results show that My Circle improved mental health, reduced self-stigma, and increased awareness and help-seeking behavior among young people [4]. It engaged those who might otherwise not seek help, providing early intervention and pathways to additional services.

4.3 Inclusivity

The development and evaluation of My Circle adopted a person-centered approach, involving young people in decision-making. It supported those with impairments through features like voice-to-text and screen reader compatibility. It appealed to gender-diverse individuals and those in remote areas, with the 'LGBTIQAP+' Circle among the most popular with users. The platform continually adapted to meet the diverse needs of its users, including those with unique conditions like dissociative identity disorder.

5. Conclusion

My Circle, a community of over 10,000 young Australians, was developed through evidence-based refinement with active input from young people, counsellors, and stakeholders. Led by the University of Sydney's Cyberpsychology Research Group, this participatory approach enabled continuous improvement. Prioritizing safety, accessibility, and inclusivity, My Circle engaged young people who might not otherwise seek support, offering early intervention and pathways to further services. Clinical moderators supervise interactions, providing validation, crisis support, and enhancing emotion regulation and social skills. My Circle effectively overcomes barriers to mental health support, normalizes help-seeking, and reduces psychological distress, offering a scalable, cost-effective care model.

References

- [1] Kids Helpline. My Circle [Internet]. Brisbane (AU): Kids Helpline; 2024 [cited 2024 July 3]. Available from: <https://kidshelpline.com.au/my-circle>
- [2] Campbell A, Ridout B, Amon K, Navarro P, Collyer B, Dalgleish J. A customized social network platform (Kids Helpline Circles) for delivering group counseling to young people experiencing family discord that impacts their well-being: Exploratory study. *Journal of Medical Internet Research*. 2019 Dec 20;21(12): e16176. doi:10.2196/16176
- [3] Amon* K, Ridout* B, Forsyth R, Campbell A. Online group counseling for young people through a customized social networking platform: Phase 2 of Kids Helpline Circles. *Cyberpsychology, Behavior, and Social Networking*. 2022 Sep 1;25(9):580-8. doi:10.1089/cyber.2022.0044
- [4] Ridout B, Amon K, Forsyth R, Campbell A. Development and evaluation of Kids Helpline's My Circle. Sydney (NSW): The University of Sydney; 2023. [Report]
- [5] Kessler RC, Andrews G, Colpe LJ, Hiripi E, Mroczek DK, Normand SL, Walters EE, Zaslavsky AM. Short screening scales to monitor population prevalences and trends in non-specific psychological distress. *Psychological Medicine*. 2002;32(6):959-76.
- [6] Cameron JJ, Stinson DA. Gender (mis)measurement: Guidelines for respecting gender diversity in psychological research. *Social and personality psychology compass*. 2019 Nov;13(11): e12506.
- [7] Rickwood DJ, Mazzer KR, Telford NR, Parker AG, Tanti CJ, McGorry PD. Changes in psychological distress and psychosocial functioning in young people visiting headspace centres for mental health problems. *Medical journal of Australia*. 2015 Jun;202(10):537-42.

¹Corresponding author: A/Professor Andrew J. Campbell, Cyberpsychology Research Group, Biomedical Informatics and Digital Health Theme, Room 115 RC Mills Building, School of Medical Sciences, Faculty of Medicine and Health, The University of Sydney, Camperdown NSW 2006 Australia. Email: andrew.campbell@sydney.edu.au