Advances in E-Therapy and Psychological Treatment: Perceptions on the Introduction of Online Psychotherapy in Professional Practice Among Greek Psychologists

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Abstract: Though still often occurring in experimental settings, e-therapy is moving forward and will eventually become mainstream practice in Europe. Prominent promoters of the practice claim that technology is surmounting such major barriers to mental health such as distance, scheduling, stigma and cost. Before such prediction can come true, supporters will have to overcome significant clinical, ethical and administrative issues as well as the skepticism of many of their own professional peers. This study investigates how counseling psychologists in Greece perceive the use information technology and e-therapy in their professional practices. A self-administered survey was used as the instrument of observation for a sample of 64 practicing Greek counseling psychologists. Frequency distributions were calculated by using the SPSS software package. In parallel, the study presents the latest advances in the use of e-therapy and online psychotherapy through a review of the existing literature on this topic.

Key words: E-therapy; online psychotherapy, psychological treatment, Greek psychologists

1. Introduction
E-therapy normally refers to the provision of mental health services online (through the internet). Related terms include cybertherapy, teletherapy, internet counseling, online counseling, and so forth. With this relatively new form of treatment, there is considerable debate among mental health practitioners about the efficacy of e-therapy, whether comparisons to traditional psychotherapy are valid, and which types of patients may or may not be treated through e-therapy (Gingrich, 2004). Sixty million people searched the Web for health care information in 1998 (Maheu, 2000). Online support and discussion groups on every disease and health care topic have proliferated rapidly. The advantages of e-therapy enable it to fill some of the key needs of this growing online population. John Grohol, Psy.D., past president of the International Society for Mental Health Online (ISMHO), told the online journal New Therapist (2000) that he expects...
the number of e-therapy providers to grow from the current 300 to over 5,000 by 2005. Despite various reservations or biases, e-therapy will significantly impact the practice of psychiatrists and other mental health care providers in the near future.

Will the impact of e-therapy on psychiatrists be positive? There are many reasons to believe that the impact will be beneficial to the traditional practice of psychiatry. *Traditional* is used here to refer to face-to-face or in-person psychotherapy in contrast to the four primary methods of online counseling—e-mail question-and-answer, online chat, Web-based messaging and video-conferencing. Although not necessarily utilizing Internet technology, counseling via telephone is often included with e-therapy due in part to the rapid convergence of telecommunications and computer technologies. As technology rapidly develops, newer forms of communication are continually emerging. Regardless of technological advances, it is unlikely that traditional psychotherapy will ever be replaced in whole or in significant part by e-therapy. Rather, e-therapy should be regarded as a supplemental delivery model for mental health care services or as a means of transitioning a patient to traditional psychotherapy (Grohl, 2000).

2. Advantages

There is no strong evidence that patients currently receiving traditional psychotherapy will want to switch to e-therapy. Preliminary studies indicate that e-therapy will expand the existing market opportunity for psychotherapy and counseling by making services available to populations that currently have limited or no access to them. For instance, Candida Graham, M.D. (2000), a psychiatrist at Maudsley Hospital in London, and colleagues surveyed 113 patients with obsessive-compulsive disorder and phobic anxiety disorders and found that 91% preferred receiving services via interactive voice response, the Internet or home computer over face-to-face treatment. This trend obviously will have substantial benefits for both patients and practitioners.

E-therapy makes it possible to service the millions of people who could benefit from therapy but would otherwise not participate, including:

- people ambivalent about treatment and its benefits;
- people with time constraints such as salespeople, executives and other professionals; and
- people uncomfortable with the stress or stigma of traditional counseling.

Studies investigating the long-term effectiveness of e-therapy for the treatment of specific disorders or conditions are currently lacking. As a relatively new treatment modality, e-therapy has not yet progressed to the status of an empirically validated therapeutic medium. There is a need for additional research into the risks and benefits associated with e-therapy in the treatment of various conditions. Despite its novelty, e-therapy has many enthusiastic proponents, among them satisfied patients (Benderley, 2005).

In addition to increased accessibility and convenience, the cost of interactions conducted via telephone, e-mail and chat are arguably lower for patients (or should be) given the provider’s lessened need for office space and other overhead. Results of studies using telepsychiatry and interactive television show comparable efficacy to psychotherapy (Kennedy & Yellowlees, 2000; Zaylor, 1999), and future studies should address these issues with e-therapy as well.

E-therapy also decreases the typical inhibition of patients in a face-to-face session to fully disclose information and immediately get to the heart of the matter. Grohol (YEAR?) stated: "People's communications on the [Internet] are more disinhibited than they are in real life. Clients get to the point in e-therapy in the first correspondence". This could also mean that less time would be spent on trust issues and side-tracking, denial, deflection, and so on, resulting in further cost reductions for both patients and providers (Kraus et al., 2004).

3. Obstacles

Issues surrounding e-therapy, such as patient confidentiality, licensing and out-of-state services, patient evaluation and diagnosis, malpractice coverage, and insurance reimbursement are legitimate concerns. State regulatory agencies and professional organizations are struggling to agree on standard ethical and practice guidelines. Nonetheless, progress has been made. The American Counseling Association, the American Psychological Association and the National Board of Certified Counselors have each released codes of ethical conduct for e-therapy that emphasize various
concerns. (The American Psychiatric Association has no formal position at this time—Ed.) In addition, the ISMHO, a professional organization for online therapists, has released an in-depth statement of ethics (ISMHO, 2000). Only those patients who have a high degree of literacy, computer literacy, and the financial means to acquire the necessary hardware and software will be able to benefit from e-therapy services. Additionally, the wealthier and more educated a client, the more he stands to gain from the service. As an example, in video-conferencing, a crucial factor in determining quality of service will be the available bandwidth. A client who has access to (expensive) cable modem service will receive and transmit data at a faster rate than will a client with a less-expensive dial-up connection. Slow data transmission results in lags and gaps in video streaming. This affects the availability of non-verbal clues to the therapist, among other variables (Elleven & Allen, 2004).

There are numerous reasons some physicians object to e-therapy. For some, the technology is a barrier - learning how to use encryption software may seem tedious and overwhelming, for example. Others are wary of malpractice liability. Some feel that e-therapy is not a valid form of mental health service and that psychotherapy must be done in a traditional face-to-face setting. Despite the growing number of patients who prefer online counseling, many mental health professionals are concerned that e-therapy may not be the best treatment for a patient (Fenichel et al., 2002).

Many of these issues will be resolved as technology improves. The convergence of telecommunications, computers and wireless technologies will soon result in interactive video conferencing technologies that come full circle to the traditional practice of psychotherapy. Low-cost video conferencing solutions are only a few short years away and will empower psychiatrists to fully interact with patients (Fenichel et al., 2002).

4. Security, Patient Confidentiality and Data Protection Issues
Internet communications are not secure unless additional provisions are made by the psychiatrist and patient. Technical solutions are available to allay most confidentiality concerns, however. Providers can use secure Web-based messaging systems that replace regular e-mail and provide secure Web pages similar to those used by banks and other at-risk companies. Such Web sites utilize data security and encryption measures to protect confidentiality. Encryption of regular e-mail is also available through formats such as PGP software, provided that both patients and providers enable their computers. PGP and other encryption software are readily available to the public at a reasonable cost (Elleven & Allen, 2004). Like most forms of electronic communication, e-therapy carries numerous security risks. Hackers, viruses, spyware, interception of messages by a patient’s family members, and other threats may pose significant concerns for the e-therapist and e-therapy clients. Fortunately, there are technological measures that can increase the security of e-therapy communications. Numerous software packages are available to increase security in computer applications. Some of the options available are antivirus software, firewalls, passwords, encryption software, antispy software and Norton Internet Security (American Psychiatric Association, 2004).

5. Research Methodology and Results
Existing research (Benderley, 2005) that was conducted on 400 clients of online therapists identified that 90% of the respondents considered online sessions to be helpful in their overall treatment. Further evidence (Oravec, 2005; Elleven, 2004; Carlbring & Andersson, 2006) suggest that a significant percentage of adults with Internet access go online to find mental health information and participate in online counseling sessions. To study the perceptions of Greek therapists with respect to the use of technology and Internet in particular a self-administered survey was developed and used as the instrument of observation for a sample of 64 practicing Greek psychologists and counselors. Results were obtained and analyzed using SPSS Version 14. The primary focus of this research was to identify trends and perception so
simple frequency calculations were performed.

>From the analysis 84% of the participants reported that access Internet from home while a 58% of them reported that they were considering themselves experienced enough with the use of the Internet (Figure 1). The percentages of therapists that felt comfortable with the use of technology were evenly split but there was a clear preference (Figure 2) for the use of technology for therapy. It is evident from the above that although technology creates certain insecurities with respect to its manipulation its perceived potential for practicing counseling is very positive. Further 95% of the respondents believed that they would use IT only for specific conditions like depression, eating disorders, substance abuse, anxiety and CBT while a 33% of them felt that the e-therapy can be harmful for treating certain psychological conditions. Further research should be carried out to identify the conditions that would not be perceptive to e-therapy.

A great percentage of the respondents (Figure 3) were very supportive of using the Internet for networking with other therapists while only 33% of them believed that e-therapy might pose a threat to privacy and confidentiality. While most of the indicators indicated a positive inclination towards the use of technology, 89% of the respondents fear about the future should e-therapy become part of the mainstream of their profession. This result is very common indicator that while technology surrounds itself with an aura of amazement and magic it hasn’t yet become a mainstream in our daily lives so it carries with it the fear of the unknown.

6. Conclusions

The perceptions of Greek therapists with respect to the use of the Internet as a means for psychotherapy was studied through a self-administered survey. Overall, despite potential difficulties with the use of technology, there is a positive attitude among professionals towards its use for practicing counseling. It is of interest to note however that counselors differentiate on the efficacy of e-therapy for various disorders. More precisely, 95% of the respondents believe that certain conditions, such as depression and anxiety, may be more conducive than others for an electronic form of psychotherapy. What psychological conditions e-therapy may be harmful to is not yet researched. In addition, despite the positive overall inclination, there is an expressed fear for the future should e-therapy become mainstream in the profession.

E-therapy is changing the way that the behavioral health care community interacts. If psychiatrists and other providers do not embrace these changes, the e-therapy revolution will be a missed opportunity to enlarge and enhance an existing practice and to reach out to thousands who otherwise lack access to needed mental health services. Practitioners are encouraged to learn as much as possible about the implications of e-therapy on their practice and to become an informed voice in shaping responsible therapy for the 21st century.

Given the rapid increase in the popularity of the internet for obtaining information about mental health, a growing number of people will become aware of the availability of online counseling and e-therapy services. As knowledge of e-therapy services becomes widespread, the demand for this type of counseling will grow. There are already numerous practitioners of e-therapy on the web, and this number will continue to increase. As the use of e-therapy becomes more widespread, new research studies will surface. The results of these research projects, in conjunction with legal decisions and evolving case law, will formulate the standard practices and procedures in the growing field.
7. Recommendations for Future Research

E-therapy has recently become an option to psychotherapy clients but it is still in an experimental stage. Much research is required before its efficacy can be established. Like with any form of therapy, some conditions may be more manageable through e-therapy than others. For instance, agoraphobics may start off with therapy over the Internet before they are adequately prepared to face their fears and possibly move to a more traditional form of face-to-face psychotherapy. Such issues as what conditions are more perceptive to e-therapy, what the costs and benefits are associated with this form of therapy in the treatment of various conditions as well as percentages of patient transition from one type of therapy to the other should be subject to further investigation.

Current research (e.g., Kraus & Stricker, 2004; Carlbring & Andersson, 2006) has shed some light on the use of Internet for counseling. However, results should be replicated using diverse populations. Cross cultural differences are evident in traditional forms of psychotherapy and should be further investigated in terms of e-therapy as well. The current investigation is an effort to reveal Greek counselors’ perceptions of the use of technology in their profession. It should be followed up using a larger sample and controlling for age. It can be argued that perceptions of Internet use are more positive amongst younger professionals who have been exposed and feel more comfortable with the use of technology in general.

References:


