

## **Telephone and Internet Based Counselling and Psychology: New Interest Group Formed**

*“The marriage between technology and psychological services is known as  
Telepsychology”*

In the past two decades, there has been an enormous growth in the call centre and computer IT industry and as a result, services provided by psychologists, psychiatrists and social workers are now offered in this environment. The term commonly used are **Telepsychology** or **Telehealth**, however there are other terms used such as e-health, e-counselling, online counselling, web-counselling or telephone counselling. All of these terms reflect the nature of remote psychological services.

The proposal to form the Telephone and Internet Based Counselling and Psychology (TIBCP) Interest Group, was because of the lack of formal structures and representation of psychologists in this area. Telehealth is expanding in Australia, and presently, psychologists are ill informed about technology assisted counselling and psychology services. This interest group will allow some formal recognition of psychologists in the development of telehealth services in Australia.

As an interest group we would like to provide a network where psychologists are informed about advances and developments in this area. Psychologists play a key role as a mental health services provider and as telepsychology or telehealth advances as a legitimate and complimentary mental health service, it is important for psychologists to be involved in the development of telehealth. As a result we invite your participation to this interest group.

The telehealth service is a dynamic area, with interest coming from State and Federal governments relating to telehealth's position to provide mental health services across Australia. Recent trends from the UK, Canada and United States indicate that this form of service is becoming mainstream

and as technology advances, the uptake, access and affordability of these services are increasing.

### ***Misconceptions about Telepsychology***

One could be mistaken for assuming that telepsychology and helplines provide the same service when actually, differences in technology and case management practices are emerging that may create distinct differences in the definition of these services. Presently, the difference between telepsychology and helplines lies in the case management practices of the clients. In general terms, helplines are a community service where people call, talk to someone and remain anonymous. In the helpline environment the client chooses the conditions of interaction such as the time and length of call. Helplines usually rely on the client to end the call and there is no cost, or minimal cost, to the client. Volunteers with little formal qualifications commonly staff Helplines and the service is available to clients at extended hours, often 24 hours a day.

Telepsychology on the other hand, is a detailed sharing of information between the psychologist and the client. The client provides personal details, payment, and sessions are structured. The psychologist can make appointments and transfer information from client to professional in the context of a therapeutic relationship. Information relating to the client can be effectively followed up and continuity of care maintained. The psychologist is providing services over the telephone and/ or computer similarly to the type of service provided in face-to-face consultation.

### ***Types of Telepsychology services emerging in Australia***

In Australia, a geographically vast country, many welfare and health services rely heavily on technology, such as radio, Internet and mobile phones. Telepsychology specialties are now being recognised and has emerged in Australia in several areas, as follows:

Private practitioners are offering their services over the telephone. This is currently occurring by offering coaching services to executive clients.

Professional people are consulting with Psychologists about relationships, stress and family issues all via the telephone and/ or modem.

Psychologists are also providing supervision for students via the telephone and e-mails as an effective method of keeping track of student's progress.

Health Insurance companies are now developing telepsychology practices as a way of effectively case managing their clients. (The term currently used is 'managed care'). For example, the company provides details of their membership to a "telepsychologist" and if members need to consult with a psychologist, they are referred to the telepsychologist first. The service is free to the members (callers) and the "telepsychologist" refers to face-to-face services if necessary. The telepsychologist also consults with the referred face-to-face service for managing the best treatment.

Employee assistance programs (EAP) are similarly adopting telepsychology services as health insurance companies. EAP services are providing counselling to employees directly via the telephone and/or computer. This has specifically been adapted to trauma and critical incidents. Clients are able to access information and support quickly, and the telepsychologist is able to monitor the client's situation and progress.

Pharmaceutical companies are also providing counselling and case management services for patients using new products. The pharmaceutical companies set up a support hotline for the families and the patients, on specific medications, to provide information and counselling. The rationale behind such a service is for patients to discuss their concerns about their treatment, to be more informed about a product, will have a greater chance of adhering to the prescribed medication and completing their treatment.

There is also the emergence of the 1900 Telepsychology services. These are "pay as you talk" service often charged to the caller at a rate per minute. The client (caller) calls and talks to a Psychologist according to their needs. The issues are addressed during the call and a referral is made if necessary. The caller is assured that the person on the phone is a qualified and registered Psychologist.

Lastly there is the emergence of on-line or webcounselling. These services are rapidly emerging as a direct result of technology. There are

specific chat rooms, web cam integration such as teleconferencing and also interactive media whereby information and communication is passed on to mobile devices such as video-phones. This area in particular, has the greatest potential for development as the structure and application of the technology is presently being developed.

***Example of a Telepsychology user (client)***

With the advent of different modes and technologies emerging, particularly relating to telepsychology, there are considerable changes to how clients access health or mental health services in contrast to face-to-face services. Take this scenario for example.

*A working mother of two young children has recently separated from her husband and is presently very depressed. She is reluctant to discuss the issues with her family, as her relationship with them is poor. She perceives that to talk to family members may create more stress, from the assumed negative judgments made by people closest to her.*

*Late one night in a very depressed state, after receiving an email from her separated husband and the children asleep, she logs on to the Internet, to a self-help site for depression and completes a 20-item depression checklist. Within a few moments she receives an e-mail suggesting that her levels of depression are quite severe and she is provided with a phone number of a 24-hour counselling service to talk to a qualified counsellor. She is also invited to join an online self-help chat room. She makes the phone call and whilst discussing concerns with the telephone counsellor, she is also advised to pursue other services and is given contact details and information for a local psychologist or general practitioner and a referral to legal support services for further assistance. At the conclusion of the interaction the Mother of two found the discussion very helpful.*

*A few days have passed and she realizes that she will need help in overcoming her depression. She contemplates how she may seek help whilst managing the household and the busy life of two young children and still maintain this issue private from her family and husband. (She is concerned about any implications this may have if she was to seek a divorce from her husband).*

*Due to the nature of her state, she chooses to confide and discuss her problems with the telephone counsellor, as she believes the service is useful, affordable, convenient and confidential. Furthermore she has been able to develop a good rapport and develops structured counselling sessions with the Telephone Counsellor.*

### ***Effectiveness of Telepsychology***

The literature on telepsychology indicates that clients, who seek help using these modes, generally seem satisfied with the services that they receive. Researchers reports that technology assisted counselling appear to be growing at an exponential rate. Customer satisfaction also appears to be high with several studies reporting that up to 90% of callers feel satisfied with telephone counselling while about half felt their problem was less severe at follow-up. In a survey of the literature found that overall, about two-thirds of telepsychology users felt that they had been helped by counselling via the telephone, these results are similar to client satisfaction from face-to-face counselling services.

### ***In Summary***

Telephone and Internet counselling provides an environment where clients can be listened to, be provided with information and referrals. This can assist clients in alleviating some of their distress. These are factors that can contribute to effectiveness. It is accepted that counselling is an effective therapeutic interventions for mental health issues and the same basic skills are being used for telepsychology. It is reasonable to suggest that these services are effective at least in terms of case management and preventative measures.

It is understandable that technology-assisted media will inevitably change any cues associated with physical presence. However, we need to understand that face-to-face counselling is one way of counselling, there are other forms of communicating including, symbolic or written (visual) and speech or noises, (sounds). It can be further argued that effective counselling may include a number of forms of communication, with or without physical presence.

At present this Interest group sees the area of telepsychology and Telehealth as an enormous research interest. The development of technology has meant that policies, procedures and legislations are slowly 'catching up' to the practises of telepsychology. Furthermore empirical research has only recently emerged and many fundamental questions of viability, sustainability effectiveness and cohesion to current mainstream services are emerging.

The Telephone and Internet based Counselling and Psychology (TIBCP) interest group invites interested members to join this exiting and relative emerging area of Psychology and would welcome participation to future developments in this area.

Please visit our page on the APS website

([www.psychology.org.au/tibcp](http://www.psychology.org.au/tibcp))

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