

Online psychotherapy during COVID-19 pandemic – experiences of psychotherapists. Research review

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Abstract

In 2019, mass infections caused by the SARS-CoV-2 coronavirus and the disease caused by it became the reason for global social, economic and health crises. This situation required changes, also in the field of psychotherapeutic practice and the implementation of new solutions. One of the possibilities of continuing services provision was to start the Internet usage

Aim: The purpose of this paper is to review the latest research related to the experiences of psychotherapists working online during the pandemic. An additional goal is to present the broadest possible analysis of the literature based on research conducted in various countries around the world.

Materials: Google Scholar, PubMed, Scopus and PsycNet were searched for a review. From among the search results that met the general criteria, those related to psychotherapeutic practice in the given countries were selected.

Conclusions: Online psychotherapy has become a significant component of psychotherapeutic practice during a pandemic. Earlier expectations and concerns could be verified. The presented results of selected studies create a picture of the functioning of psychotherapists in many countries and constitute the basis for future research and forecasts for the development of psychotherapy after the pandemic.

online psychotherapy; psychotherapist; pandemic; experience

COVID-19 PANDEMIC AND ITS CONSEQUENCES

COVID-19 is a disease caused by the SARS-CoV-2 coronavirus infection, which has caused social, economic and health crises around the world [1].

The greatest threat to the life of an infected person are symptoms of the respiratory system, but there is evidence that the acute condition is associated with the occurrence of a cytokine storm, gastroenterological disorders, disorders

of the coagulation system or the nervous system [2-6].

The transmission of the virus and, consequently, infection occurs through the air. As a result, the social and professional activity of many people has been significantly changed. This also applies to the area of mental health. The SARS-CoV-2 coronavirus pandemic has created mental difficulties that can be considered in two ways. First, the pandemic drastically and suddenly changed people's functioning, which was associated with the exacerbation of the course of diseases and an increase in the incidence of anxiety and affective disorders (especially depression). [7] Secondly, during the pandemic,

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the availability of traditionally understood services, including psychotherapeutic services, had to change its form. Online psychotherapy solutions had to be implemented on a large scale or increased to maintain treatment of patients and reduce the risk of infection. Adapting the infrastructure necessary for such activities and attitudes towards remote forms of providing services, demonstrated by psychotherapists, may play a significant role in the treatment process. Contrary to the needs, there is a belief that inpatient treatment is superior and more effective. It is noticeable among patients [8] and professionals. [9] There is data showing that psychotherapists are afraid of reducing the quality of their work and effectiveness, as well as technical difficulties in conducting therapeutic sessions. [10-12]

Changing the working modality is also associated with the need to adapt your practice, way of working and use of software or devices.

The factors described above may be related to the shaping of the practice – in a manner favorable or unfavorable for both the psychotherapist and the patient – the way of conducting it and its effects.

Search strategy

During the pandemic, many studies related to the effects of psychotherapy were carried out. They concerned not only epidemiological and physiological aspects, but also focused on mental health, including psychotherapy. The role of psychotherapy in the treatment of mental disorders and diseases is widely accepted and well-established in medical practice. The psychological consequences of the pandemic and research into them now seem to be of particular importance. The results of the research indicate that the effectiveness of telepsychiatry [13] is comparable to that of traditional psychiatry. Similar, although ambiguous, conclusions arise from the results of research on psychotherapy and psychological help.

The aim of this study is to review the latest research related to the experiences of psychotherapists working online during a pandemic. An additional goal is to present the broadest possible analysis of the literature based on research conducted in various countries around the world.

For this purpose, the resources of the following databases were searched: Google Scholar, PubMed, Scopus and PsycNet. A combination of the phrases “psychotherapy”, “psychotherapist”, “COVID-19”, “online”, “SARS-CoV-2” and “pandemic” was used for the search. Each search was carried out using a combination of phrases, one related to a pandemic and the other related to psychotherapy. The publication period in the years 2020-2021 was adopted as the inclusion criterion in order to obtain the most accurate and up-to-date results. An additional criterion was to conduct a study among psychotherapists, as a study group, practicing in the area of a selected country or area of the world. Studies published in English or Polish were reviewed.

Research on psychotherapists experiences during pandemic

The experiences of Polish psychotherapists are described by Kluzowicz and Kluzowicz. [14] The study involved 54 psychotherapists and 101 patients. Most (66.7%) of the psychotherapists surveyed had previous experience with online psychotherapy. In the group of patients, 14.9% of therapy participants had previous experiences with this form of therapeutic work. Many (61.1%) psychotherapists stated that fewer people were willing to start psychotherapy. Further research results indicate the concerns of psychotherapists regarding the issue of sufficient privacy and intimacy of their patients at home. Patients were also more open-minded in online sessions, more frequent was the shortening of the distance by patients and more frequent expressing of feelings and the amount of spoken content. However, some psychotherapists notice that the therapeutic contact is shallow, and they perceive the relationship as more difficult to maintain. Difficulties are also noticeable, for example in connection with the use of techniques for working with the body. Out of the study group, 53% were initially reluctant to perceive online psychotherapy, but 73% of them changed their attitude along with the use of this form of providing their services. Less than 10% of the surveyed psychotherapists considered the prism of online psychotherapy over stationary

psychotherapy. 37% of the surveyed group expressed a willingness to continue this form of practice after the end of social isolation and the pandemic situation.

The study by Békés and Aafjes-van Doorn [15] included 145 psychotherapists working in Europe and North America. The subjects worked in various theoretical orientations: cognitive-behavioral, psychodynamic, psychoanalytical, humanistic, systemic, integrative and in others (17 people). The aim of the study was to determine what factors may be involved in shaping attitudes towards online psychotherapy during the COVID-19 pandemic. The results show an overall positive attitude of therapists and positive expectations of online practice during a pandemic. At the same time, most of the results did not differ significantly between therapists from different continents. Only the results concerning the general attitude indicate that psychotherapists working in the American continent showed more positive attitudes and greater readiness to go online.

A more positive attitude among all psychotherapists was related to the previous positive experiences of both therapists and their patients. Cognitive-behavioral psychotherapists showed more accepting attitudes than psychodynamic psychotherapists. Negative attitudes were related to the perceived fatigue of online sessions, a sense of inferior therapeutic relationship, and a lower sense of being competent.

In addition, psychotherapists whose patients have had past experiences with online psychotherapy indicate that they were extremely positive (13.8%), positive (49%), or neutral (27.6%). Only 7.6% of patients reported negative past experiences with online therapy.

One of the Austrian studies [16] was conducted among 1162 Austrian psychotherapists with the following theoretical orientations: behavioral, psychodynamic, humanistic and systemic. Of those surveyed, 614 started practicing using the Internet during the pandemic. The results indicate that the use of online solutions turned out to be better than the psychotherapists expected. The theoretical orientation was not significant for this variable. In addition, online psychotherapy turned out to be more comparable to face-to-face therapy and the experiences more positive than psychotherapy conducted solely with

the use of telephone calls. These experiences differed significantly only in relation to psychodynamic psychotherapists.

Probst, Stippl, Pieh [17] examined a group of 1547 Austrian psychotherapists. The investigated psychotherapists practiced in the psychodynamic, humanistic, systemic or behavioral currents. The obtained data allow to conclude that the percentage of participants in stationary psychotherapy decreased by 81%, and the number of patients admitted due to the theoretical orientation was comparable. This means that the way the psychotherapist worked was a less significant factor of participation in therapy for Austrian patients than the form of its delivery. As the authors point out, the perception and thus joining online psychotherapy in Austria may be related to the aspects of the functioning of the online psychotherapy financing system as a health insurance benefit in this country.

Data on Austrian and German psychotherapists is provided by the study by Korecka et al. [18] The study was conducted on a total sample of 237 (151 from Austria and 86 from Germany) cognitive-behavioral psychotherapists, 190 of which were finally included in the analyzes. The conducted research shows the correlation in terms of the comparability of face-to-face psychotherapy and online psychotherapy with the number of patients admitted – the more patients the psychotherapists admitted, the more comparable the forms of conducting the sessions turned out to be. A positive correlation was also found between the number of online patients with more positive experiences compared to previous expectations. This means that the more patients undertook online therapy during a pandemic, the better psychotherapists perceived this form of work compared to their previous expectations.

Cantone et al. [19] presented the results of Italian psychotherapists and their experiences related to changing the way of working during a pandemic. 507 psychotherapists working in the following fields were examined: transactional, cognitive, behavioral, Gestalt, psychoanalytical, psychodynamic, system-relational, humanistic and others. 37.2% of the respondents had practiced remotely before. Most often they were psychotherapists with knowledge of Gestalt, cognitive and psychoanalytical trends. The main

reason for switching to remote work was the inability of patients to participate in face-to-face sessions. During the pandemic, 93.7% of psychotherapists changed the setting. Of these, 87.8% conducted psychotherapy in the form of videoconferences. No relationship of theoretical orientation with the changes mentioned was found. Changing the place of work was reported to a lesser extent in psychotherapists <35 years of age (5.8%). Psychotherapists aged 35-45 changed their place of work in 43.7%. Only 2.2% of respondents experienced no difference in the quality of the work performed. Most of the respondents reported work-related inconveniences such as: need for greater flexibility (58.8%), greater fatigue (40.4%). Fatigue was most often reported by psychoanalytically oriented therapists (50.3% of them). 48.9% of the respondents complained about the inability to use working techniques typical of their paradigm. Most often these were people working in the Gestalt trend (71.1% of them). 39.3% found the moments of silence more difficult. This difficulty was most often indicated by psychoanalytical (50.9%) and psychodynamic (46.2%) psychotherapists. For 37.9% of the respondents, psychotherapy turned out to be a factor modifying the existing asymmetry in therapeutic contact. Almost half (45.8%) of psychotherapists believe that online psychotherapy is not applicable to certain types of patients, and 62.1% recognize that some patients respond better or worse than others to online psychotherapy. Researchers also raised the issue of the clinical effectiveness of the activities carried out in the study. A part of the study group equal to 20.3% expressed the view that the clinical effectiveness of the therapies was lower than that of face-to-face psychotherapy. Another 20.9% were convinced that the form had no effect on effectiveness, and only 0.4% of the respondents considered the results to be better than inpatient psychotherapy.

The study, involving Czech, Slovak and German psychotherapists, was conducted among 338 psychotherapists. [20] The data on the fear of contracting coronavirus during the sessions indicate its highest level among Slovak psychotherapists, followed by Czech and German psychotherapists. Analyzes of anxiety and gender indicate its greater prevalence in women. The average number of treated face-to-face patients

decreased on average by 48%, of which in individual countries: the Czech Republic by 71%, Slovakia by 76% and in Germany by 18%. There was an average increase in the number of online sessions by 888%. The following growth rates were recorded in individual countries: Czech Republic by 1200%, Slovakia by 343%, Germany by 6558%. A negative correlation was found between the number of patients in direct contact and the fear of coronavirus infection demonstrated by psychotherapists. The opposite, positive relationship was found between the fear of infection and the number of patients treated via the Internet.

CONCLUSIONS AND DISCUSSION

The presented research allows us to notice a diverse and complex picture of the professional and personal experiences of psychotherapists during a pandemic. Various aspects such as theoretical orientation, previous beliefs, features of the country and its way of functioning turn out to be important. There are also noticeable ratios of increases and decreases in the percentage of values concerning the number of patients.

Online psychotherapy may prove to be a challenge for many practitioners, but also an opportunity to verify your views on the form of practice and your own skills workshop. The remote form of practice also highlighted the aspects of the usefulness of psychotherapy via the Internet and its likely clinical limitations. As the results of the research have shown, some psychotherapists may incorporate online psychotherapy into their practice during the post-pandemic period or abandon it altogether.

Important recommendations for online psychotherapy in a pandemic was issued by The Lancet's COVID-19 Commission Mental Health Task Force. [21] It is related to the indication of eCBT as a method recommended for wide use due to its proven effectiveness in research. The possibility of training members of the community and implementing forms of support, e.g. in the field of stigma reduction, was also indicated. Further research into the effectiveness of eCBT and its intercultural aspects is also recommended.

It is worth noting a noticeable deficit of research focused on the experiences of psychother-

apists, especially in the area of India, Africa and Asia. Psychotherapists working in these parts of the world could enrich their practice, knowledge and shape their views on the basis of research. This seems to be particularly beneficial considering the ongoing pandemic and its consequences such as isolation, emergence or exacerbation of crises, disorders and mental diseases.

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