

Features and benefits of online counselling: Trinity College online mental health community

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(Received 12 September 2008; final form received 24 February 2009)

Universities have a responsibility to develop appropriate interventions to respond to the mental health needs of their students. Students' use of technology is an integral part of how they communicate and relate to the world; it is reasonable to consider engaging the internet and Information and Communication Technologies (ICT) for mental health service delivery. Internet-delivered counselling brings with it many distinct advantages, but also challenges. Investigating the effectiveness of any internet-delivered counselling intervention is important so as to establish a sound evidence-based practice. A unique feature of online delivery is that the internet can facilitate community and therefore allow counselling interventions to act therapeutically for an online community of users. This paper reports on the use of the online counselling service at Trinity College Dublin, including its uptake and usage, the issues and benefits of online counselling to students and whether clients are satisfied with their experience of online counselling. The paper highlights the positive effect of disinhibition and the therapeutic benefit of writing. Single session counselling is discussed as a model that fits the experience of users and the service provider. Users have reported satisfaction with online counselling and the service's impact within the community of users is complementary. The benefits of increasing access, flexibility and on-time and on-demand services are given attention as is the use of online counselling as an element of a stepped care approach to service delivery.

Keywords: online counselling; single session counselling; online mental health; client satisfaction; stepped care

Introduction

The growth of new technologies has made it possible for the online delivery of psychological support (Ritterband et al., 2003). The expansiveness of technology in people's lives has been noticed by mental health professionals. Further, it is predicted that the increasing growth and prevalence, as well as the demand of users, will solidify technology as an integral aspect of healthcare into the future (Alleman, 2002; Yellowlees & Brooks, 1999). Many forms of internet-delivered psychological support have been researched, including online counselling (Anthony, 2000; Day & Schneider, 2002; Efsthathiou & Kalantzi-Azizi, 2005; Richards & Tangney, 2006, 2008; Robinson & Serfaty, 2001; Wolf, Kordy, Maurer, Dogs, & Arikan, 2006), online psycho-education, and online peer support for mental health (Johnsen, Rosenvinge, & Gammon, 2002; Kummervold et al., 2002; Salem, Bogat, & Reid, 1997), among

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others. Research into online counselling has produced a small number of empirical studies that, for the most part, show positive results. In addition, the broad area of computer-aided psychotherapy has produced a multitude of studies that attest to the positive potential of online and remote delivery of psychological support (Marks, Cavanagh, & Gega, 2007).

The focus of this paper is the delivery of online counselling to students at university. Online counselling involves, in this case, the creation of a website where individual students can post a submission online and receive a reply from a counsellor. In this model the individual student receives a personal reply to their submission and the submission and the counsellor's reply are posted live to the website for all registered users to access. It is important to point out that users create fictitious usernames. This model of online counselling can be researched in at least two ways: firstly, individuals' experience of online counselling and secondly, the unique internet-enabled aspect, the community of users' experience. Researching online counselling can potentially support the development of effective evidence-based practice and can be compared with traditional face-to-face effectiveness studies; in doing so the potential effectiveness of online counselling can be established.

Technology in mental health

The literature to date has presented the many benefits and challenges to online counselling (Goss & Anthony, 2003; Rochlen, Zack, & Speyer, 2004; Tate & Zabinski, 2004). From a mental health service perspective the potential benefits include the possibility of providing treatment that is more cost-effective and therefore reducing therapist time, reducing waiting lists, compensating for the lack of trained professionals, and relieving the burden often experienced by service providers in meeting demands (Griffiths, Lindenmeyer, Powell, Lowe, & Thorogood, 2006; Marks, 2000).

The British Association of Counselling and Psychotherapy produced guidelines (Anthony & Jamieson, 2005; Goss, Anthony, Jamieson, & Palmer, 2001) for online mental health service delivery, the latter including online supervision, and concluded that practitioners could no longer ignore the influence of new technology and communication and highlighted the need for empirical research in the area.

The range of applications of technology in mental health has been varied (Richards, 2008) and includes online synchronous and asynchronous counselling (Efstathiou & Kalantzi-Azizi, 2005; Richards & Tangney, 2006, 2008; Robinson & Serfaty, 2001; Wolf et al., 2006), videoconferencing (Simpson, Bell, Knox, & Mitchell, 2005; Simpson, Deans, & Brebner, 2001; Simpson et al., 2006), virtual reality applications (Botella et al., 2000; Botella, Hofmann, & Moscovitch, 2003; Herbelin, Riquier, Vexo, & Thalmann, 2002; Klinger et al., 2005), multimedia and games (Coyle, Doherty, Matthews, & Sharry, 2007; Coyle & Matthews, 2004) and stand-alone self-directed software (Marks, 2000; Marks et al., 2003, 2007; Proudfoot et al., 2003, 2004), which for the most part are internet-delivered interventions with minimal therapist contact (Andersson & Kaldø, 2004; Andersson, Lundstrom, & Strom, 2003; Andersson et al., 2005; Lange, Van den Ven, & Schrieken, 2003; Lange, Van den Ven, Schrieken, & Emmelkamp, 2001; Lange et al., 2003; Carlbring & Andersson, 2006; Carlbring, Ekselius, & Andersson, 2003; Carlbring et al., 2005, 2006; Wagner, Knaevelsurd, & Maercker, 2005, 2006; Zetterqvist, Maanmies, Stron, & Andersson, 2003).

Online counselling

The goal of counselling is to alleviate the distress, anxiety, and concerns that clients can present. Counselling attempts to return a client to pre-crisis functioning and in doing so build on a client's strengths and help improve overall functioning (Mallen, Vogel, Rochlen, & Day, 2005). Online counselling must also adhere to the same objectives. Several studies have researched aspects of online counselling using synchronous chat, asynchronous e-mail, videoconferencing, and self-directed programmes. The findings from these studies in the area of online counselling have positively evaluated working alliance, helpfulness and impact and report client improvement and satisfaction (Barak & Bloch, 2006; Cook & Doyle, 2002; Day & Schneider, 2002; Efstathiou & Kalantzi-Azizi, 2005; Knaevelsrud & Maercker, 2006; Leibert, Archer, Munson, & York, 2006; Reynolds, Stiles, & Grohol, 2006; Richards & Tangney, 2006; Robinson & Serfaty, 2001; Wolf et al., 2006).

For example, Cook and Doyle (2002) researched a comparison of face-to-face and online counselling using both e-mail and chat and found that working alliance levels demonstrate that participants felt a collaborative, bonding relationship with therapists. Their analysis reveals that both the total score on the Working Alliance Inventory (WAI) and individual sub-scale scores were as strong for online as for face-to-face clients. Qualitatively, participants overwhelmingly indicated that online counselling was a positive experience with advantages over face-to-face.

Efstathiou and Kalantzi-Azizi (2005) provide asynchronous online counselling to students at the University of Athens, where students can post a submission to the counsellor and receive a reply. During a 41-month period the service received 1384 e-mail submissions. Female students sent 64.1% of messages and the mean age of users was 25 years old. According to the research the service is highly popular among students. This type of intervention offers some distinct advantages such as building a database of information on issues relevant to students that can be referenced time and again. Interestingly, their research highlights that students preferred to consult such a body of literature than to consult more traditional self-help materials. Furthermore, such a database of information is quality controlled and therefore can be more generally and perhaps easily trusted as a source of information on the web as opposed to other web materials that students might search for.

Text-based communication has led to some concern among practitioners, especially the lack of social signalling. However, such communication can be of higher quality, in that the time given to formulating the question and the answer reduces the possibility of misunderstandings (Bischoff, 2004). Efstathiou and Kalantzi-Azizi (2005) report users being satisfied with the answers they received. Similarly in an earlier study, Michaud and Colom (2003) report that 92% of users felt the professionals had clearly understood them and were satisfied with the answer they received.

Disinhibition (Suler, 2004) has also been demonstrated in the work of text-based communication. It seems the anonymity, the use of written communication and the lack of personal contact facilitates disclosures of personal information. Online counselling seems to reduce the traditional social stigma toward seeking help and also counteract social factors that may hinder people in seeking help such as gender and physical appearance (Efstathiou & Kalantzi-Azizi, 2005).

The majority of studies report positive experiences for clients who found online counselling helpful to them. Indeed at Trinity College Dublin (TCD) students too

report that the e-counselling is very helpful (Richards & Tangney, 2008). Barak and Bloch (2006) investigated the perceived helpfulness of emotional support conversations carried on by professional helpers through internet chat with distressed individuals. They report positive outcomes for clients who have used the service, but found no significant difference in clients' perceived session helpfulness for online than would be found with face-to-face services, despite what they refer to as 'meaningful differences in these two modalities'.

Barak and Bloch (2006) have also demonstrated that perceived helpfulness correlated highly with impact from both client and therapist perspectives. Indicating that deep, smooth conversations yielding positive responses and arousing clients' emotions are helpful, this is similar to face-to-face and contradicts the common criticism that online therapeutic conversations might be shallow, superficial or distant (Barak & Bloch, 2006). Their findings have recently been confirmed in a recent and ongoing study of session impact and alliance in online counselling compared to face-to-face counselling. Reynolds et al. (2006) report that session impact and alliance are similar between the two modes of treatment. Their preliminary findings also support the earlier Cook and Doyle (2002) study and suggest that a therapeutic alliance can be constructed online and equal that of face-to-face counselling.

The importance of the therapeutic alliance is essential as it has been continually demonstrated to be one of the most consistent variables predicting successful outcome in counselling and therapy. Unlike the studies of therapeutic alliance already mentioned, Leibert et al. (2006) contradict earlier findings revealing that face-to-face clients reported significantly higher alliance ratings, globally and for each of the three alliance sub-scales than do online clients. Although reporting weaker working alliance scores for online clients, Leibert et al. (2006) also report that working alliance scores were significantly associated with respondent satisfaction with online counselling. This finding supports the significance of alliance to outcome in therapy. Knaevelsrud and Maercker (2006), in another study of alliance quality and whether it can predict outcome, found that although alliance in online treatment was one standard deviation higher than in face-to-face, they only found a low to modest association between alliance and outcome. A variable that may have some impact on the results of this study is the population group being investigated. In the limited studies to date on working alliance in online counselling and the relationship of alliance scores to outcome of counseling, the data are positive but inconclusive.

Rochlen, in a recent review of online counselling (2004), recommended alternatives in relation to evaluating online counselling and to this end Leibert et al. (2006) investigated satisfaction with online counselling. Using the client satisfaction inventory (CSI), data were gathered from participants [$N = 81$] and the reported mean reached 67.8 [out of 100]. When benchmarked with face-to-face studies of satisfaction, Leibert deduces that clients are reporting satisfaction but less so than in face-to-face counselling (Leibert et al., 2006). For example, the validation study for the CSI generated a client satisfaction score of 88.1 (McMurtry & Hudson, 2000).

While the data presented from this small number of studies that have endeavoured to investigate important aspects of online counselling are generally positive, there are also some contradictory findings that raise questions. The data for now, while generally positive, are inconclusive. Further research is needed to establish these findings.

Trinity online mental health community

Online mental health including online counselling, online peer support and online psycho-education was piloted at the authors' university (Richards & Tangney, 2008). The following section provides an update on the work of the online counselling service at Trinity College Dublin.

All students wishing to use the service register onto the online mental health website. To date there are a total of 664 registered users. The model of online counselling being used at the university is asynchronous (e-mail). Users can send a message to a counsellor; the system holds the submission until it is retrieved and answered by the counselling service. Thereafter the student's original submission and the counsellor's reply are posted live to the website. In this way the individual student receives a personal reply, and the community of users can access the submission and reply.

Methodology

This paper reports the analysis of data collected by the online system on usage of the online counselling service by students at the university. In addition the paper reports two small-scale pieces of research into online counselling at the university. Firstly, a content analysis of the online counselling submissions [N = 32] was conducted to ascertain the issues and benefits to students of online counselling (Clayton, 2007). The analysis was based on the qualitative method described by Hill, Thompson, and Williams (1997).

Secondly, data were collected on clients' perception of satisfaction in using the online counselling service [N = 7]. The Client Satisfaction Inventory – Short Form (CSI-SF) (McMurtry & Hudson, 2000) was administered to 15 users of online counselling and 7 completed inventories were returned. The CSI-SF has moderate content validity [$r = .64$] and high internal consistency [Cronbach's Alpha = .89]. McMurtry and Hudson's initial norms produced a mean score of 88.1.

Results

Between April 2006 and June 2007, a total of 50 submissions were received from 41 people who accessed and used online counselling at the university. The majority of submissions were from students who are within the 20–30-year age bracket [79%]. A smaller number were from the 30–40 [19%] age bracket and only 2% [N = 1] from the 40–50 age bracket. An interesting and challenging result relates to the gender breakdown [Male: 21%; Female: 79%] of use of the service. The gender breakdown shows a significant difference in favour of females when compared with the use of face-to-face services [Male: 31%; Female: 68%]. College standing (Figure 1) shows a representation from across the undergraduate [blue] and postgraduate [red] years. Interestingly there is a small difference between the usage of the system by postgraduates [39%] and undergraduates [60%] when compared with their representation in the general college population [UG: 69%; PG: 31%].

Between April 2006 and June 2007, 50 e-mail submissions were received. This may seem a low number, but the service had not been advertised widely except for one e-mail to students at the beginning of the academic year [October 2006]. The majority of these have been one-off submissions, with only a small number of individuals (N = 5) e-mailing more than once. In total the 50 submissions have

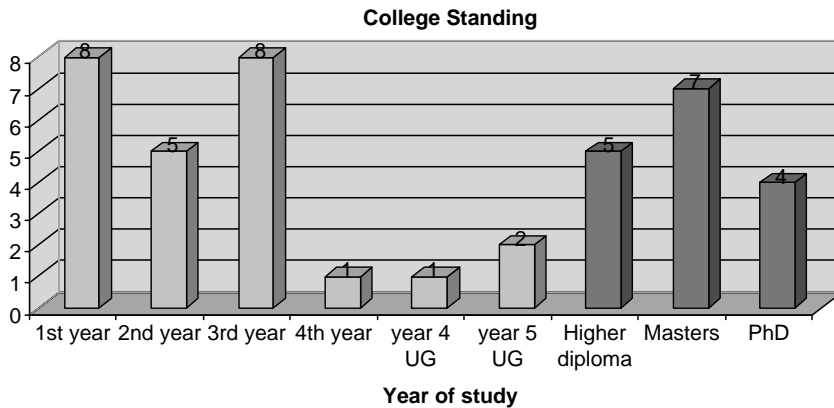


Figure 1. The number of users by college standing.

received 7141 views by other users in the system. On average each submission has been viewed 146 times.

The percentage of submissions outside of the regular office hours, Monday to Friday 9.00am–5.00pm, is 77% [N = 34] and 29% [N = 18] were submitted at weekends. Twenty-three percent of users of online counselling thereafter accessed face-to-face counselling.

Two small pieces of research were carried out into online counselling. The first piece was carried out by a master's student in counselling psychology which investigated the issues and benefits to students of online counselling. The content of the online counselling submissions [N = 32] was analysed to ascertain the issues presented and the benefits of e-counselling to students. The results show no difference in the range of issues presented in online counselling as would be in face-to-face counselling. The results highlight the benefit of disinhibition facilitated by the perception of anonymity and the reality of distance. The therapeutic benefit of writing was also highlighted as a benefit to users.

A second piece of research was carried out by the author and sought to investigate client satisfaction with online counselling. Client satisfaction was measured using the CSI-SF and was administered to 15 clients and returned by 7 [47%]. Using the procedure to score the instrument, the mean satisfaction for the respondents was established at 58 [out of 100].

Discussion

Single session counselling

Between April 2006 and June 2007, 50 e-mail submissions were received. The majority of these have been one-off submissions, with only a small number of individuals (N = 5) e-mailing more than once. This is an interesting phenomenon especially when students usually attend face-to-face services for an average of four to five sessions. Why is it in the online environment that a single session is presumably sufficient? A number of reasons can be advanced. Firstly, it is noted that the characteristic of disinhibition is evident in the submissions made by users. In this way it seems that a far greater amount of personal information and detail is divulged. While Suler (2004) and others have referenced this phenomenon because of the

perceived distance of the counsellor, it has to be remembered that while users operate in the system under fictitious usernames, their identity was not completely anonymous and the counsellors could access their student profile if needed. A second reason is the nature of text communication. The therapeutic benefits of writing have been long documented (Sheese, Brown, & Graziano, 2004). However, in addition, users who write out their difficulties engage in a 'zone of reflection', whereby through the process of constructing their story they are already engaging in the process of counselling. They are for the first time perhaps externalising their experience and consequently giving themselves another and new perspective. This perhaps has a significant bearing on how they perceive their difficulties after writing that is in addition to receiving the counsellor's reply.

Yet another element is to consider the notion of single session counselling. Single session counselling is not a new idea and indeed in an age of increased demand and stretched resources it is seen by some services as a viable alternative in service provision. Often, simply offering advice to the client, reframing their problems, or normalising their difficulties is all that is required (Cameron, 2007). Single session counselling has received considerable attention and research has demonstrated its positive outcome for a wide range of presenting problems.

In an online environment, this unique form of single session counselling offers the client psychological support at a moment in time completely determined by them (Cameron, 2007). Single session counselling can also build on a philosophy of resourcefulness. Students and young people are in general resourceful and adaptable particularly because of the nature of change and development at this important stage of life. Single session counselling can therefore build on these strengths to help engage, seek help and want change. In this way single session counselling is a collaborative and pragmatic approach that builds on the utilisation of existing client resources and helps identify these in rectifying the present difficulties (Cameron, 2007).

Readership

It is presumed that the individual who writes the submission will read the reply they receive. A unique feature of the online mental health community is that the student's submissions and their counsellor's replies can be read by all registered users. In this way the content becomes a psycho-educational resource for all users of the system. Efstathiou and Kalantzi-Azizi (2005) have noted this advantage, as the practice means that a database of information regarding student mental health issues is built and can be used and referenced in the future. Perhaps with this a high number of students will find the information they require and consequently submissions will reduce, thereby relieving the counsellor's time. Michaud and Colom (2003) report that after four years of an internet mental health site for teenagers in Switzerland, the number of visitors per month continued to increase and at the same time the number of submissions dropped by half. Efstathiou and Kalantzi-Azizi (2005) report how users found previously published answers helpful and in addition users stated that a reason they did not use the service was because they found an answer in a previously published submission.

At TCD online mental health community, in total the 50 submissions have received 7141 views by other users in the system. On average each submission has been viewed 146 times. This is a large impact factor considering that the membership of the community is 664. It is important to note that the database of psycho-educational material being built is user-generated as opposed to the more traditional

self-help and psycho-educational materials that are generally developed by professionals. Student-generated content will hopefully have an appeal to other students and certainly the high readership of submissions would suggest this to be the case. In addition, on a number of occasions users who have used the online counselling have referenced other submissions as a motivating factor in using the service. One user opens their submission with the following:

I just read the submission posted [title deleted] and I saw in the response to it a description that seemed very like me . . .

Access to services

An oft-cited benefit of online counselling is that it places the pace and direction of where and when counselling occurs into the client's control. Seventy-seven percent [N = 34] of the online counselling submissions were received outside of the usual Monday to Friday, 9.00am–5.00pm service hours and 29% [N = 18] were submitted at weekends.

The high percentage of access and use outside of usual office hours and at weekends highlights a need for flexible service provision. It also demonstrates the value for users in accessing services on time and on demand, which is often outside of traditional service hours. In this way, students who perhaps cannot access regular services because of loaded timetables can still receive the support they may require.

Acting as a gateway to other services

It is known that many people do not access the help that they require. It is therefore encouraging to see users of the online system accessing traditional services. The online service has in some way acted as a first point of contact for the user and as such acts as a gateway for users to access help. Perhaps online counselling could be seen as an aspect of stepped care. Therefore, it is not seen as a replacement of traditional services but rather an extension (Proudfoot et al., 2004). In our experience, 24% [N = 10] of users who used the online counselling thereafter accessed face-to-face counselling. The time lapse between use of the online service and accessing face-to-face counselling ranges from one month to 11 months, the average being six months.

At the same time, some users may hold a preference for working online. One user wrote: 'I couldn't make a confidential appointment with a counsellor'. It's important to note this and be open to the preferences of users.

Content of the submissions

A content analysis of the online counselling submissions [N = 32] to ascertain the issues and benefits to students of online counselling was conducted. The analysis reveals how the range of presenting issues to online counselling is no different to that of face-to-face counselling. The majority of submissions had multiple presenting issues, and it can be inferred that the self-selected topics [e.g. depression, relationships, stress] represent users' most pressing problems. The self-selected topic was the topic chosen by the user when they posted their submission. The list of topics corresponds to the list of difficulties that clients check as part of intake to face-to-face counselling, for example, depression, stress, and relationships.

The content analyses of submissions to online counselling illustrate the characteristic of disinhibition being supported by anonymity (Suler, 2004). This is reflected in the depth and detail of the submissions, and the apparent ease for users in reporting difficulties such as suicidal ideation [N=5], loneliness [N=6], and depression [N=7].

Highlighted in the content analysis were users' comments on the benefit of writing out their problems, irrespective of the response they received. Pennebaker has long documented the therapeutic benefits of writing (Sheese et al., 2004).

Client satisfaction

Data were collected on clients' perception of satisfaction in using the online counselling service [N=7]. The CSI-SF (McMurtry & Hudson, 2000) was administered to 15 users of online counselling and returned by 7 [47%]. Mean satisfaction was 58 [out of 100]. The scores from the current study were compared with scores from Leibert et al. (2006) and it was found the difference was non-significant. However, when compared with the original validation scores [81], a significant difference was found (McMurtry & Hudson, 2000). The findings support the earlier study by Leibert et al. (2006) that concludes that while clients are reporting satisfaction it seems less so than is reported in face-to-face counselling.

Conclusion

The findings presented and discussed here are preliminary and generalisability is weakened by small sample sizes [submission N = 50; content analysis N = 32; client satisfaction N = 7]. However, the numbers using the service and the high readership of the content posted show the online service is meeting a need in the community. In addition, the content analysis shows no significant difference between use of the online and face-to-face counselling service in terms of presenting issues. Further the analysis reveals how anonymity and distance facilitate personal disclosure, engagement in therapy through the creation of the 'zone of reflection' and the consequent realising of the therapeutic benefits of writing.

Yellowlees (1999) writes how the future is not what it used to be; within the context of a perceived and transformative healthcare revolution, service providers are invited to review provision and revise interventions to meet user needs. A key aspect of the change in how care is delivered in the future will be based on users' demand for such innovative provision. To meet the mental healthcare needs of a growing and diverse student population, service providers need to give due consideration to the increasingly pervasive role of technology in the lives of individuals, and the consequent need for flexible service provision. In this regard it is argued that online counselling can act as a first step within a stepped-care approach, which aims to realise the benefits of all available resources and technologies, including self-help.

It is clear that there are benefits to online counselling. It is also clear that it is an option for users within a university setting and that their experience of online counselling is satisfactory. Satisfaction ratings for this study are high and are based on single session encounters. Single session counselling and user satisfaction are interesting phenomena and require further attention.

The general direction of the results presented is positive and in this way supports earlier research outlined. At the same time, it is recognised that the evidence to date is

largely inconclusive with regard to online counselling. The efficacy and effectiveness of providing innovative online psychological services is still largely unanswered. Within the context of a university counselling service it will be important that any extension of services provided to students has a strong evidence base.

Acknowledgements

Some parts of this paper were presented previously at the FEDORA Psyche conference in Greece, in September 2007.

Notes on contributor

Derek Richards is a psychotherapist and researcher at Trinity College Dublin. He is coordinator of the online mental health project at TCD. His research is focused on the use of technology in mental health service delivery. He is currently researching therapist-led and client-administered online psychological interventions for depression.

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