

# Ethical Dilemmas in Research on Internet Communities

Sarah Flicker  
Dave Haans  
Harvey Skinner

*There has been a rapid growth in the number of articles using Internet data sources to illuminate health behavior. However, little has been written about the ethical considerations of online research, especially studies involving data from Internet discussion boards. Guidelines are needed to ensure ethical conduct. In this article, the authors examine how a youth-focused research program negotiated ethical practices in the creation of its comprehensive health site and online message board. They address three situations in which ethical predicaments arose: (a) enrolling research participants, (b) protecting participants from risk or harm, and (c) linking public and private data. Drawing on the ethical principles of autonomy, nonmaleficence, justice, and beneficence, the authors present practical guidelines for resolving ethical dilemmas in research on Internet communities.*

**Keywords:** *Internet; ethics; youth; health; message boards; online communities*

Online discussion boards have shown great promise for enhancing health service delivery (practitioner-patient communication), consumer health information, and mutual support (patient-patient communication) (Skinner, 2002). As a result, there has been a proliferation of articles in which researchers have used Internet data to understand health behavior and new models of health services (Finn, 1995, 1996, 1999; Finn & Lavitt, 1994; Sharf, 1997; Winzelberg, 1997). A growing literature on the importance of ethical issues in Internet research has ensued (Allen, 1996; Eysenbach & Till, 2001; Frankel & Siang, 1999; Hsiung, 2000; Jones, 1994; Reid, 1996; Rodriguez, 1999; Roenoer, Isaacs, Maklin, & Silverman, 1995; Sharf, 1999; Sixsmith & Murray, 2001). However, little has been written about the ethical considerations of developing online health resources for the dual purpose of research and service delivery.

Two notable exceptions are descriptions of a mental health site (Hsiung, 2000) and a nutrition site (Rodriguez, 1999). Hsiung outlined the challenges experienced in setting up an online self-help group, in particular, how to deal with users who

---

**AUTHORS' NOTE:** The authors thank Oonagh Maley, Sherry Biscope, Shawn Chirrey, Cameron Norman, Meg Morrison, and Charlotte Lombardo for their assistance in TeenNet research and feedback on the manuscript. In addition, we gratefully acknowledge the editorial assistance provided by Jennifer Elliot, David Flicker, and Matthew Sullivan. This study was supported by grants from Ontario Ministry of Health and Health Canada.

QUALITATIVE HEALTH RESEARCH, Vol. 14 No. 1, January 2004 124-134  
DOI: 10.1177/1049732303259842  
© 2004 Sage Publications

might be presenting multiple identities or who are determined to be disruptive. Hsiung also emphasized the importance of having trained professional moderators online to minimize potentially destructive interactions. By contrast, Rodriguez discussed the difficulties of maintaining appropriate boundaries in the client-practitioner relationship during the provision of nutritional services online. In particular, challenges are highlighted about responding to questions online in a legal and ethical manner "within geographic and socially expanded boundaries," and the blurry lines between public information and client-practitioner communication in online forums. Rodriguez emphasized the importance of developing clear communication policies and transparent procedures.

Eysenbach and Till (2001) have recently called for further case studies of online research practices that document the process of creating Web sites and the ethical considerations involved in these activities. In this article, we describe how a youth-focused research program ([www.TeenNetProject.org](http://www.TeenNetProject.org)) wrestled with ethical issues in the creation of its comprehensive youth health Web sites and discussion boards. We discuss specific ethical choices made and how other researchers can build on this experience. We address three situations in which ethical predicaments arose: (a) participant enrollment and informed consent, (b) protecting participants from risk and harm, and (c) linking "public" and "private" data. Following Frankel and Siang (1999), we present solutions for online research practices drawing on the ethical principles of autonomy, nonmaleficence, justice, and beneficence.

## BACKGROUND

Since 1995, the TeenNet Project has worked with a network of youth and collaborating organizations in research aimed at engaging youth in health promotion using information and communication technologies (Skinner, Maley, Smith, Chirrey, & Morrison, 2001; Skinner, Maley, Smith, Morrison, & Goldberg, 2002; Skinner, Morrison, et al., 1997). TeenNet has developed interactive websites for youth, including CyberIsle (<http://www.cyberisle.org>, a comprehensive health promotion environment), Teen Clinic Online (a virtual health care system), Smoking Zine (self-guided prevention and cessation modules), and YouthBet.net (public health interventions for gambling). The goal of these sites is to provide youth with resources to make informed decisions about relevant health behaviors through a technology they find trustworthy, engaging, and appealing.

Ranked by number of page views, the most popular feature of all of these sites is our message board HotTalk. This is an online environment where youth participate in predominantly unmoderated discussion threads. Its purpose is threefold: (a) to provide youth with a place to express themselves in a safe environment; (b) to give youth the opportunity to connect with other youth; and (c) to study how youth support each other in peer environments. The community is governed by a set of community values. Currently, HotTalk hosts 14 topic areas, such as smoking, sex, relationships, body image, music, and racism. Since April 1997, when HotTalk was initiated, more than 11,100 messages have been posted.

In our research, we investigate how information and communication technologies can be used to reach youth (Lombardo, Zakus, & Skinner, 2002). We collect data on how youth use these sites. For instance, by analyzing the Web server logs, we can tell which areas of the site get the most traffic. We also examine the content of

messages posted on our message boards to learn more about youth culture and health beliefs. These data provide an important source for studying what youth see as important health issues and how they provide mutual support online.

During the development of these sites and our message board, certain ethical dilemmas presented by Internet-based research became apparent. As early entrants into online health research, TeenNet investigators have grappled with these issues. Although TeenNet studies must first undergo approval by the University of Toronto Human Subjects Review Committee, many issues encountered were as new to the ethics committees as they were to the researchers. To date, the TeenNet Project has had 16 research protocols approved.

### **AUTONOMY: ETHICAL ISSUES RELATED TO CONSENT AND ENROLLMENT**

The centrality of the ethical principle of autonomy to health research is underscored in the Declaration of Helsinki (World Medical Association Declaration of Helsinki, 2000). Autonomy refers to the notion that individuals deserve respect and that their rights to health, privacy, and dignity should be protected at all times. In relation to health research, this concept is often operationalized through the process of informed consent, whereby individuals are given the opportunity to decide whether they want to take part in specific research protocols (Frankel & Siang, 1999).

Enrolling study participants necessarily includes some form of communication between the research team and study participants. This contact usually takes the form of a face-to-face interview or phone conversation, during which potential subjects are informed about the purpose of the study, possible harms and benefits of participation, confidentiality and privacy protocols, how the information will be used, what their rights and responsibilities of study participation include, and withdrawal procedures (Tri-Council of Canada, 2000). Potential study participants are then given the opportunity to ask questions. Finally, informed consent is sought.

In online research, the entire research process can be facilitated online (Nosek & Banaji, 2002). The lack of face-to-face contact with study participants can lead to a variety of research and ethical issues, including difficulties in enrolling participants (Table 1). The forum of the Internet as a new communication technology tool creates novel possibilities for conducting research. Nevertheless, careful attention needs to be paid to ensuring that equally rigorous and ethical study enrollment procedures take place in "virtual" online encounters.

To obtain informed consent without any individual contact, it is vital that all elements that would normally be part of the consent process be available online. The new medium of the Internet makes it possible to make each element available on its own (by linking directly to the appropriate topic) and in one place (by having a general link). As a youth health site, TeenNet has made sure that all the information about our research is made available on registration to the CyberIsle site in youth-friendly formats.

On the registration page, information is provided about the TeenNet research project, its goals, and what it means to participate in the research. Those who are

**TABLE 1: Study Group Enrollment**

Situation	Enrollment of study participants needs to be facilitated online
Issues	Guaranteeing informed consent from study participants Ensuring that eligibility criteria are met Differentiating between service delivery and research agendas in an online context Ensuring accuracy of information
Resolution/ What we did	Information about study aims and procedures is provided online All users coming to the site must register; consent is obtained during registration Youth users are given autonomy to consent; parental consent is not required Users are asked for their date of birth at registration; only those between the ages of 10 and 24 are considered eligible Users not consenting still have access to all parts of the site, but their data are not used in analyses

interested in receiving more information are given the opportunity to read our privacy statement through an obvious link.

To ensure that all enrollment and eligibility criteria are met, TeenNet requires that all users complete registration to use the CyberIsle site. During registration, users are asked to create a nickname and password for themselves. The nickname becomes their unique identifier; all TeenNet research is anonymous and confidential. In addition, users are asked for their date of birth, gender, and country of citizenship. We never ask users to provide their real names or any other information that would allow us to identify them. They are also given the option of providing their e-mail address if they wish to receive e-mail from us. These demographic data allow us to understand who is using our site and how they are using it. During registration, youth are also asked whether they would be willing to participate in research.

Users who have not consented to be part of research or who are ineligible because they are not part of our target group (ages 10 to 24) still have access to the entire CyberIsle site and all site privileges; however, their data are not included in data analyses. Coercion is therefore minimized, as all youth, regardless of research participation, may access the site (Jones, 1994). In our experience to date, 75% of CyberIsle users consent and are eligible for study group participation.

Normally, youth would be considered a special or vulnerable population in need of additional protection measures or parental consent. The reality, however, is that most youth surf the Net without any parental supervision. If we required parental consent for site use, it would likely prove an insurmountable barrier to its use (that would be hard to verify anyway). The research we do is anonymous, noninvasive, and nonreactive. As such, it poses minimal risk to youth that participate.

By contrast, youth accessing our site might receive considerable benefits. For instance, through our site, youth gain access to valuable, prescreened, and reliable health information made available in youth-friendly formats. Furthermore, they gain access to a peer-driven message board that is monitored daily by health professionals. During site development, all content and links on our site are pre-vetted by a committee composed of youth, health professionals, school board representatives, and community partners. This process ensures that all site content has been assessed for quality and validity by professionals that generally work in a fiduciary

fashion with youth, as well as by peers. Thus, benefits to participation significantly outweigh the risks.

Although there is considerable controversy in the literature as to whether obtaining consent is necessary (or appropriate) when nonreactively studying online communities (Reid, 1996), our position has been that as researchers who are creating sites for research, we are under an ethical obligation to seek consent (Allen, 1996; Eysenbach & Till, 2001; Jones, 1994; King, 1996; Sixsmith & Murray, 2001).

Finally, there is considerable worry among the research community about the difficulty in ensuring that participants really are who they say they are (Nosek & Banaji, 2002). For instance, there is no way of verifying that someone who posts as an 18-year-old woman is not a 40-year-old man. For the purposes of our research, TeenNet has relied on "good faith" and taken at face value the information that users have offered. Concerns about identity fraud could be addressed by asking the same questions in multiple formats (e.g., both date of birth and age of users) and then checking for discrepancies. A more intrusive option (which we have never employed) would be to have participants send in personal identification information that could be verified independently.

## **NONMALEFICENCE: PROTECTING PARTICIPANTS FROM RISK AND HARM**

It is the responsibility of researchers to protect study participants from unintended harm resulting from the research. Special attention needs to be paid to the ways in which online research strategies create new venues for unintentional risk or harm (Table 2). As outlined elsewhere, protecting privacy and confidentiality in the online environment poses new challenges for the researcher (Eysenbach & Till, 2001; Frankel & Siang, 1999).

Some of the new predicaments that arise include (a) protecting users of the site from themselves or other users, (b) limiting use of the data for research purposes and service delivery, and (c) making sure reported results do not breach confidentiality or cause embarrassment and/or unintentional harm to participants.

One way in which TeenNet attempted to safeguard its users was to establish community values on our message board. Every effort is made to create and maintain a safe and youth-friendly environment. Project staff checks the board daily to ensure that the values are being adhered to. Where posts are made that violate community tenets, messages are either edited or deleted and a replacement message explaining the change is left in its place. Specifically, messages that directly attack individuals or groups, are commercial in nature, or are sexually solicitous are either edited or removed. In addition, when staff members see messages indicating distress (e.g., threat of suicide), a reply is crafted urging youth to seek help from a trained professional in their area or to call a help phone line. Should an e-mail address be available, a personalized message is sent directly to the youth.

Another way in which we attempt to safeguard users is by respecting their right to privacy. Immediately on registration, users are made aware of the fact that they are entering a research site. They are provided with a link to our privacy statement, in which we outline what type of data we collect, what we do with it, and how it is not used. Users are never asked for their real name. All correspondence occurs

**TABLE 2: Protecting Participants From Risk and Harm**

Situation	All research participants need to be protected from any unintended harm resulting from the research process; special attention needs to be paid to ways in which online research might create unintentional harm
Issues	Protecting users of the site from other users and themselves Limiting use of the data for research purposes and service delivery Making sure reported results do not breach confidentiality or cause embarrassment or more serious harm to participants
Resolution/ What we did	A privacy page tells users what type of data is collected, what we do with it, and how it is used and not used The TeenNet Project monitors the site daily for messages requiring immediate attention and removes those that are deemed inappropriate Web server information is password protected and stored in a locked research office; linked data are made available only to the research team

under self-selected nicknames. Whenever users post information that might be perceived as a unique identifier (e.g., last name or contact information), messages are edited to safeguard youth anonymity. Web server data information (in the form of logs and database tables) is password protected and stored in a locked research office; linked data are made available only to the research team. In addition, connections to the CyberIsle Web server can be made only through a secure, encrypted connection.

When research results are presented or disseminated, only postings of youth that have consented to be part of the study group are quoted. Real names are never associated with quotations. Furthermore, to maximize privacy, search engines cannot access our message board directly. Users must go through registration and login to view the message board.

## JUSTICE: LINKING “PUBLIC” AND “PRIVATE” DATA

The ethical principle of justice in health research is interpreted as “fair, equitable and appropriate treatment in light of what is due or owed to persons” (Frankel & Siang, 1999). In relation to our research, the ethical principle has come to life in the process of analyzing our message board (Table 3), which includes postings by youth who have consented to be part of our research and youth who have not. As posted messages are often parts of ongoing conversations, including some messages in analyses and excluding others becomes problematic. An ethical dilemma involves whether consent needs to be sought at all for analyzing information in the “public domain.” Other concerns include how to determine which posters consented to be part of research and how to analyze conversations in which some message posters have agreed to be part of research and others not.

Within seconds of message composition, new posts appear online. Members have the option of posting anonymously or using a made-up nickname. Any member of the HotTalk community that has already registered has free access to the message board, where posts appear chronologically on the screen with the date and time of their posting, and, when available, their HotTalk nickname. No other information is available to the general public that views the site. As such, the data in its “rawest” form might simply be a printout of the computer screen. All conversations

**TABLE 3: Linking "Public" and "Private" Data**

Situation	Discussion board (HotTalk) includes postings by youth who might or might not have consented to our research; including some messages in analyses and excluding others becomes problematic
Issues	Requiring consent from posters on "public" message boards Determining which individuals consented to be part of the study group Analyzing conversations where some message posters are study group members and others not
Resolution/ What we did	Assumed that all data were private and only those posters who consented to be part of the study group could be explicitly quoted in analyses Used web server logs to determine study group membership; although messages are publicly available, registration information is attached for data analysis purposes only Used postings of nonconsenters only as contextual in analyzing conversations; do not quote them in analyses

are digitally archived and are accessible at all times by the general public, so that a youth can read or add to any thread he or she pleases.

Many have argued that given the public nature of the Internet, data from these postings are "fair research game" (Finn & Lavitt, 1994; Salem, Bogat, & Reid, 1997; Sharf, 1997). This line of argument suggests that chat rooms and message boards by their very nature are public discourses. As such, researchers are excused from the necessary consent procedures.

In the opposite camp are those who believe that Internet chat rooms are not necessarily public spaces. Rather, they represent a space that is neither public nor private but exists in the nexus between these two axes. Waskul and Douglas (1996) have suggested that Internet message boards are both "publicly private" and "privately public." This argument suggests that because posters never intended that their messages be used for research or education, the practice is unethical. Others have suggested that the requirements for making consent necessary are contingent and might depend on the size of the community, group norms, and the accessibility of the site (Eysenbach & Till, 2001).

As researchers who are working with minors and sensitive subjects (e.g., drugs, alcohol, sex, and relationships), the TeenNet Project team seeks to maintain the highest ethical standards. Our position has been to identify the site specifically as a research project and explicitly offer youth the opportunity to opt out of that research. The ethical obligation therefore presents itself not to analyze postings by youth that decline to participate in research.

As such, our research team was placed in a position that made it important for us to figure out "who" wrote "what," in an effort to tease out which data we were free to analyze and which we ought to ignore without making the distinction necessarily obvious to the community of users.

The capability of merging the Web site logs with message board postings has afforded us the ability to discern which messages were posted by youth that have consent to research and which were not. This process, however, is a lengthy and time-consuming project that needs to be undertaken manually, as the message board software is unable to do it automatically. Nevertheless, it is an important process to determine study group participation before analysis. This process not only provides us with study group status but also allows us to merge messages with the

poster's nickname, gender, age, country of citizenship, consent, and domain/IP address, as well as other information derived from site use analyses.

Determining study group participation has opened up a Pandora's box of what to do with this new "linked" data. Going to great lengths to preserve the integrity of the research by linking the postings to their writers opens up new ethical concerns about what other information we might be able to use and what it means to "use" it (Jones, 1994). For instance, by uncovering authorship, are we compromising user anonymity? In relation to the principle of justice, as researchers we needed to weigh the costs of maintaining confidentiality with the cost of conducting research on those who have not consented. We therefore link public and private data sets to uncover authorship and preserve the integrity of our consent process while rigorously limiting the access of others to that linked data set.

Another problem revolves around the analysis of conversations when the postings of those who have asked to opt out of our research have been omitted. In making sure that these participants' data are not quoted or explicitly involved in research analyses, we affect the context in which the conversation takes place. How does one deal with a transcript that reads like a conversation among several people where one voice has been systematically and purposefully erased? What, then, becomes of a detailed response by a study participant to a youth who has opted out of the research? Need the response also be omitted because it speaks to content and details written in the first youth's letters? What are acceptable compromises?

The richness of the chat room data stems from their being contextualized, "natural" conversation. By stripping the data of voices and threads in the conversation, the danger becomes losing some or even the entire context. Our position has been to never explicitly quote youth who have not consented to be part of research and use their postings only to understand the context under which consenters are posting.

In the future, we will be able to use newer technology to create automatically seamless data sets containing not only the text of the posted messages but also other Web server information, such as registration information. Alternatively, one might decide to allow only those consenting to the research to post messages or advise all users that their posts might be used for research purposes. Nevertheless, it is imperative that researchers hoping to use sensitive information posted in online environments warn users of their presence and that research is being conducted.

## **BENEFICENCE**

Internet communities continue to grow. It is estimated that 84% of American Internet users have contacted an online group (Horrigan, 2001); the same survey discovered that half of those individuals say that the Internet has helped them to get to know people they would not have otherwise met. Furthermore, online health information is a burgeoning field. Thirty one percent of Americans said that they would turn first to the Internet for their health information (Horrigan & Rainie, 2002); health information is also the fourth most cited reason for Internet use (CyberDialogue, 2000). These two trends create novel opportunities for health researchers. For practitioners, the Internet offers the possibility to provide patient information in interactive, innovative formats and opens up novel individual and group communication possibilities. For health sociologists and anthropologists, online groups represent a unique opportunity to study vibrant, emerging commu-

**TABLE 4: Ethical Guidelines for Researching Internet Communities**

- 
1. Supply a readily available link to the individuals and institutions responsible for the research project.
  2. Describe study aims, potential benefits, and harms.
  3. Provide information about what data will be collected and how it will be used.
  4. State clearly what kinds of services you are (and are not) able to provide.
  5. Identify any commercial or competing interests.
  6. Offer direct contact information for the principal investigator and/or study coordinator, so that participants can get their questions answered.
  7. Seek informed consent.
  8. Grant users that do not consent to be part of research comparable service.
  9. Be explicit about steps taken to preserve confidentiality and anonymity.
  10. Create policies and procedures to ensure the well-being of the community (e.g., protocols for maintaining community values, moderating site, and managing crisis); make policies public and transparent.
  11. Limit the ability of search engines to access message boards directly to safeguard privacy.
  12. Gain approval from a credible human subjects ethics review committee.
- 

nities and cultures. As individuals continue to turn to the Web for many of their social and health needs, it will become increasingly important for health researchers to study and understand the processes underlying these changes.

Our interest in the field of adolescent health research stems from the most basic ethical principle—beneficence—or the desire to “do good.” This principle is operationalized through the creation and maintenance of credible and reliable health information resources for youth that are presented in fun, new, interactive formats. However (as discussed above), in our efforts to study the use of Internet technology as a health promotion strategy, a number of new ethical conundrums have presented themselves.

## CONCLUSION AND RECOMMENDED GUIDELINES

Given the imperative to conduct Internet-based research, guidelines are urgently needed to ensure ethical conduct. Based on our experiences, we have developed a set of guidelines for researchers and health professionals considering developing online communities (Table 4). These guidelines are a summary of the key points of the article. They are meant to serve as a stepping-stone for further discussion and refinement.

Although many of the guidelines are familiar to seasoned researchers, it is imperative that those conducting research online continue to be reminded of the importance of ethical conduct. As early entrants into the field of online research, the TeenNet Project has had the opportunity to wrestle with both traditional dilemmas presented by research generally and new issues raised by technological advances. The rapid pace of technological innovation challenges us to constantly reflect on our research practices. Over the past 7 years, we have refined our research protocols, streamlined our informed consent procedures, and made our privacy links more prominent and clear.

In this article, we have highlighted some of the key issues we came across and how we addressed them. Lessons learned are presented so that other researchers

conducting similar kinds of Internet-based research can benefit. It is important that we learn from and share our experiences in addressing the ethical implications of online research. We welcome response, dialogue, and debate.

## REFERENCES

- Allen, C. (1996). What's wrong with the "golden rule"? Conundrums of conducting ethical research in cyberspace. *Information Society, 12*(175), 187.
- Cyberdialogue. (2000). *Major cyber trends for 200: Taking the "E" out of e-commerce*. Retrieved September 16, 2002, from <http://www.cyberdialogue.com>
- Eysenbach, G., & Till, J. E. (2001). Ethical issues in qualitative research on Internet communities. *British Medical Journal, 323*, 1103-1105.
- Finn, J. (1995). Computer-based self-help groups: A new resource to supplement support groups. *Social Work With Groups, 18*(1), 109-117.
- Finn, J. (1996). Computer-based self-help groups: Online recovery for addictions. *Computers in Human Services, 13*(1), 21-41.
- Finn, J. (1999). An exploration of helping processes in an online self-help group focusing on issues of disability. *Health & Social Work, 24*(3), 220-231.
- Finn, J., & Lavitt, M. (1994). Computer based self-help groups for sexual abuse survivors. *Social Work With Groups, 17*(1/2), 41-46.
- Frankel, M., & Siang, S. (1999). *Ethical and legal issues of human subjects research on the Internet—Report of a workshop*. Washington, DC: American Association for the Advancement of Science. Retrieved September 23, 2003, from <http://www.aaas.org/spp/sfsl/projects/intres/report.pdf>
- Horrigan, J. B. (2001). *Online Communities: Networks that nurture long-distance relationships and local ties—Pew Internet & American Life Project Report*. Retrieved September 16, 2002, from <http://www.pewinternet.org>
- Horrigan, J. B., & Rainie, L. (2002). *Counting on the Internet—Most expect to find key information online, most find the information they seek, many now turn to the Internet first: Pew Internet & American Life Project Report*. Retrieved September 16, 2002, from <http://www.pewinternet.org>
- Hsiung, R. C. (2000). The best of both worlds: An online self-help group hosted by a mental health professional. *CyberPsychology & Behavior, 3*(6), 935-950.
- Jones, R. (1994). The ethics of research in cyberspace. *Internet Research, 1994*(4), 3-30.
- King, S. A. (1996). Researching Internet communities: Proposed ethical guidelines for the reporting of results. *Information Society, 12*(2), 119-128.
- Lombardo, C., Zakus, D., & Skinner, H. (2002). Youth social action: Building a global latticework through information and communication technologies. *Health Promotion International, 17*(4), 363-371.
- Nosek, B. A., & Banaji, M. R. (2002). E-Research: Ethics, security, design and control in psychological research on the Internet. *Journal of Social Issues, 58*(1), 161-176.
- Reid, E. (1996). Informed consent in the study of on-line communities: A reflection of the effects of computer mediated social research. *Information Society, 12*, 169-174.
- Rodriguez, J. (1999). Legal, ethical, and professional issues to consider when communicating via the Internet: A suggested response model and policy. *Journal of the American Dietetic Association, 99*, 1428-1432.
- Roenoer, J., Isaacs, S., Maklin, R., & Silverman, S. (1995). The forum: Observational research on the electronic superhighway. *Ethics and Behavior, 5*, 105-118.
- Salem, D. A., Bogat, G. A., & Reid, C. (1997). Mutual help goes on-line. *Journal of Community Psychology, 25*(2), 189-207.
- Sharf, B. F. (1997). Communicating breast cancer online: Support and empowerment on the Internet. *Women & Health, 26*(1), 65-84.
- Sharf, B. F. (1999). Beyond netiquette: The ethics of doing naturalistic discourse research on the Internet. In S. Jones (Ed.), *Doing internet research* (pp. 243-256). London: Sage.
- Sixsmith, J., & Murray, C. D. (2001). Ethical issues in the documentary analysis of Internet posts and archives. *Qualitative Health Research, 11*, 423-432.
- Skinner, H. (2002). *Promoting health through organizational change*. San Francisco: Benjamin Cummings.

- Skinner, H., Maley, O., Smith, L., Chirrey, S., & Morrison, M. (2001). New frontiers: Using the Internet to engage teens in substance abuse prevention and treatment. In P. Monte & S. Colby (Eds.), *Adolescence, alcohol, and substance abuse: Reaching teens through brief interventions* (pp. 297-318). New York: Guilford.
- Skinner, H., Maley, O., Smith, L., Morrison, M., & Goldberg, E. (2002). TeenNet: Using the Internet for e-health. In H. Skinner (Ed.), *Promoting health through organizational change* (pp. 293-314). San Francisco: Benjamin Cummings.
- Skinner, H., Morrison, M., Bercovitz, K., Haans, D., Jennings, M. J., Magdenko, L., et al. (1997). Using the Internet to engage youth in health promotion. *International Journal of Health Promotion & Education*, 4(4), 23-25.
- Tri-Council of Canada. (2000). *Tri-Council policy statement: Ethical conduct for research involving humans*. Retrieved September 9, 2003, from <http://www.nserc.ca/programs/ethics/english/policy.htm>
- Waskul, D., & Douglas, M. (1996). Considering the electronic participant: Some polemical observations on the ethics of online research. *Information Society*, 12(2), 129-139.
- Winzelberg, A. (1997). The analysis of an electronic support group for individuals with eating disorders. *Computers in Human Behavior*, 13, 393-407.
- World Medical Association Declaration of Helsinki. (2000). *Ethical principles for medical research involving human subjects* (last amended Oct 2000). Retrieved September 16, 2002, from <http://www.wma.net/e/policy/17cnote.pdf>

*Sarah Flicker, M.Ph., is a research assistant, TeenNet Project, Department of Public Health Sciences, University of Toronto, Ontario, Canada.*

*Dave Haans, M.A., is evaluation coordinator, TeenNet Project, Department of Public Health Sciences, University of Toronto, Ontario, Canada.*

*Harvey Skinner, Ph.D., is professor and chair of the Department of Public Health Sciences, University of Toronto, Ontario, Canada.*