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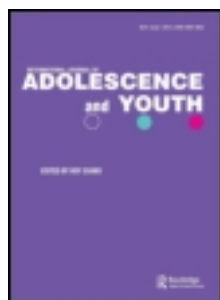
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The role of social support in adolescents: are you *helping me* or *stressing me out*?

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Interpersonal relationships are indispensable in helping adolescents cope with stressors, acting as social support sources that protect them from psychological distress. Learning from their experiences may elucidate what strategies could be employed to support adolescents during this vulnerable life stage. Focus groups ($N = 80$) with adolescents in the Basque Country, Spain, were conducted to capture adolescents' narratives on stress and social support. Findings revealed the dual role of interpersonal relationships – as stressors and as sources of social support. Adolescents draw on sources of support that are familiar, mature, friendly, and, most importantly, worth of trust. Their most valued type of support is emotional, although there should be a match between the needs and the help offered. Implications for intervention programmes are discussed.

Keywords: adolescents; social support; coping; seeking help; interpersonal stress; focus groups

Life's major changes experienced during adolescence – academic pressure, gaining independence from parents, intimate relationships with peers, physical maturation, starting romantic relationships, expectations from parents, etc. – are accompanied by a drastic increase in the frequency at which stressful events occur (Hankin, Mermelstein, & Roesch, 2007; Mezulis, Funasaki, Charbonneau, & Hyde, 2010; Ngai & Cheung, 2000; Pettit, Lewinsohn, Seeley, Roberts, & Yaroslavsky, 2010). These changes and stressful events during adolescence may elevate to maladaptive behaviour and problems, such as depressive symptoms (Byrne, Davenport, & Mazanov, 2007; Calvete, Orue, & Hankin, 2012; Calvete, Villardón, & Estevez, 2008; Hankin, 2008; Meadows, Brown, & Elder, 2006) and anxiety symptoms (Adewuya, Ola, & Adewumi, 2007; Byrne et al., 2007; Esbjom, Hoeyer, Dyrborg, Leth, & Kendall, 2010; Mann et al., 2011), among others.

There are mixed findings in regard to the sources of stress in adolescents. In a large sample pool, 10 categories of stressors were yielded from a self-reported questionnaire including schooling, interpersonal relationships (i.e. peer pressure, romantic relationships, and relationships with parents), home life, financial pressure, uncertainty about the future, and the presence of emerging adult responsibility (Byrne et al., 2007). On the other side, in a focus group's study with 120 adolescents, it was found that the most frequently noted stressor was school (maintaining good grades, passing their classes, and being accepted into college) followed by money, relationships, and parents (LaRue & Herrman, 2008). Despite this variability, several studies have shown interpersonal problems as more relevant in that period of life (Hankin et al., 2007; Mezulis et al., 2010; Pettit et al., 2010). Family problems (Van Oort, Verhulst, Ormel, & Huizink, 2010) and conflicts with peers (Jose & Killburg, 2007) are among the most cited.

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Gender differences have been found in how adolescents experience stress. Adolescent girls report higher stress levels in relationships with parents, peers, and romantic partners than boys do (De Coster, 2005; Kort-Butler, 2009; Lorence, Jiménez, & Sánchez, 2009; Moksnes, Moljord, Espnes, & Byrne, 2010). Hankin et al. (2007) found that events from interpersonal nature (i.e. relationship with peers, intimate partners, or family members) explain depressive symptoms among the girls, while boys tend to react more to achievement-related events (i.e. sports performance). Some have even claimed that girls react more negatively when facing similar levels of distress (Mezulis et al., 2010; Pettit et al., 2010; Shih, Eberhart, Hammen, & Brennan, 2006). At a clinical level, as twice as many adolescent girls experience a depressive episode as compared to boys (Hankin et al., 2007).

In brief, interpersonal stressors, like conflicts with peers and family, are a source of distress among adolescents. At the same time, family and peers can be the main sources of support for adolescents and, therefore, protect them from experiencing distress.

Social support as a buffer to stress

Social support has been proposed as one of the protective factors to stress that include social systems as a source of well-being (Cohen & Wills, 1985; Thoits, 1986). Particularly in children and adolescents studies, social support is seen as a manifestation of community social capital (Ellonen, Kääriäinen, & Autio, 2008). Social support has been defined as the instrumental and/or expressive provisions, real or perceived, given by the community, social networks, and intimate relationships (Lin, Dean, & Ensel, 1986). This definition includes different perspectives of the study of social support (structural, functional, and contextual), the different levels of analysis (community, social networks, and intimate relationships), and it differentiates between real versus perceived support. While studying social support from a functional perspective, the analysis focuses on the different types of support that adolescents search for and receive. Following Cohen and Wills' (1985) classical taxonomy, we can distinguish among emotional support, instrumental or material support, informative support, and social company. Emotional support encompasses behaviours that grant affective well-being like listening, expressing love, and appreciation. Vollmann et al. (2010) found this kind of support to be the most beneficial in depression for purveying the receptors with a sense of acceptance that reinforces their self-esteem. In adolescents, emotional support from friends and family has also been revealed superior to the other types of support (Griffiths, Crisp, Barney, & Reid, 2011).

A contextual perspective of analysis on social support focuses on the environmental and social conditions in which the transactions take place, like the sources of support. The main sources for adolescents are family, peers, college mates and staff, cultural, sports, social organisations and groups, and online social networks. Parental support deficits, and not peers', have been shown to predict depressive symptoms (Stice, Ragan, & Randall, 2004). On the other hand, adolescents feel freer to talk about their problems with peers than parents (Aisenso et al., 2007). A link between teachers' support and students' well-being has been revealed rather than family and friends' support (Cattley, 2004). On the other hand, community connectedness is a resilience factor for high-risk adolescents (Mosavel, Ahmed, Ports, & Simon, 2013). Negative associations have also been revealed between friend's support and well-being (Kerr, Preuss, & King, 2006) and family support has been found not to buffer the effects of family stress (Ngai & Cheung, 2000). Inconclusive findings regarding the sources of support in adolescents show the lack of agreement and/or the role of the context in defining them.

Different stress models have explained social support's functioning. The *principal effect model* suggests that social resources are helpful by themselves independently of the situation, providing people with positive affect, sense of predictability, and self-value acknowledgement. Having and using social supports has been directly associated with lower rates of depression, better academic adjustment, and lower rates of substance use (Cava, Murgui, & Musitu, 2008; Decker, 2007; Demaray, Malecki, Davidson, Hodgson, & Rebus, 2005; Dingfelder, Jaffee, & Mandell, 2010; Graziano, Bonino, & Cattelino, 2009; Musitu Ochoa, Martínez Ferrer, & Murgui Pérez, 2006; Somers, Owens, & Piliawsky, 2008). The *buffering hypothesis* (Cohen & Wills, 1985) proposes social support as a buffer of the impact that stressful events have on distress. In other words, when facing troubles, adolescents with greater support will be less likely to become depressed than those with lower support. However, for this protector role to work, there must be a match between the demands and the type of support available as the same authors propose in their *match hypothesis* (Cohen & Wills, 1985). For example, in a critical review of studies made with adolescents with cancer it was found that emotional support by the family (especially the mother) is essential in decreasing associated stress. The buffering effect of social support has been confirmed in adolescents fully (Brady, Dolcini, Harper, & Pollack, 2009; Decker, 2007; Malecki & Demaray, 2006; Shorey, Rhatigan, Fite, & Stuart, 2011; Wei, Zhang, & Xi, 2006; Yang et al., 2010) and partially (Auerbach, Bigda-Peyton, Eberhart, Webb, & Ho, 2011). Others found that neither parental nor peer or school support significantly moderate the relationship between stress and depressive symptoms (Burton, Stice, & Seeley, 2004; Ngai & Cheung, 2000). Mixed findings regarding the buffering hypothesis and the lack of studies in adolescents' samples leave inconclusive results for the role of social support as a moderator to distress.

There is evidence for gender differences on how girls and boys perceive and use support. In regard to the sources of support, girls find more support from close friends than classmates, parents, or teachers, whereas boys perceive less from all (Aisenso et al., 2007; Cheng & Chan, 2004; Rueger, Malecki, & Demaray, 2008). Social support might be more important to girls as interpersonal stressors are stronger predictors of negative psychological outcomes in girls relative to boys (Hankin et al., 2007; Rose & Rudolph, 2006).

Since social support is a protector to distress, seeking help strategies will be essential to cope with interpersonal stress. It has been found that support and help-seeking behaviours, while they interplay, are different constructs that should be studied separately (Heerde, 2013).

Adolescents' help-seeking behaviours

Help-seeking behaviours can be identified as functional coping strategies that people use when they have to face stressful events. In a WHO review on adolescents, Barker (2007) defined help-seeking behaviours as:

any action or activity carried out by an adolescent who perceives herself/himself as needing personal, psychological, affective assistance or health or social services, with the purpose of meeting this need in a positive way. (p. 2)

Help providers can be differentiated between formal (i.e. organisations, institutions) and informal (i.e. family and friends) supports, generally informal help being superior to the formal (Hightet, Hickie, & Davenport, 2002). Some of the advantages of informal support that Griffiths et al. (2011) found were the presence of social support, background knowledge of the person, the opportunity to offload the burden, the personal attributes of the sources of support, and their accessibility.

Many adolescents report that they receive almost no support when they need it, like following the death of a friend, or that despite available resources such as family, friends, and counsellors, they feel unable to express their feelings (Rask, Kaunonen, & Paunonen-Ilmonen, 2002). In fact, when asked to adolescents why do they not make use of the existing supports available, they report lack of trust and past disappointment from providers (Barker, 2007).

Seeking social support is a functional coping strategy that predicts a decrease in internalising and externalising symptoms (Shulman & Cauffman, 2011). In fact, it has been included in different coping scales for adolescents (Galaif, Sussman, Chou, & Wills, 2003; Wadsworth & Compas, 2002). Murray-Harvey and Slee (2007) found that adolescents regard it as the most important coping strategy used to resolve interpersonal conflicts. Girls are more likely to use coping strategies that involve relationships, such as seeking social support (Eschenbeck, Kohlmann, & Lohaus, 2007; Lynch, Kashikar-Zuck, Goldschneider, & Jones, 2007; Murray-Harvey & Slee, 2007; Piko, 2011), than boys who tend to use others, such as distraction (Gómez-Fraguela, Luengo-Martín, Romero-Triñanes, Villar-Torres, & Sobral-Fernández, 2006). Therefore, girls are more sensitive to relationship stress but are also more likely to use coping strategies that maintain relationships (Rose & Rudolph, 2006; Schmitz, Vierhaus, & Lohaus, 2012).

In sum, social support has revealed as a protector to the impact of stress in adolescents. There are mixed findings in regard to the adolescents' sources of stress and support, due to the different contexts. Despite the fact that seeking support has been demonstrated as a functional strategy to cope for stress, adolescents not always use it. This, in turn, hinders the development of efficient help-seeking and social support interventions. Our study's goal was to explore a group of Basque adolescents narratives about stress and the role that social support may play in buffering it. Furthermore, to develop a conceptual model that synthesises their understanding of how social support and seeking support work.

Method

This study used qualitative methods to explore Spanish adolescents' perspectives on depression and stress. Techniques and procedures for data collection and analysis followed the guidelines set forth by the grounded theory (Glaser & Strauss, 1967; Strauss & Corbin, 1998). Data collection occurred through focus group interviews until theoretical saturation had occurred. Analysis occurred concurrently with data collection, using an inductive process to interpret participants' meanings, organise them into like properties, and reassemble them into a conceptual model.

Participants

A group of 80 adolescents (43 boys and 37 girls), aged 15–16, participated in nine focus groups of 90 minutes each, in three schools located in an urban area in the north of Spain, one public and another private. The nine groups of various gender compositions were design to ensure dialogue among boys or girls alone, as well as mixed gender. Three groups were composed of girls only, a third of boys, and three groups were mixed.

Procedure

The fieldwork consisted of nine focus groups that took place at collaborating schools. The Ethics of Committee at the University of Deusto approved the research protocol. Informed

consent was obtained from parents or guardians. The adolescents also signed consent forms and provided demographic information at the start of the focus groups. The focus groups lasted approximately 90 minutes. Adolescents received a compensation of 15€ voucher for their participation.

When adolescents were asked about their understanding on stress, apart from the sources of stress, social support with its role as protector from distress was spontaneously mentioned in the focus groups. The open-discussion format was guided by a set of questions that initially did not include the role of social support but were purposely introduced as part of the research protocol of every focus group. The questions that guided the focus groups included the following:

- (1) What comes to your mind when you hear the word stress? What things do stress adolescents?
- (2) Do you ask for help? To whom? If not, why? What is it that is more helpful?
- (3) Do you think there are differences between boys and girls?

Following completion of each focus group session, the research facilitator (Author #2), a second researcher, and two graduate research assistants met to compare observations and impressions of the group process and prepare field notes. The research team members transcribed the digital recordings and develop a first coding sheet. As the written transcripts became available, the principal researchers for accuracy reviewed them. This was followed by the development of a more extensive coding sheet with the entering of all the transcripts and memos into a qualitative research software (NVivo9). The work of three researchers in the data analysis with the assistance of software provided support to decisions about data saturation. Three types of coding procedures were used in developing the conceptual model: open coding, axial coding, and selective coding. In axial coding key words were found which describe the meaning of each sentence. These are then grouped into initial categories. For example, there were many references by participants to what constituted stressful sources. Axial coding during which the properties and dimensions of an identified category were detailed followed open coding. Both open coding and axial coding occurred simultaneously as new data were compared to the old in substantiating the categories. To aid in the triangulation of the data analysis, a larger research group provided feedback on what constituted the central characteristics of the emerging grounded theory.

During the final process of selective coding, previously identified categories were incorporated into the conceptual model: the dual role of social support. The interrelationships among the different categories were identified and constructed to fit into a theory. The data were continuously compared with previous data and categories refined until what emerged was a conceptual model of adolescents' experiences of stress and social support. Memos and diagrams were also used to assist the researchers during this phase of data analysis. Finally, we examined the theory for internal consistency and logic: did the theory represent an abstraction of the data? Validation of this emerging theory occurred by comparing it to the data collected and being reassured that it explained most, if not all, of the variations.

Results

For the adolescents, interpersonal relationships are core in the experience of distress. Relationships can be a source of distress, like conflicts with parents for the academic performance, or conflicts with their peers. And, at the same time, adolescents consider relationships as sources of support that help them to cope better with stress under certain

favourable conditions. They perceive a dual role of interpersonal relationships: stressors and social support.

Stressors

Close interpersonal interactions are the source of most distress for participants, in particular family and peers. Moreover, it was stated that family conflicts are often triggered by the adolescents' academic performance. This distress is compounded by parents' perception that the adolescents may not care about their school performance.

What it is stressing me out is that my parents, if I get a bad grade on an exam, think that I don't care, that I just do it like that, because I want to fail . . . Yes, they think that I don't give a shit and this makes me not caring about anything . . . (FG3, girl)¹

However, adolescents revealed being afraid about their future career and the way of earning their living connected to their academic results, having a detrimental effect in their academic performance.

If you see that now you're bad at school, you risk a lot this year, to pass or not pass, what you will get next year, and it's your job, your future. (FG2, boy)

Acceptance by peers is another situation that all the groups of adolescents identify as stressful and is sometimes triggered by their concern about being judged by others.

In my place, for example, it can drag me down that my group of friends are different from me in, so to speak, different way of seeing life or habits, such as going out Saturday night to a bar and drink. While I might feel like stay in, quiet, skating or doing other things, and, . . . , eventually it bothers because you notice that you're apart, and you don't know if it's you or them, right? (FG9, girl)

According to all, girls are more worried about their peers' approval regarding their physical appearance.

A guy can come up with the same clothes for a week, the same pants, same shoes. At most, you change your t-shirt and the underpants too, man! (laughs) — a girl says, if I go two days in the same clothes, my girlfriends will criticize me. (FG1, boy)

In the focus groups, adolescents mention the sources of stress as well as what helps them to cope with stress. In that regard, social support was the other theme of the conversation in which interpersonal relationships are crucial too.

Social support

The discourse about social support is part of the narrative about the experience of stress. When adolescents refer to distress, they also talk about how to cope with it. From the adolescents' narratives, two different dimensions emerged that explain the process of social support: seeking for support and receiving the support.

Seeking support

There are certain conditions that facilitate adolescents' disclosure so that they will seek for help when they need it. The most mentioned ones were familiarity, friendship, trust, maturity, and approval from the eventual source of support.

When adolescents are distressed and need support, they draw on informal sources of help that are familiar to them, such as friends and family, rather than professionals.

I don't think I will that bad so that I need to go to a psychologist. (FG6, boy)

A good relationship with the person facilitates adolescents' disclosure, and therefore, the will to seek help.

If you get along with your sister, I, for example with mine, I get on very well and would tell her about it. (FG4, girl)

Trust emerge as a significant factor in determining whom the adolescents assess as worth of disclosure and, therefore, a proper source of support.

It depends on whom you trust more (FG1, boy)

. . . but if you trust the people around you and your parents, for as you wouldn't have any problems. (FG6, boy)

The level of maturity of the person that the adolescent may seek support is an important factor in assessing whom to ask for help.

I like, for example, asking for advice to my sister or my parents, you know? Because I know they are older and have probably been through similar things, then they help you even if they don't agree with you, and I like a lot. (FG3, girl)

Fears about others' approval on their experiences can prevent adolescents from disclosing and, therefore, asking for help.

You may think that the person is thinking like you did wrong or something, or say you think about what would he/she say, I don't know, . . . then you just don't wanna talk (FG3, girl)

Receiving support

The kind of support that adolescents most value is emotional support presented in different forms (empathy and presence). Empathic responses are what they most associate with being emotionally supported.

Well . . . seeing things like you right? Not seeing them from their point of view, because from their point of view probably what you are gonna tell will be wrong and they are not gonna support you, then watching them from your point of view. (FG3, boy)

To me as long as you are by my side . . . serves me and support me even if you know? if you have to cry I'm with you, if you wanna laugh, I laugh with you. (FG9, girl)

Feeling that others are concerned about them, that they are not invisible to others, is another way to receive emotional support.

Maybe you don't want people on you, I think that, you don't want that, maybe in that very moment you don't want anybody to be on you but just knowing that people are worried about you (FG7, girl)

There are certain reactions that the adolescents perceive as the opposite of support become obstacles for receiving support. When others overreact or minimise what is happening to them, like parents worrying even more or friends trivialising their problems.

Sometimes you like tell something to your dad or mum and they give it more turns than you, and the problem is yours, it's like you're quiet and they get stressed and it's like, what's this? (FG5, boy)

If they don't really know how you feel and they say . . . you say 'I'm depressed I do not know why' and they answer: 'Come on, it's not a big deal!' (FG7, girl)

While discussing on their preferred ways of receiving support, adolescents mentioned their strategies for helping others too. Similarly, giving emotional support to others was widely used strategy, like empathic responses.

Telling something similar that has happened to you, to see how he reacts. (FG7, boy)

However, adolescents emphasise the importance of matching the person's needs with the support provided, rather than always using the same strategies.

Everyone takes things in a different way, maybe someone prefers to be alone and go through it on her own, and there are people who need to be supported, then, I don't know, it depends, if you know that person, you know what she needs. (FG3, girl)

Gender differences are found in how girls and boys help each other, showing girls as more skilled to give support – they use more emotional expression strategies, while boys tend to use distraction.

Guys also have very different ways of helping; you tell that to a guy . . . maybe the best way to remedy it is taking you to party, whereas the girl maybe also talks about it . . . (FG1, boy)

In sum, when adolescents approach the experience of stress, interpersonal relationships have a dual role as important sources of stress and support as well. Stressors often are related to conflicts with family and peers triggered by certain contextual factors. For the process of social support to happen, help-seeking behaviours are first needed under certain conditions (i.e. familiarity, friendship, trust, etc.). The type of support adolescents prefer to receive and give is emotional, in particular, in the form of empathic responses. However, adolescents acknowledge that support responses should adapt to the person's needs; in other words, there should be a match between the support given and the demands of the person.

Discussion

The first objective of this study was to capture what do adolescents understand by stress. Based on our results, interpersonal relationships are key in how they experience stress. First, the role social interactions have as sources of stress (stressors), and second, their role as sources of support and buffers to stress. Adolescents understand social support by the help-seeking behaviours and the process of receiving support. Certain conditions (i.e. trust, maturity, etc.) facilitate seeking help as well as obstacles for receiving such help. Gender and culture also shape the adolescents' experience of stress and social support.

Stressful events as a source for distress

Consistent with the existing literature (Hankin et al., 2007; Mezulis et al., 2010; Pettit et al., 2010) the adolescents consider conflicts in the interpersonal relationships as the main sources of distress. Social interactions are problematic in specific contexts or are triggered by other stressors. Conflicts with parents are often triggered by the adolescents' academic performance and concerns about the future economic conditions. The economic situation in Spain is uncertain and, therefore, those stressors can be exacerbated. Moreover, it has been found that unemployment among the youth diminishes their social contact and creates segregation from society (Zeng, 2012). Previous studies had already emphasised the stress generation process in which some stressors trigger the occurrence of other stressors (Auerbach et al., 2011; Rudolph, 2008). Similarly, the conflicts with peers for these adolescents are related to the feeling of 'not belonging' to the group in a culture where the '*cuadrilla*' (name for the reference group of peers in the Basque country which has consequences throughout the lifetime of individuals) is one of the most valuable social resources (Gatti, Irazuzta, & De Albeniz, 2005). Therefore, contextualising stressors

historically and culturally is required to comprehend the adolescents' narratives and psychosociological responses.

On the other hand, the sources of stress in one context behave as protectors from stress in another context when they play their role of social supports. Previous studies had already found that this double role also occurs with online social networks (Moreau, Roustit, Chauchard, & Chabrol, 2012) and in adolescents with cancer (Woodgate, 2006).

Social support as a protector to distress

Social support is seen by adolescents as an important protector to distress like the *buffering hypothesis* proposes (Cohen & Wills, 1985). Previous studies have already confirmed this hypothesis in adolescents in quantitative studies (e.g. Brady et al., 2009; Decker, 2007; Malecki & Demaray, 2006; Shorey et al., 2011; Wei et al., 2006; Yang et al., 2010), not being explored in qualitative studies though. The present study supports the role interpersonal relationships have to buffer the impact of stressful events. Adolescents have defined social support by referring to two processes: the help-seeking behaviours and the process of receiving help.

Participants mention seeking support as an important way to cope with stress, consistent with Murray-Harvey and Slee (2007). Adolescents' appraisal of an appropriate source of support is determined by certain conditions: familiarity, friendship, maturity, and trust. Previous research had already shown the existence of certain conditions for the help to be effective, such as the type of aid, specificity of aid, and balanced coordination from other sources of support and young people's mutual aid (Sek-yum Ngai, Ngai, & Cheung, 2009). In the present study, familiarity is regarded as one of the conditions for an effective help, and therefore, informal sources of support such as friends and family are more used than the formal ones (professional help). In the context of physical and mental health needs, previous studies had already found that adolescents seek help first from non-professional providers or family members whom they know or are closer rather than trained medical or social services (Barker, 2007; Lindsey et al., 2006). Friendship or having a good relationship helps adolescents to disclose, and therefore, seek for help in peers for their privileged intimate relationship, like previous studies had shown (Aisenson et al., 2007). The maturity of the sources of support, like in the case of parents or older siblings, is assessed as important condition to seek for help. No matter who is providing the help, however, adolescents value the most trustable. Previous research shows interpersonal trust to be associated with seeking support, which in turn, predicted the likelihood of sharing their experiences with others (Mortenson, 2009). Barker, Olukoya, and Aggleton (2005) had also highlighted how adolescents may ignore help-related information because they consider the source of support unreliable: adolescents rely on their parents for certain needs while not for others.

Gender is another contextual factor that showed different responses in the process of support. In particular, girls tended to be better sources of support because they tend to use more emotional support strategies than boys who use distraction. Previous studies had already found that, when coping with stress, girls are more prone to seek social support (Eschenbeck et al., 2007; Lynch et al., 2007; Murray-Harvey & Slee, 2007; Piko, 2011) than boys who rather try to get distracted by different activities (Gómez-Fraguela et al., 2006).

Emotional support is the most appreciated kind of support for these adolescents, consistent with the existing literature (Griffiths et al., 2011; Vollmann et al., 2010). In particular, empathic responses and being present were the most mentioned. It has been

found that being listened is more valued than receiving actual advice (Barker, 2007; Woodgate, 2006). Giving support has emerged inseparable to the process of receiving support in this study. Adolescents tend to provide the same kind of support that they need to obtain. When describing the kind of support they give to their peers, empathy was the most used strategy, similar to the favourite kind of received support. Furthermore, the adolescents acknowledge the need to shape their helping strategies according to the person's need. There should be a match between the needs of the person and the support provided, according to the *match hypothesis* (Cohen & Wills, 1985); a context-sensitive approach is required.

Among the obstacles that adolescents mentioned at the time of receiving functional support are others overreacting to the situation (often parents) or minimising the problem (often peers). These reasons may explain why sometimes adolescents do not seek for help even when they need it.

In sum, interpersonal relationships play a dual role in the process. Relationships with family, peers, etc. can be a source of stress and, at the same time, a source of support that protects from distress. There are certain conditions that facilitate the process of support to work. Adolescents find it easier to disclose and, therefore, are more likely to seek for help when the source of support is trustable, familiar, mature, approves them, and with whom have a good relationship. However, when others overreact or minimise adolescents' problems they withdraw from seeking help. Emotional support is their preferred type of support while receiving and giving. Nevertheless, adolescents emphasise the importance of matching the person's needs and the type of support provided.

This study presents some limitations. Voluntary participation, not randomised, may represent a limitation in generalising the results. Moreover, dialogical limitations, present in groups settings by peers pressure and social desirability bias, may have prevented participants from openly disclose their experiences.

Despite the limitations, the present study adds to our understanding of the process of stress in adolescents the role of interpersonal relationships. A conceptual understanding of social support has been developed from the analyses of adolescents' narratives that emphasises hindrances and facilitators for help-seeking behaviours, applicable to more adolescents-friendly stress prevention educational programmes as well as clinical interventions. Pivotal components of such programmes should be to provide adolescents with emotional support, to reinforce trust as a key for support, to train them in seeking for help, and to generate mutual support among peers.

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Conflict of interest

There is no conflict of interest in the completion of the present study nor in the publication of this paper.

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Note

1. Quotes were translated into English by bilingual researchers. The gender and the focus group number have been identified in each quote.

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References

- Adewuya, A. O., Ola, B. A., & Adewumi, T. A. (2007). The 12-month prevalence of DSM-IV anxiety disorders among Nigerian secondary school adolescents aged 13–18 years. *Journal of Adolescence, 30*, 1071–1076.
- Aisenson, D. B., Aisenson, G., Batlle, S. M., Legaspi, L. P., Polastri, G. E., & Valenzuela, V. (2007). Concepciones sobre el estudio y el trabajo, apoyo social percibido y actividades de tiempo libre en jóvenes que finalizan la escuela media. *Anuario de Investigaciones, 14*, 71–82.
- Auerbach, R. P., Bigda-Peyton, J. S., Eberhart, N. K., Webb, C. A., & Ho, M. H. R. (2011). Conceptualizing the prospective relationship between social support, stress, and depressive symptoms among adolescents. *Journal of Abnormal Child Psychology, 39*, 475–487.
- Barker, G. (2007). *Adolescents, social support and help-seeking behaviour: An international literature review and programme consultation with recommendations for action*. Geneva: World Health Organization.
- Barker, G., Olukoya, A., & Aggleton, P. (2005). Young people, social support and help-seeking. *International Journal of Adolescent Medicine and Health, 17*, 315–335. doi:10.1515/ijamh.2005.17.4.315.
- Brady, S. S., Dolcini, M. M., Harper, G. W., & Pollack, L. M. (2009). Supportive friendships moderate the association between stressful life events and sexual risk taking among African American adolescents. *Health Psychology, 28*, 238–248. doi:10.1037/a0013240.
- Burton, E., Stice, E., & Seeley, J. R. (2004). A prospective test of the stress-buffering model of depression in adolescent girls: No support once again. *Journal of Consulting and Clinical Psychology, 72*, 689–697.
- Byrne, D. G., Davenport, S. C., & Mazanov, J. (2007). Profiles of adolescent stress: The development of the adolescent stress questionnaire (ASQ). *Journal of Adolescence, 30*, 393–416.
- Calvete, E., Orue, I., & Hankin, B. L. (2012). Depression in adolescents: Reciprocal influences between depression, stress and cognitive vulnerabilities. *European Psychiatry, 27*, 1–12. doi:10.1016/S0924-9338(12)74438-3.
- Calvete, E., Villardón, L., & Estevez, A. (2008). Attributional style and depressive symptoms in adolescents: An examination of the role of various indicators of cognitive vulnerability. *Behaviour Research and Therapy, 46*, 944–953.
- Cattley, G. (2004). The impact of teacher-parent-peer support on students' well-being and adjustment to the middle years of schooling. *International Journal of Adolescence and Youth, 11*, 269–282.
- Cava, M. J., Murgui, S., & Musitu, G. (2008). Diferencias en factores de protección del consumo de sustancias en la adolescencia temprana y media. *Psicothema, 20*, 389–395.

- Cheng, S. T., & Chan, A. (2004). The multidimensional scale of perceived social support: Dimensionality and age and gender differences in adolescents. *Personality and Individual Differences, 37*, 1359–1369.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin, 98*, 310–357.
- De Coster, S. (2005). Depression and law violation: Gendered responses to gendered stresses. *Sociological Perspectives, 48*, 155–187.
- Decker, C. L. (2007). Social support and adolescent cancer survivors: A review of the literature. *Psycho-Oncology, 16*, 1–11. doi:10.1002/pon.1073.
- Demaray, M. K., Malecki, C. K., Davidson, L. M., Hodgson, K. K., & Rebus, P. J. (2005). The relationship between social support and student adjustment: A longitudinal analysis. *Psychology in the Schools, 42*, 691–706.
- Dingfelder, H. E., Jaffee, S. R., & Mandell, D. S. (2010). The impact of social support on depressive symptoms among adolescents in the child welfare system: A propensity score analysis. *Children and Youth Services Review, 32*, 1255–1261.
- Ellonen, N., Kääriäinen, J., & Autio, V. (2008). Adolescent depression and school social support: A multilevel analysis of a Finnish sample. *Journal of Community Psychology, 36*, 552–567.
- Esbjorn, B. H., Hoeyer, M., Dyrborg, J., Leth, I., & Kendall, P. C. (2010). Prevalence and co-morbidity among anxiety disorders in a national cohort of psychiatrically referred children and adolescents. *Journal of Anxiety Disorders, 24*, 866–872. doi:10.1016/j.janxdis.2010.06.009.
- Eschenbeck, H., Kohlmann, C. W., & Lohaus, A. (2007). Gender differences in coping strategies in children and adolescents. *Journal of Individual Differences, 28*, 18–26. doi:10.1027/1614-0001.28.1.18.
- Galaif, E. R., Sussman, S., Chou, C. P., & Wills, T. A. (2003). Longitudinal relations among depression, stress, and coping in high risk youth. *Journal of Youth and Adolescence, 32*, 243–258.
- Gatti, C., Irazuzta, I., & De Albeniz, I. M. (2005). *Basque society: Structures, institutions, and contemporary life*. Reno, NV: Center for Basque Studies.
- Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. New York: Aldine de Gruyter.
- Gómez-Fraguela, J. A., Luengo-Martín, Á., Romero-Triñanes, E., Villar-Torres, P., & Sobral-Fernández, J. (2006). Estrategias de afrontamiento en el inicio de la adolescencia y su relación con el consumo de drogas y la conducta problemática. *International Journal of Clinical and Health Psychology, 3*, 581–597.
- Graziano, F., Bonino, S., & Cattelino, E. (2009). Links between maternal and paternal support, depressive feelings and social and academic self-efficacy in adolescence. *European Journal of Developmental Psychology, 6*, 241–257.
- Griffiths, K. M., Crisp, D. A., Barney, L., & Reid, R. (2011). Seeking help for depression from family and friends: A qualitative analysis of perceived advantages and disadvantages. *BMC Psychiatry, 11*(1), 196.
- Hankin, B. L. (2008). Cognitive vulnerability-stress model of depression during adolescence: Investigating depressive symptom specificity in a multi-wave prospective study. *Journal of Abnormal Child Psychology, 36*, 999–1014.
- Hankin, B. L., Mermelstein, R., & Roesch, L. (2007). Sex differences in adolescent depression: Stress exposure and reactivity models. *Child development, 78*, 279–295.
- Heerde, J. A. (2013). Temporal patterns and psychosocial consequences of adolescent help-seeking behaviour. *International Journal of Adolescence and Youth*. Advance online publication. doi:10.1080/02673843.2013.767744.
- Hight, N. J., Hickie, I. B., & Davenport, T. A. (2002). Monitoring awareness of and attitudes to depression in Australia. *Medical Journal of Australia, 176*, 63.
- Jose, P. E., & Killburg, D. F. (2007). Stress and coping in Japanese children and adolescents. *Anxiety, Stress & Coping, 20*, 283–298. doi:10.1080/10615800701272519.
- Kerr, D. C. R., Preuss, L. J., & King, C. A. (2006). Suicidal adolescents' social support from family and peers: Gender-specific associations with psychopathology. *Journal of Abnormal Child Psychology, 34*, 99–110.
- Kort-Butler, L. A. (2009). Coping styles and sex differences in depressive symptoms and delinquent behavior. *Journal of Youth and Adolescence, 38*, 122–136.

- LaRue, D. E., & Herrman, J. W. (2008). Adolescent stress through the eyes of high-risk teens. *Pediatric Nursing, 34*, 375–380.
- Lin, N., Dean, A., & Ensel, W. M. (1986). *Social support, life events, and depression*. New York: Academic Press.
- Lindsey, M. A., Korr, W. S., Broitman, M., Bone, L., Green, A., & Leaf, P. J. (2006). Help-seeking behaviors and depression among African American adolescent boys. *Social Work Research, 51*, 49–58.
- Lorence, B., Jiménez, L., & Sánchez, J. (2009). Un análisis de los sucesos vitales estresantes experimentados por adolescentes que crecen en familias usuarias de los servicios sociales comunitarios. *Portularia: Revista de Trabajo Social, 9*, 115–126.
- Lynch, A. M., Kashikar-Zuck, S., Goldschneider, K. R., & Jones, B. A. (2007). Sex and age differences in coping styles among children with chronic pain. *Journal of Pain & Symptom Management, 33*, 208–216. doi:10.1016/j.jpainsymman.2006.07.014.
- Malecki, C. K., & Demaray, M. K. (2006). Social support as a buffer in the relationship between socioeconomic status and academic performance. *School Psychology Quarterly, 21*, 375–395.
- Mann, R. E., Paglia-Boak, A., Adlaf, E. M., Beitchman, J., Wolfe, D., Wekerle, C., . . . , Rehm, J. (2011). Estimating the prevalence of anxiety and mood disorders in an adolescent general population: An evaluation of the GHQ12. *International Journal of Mental Health and Addiction, 9*, 410–420.
- Meadows, S. O., Brown, J. S., & Elder, G. H. (2006). Depressive symptoms, stress, and support: Gendered trajectories from adolescence to young adulthood. *Journal of Youth and Adolescence, 35*, 89–99.
- Mezulis, A. H., Funasaki, K. S., Charbonneau, A. M., & Hyde, J. S. (2010). Gender differences in the cognitive vulnerability-stress model of depression in the transition to adolescence. *Cognitive Therapy and Research, 34*, 501–513.
- Moksnes, U. K., Moljord, I. E. O., Espnes, G. A., & Byrne, D. G. (2010). The association between stress and emotional states in adolescents: The role of gender and self-esteem. *Personality and Individual Differences, 49*, 430–435. doi:10.1016/j.paid.2010.04.012.
- Moreau, A., Roustit, O., Chauchard, E., & Chabrol, H. (2012). Facebook use, family and peer issues among adolescents: A qualitative study. *Neuropsychiatrie de l'enfance & de l'adolescence, 60*, 429–434. doi:10.1016/j.neurenf.2012.05.530.
- Mortenson, S. T. (2009). Interpersonal trust and social skills in seeking social support among Chinese and Americans. *Communication Research, 36*, 32–53.
- Mosavel, M., Ahmed, R., Ports, K. A., & Simon, C. (2013). South African, urban youth narratives: Resilience within community. *International Journal of Adolescence and Youth*. Advance online publication. doi:10.1080/02673843.2013.785439.
- Murray-Harvey, R., & Slee, P. T. (2007). Supportive and stressful relationships with teachers, peers and family and their influence on students' social/emotional and academic experience of school. *Australian Journal of Guidance and Counselling, 17*, 126–147.
- Musitu Ochoa, G., Martínez Ferrer, B., & Murgui Pérez, S. (2006). Conflicto marital, apoyo parental y ajuste escolar en adolescentes. *Anuario de psicología, 37*, 247–258.
- Ngai, N.-P., & Cheung, C.-K. (2000). Family stress on adolescents in Hong Kong and the mainland of China. *International Journal of Adolescence and Youth, 8*, 183–206.
- Pettit, J. W., Lewinsohn, P. M., Seeley, J. R., Roberts, R. E., & Yaroslavsky, I. (2010). Developmental relations between depressive symptoms, minor hassles, and major events from adolescence through age 30 years. *Journal of Abnormal Psychology, 119*, 811–824.
- Piko, B. (2011). Gender differences and similarities in adolescents' ways of coping. *Psychological Record, 51*, 223–236.
- Rask, K., Kaunonen, M., & Paunonen-Ilmonen, M. (2002). Adolescent coping with grief after the death of a loved one. *International Journal of Nursing Practice, 8*, 137–142.
- Rose, A. J., & Rudolph, K. D. (2006). A review of sex differences in peer relationship processes: Potential trade-offs for the emotional and behavioral development of girls and boys. *Psychological Bulletin, 132*, 98–131.
- Rudolph, K. D. (2008). Developmental influences on interpersonal stress generation in depressed youth. *Journal of Abnormal Psychology, 117*, 673–679.
- Rueger, S. Y., Malecki, C. K., & Demaray, M. K. (2008). Gender differences in the relationship between perceived social support and student adjustment during early adolescence. *School Psychology Quarterly, 23*, 496–514.

- Schmitz, A., Vierhaus, M., & Lohaus, A. (2012). Sex differences and sex-related expectancies regarding the use of coping strategies and their relations to adolescents' problem behavior. *Zeitschrift für Gesundheitspsychologie, 20*, 13–21. doi:10.1026/0943-8149/a000060.
- Sek-yum Ngai, S., Ngai, N.-p., & Cheung, C.-k. (2009). Mutual aid among young people with emotional and behavioral problems: A proposed theoretical framework. *International Journal of Adolescence and Youth, 14*, 353–365.
- Shih, J. H., Eberhart, N. K., Hammen, C., & Brennan, P. A. (2006). Differential exposure and reactivity to interpersonal stress predict sex differences in adolescent depression. *Journal of Clinical Child and Adolescent Psychology, 35*, 103–115. doi:10.1207/s15374424jccp3501_9.
- Shorey, R. C., Rhatigan, D. I., Fite, P. J., & Stuart, G. L. (2011). Dating violence victimization and alcohol problems: An examination of the stress-buffering hypothesis for perceived support. *Partner Abuse, 2*, 31–45. doi:10.1891/1946-6560.2.1.31.
- Shulman, E. P., & Cauffman, E. (2011). Coping while incarcerated: A study of male juvenile offenders. *Journal of Research on Adolescence, 21*, 818–826. doi:10.1111/j.1532-7795.2011.00740.x.
- Somers, C. L., Owens, D., & Piliawsky, M. (2008). Individual and social factors related to urban African American adolescents' school performance. *High School Journal, 91*, 1–11.
- Stice, E., Ragan, J., & Randall, P. (2004). Prospective relations between social support and depression: Differential direction of effects for parent and peer support? *Journal of Abnormal Psychology, 113*, 155–159.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (2nd ed.). Thousand Oaks, CA: Sage.
- Thoits, P. A. (1986). Social support as coping assistance. *Journal of Consulting and Clinical Psychology, 54*, 416–423.
- Van Oort, F. V. A., Verhulst, F. C., Ormel, J., & Huizink, A. (2010). Prospective community study of family stress and anxiety in (pre)adolescents: The TRAILS study. *European Child and Adolescent Psychiatry, 19*, 483–491. doi:10.1007/s00787-009-0058-z.
- Vollmann, M., Scharloo, M., Salewski, C., Dienst, A., Schonauer, K., & Renner, B. (2010). Illness representations of depression and perceptions of the helpfulness of social support: Comparing depressed and never-depressed persons. *Journal of Affective Disorders, 125*, 213–220.
- Wadsworth, M. E., & Compas, B. E. (2002). Coping with family conflict and economic strain: The adolescent perspective. *Journal of Research on Adolescence, 12*, 243–274.
- Wei, S. G., Zhang, Y. J., & Xi, M. J. (2006). The functioning mechanisms of social support and self-efficacy between stress and depression. *Chinese Journal of Clinical Psychology, 14*, 300.
- Woodgate, R. L. (2006). The importance of being there: Perspectives of social support by adolescents with cancer. *Journal of Pediatric Oncology Nursing, 23*, 122–134. doi:10.1177/1043454206287396.
- Yang, J., Yao, S., Zhu, X., Zhang, C., Ling, Y., Abela, J. R. Z., . . . , McWhinnie, C. (2010). The impact of stress on depressive symptoms is moderated by social support in Chinese adolescents with subthreshold depression: A multi-wave longitudinal study. *Journal of Affective Disorders, 127*, 113–121. doi:10.1016/j.jad.2010.04.023.
- Zeng, Q. (2012). Youth unemployment and the risk of social relationship exclusion: A qualitative study in a Chinese context. *International Journal of Adolescence and Youth, 17*, 85–94.