

Researching online counselling and psychotherapy: The past, the present and the future

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Abstract

This paper reflects upon the history of online counselling and psychotherapy research. It provides a reflection upon the growing body of research in this field and discusses the impact of the recent global COVID-19 pandemic upon it. It specifically argues that the pandemic has been an evolutionary catalyst for developments in online therapy. Therapeutic practices, and attitudes towards them, have changed in ways that will alter the shape and form of therapies in the future. As a consequence, research into online therapeutic work needs to be responsive and adapt to this changing world. Counselling and psychotherapy researchers therefore have to situate themselves in a way that allows them to keep one foot in the present and one foot in the future to stay abreast of technological developments. There may be a reluctance to do so from some areas in the therapeutic profession, but their presence might prove vital in ensuring that ethical sensitivity, which acknowledges and values the complexity of the human experience, remains at the foreground of psychological support.

KEYWORDS

digital mental health, online counselling, e-therapy, telepsychology, COVID-19

1 | THE PAST: AN UNCOMFORTABLE UNION BUT AN AREA OF GREAT POTENTIAL

Using technology as a therapeutic tool is by no means new. During the 1960s, Weizenbaum and his colleagues created a computer programme (ELIZA—which is freely available online for those curious to try it out) that used language rules based upon client-centred counselling principles (Weizenbaum, 1966). Despite the programme's rudimentary nature, Weizenbaum found that participants in his studies engaged in a surprisingly rich way with it. Such interest in the interface between therapy and technology, although not mainstream, has continued throughout the subsequent decades. Research communities have consistently considered how technology might be used to

enhance therapeutic practice or, at least, to make it more efficient. Making use of the Internet as a means of offering therapy has been an inevitable part of this process.

Many developments have occurred in the field of online counselling and psychotherapy. Given the way that access and usage of the Internet has bloomed since the 1990s, a majority of the online therapeutic developments occurred after this date. For instance, the first reported paid therapy session is recorded in 1995 (Anthony, 2003a). Since then, an abundance of research has been completed considering who is seeking support via this means (e.g. Hanley et al., 2017; King et al., 2006), how individuals (therapists and clients) experience such services and rate the quality of the relationships they enter into (e.g. Dowling & Rickwood, 2014; Hanley & Reynolds, 2009), and how effective and efficacious such approaches are (e.g. Barak

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et al., 2008; Sefi & Hanley, 2012). Whereas special editions of counselling and psychotherapy research journals were necessary to collate papers around this niche practice in the past (e.g. the British journals, *The British Journal of Guidance and Counselling*, *Counselling and Psychotherapy Research* and *Counselling Psychology Review*, have all produced special editions on the topic), journals have now emerged in the arena of cyberpsychology and digital mental health that could arguably provide natural homes for collating such work. These developments highlight some of the sea change towards online practices.

Despite new developments in the field, historically there has been considerable reticence and reluctance from some areas of the profession to engage in online practices. Those in the counselling and psychotherapy professions have raised concerns about the technology being sufficiently advanced to offer therapy (e.g. Baker & Ray, 2011; Rochlen et al., 2004), that the technology might only allow individuals to create surface-level relationships (e.g. Robson & Robson, 1998; Williams et al., 2009) and ethical concerns related to managing risk appropriately (e.g. Hanley, 2006; Hoffman, 2020). These have been some of the core issues that have echoed time and time again within both the theoretical and empirical literature on the subject. In more recent years, however, such views appear to be subsiding. As noted above, quantitative and qualitative research has demonstrated that many individuals appear to benefit from online therapy. Further, although there is still much caution from therapists who work in relational ways to such developments, with some noting it as a 'temporary' solution during the COVID-19 social distancing restrictions (Luiggi-Hernández & Rivera-Amador, 2020), there are signs that others are beginning to acknowledge that online therapy is here to stay. For instance, relationally focused existential psychotherapists, such as Kirk Schnieder, have provided balanced reflections upon the role of technology going forward (Schneider, 2019).

Personally, I have been involved in completing a series of projects examining online therapeutic work with young people. At the turn of the century, I stumbled into the arena as a consequence of receiving funding to develop a digital service for a youth charity that I worked for. Additionally, further demonstrating the attractive nature of the topic, I received funding to complete a PhD focusing upon the topic from the Economic and Social Research Council within the United Kingdom. At the outset of my studies, I had only been trained to develop therapeutic relationships face to face. I was interested in rich human-to-human encounters and incredibly sceptical that relationships of a sufficient quality to create meaningful therapeutic change (as I conceptualised it) could be created online. The experience of meeting and interviewing young people about their views of accessing and having online therapy shifted my viewpoint, however. Individuals highlighted the importance of the Internet as a means of seeking out support. For instance, one young person I interviewed said, 'oh yea part my life would never been discussed if was not for online work' (Hanley, 2012, p. 40). Reading comments, such as this one, altered my perception of online work and highlighted to me the importance of having therapists engage with these new ways of offering therapy.

Since these initial projects, looking at online working, I have been involved in a series of systematic reviews examining the literature around online therapeutic practices. This has included pulling together studies examining therapeutic work with young people (Ersahin & Hanley, 2017), higher education students (Hanley & Wyatt, 2020) and the literature around the way that young people make use of online mental health and well-being forums (Hanley et al., 2019). Each of these pieces has striking similarities. They highlight that individuals are keen to access support online, that they do experience them positively and that the technology often affords additional advantages, such as enabling individuals to access support anonymously. Further, although negative elements are acknowledged, such as the technology failing or the limitations of communicating at a distance, those accessing support online often believe the trade-offs are worth it. These sentiments resonate throughout the research literature examining online therapy.

2 | THE PRESENT: COVID-19 AS AN EVOLUTIONARY CATALYST, FACE-TO-FACE EQUIVALENTS AND POSITIVE VIRTUAL ECOSYSTEMS

This paper was written at the tail end of 2020. At this point in time, the world is hoping that the stranglehold that the COVID-19 pandemic is having on some countries is coming to an end. In response to the current situation, many therapeutic professionals have found it necessary to adapt the services that they offer and move online. The necessity to do this, predominantly so that individuals can keep accessing support and therapists can keep offering it, has led individuals to view online therapeutic work in a vastly different light. Anecdotally, numerous professionals have shifted their view of online working from one that was quite negative to one that acknowledges the potential in such delivery. This is not to say that there is a momentous shift to move away from face-to-face services, by no means, but there does appear to be a thawing towards such a way of working that acknowledges the potential of offering services online.

It is important to acknowledge that the shift in mindset noted above has been scaffolded by the work of numerous individuals and groups who, despite its lack of mainstream adoption, have remained interested in online counselling and psychotherapy. As such, the developments of professionals and researchers working in this arena have provided an important foundation for the work that has been thrust upon many during the pandemic. As a consequence, once the pandemic is behind us, the world of therapy will undoubtedly remain changed. Attitudes towards online working will have shifted, and therapeutic practices will, most likely, retain elements of online delivery. The COVID-19 crisis will have sped up this process and might therefore be viewed as an 'evolutionary catalyst' for developments in online counselling and psychotherapy.

Despite the recent thawing of the negative views towards online therapy, it is notable that the shift typically relates to therapeutic work that tangibly reflects that delivered face to face. Many

individuals appear to have felt comfortable transplanting their services online, but do not use technology to complement their work. For numerous years, such potential has been flagged (e.g. Rochlen et al., 2004), but developments in everyday practice have been limited. Computer scientists and therapeutic researchers are, however, starting to consider how technology might replace and complement face-to-face support. Computerised therapy, particularly computerised cognitive behavioural therapy (cCBT), has been rigorously researched and is currently recommended as a supportive tool for a number of common mental health difficulties (NICE, 2006). More recently, consideration has also been given to the way that complex online environments might work as systemic units. Similar to the way that phone companies sell a variety of their services as 'bundles', therapists might start to view their work in a similar light. Such a move does require the adoption of more of a social psychology lens, however. For example, in contrast to the commonplace focus that many researchers place upon the reduction of pathology, the online counselling and support service Kooth, who have an underpinning in humanistic psychology principles, have described their online resource as a 'positive virtual ecosystem' (Hanley et al., 2019). This term reflects the aim (i) to create a safe online space for service users to learn about themselves, and (ii) to acknowledge the importance of the interaction between multiple resources such as online forums, tailored information and contact with online professionals (including counsellors and psychotherapists). Such a position acknowledges that therapy does not occur in isolation and highlights the importance of the interaction between sources being offered. It emphasises the need for spaces that provide trustworthy credible support, unhampered by 'alternative facts' or 'fake news'. Such systemic thinking arguably captures some of the complexity in real-world therapeutic encounters, but has received little attention in the literature to date.

Research needs to remain at the forefront of therapeutic developments to help inform and guide professionals in the work that they engage in. The next section considers some of the areas for development on the horizon.

3 | THE FUTURE: UNKNOWN TECHNOLOGIES, ARTIFICIALLY INTELLIGENT THERAPISTS AND BLENDED MENTAL HEALTH AND WELL-BEING ECOSYSTEMS

Going forward, it is difficult to predict how the therapeutic world will be impacted by technological advances. There will be developments that continue the trend of replicating face-to-face provision online. Researchers cannot stand still, however. Due to the speed of technological change, as soon as findings are published, it is likely that they are already beginning to show their age. Even core terms have changed their meanings as technology has changed. For instance, the term 'online therapy' typically referred to text-based

interventions during the 2000s (e.g. Anthony & Goss, 2009), while currently, it more commonly refers to therapy conducted through videoconferencing software. As a consequence of these technological developments, the near future is likely to see the growth of virtual reality headsets as a common way of offering therapy. Beyond this, conversations appear to take the form of science fiction, but, as with many advances in technology, they will soon become science fact.

In the longer term, we arguably face the greater and more complex issue of considering how new developments (inventions, if you do not see them as developments) might be incorporated into a therapeutic ecosystem. New apps are being developed weekly, and the use of artificial intelligence (AI) has huge potential to transform the therapies of the future. Inroads into using such software are at their rudimentary beginnings, but this will evolve at speed. At a conference in 2015, Professor Stephen Hawking said:

Computers are likely to overtake humans in intelligence at some point in the next 100 years. When that happens, we will need to make sure the computers have goals aligned with ours (Hawking, 2015)

One hundred years may seem a long way away off, but, given that therapy itself is not much older than 100 years as a profession, it is easy to see how much things can change in that time. With this in mind, I believe that counselling and psychotherapy researchers need to be involved in supporting the development of technology that is going to be used to offer automated support. The appetite for such resources will grow, and technology companies will start to develop them. As an example, I am currently involved in a project working alongside a technology company using AI to examine voice patterns during telephone calls to identify specific vulnerability indicators. The tool being created is currently relatively basic, although it can already identify a number of key features relatively well, but it will evolve and develop at a fast pace. By being involved in such projects, therapists and therapy researchers can help ensure that ethical sensitivity, which acknowledges and values the complexity of the human experience, remains at the foreground of psychological support (i.e. 'to make sure the computers have goals aligned with ours'). Without such a voice, technological developments targeted at people seeking support run the risk of being guided by alternative goals, or without due consideration of the impact upon the individuals they ultimately hope to support.

As new tools develop, the ecosystem of mental health and well-being resources will expand. Face-to-face and virtual services are likely to blur, and the technologies that we see as advanced now will either become so commonplace that we forget that they exist (Adams, 1999), or they will get abandoned in favour of other technologies. Therapists are increasingly likely to see themselves having to blend services offered by humans with artificially intelligent counterparts ('blended mental health and well-being ecosystems'). Just as education is now supplemented by technology, therapy is likely to follow suit. Counselling and psychotherapy researchers therefore

need to be at the forefront of such advances so as to use their knowledge to create resources fit for humankind. Whereas supporting the development of approaches that echo work offered face to face has been incredibly important up until now, further consideration of how technology might be embedded into day-to-day practices in the future is much needed.

4 | CONCLUSION

Online therapy is here to stay. It is not without its challenges, but it also brings distinct opportunities. This has been conclusively shown during the COVID-19 pandemic, but has also been evident in the steady evolution of online services over the past decades. Going forward, it is important for counselling and psychotherapy researchers to continue investigating the impact of new online technologies upon the work that therapists enter into. This is likely to take therapy into additional arenas that feel uncomfortable and, potentially, reconceptualise the way that therapists of the future work. This raises numerous concerns and is without doubt daunting for a young profession. It is my view, however, that it is better to be proactively involved in these changes, rather than have them creep up on the profession and be surprised by an unchangeable tide.

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