A Comparison of Client Characteristics in Cyber and In-Person Counselling

Lawrence MURPHY [a], Dan MITCHELL[a] and Rebecca HALLETT [b]

[a] *Worldwide Therapy Online Inc.*

[b] *University of Guelph*

Abstract. As cybertherapy diversifies into a wide variety of modalities, it is incumbent upon researchers and clinicians to determine the most suitable cybertherapy approach for clients. Suitability encompasses ethical considerations, client satisfaction, and treatment outcomes. The authors, working with an Employee and Family Assistance Program provider based in Canada, provided text-based email counselling (cybercounselling) to clients across the country. Cybercounselling was accessible to clients through the same avenues as in-person counselling. Clients self-selected for either cybercounselling or in-person counselling at intake. For the purposes of this study, data from 211 clients have been collected; 105 online and 106 in-person clients. Client demographic data including age, gender, presenting problem, referral source and marital status were collected for each client. Comparing the cyber and in-person client data provides insights into the similarities and differences between cyber and in-person client groups.

Keywords. Client characteristics, employee assistance, cybertherapy, cybercounselling, online counselling, e-counselling, e-therapy

Introduction

An ever increasing diversity of technological systems is being used to deliver mental health services online. Cybertherapy can be provided in virtual reality worlds, multi-user domains with avatars, and may include physiological monitoring and even robotics. Online support groups via chat or email, counselling via webcam and asynchronous email counselling are perhaps the most common modalities.

Cybertherapy is a field that has seen significant growth in the past dozen years [1]. As trust in technology increase internet use becomes the norm, more and more clients are turning to cybertherapy [2].

With increasing diversity comes an increased duty to understand which service is best suited to each client. In the present study, we consider only one specific modality of cybertherapy: "cybercounselling" - defined here as counselling delivered via secure email. The purpose of this study is to explore similarities and differences in client characteristics between online and in-person counselling clients. Our hypothesis is that there will be no significant differences between the two groups.

1. Literature Review

There is a growing body of literature in this field [3, 4, 5, 6, 7, 8, 9, 10] A recent study by the present authors [11] found no overall differences between face-to-face and online clients in terms of effectiveness and satisfaction.

Cybercounselling has been the subject of both quantitative studies [12, 13] and qualitative review analyses [14], but research comparing client characteristics of cyber and in-person clients is limited. DuBois [15] provided some early information about the characteristics of clients seeking cybercounselling in her online practice. The present study seeks to add to the literature by comparing the two client groups.

Barak et al. [1] used a meta-analysis approach to analyse ninety-two studies examining internet-based psychotherapeutic interventions which included a total of 9,764 clients. The mean weighted effect size was 0.53 (medium effect) for internet-based interventions. This is similar to the average effect size in face-to-face therapy. The authors conclude that 'internet based therapy on the average is as effective or nearly as effective as face-to-face therapy' [1, p. 30]. The study, however, did not report on client characteristics of online and in-person clients.

Client satisfaction with online counselling is influenced by the client's comfort and familiarity [16]. A recent study found that face-to-face counselling clients evaluated their experience more favourably than did clients online. However, counselling modality and traditional help-seeking attitudes, and modality and comfort with e-mail and interest in counselling services were found to be significantly correlated. The study is limited in its generalizability because it involved a homogeneous sample of college students.

Anonymity, convenience and privacy were found in another study to be the most common reasons for using cybercounselling services [17], and have been suggested as key advantages for cybercounselling [18]. It has been speculated that 'people who are especially sensitive to the presence of others, who have experienced emotional trauma, social marginalization, or judgment from others may need to communicate without fear of a listener's first reaction' [17, p. 83].

Given that cybercounselling is one of the newest approaches in the field of psychotherapy [19], it is incumbent upon us to continue to investigate whether it is possible distinguish the clients for whom this approach is best suited and those for whom the approach is not. In the case of face-to-face counselling, the client-therapist relationship is known to be important in client satisfaction and treatment outcomes. But in the case of cybercounselling, in addition to the client-therapist relationship [3], the relationship with the technology is also an important factor, and may impact both client satisfaction and treatment outcome [11]. For example, previous research [11] has found that even some clients who express satisfaction with their online counsellor and who experienced significant change as a result of the counselling were less than satisfied with the process. Matching client characteristics to the most appropriate modality is of primary concern for this emerging approach.

2. Method/Tools

PPC Worldwide Canada EAP Services Ltd. (PPC Canada, formerly Interlock EAP) is a Canadian Employee and Family Assistance Program provider. Worldwide Therapy Online Inc. (Therapy Online) began sub-contracting with PPC Canada to provide online counselling for their clients in April 2006. Only Therapy Online counsellors provide online counselling and PPC Canada counsellors provide face-to-face counselling, without overlap.

All prospective clients can contact PPC Canada by phone, email, or by direct self-registration into cybercounselling and are screened by intake workers. Clients in cybercounselling receive the service from Therapy Online's Affiliate Counsellors.

Client data is collected at intake. Client data were subjected to analysis by X^2 tests (alpha=0.05) [20]. Comparisons with referring person and presenting problem were also performed using X^2 tests.

3. Results

Raw data for each client group for all categories except presenting problem is shown in Table 1. Overwhelmingly, there were no significant differences between the two client groups. No differences were found between online and in-person clients for average age (X^2=0.31, df=1), gender (X^2=1.66, df=3), average service hours (X^2=0.05, df=1), or marital status (X^2=0.28, df=2). In addition, there were no significant differences between genders with respect to mean age (X^2=0.02, df=3) and service hours (X^2=0.03, df=1).

Significant differences between the two service modalities were found for only one presenting problem. Significantly more in-person than online clients presented needing to deal with grief (X^2=5.0, df=1). However, the number of clients with this issue was very small (N=5) and so this difference might not hold up in a larger study.

The other significant difference between the two groups was found in relationship to the referral source. Significantly more clients who sought cybercounselling refused to disclose their referral source than did clients seeking in-person counselling (X^2=8.26, df=1).

For both modalities the two most common presenting problems were couples issues (not including separation/divorce concerns) and work-related issues. Couples issues were most common (23 clients in each modality), followed by work-related issues (18 in-person and 17 online clients). In terms of referrals the most common type for both modalities was self-referral.

Table 1. Client Characteristics for in-person and online groups.

Client Characteristic	In-person (N=106)	Online (N=105)
Gender		
Male	24	32
Female	82	73

Average Age (years)	44.5	39.4
Average Service Hours	4.7	5.4
Marital Status		
Single	3	5
Partnered/Married	19	29
Separated/Divorced	7	8
Unknown	77	63
Referral Source		
Doctor	2	1
Family Member	12	6
Friend	2	2
Co-worker	8	11
Self	73	56
Did not say	9	29

4. Conclusion

The data for this study was derived from the demographic data associated with a previous study that looked to see whether there were differences between online and in-person clients in terms of counselling outcome or client satisfaction [11]. That study found no significant differences in outcomes or client satisfaction when comparing cybercounselling and in-person counselling clients. It was on the basis of these findings that we hypothesised that there would be no significant differences in client characteristics.

Concerns that those seeking online counselling differ significantly from those seeking in-person counselling have appeared in the literature [11, 15] and not without reason. The data in the present study make clear that the two groups were virtually identical.

The one difference noted was the higher level of refusal on the part of online clients to disclose their referral source. It is important to understand that this item was optional, whereas the other items were not. One possible explanation is that clients online experience a greater level of anonymity than in-person clients; despite the fact that the same identifying information (e.g. address, place of employment) is collected about both groups. This sense of anonymity is one component of disinhibition [21], an effect hypothesised to explain a variety of online counselling client behaviours [19]. If this is the case then online clients, when give the option, may choose not to disclose identifying information.

Combining insights from this study and the comparison paper noted previously [11] it seems reasonable to conclude that cybercounselling is not only an effective counselling method but is also an appropriate modality for typical clients seen in an EAP setting.

References

[1] A. Barak, L. Hen, M. Boniel-Nissim, & N. Shapira. A comprehensive review and a meta-analysis of the effectiveness of Internet-based psychotherapeutic interventions. *Journal of Technology in Human Services,* **26** (2008), 109-160.

[2] M.J. Mallen, S.X. Day, & M.A. Green. Online versus face to face conversations: An examination of relational and discourse variables. *Psychotherapy: Theory, Research Practice Training,* **40** (2003), 155-163.

[3] L.J. Murphy, D.L. Mitchell. When writing helps to heal: E-mail as therapy, *British Journal of Guidance and Counselling*, **26** (1998) 21–32.

[4] K. Collie, D.L. Mitchell, & L.J. Murphy. Skills for on-line counseling: Maximum impact at minimum bandwidth. In J. W. Bloom and G. R.Walz (Eds.), *Cybercounseling and cyberlearning: Strategies and resources for the millennium* (pp. 219-236), Alexandria, VA, American Counseling Association, 2000.

[5] R.C. Hsiung. (ed.). *Etherapy: Case studies, guiding principles, and the clinical potential of the internet*, New York, Norton, 2002.

[6] J.M. Tyler, & R.A. Sabella, R.A. *Using technology to improve counseling practice: A primer for the 21st Century,* Alexandria, VA, American Counseling Association, 2003.

[7] R. Kraus, J. Zack, & Sticker. (eds.). *Online counseling: A handbook for mental health professionals*, San Diego, CA, Elsevier Academic Press, 2004

[8] D.L. Mitchell, & L.J. Murphy, L. J. E-mail rules! Organizations and individuals creating ethical excellence in telemental-health. In J. Bloom and G. Walz (eds.) *Cybercounseling and Cyberlearning: An ENCORE* (pp. 203-217,. Alexandria, VA, CAPS Press and American Counseling Association, 2004.

[9] K. Derrig –Palumbo, & F. Zeine. *Online therapy: A therapist's guide to expanding your practice*, New York, Norton, 2005.

[10] L.J. Murphy, R.J. MacFadden, & D.L. Mitchell. Cybercounseling online: The development of a University-based training program for e-mail counselling. *Journal of Technology in Human Services*, **26** (2008), 447-469.

[11] L.J. Murphy, P. Parnass, D.L. Mitchell, R.H. Hallett, P. Cayley & S. Seagram. Client satisfaction and outcome comparisons of online and face-to-face counselling methods. *British Journal of Guidance and Counselling*, **39** (2009) 627-640.

[12] P.J. Chechele, & G. Stofle. Individual therapy online via e-mail and internet relay chat. In S. Goss and K. Anthony (Eds.), *Technology in counselling and psychotherapy: A practitioner's guide* (pp. 39-58). Houndmills, UK, Palgrave Macmillian, 2003.

[13] K.H. Luce, A.J. Winzelberg, M.F. Zabinski, & M.I. Osborne. Internet-delivered psychological interventions for body image dissatisfaction and disordered eating. *Psychotherapy: Theory, research, practice, training,* **40** (2003), 148-154.

[14] G.S. Stofle. Chat room therapy. In R.C. Hsiung (Ed.), *Etherapy: Case studies, guiding principles and the clinical potential of the internet* (pp. 92-135), New York, Norton, 2002.

[15] D. DuBois. Clinical and demographic features of the online counselling client population. *Counselling and Psychotherapy Research*, **4** (2004), 18-22.

[16] A. Rochland, N. Beretvas, & J. Zack. The online and face-to-face counselling attitudes scales: A validation study. *Measurement and Evaluation in Counselling and Development,* **37** (2004), 95-111.

[17] T. Liebert, J. Archer, & J. Munson. An exploratory study of client perceptions of internet counselling and the therapeutic alliance. *Journal of Mental Health Counselling,* **28** (2006), 69-84.

[18] Y. A. Hamburger, & E. Ben-Artzi. The relationship between extraversion and neuroticism and the different uses of the Internet. *Computers in Human Behavior,* **16** (2000), 441-449.

[19] L.J. Murphy, P. Parnass, D.L. Mitchell, & S. O'Quinn. The emerging field of cybercounselling: Personal and professional reflections. *Intervention*, **132** (2010), 84-93.

[20] J.H. Zar. *Biostatistical Analysis*. Second Edition. Prentice-Hall Inc., Englewood Cliffs, NJ., 21984.

[21] Suler, J. (2004). The online disinhibition effect. *Cyberpsychology and Behavior*, **7** (1984), 321.326.