

Adopting internet-based psychological interventions for practice: Lessons to take away from three decades of intensive research

EFPA PG eHealth – 2023 Webinar series overview - Webinar 1

15 JUNE
2023

The webinar will commence at 11am CET.



Vilnius University



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SCIENCES



Project Group eHealth

The project group is involved in activities to survey, monitor, investigate and evaluate eHealth applications as well as in efforts to guarantee the quality of applications and guidelines on proper use of eHealth applications. This work is done in international collaboration between experts and together with other health professions.



ehealth.efpa.eu



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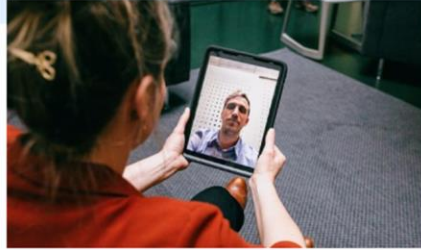
Glauco TREBBI




Luxembourg
Société luxembourgeoise de Psychologie

List of members

Resources from this working group



September 20, 2022

Online consultations and psychologists' use and experience

While online consultations have shown promise to be a means for the effective delivery of high-quality mental healthcare and the first implementations of these digital therapeutic contacts go back nearly...

[Read more >](#)

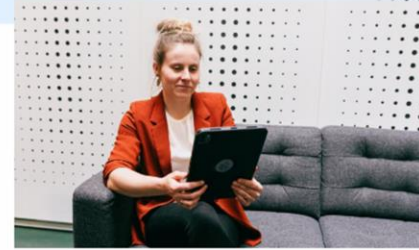


May 26, 2021

Online consultations and psychologists' perspectives

While the general uptake of e-mental health interventions remained low over the past years, physical distancing and lockdown measures relating to the COVID-19 pandemic created a need...

[Read more >](#)



April 29, 2020

Webinar on online consultations

The COVID-19 pandemic crisis forced psychologists to take their consultations (partly) online, in order to continue to provide care.

[Read more >](#)



April 27, 2020

Recommendations for policy and practice

The COVID-19 pandemic has brought with it a great need for the use of telepsychotherapy and other interventions using psychological theories and techniques to support both mental and physical...

[Read more >](#)



January 1, 2020

Digital psychological interventions – consensus statement

This consensus statement from the different members of the EFPA project group on E-health aims to provide general rules of thumb concerning the dissemination in and use of digital...

[Read more >](#)



January 11, 2019

Increasing digital intervention adherence in chronic illness sufferers

Chronic illnesses cause considerable burden in quality of life, often leading to physical, psychological, and social dysfunctioning of the sufferers and their family.

[Read more >](#)



2023 webinars - save the dates



- 12 September – 10am CET
More than metaverse madness? The potential of **immersive technologies** for mental health
Tom Van Daele
- 26 September – 10am CET
EMA & just-in time interventions
Andreas Schwerdtfeger
- 17 October – 5pm CET
The Promises and Pitfalls of using **Machine Learning** in Mental Health
David Gosar
- 26 October – 4pm CET
Global Online Classrooms in How to Train Caregivers of Abandoned Children
Niels Peter Rygaard

Program for today



Jonas Eimontas – Vilnius University

Postdoctoral fellow and assistant professor at
Institute of Psychology, Vilnius University, Lithuania.

Main research interests: internet-delivered psychological interventions

- effectiveness of for depression, anxiety,
and stress-related disorders
- engagement, adherence,
role of therapist support

Representative of the Lithuanian Psychological Association
in EFPA eHealth group.





Vilnius
University



Adopting internet-based psychological interventions for practice: Lessons to take away from three decades of intensive research

Dr. Jonas Eimontas

Vilnius University, Lithuanian Psychological Association

EFPA Project Group e-Health WEBINAR SERIES

15 June 2023, Thomas More University of Applied Sciences, Antwerpen, Belgium

Agenda

1. What internet based interventions are and what they are not.
2. Efficacy and effectiveness. Same intervention in different settings.
3. Target audience. Inpatient, outpatient, private counseling. Blended treatment? Stepped care?
4. Stand alone or with support? Do we need highly trained therapists?
5. Research should be part of the intervention. Easy to implement questionnaires and track progress.
6. Successful implementation examples in private and public practice in Australia, UK, etc.

What internet based interventions are and what they are not.

Terminology

Internet Interventions 21 (2020) 100331



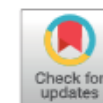
Contents lists available at ScienceDirect

Internet Interventions

journal homepage: www.elsevier.com/locate/invent



Consensus statement on the problem of terminology in psychological interventions using the internet or digital components



Ewelina Smoktunowicz^{a,b}, Azy Barak^c, Gerhard Andersson^{d,e}, Rosa M. Banos^{f,g}, Thomas Berger^h, Cristina Botella^{g,i}, Blake F. Dear^j, Tara Donker^k, David D. Ebert^l, Heather Hadjistavropoulos^m, David C. Hodginsⁿ, Viktor Kaldø^{o,p}, David C. Mohr^q, Tine Nordgreen^r, Mark B. Powers^s, Heleen Riper^k, Lee M. Ritterband^t, Alexander Rozental^{e,u}, Stephen M. Schueller^v, Nickolai Titov^j, Cornelia Weise^w, Per Carlbring^{b,*}

EFPA Project Group e-Health WEBINAR SERIES

15 June 2023, Thomas More University of Applied Sciences, Antwerpen, Belgium

Terminology

Table 1

Examples of title terms used to delineate internet-delivered psychological interventions, including the number of occurrences in titles in PubMed in November 2019.

Term used	Titles in PubMed	Publication title	Citation
Avatar-assisted therapy	3	Avatar-assisted therapy: a proof-of-concept pilot study of a novel technology-based intervention to treat substance use disorders.	Gordon et al. (2017)
Chat treatment	1	Effectiveness of a web-based solution-focused brief chat treatment for depressed adolescents and young adults: randomized controlled trial.	Kramer et al. (2014)
Computer-assisted therapy	15	Computer-assisted therapy for medication-resistant auditory hallucinations: proof-of-concept study.	Leff et al. (2013)
Computer intervention	10	Development and preliminary pilot evaluation of a brief tablet computer intervention to motivate tobacco quitline use among smokers in substance use treatment.	Brown et al. (2017)
Computerized therapy	6	Attitudes towards the use of computerized Cognitive Behavior Therapy (cCBT) with children and adolescents: a survey among Swedish mental health professionals.	Vigerland et al. (2014)
Computer-mediated psychotherapy	1	Psychotherapy in cyberspace: A 5-dimensional model of online and computer-mediated psychotherapy.	Suler (2000)
Computer therapy	11	My care manager, my computer therapy and me: The relationship triangle in computerized cognitive behavioral therapy.	Cavanagh et al. (2018)
Cybertherapy	17	Cybertherapy meets Facebook, blogger, and second life: an Italian experience.	Graffeo and La Barbera (2009)
Digital health	546	Accelerating digital mental health research from early design and creation to successful implementation and sustainment	Mohr et al. (2017)
Digital service	3	Evaluation of the practitioner online referral and treatment service (PORTS): the first 18 months of a state-wide digital service for adults with anxiety, depression, or substance use problems	Titov et al. (2019)

Terminology

Table 1
Examples of title terms used to delineate internet-delivered

Term used	Titles in PubMed				
Avatar-assisted therapy	3	Distance counseling	1	Minimal-contact intervention(s)	7
Chat treatment	1	Distance therapy	1	Online clinical work	1
Computer-assisted therapy	15	E-aid	1	Online counseling	17
Computer intervention	10	E-counseling	7	Online intervention	129
Computerized therapy	6	E-health program	2	Online program	60
Computer-mediated psychotherapy	1	E-mental health	87	Online psychotherapy	3
Computer therapy	11	Etherapy	4	Online therapy	13
Cybertherapy	17	E-therapy	27	Online treatment	29
Digital health	546	E-mail therapy	3	Self-help through the internet	2
Digital service	3	Guided self-help	187	Telecounseling	2
		Internet-administered treatment	4	Telepsychiatry	349
		Internet-based treatment	50	Telepsychology	18
		Internet-delivered therapy	175	Teletherapy	785
		Internet intervention	81	Treatment administered through a smartphone application	2
		Internet-supported therapy	2	Virtual reality therapy	50
		Internet therapy	11		
		Internet treatment	25		
		Interapy	4		
		Medicine 2.0	20	Web-based intervention	250

Classification

Clinical services: clinician-client contract		Digital interventions: self-help	
Type 1	Type 2	Type 3	Type 4
Face-to-face (e.g., traditional therapy)	Face-to-face augmented with technology (e.g., teletherapy, therapy using online tools, apps)	Guided interventions (e.g., using coaches to increase adherence with online intervention)	Totally automated interventions (with no human guidance, like a self-help book)
Consumable	Consumable	Consumable	Non-consumable

Muñoz, R. F., Chavira, D. A., Himle, J. A., Koerner, K., Muroff, J., Reynolds, J., ... & Schueller, S. M. (2018). Digital apothecaries: a vision for making health care interventions accessible worldwide. *Mhealth*, 4.

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Berryhill, M. B., Culmer, N., Williams, N., Halli-Tierney, A., Betancourt, A., Roberts, H., & King, M. (2019). Videoconferencing psychotherapy and depression: a systematic review. *Telemedicine and e-Health*, 25(6), 435-446.

Muñoz, R. F., Chavira, D. A., Himle, J. A., Koerner, K., Muroff, J., Reynolds, J., ... & Schueller, S. M. (2018). Digital apothecaries: a vision for making health care interventions accessible worldwide. *Mhealth*, 4.

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Conditions and therapies

Mostly cognitive behavioral therapy

7 studies for internet-delivered psychodynamic therapy (Lindegard et al., 2020)

Lindegard, T., Berg, M., & Andersson, G. (2020). Efficacy of internet-delivered psychodynamic therapy: Systematic review and meta-analysis. *Psychodynamic Psychiatry*, 48(4), 437-454.

Example from Lithuania

Depresijos terapija



1. Programos pristatymas



2. Elgesio aktyvinimas



3. Elgesio aktyvinimas
2 dalis



4. Priėmimas



5. Miegas



6. Vienatvė



7. Škausmas



8. Gyvenimo istorija



Example from Lithuania (2)

🏠 Pradėti ☰ Meniu 👤 Administratorius 🆘 Pagalba ⚙️ Jonas 🔄 Atsijungti



Depresijos terapija

Programos skyriai / 2. Elgesio aktyvinimas 🔗 📄 🖨️

- 1. Įvadas >
- 2. Ydingas ir teigiamas ratas >
- 3. Keliai, vedantys į depresiją >
- 4. Plius ir minus veiklos >
- 5. Užduotis: Veiklos planas, atitinkantis dabartinį jūsų aktyvumo lygį >
- 6. Plius veiklos + >
- 7. Užduotis: Mano plus veiklos >

Elgesio aktyvinimas

Puiku, baigėte pirmąjį skyrių! Šiame ir kitame skyriuose aptarsime depresiją ir elgesio aktyvinimą. Elgesio suaktyvinimas reiškia veiklą ir elgesio, galinčių padėti pasijausti geriau, atlikimą. Išorinį elgesį keisti lengviau nei mintis ar jausmus. Todėl dirbsime keisdami elgesį ir praktikuodami naujas veiklas, kurios gali teigiamai paveikti jūsų nuotaiką.

Šio skyriaus tikslai:

- Suprasti ryšius tarp elgesio ir jausmų.
- Atpažinti *plius* ir *minus* veiklas, įtraukti daugiau *plius* veiklų.
- Sukurti kitos savaitės veiklos planą, įtraukiant daugiau *plius* veiklų.

Research at Vilnius University

Department of Clinical Psychology and Center for Psychotraumatology

- iPSYDE for depressed elderly
- TinnitusLT for tinnitus distress
- PIPP for PTSD
- BADI for adjustment disorder
- Forest for nurses
- Forest for medics
- Slaugau artimą for informal caregivers
- StillMe for students after psychotrauma

Apps

Bakker et al., 2016

Table 1. Currently available iOS apps compared across recommended features.

App	Recommended feature ^a															
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AnxietyCoach	✓	✗	✗	✓ ^b	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✗	✗
Behavioral Experiments	✓	✓	✗	✗	✓	✗	✗	✓	✗	✗	✗	✓	✗	✗	✗	✗
Breathe	✗	✗	✓	✗	✗	✗	✗	✓	✗	✗	✗	✗	✓	✓	✓	✗
DBT Diary Card and Skills Coach	✗	✗	✗	✗	✓	✓	✓	✓	✗	✓	✓	✓	✓	✗	✗	✗
Depression Prevention	✗	✗	✗	✗	✗	✓	✗	✗	✗	✓	✗	✗	✗	✓	✗	✗
Happify	✗	✓	✓	✓ ^b	✗	✓	✓	✗	✗	✗	✓	✓	✓	✗	✗	✗
HealthyHabits	✗	✓	✓	✗	✗	✓	✗	✗	✗	✓	✓	✓	✓	✗	✗	✗
HealthyMinds	✓	✓	✓	✗	✓	✓	✓	✓	✓	✓	✗	✓	✓	✓	✓	✗
HIAF	✗	✗	✓	✗	✓	✗	✓	✗	✗	✗	✗	✓	✓	✗	✓	✗
iCouch CBT	✓	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗
iCounselor ^f	✓	✗	✗	✗	✓	✓	✗	✓	✓ ^d	✓	✗	✗	✗	✓	✗	✗
iMoodJournal	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✓	✓	✓	✗	✗
In Hand	✗	✓	✓	✗	✓	✓	✗	✓	✗	✗	✗	✗	✗	✓	✓	✗
MindShift	✓	✗	✗	✗	✓	✓	✓	✓	✓	✓	✗	✗	✗	✗	✗	✗
MoodKit	✓	✓	✗	✗	✓	✓	✗	✓	✓	✓	✗	✓	✓	✗	✗	✗
Moodlytics	✗	✗	✓	✗	✓	✗	✗	✗	✗	✗	✗	✓	✓	✗	✗	✗
Moody Me	✗	✗	✓	✗	✓	✗	✓	✗	✗	✗	✗	✓	✓	✓	✗	✗
Pacifica	✓	✗	✓	✗	✓	✓	✗	✓	✓	✓	✗	✓	✗	✓	✗	✗
Pocket CBT	✓	✓	✗	✗	✓	✗	✗	✗	✗	✗	✗	✓	✗	✗	✗	✗
SAM	✓	✗	✗	✗	✓	✓	✓	✓	✓	✓	✗	✓	✗	✓	✗	✗
Smiling Mind	✓	✓	✓	✓	✓	✗	✗	✗	✗	✗	✓	✓	✗	✓	✓	✗
Stress & Anxiety Companion	✓	✗	✓	✗	✓	✓	✓	✓	✗	✗	✗	✓	✗	✓	✗	✗
SuperBetter	✗	✓	✓	✓ ^b	✗	✓	✗	✗	✓	✓	✓	✓	✓	✗	✗	✗
ThinkHappy	✗	✓	✓	✗	✗	✗	✓	✗	✗	✗	✗	✗	✗	✗	✗	✗
What's Up?	✓	✓	✓	✗	✗	✓	✓	✓	✗	✓	✗	✗	✗	✓	✗	✗
WorkOut	✓	✓	✓	✗	✓	✓	✗	✗	✓	✓	✗	✓	✓	✓	✗	✗
WorryTime	✓	✗	✓	✗	✗	✗	✗	✓	✗	✗	✗	✗	✓	✓	✓	✗

Efficacy and effectiveness. Same intervention in different settings.

RCTs

Table 1 Conditions for which guided Internet-delivered psychological treatment has been tested in research (randomized controlled trials)

Psychiatric conditions	Somatic conditions/ health problems	Other
Depression (including postpartum depression)	Headache	Couples therapy
Bipolar disorder	Tinnitus	Parent training
Panic disorder	Diabetes	Stress problems
Social phobia	Insomnia	Perfectionism
Specific phobia	Childhood encopresis	Burnout
Mixed anxiety/depression	Chronic pain	Procrastination
Health anxiety	Cancer	Bereavement
Obsessive-compulsive disorder	Irritable bowel syndrome	Infertility distress
Generalized anxiety disorder	Erectile dysfunction	Body dissatisfaction
Posttraumatic stress disorder	Hearing loss	Grief
Pathological gambling	Chronic fatigue	
Bulimia and eating disorders	Multiple sclerosis	
Body dysmorphic disorder	Obesity	
Drug addictions	Smoking	
Attention-deficit/hyperactivity disorder		

Andersson, G. (2016). Internet-delivered psychological treatments. *Annual review of clinical psychology*, 12, 157-179.

Efficacy vs face-to-face

Social anxiety disorder
Panic disorder
Depressive symptoms
Body dissatisfaction
Insomnia
Tinnitus
Male sexual dysfunction
Spider phobia
Snake phobia
Fibromyalgia



Cognitive Behaviour Therapy

ISSN: 1650-6073 (Print) 1651-2316 (Online) Journal homepage: <http://www.tandfonline.com/loi/sbeh20>



Internet-based vs. face-to-face cognitive behavior therapy for psychiatric and somatic disorders: an updated systematic review and meta-analysis

Per Carlbring, Gerhard Andersson, Pim Cuijpers, Heleen Riper & Erik Hedman-Lagerlöf

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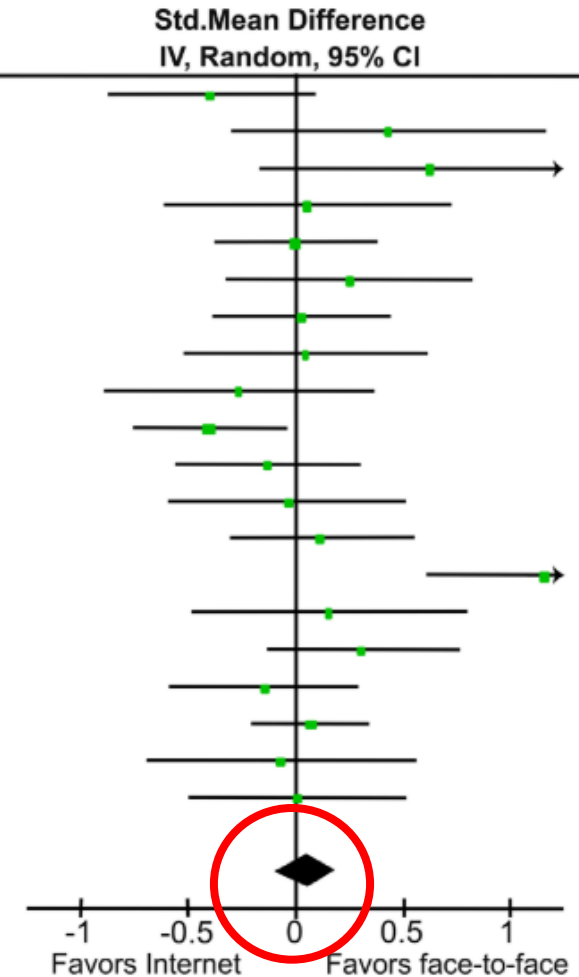
To link to this article: <https://doi.org/10.1080/16506073.2017.1401115>

Efficacy vs face-to-face

Social anxiety disorder
 Panic disorder
 Depressive symptoms
 Body dissatisfaction
 Insomnia
 Tinnitus
 Male sexual dysfunction
 Spider phobia
 Snake phobia
 Fibromyalgia

Study	Weight	Std. Mean Difference IV, Random, 95% CI
Andersson et al. (2013)	5.3%	-0.39 [-0.87, 0.09]
Andersson et al. (2009)	3.0%	0.43 [-0.30, 1.15]
Andersson et al. (2013)	2.6%	0.62 [-0.17, 1.42]
Andrews et al. (2011)	3.4%	0.06 [-0.61, 0.72]
Bergström et al. (2010)	6.9%	0.00 [-0.37, 0.37]
Blom et al. (2015)	4.2%	0.25 [-0.32, 0.82]
Botella et al. (2010)	6.2%	0.03 [-0.38, 0.44]
Carlbring et al. (2005)	4.3%	0.05 [-0.51, 0.61]
Gollings et al. (2006)	3.7%	-0.26 [-0.88, 0.36]
Hedman et al. (2011)	7.1%	-0.40 [-0.75, -0.05]
Jasper et al. (2014)	5.9%	-0.13 [-0.55, 0.30]
Kaldo et al. (2008)	4.4%	-0.04 [-0.58, 0.51]
Kiropoulos et al. (2008)	6.0%	0.12 [-0.30, 0.54]
Lancee et al. (2016)	4.4%	1.16 [-0.61, 1.71]
Lappainen et al. (2014)	3.6%	0.16 [-0.48, 0.79]
Paxton et al. (2007)	5.7%	0.31 [-0.13, 0.76]
Schover et al. (2012)	5.8%	-0.14 [-0.58, 0.29]
Spek et al. (2007)	8.6%	0.07 [-0.21, 0.34]
Vallejo et al. (2015)	3.8%	-0.06 [-0.68, 0.56]
Wagner et al. (2014)	5.0%	0.01 [-0.49, 0.51]
Total (95% CI)	100.0%	0.05 [-0.09, 0.20]

Heterogeneity: $\tau^2 = 0.04$; $\chi^2 = 32.91$, $df = 19$ ($P = 0.02$); $I^2 = 42\%$
 Test for overall effect: $Z = 0.75$ ($P = 0.45$)



Effectiveness in regular clinical settings

Verhaltenstherapie

Praxis | Forschung | Perspektiven

Review Article · Übersichtsarbeit

Verhaltenstherapie 2013;23:140–148
DOI: 10.1159/000354779

Online publiziert: 22. August 2013

Effectiveness of Guided Internet-Based Cognitive Behavior Therapy in Regular Clinical Settings

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^b Department of Clinical Neuroscience, Division of Psychiatry,

^c Department of Clinical Neuroscience, Osher Center for Integrative Medicine and Division of Psychology, Karolinska Institutet, Stockholm, Sweden

Effectiveness in regular clinical settings

Table 2. Effectiveness studies of ICBT delivered to patients in clinical routine practice

Reference	Country	Disorder	N	Outcome	Effect sizes ^a (pre/post d)
Bergström et al. [2009]	Sweden	panic disorder	20	PDSS	2.5
Hedman et al. [2013]	Sweden	panic disorder	570	PDSS-SR	a) 1.07
Ruwaard et al. [2012]	the Netherlands	a) panic disorder	a) 139	a) PDSS-SR	a) 1.36
		b) posttraumatic stress	b) 478	b) IES-intrusion and avoidance	b) 1.36
		c) depression	c) 413	c) BDI	c) 2.01
		d) burnout	d) 470	d) DASS-stress	d) 1.49
Aydos et al. [2009]	Australia	social anxiety disorder	17	a) SIAS	a) 1.51
				b) SPS	b) 0.60
Newby et al. [2013]	Australia	mixed anxiety and depression	136	a) GAD-7 b) PHQ-9	a) 1.15 b) 0.89
Mewton et al. [2012]	Australia	general anxiety disorder	588	GAD-7	0.86
Williams and Andrews [2013]	Australia	depression	359	PHQ-9	0.98
Kaldo et al. [2004]	Sweden	tinnitus	77	TRQ	0.56
Kaldo et al. [2013]	Sweden	tinnitus	293	TRQ	0.58

ICBT = internet-based cognitive behavior therapy; PDSS = Panic Disorder Severity Scale; SIAS = Social Interaction Anxiety Scale; GAD-7 = Generalized Anxiety Disorder Scale, 7-item version; PHQ-9 = Patient Health Questionnaire 9; PDSS-SR = Panic Disorder Severity Scale Self-Report; IES = Impact of Event Scale; BDI = Beck Depression Inventory; DASS = Depression Anxiety Stress Scales; TRQ = Tinnitus Reaction Questionnaire.

Effectiveness in regular clinical settings: beyond symptoms

Improvement in impairment rate high and independent from improvement in symptoms

Internet Interventions 31 (2023) 100603



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journal homepage: www.elsevier.com/locate/invent



Predictors of functional impairment at assessment and functional improvement after treatment at a national digital mental health service

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Effectiveness in regular clinical settings: unguided

More effective than guided self-help bibliotherapy and psychoeducational group therapy








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ARTICLE

Comparison of outcomes across low-intensity psychological interventions for depression and anxiety within a stepped-care setting: A naturalistic cohort study using propensity score modelling

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Angel Enrique^{1,2}  | Sarah Sollesse³ | Judith Chapman³ |
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Role of the clinician

Amongst users of digital mental health services, therapists play a critical role in facilitating informed decision-making to take up treatment

CLINICAL PSYCHOLOGIST
<https://doi.org/10.1080/13284207.2022.2163157>



Decision-making about uptake and engagement among digital mental health service users: a qualitative exploration of therapist perspectives

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ABSTRACT

Objective: This study explored therapist perspectives on decision-making about uptake and engagement with online assessment and treatment for anxiety and depression among digital mental health service (DMHS) users.

ARTICLE HISTORY

Received 30 June 2022
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Stand alone or with support? Do we need highly trained therapists?

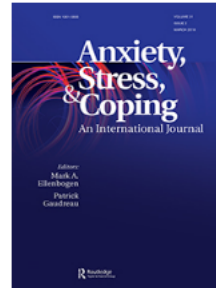
Attrition and dropout

Easy in = easy out

MoodGym → Drop out 97%

Therapist support

- Better effects
- More engagement
- Less attrition



Anxiety, Stress, & Coping
An International Journal

Routledge
Taylor & Francis Group

ISSN: 1061-5806 (Print) 1477-2205 (Online) Journal homepage: <http://www.tandfonline.com/loi/gasc20>

The role of therapist support on effectiveness of an internet-based modular self-help intervention for adjustment disorder: a randomized controlled trial

Jonas Eimontas, Goda Gegieckaite, Migle Dovydaityene, Egle Mazulyte, Zivile Rimsaite, Paulius Skruibis, Paulina Zelviene & Evaldas Kazlauskas

Target population. Inpatient, outpatient, private counselling.

Blended treatment

Stepped care

Stepped care. Mixed results

Higher costs and significantly more treatment time (Kenter et al., 2015)

VS

Reducing waiting times and enhancing clinical efficiency (Duffy et al., 2020)

- 1) Kenter, R. M., van de Ven, P. M., Cuijpers, P., Koole, G., Niamat, S., Gerrits, R. S., ... & van Straten, A. (2015). Costs and effects of Internet cognitive behavioral treatment blended with face-to-face treatment: Results from a naturalistic study. *Internet Interventions*, 2(1), 77-83.
- 2) Duffy, D., Enrique, A., Connell, S., Connolly, C., & Richards, D. (2020). Internet-delivered cognitive behavior therapy as a prequel to face-to-face therapy for depression and anxiety: a naturalistic observation. *Frontiers in psychiatry*, 10, 902.

Attitudes

Clients tend to be more positive towards internet-based treatments than clinicians, even if there are exceptions (Wangberg et al., 2007).


Psychologists are concerned about (De Witte et al., 2021):

- **Performance expectancy** (Usefulness of technology, productivity, & career prospects)
- **Attitude toward using technology** (Job satisfaction & (dis)liking online consultations Opinion)
- **Social influence** (Opinion of important others & organisational support Resources)
- **Facilitating conditions** (Resources, knowledge, compatibility with practices, & availability of assistance)
- **Client-oriented** (Client performance expectancy, effort expectancy, social influence, facilitating conditions, anxiety, concerns regarding data security, knowledge, & attitudes)

Therapeutic alliance

“Independent of communication modalities, diagnostic groups and amount of contact between clients and therapists, client-rated alliance scores were high, roughly equivalent to alliance ratings found in studies on face-to-face therapy.”

The therapeutic alliance in internet interventions: A narrative review and suggestions for future research

Thomas Berger  

Pages 511-524 | Received 05 Sep 2015, Accepted 09 Nov 2015, Published online: 06 Jan 2016

 Download citation

 <https://doi.org/10.1080/10503307.2015.1119908>



Negative effects

Large patient-level meta-analysis on deterioration found that deterioration rates among the treated participants were 5.8% and in the controls 17.4% (Rozenal et al., 2017).

Successful implementation examples in private and public sector

Implementation

Standalone
Stepcare

Australia
UK
USA
Sweden
Germany

The screenshot shows the website for 'beating the blues' (cognitive behavioural therapy). The navigation menu includes: Home, What We Offer, Who We Can Help, About our Therapy, and Contact Us. The main banner features a woman thinking, with the text: 'CBT Online Course', 'Feeling stressed, anxious or depressed? Check your mood and anxiety with our free online test', and a 'CLICK HERE' button. Below the banner are three service options: 'For Service Providers' (with a doctor icon), 'For Yourself' (with a house icon), and 'For Employers' (with a briefcase icon).

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15 June 2023, Thomas More University of Applied Sciences, Antwerpen, Belgium

Implementation

Australia
UK
USA
Sweden
Germany

MindSpot

1800 61 44 34 I need urgent help Login

Get Informed Assessment Treatment Courses About For Health Professionals

A digital mental health clinic for all Australians.

Trusted by over 150,000 Australians, MindSpot provides free, anonymous assessment and treatment for adults experiencing stress, anxiety, depression, OCD, PTSD, and chronic pain. Start with a 20-minute assessment and get connected with help.

Start your online assessment Learn more

Always confidential. Free for everybody. Evidence-based.

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Success stories: Australia

Who pays for mental health services?

Medicare pays for all or part of the cost of seeing doctors and psychiatrists. You can get a Medicare benefit for eligible psychologists, occupational therapists and social workers if you have a mental health treatment plan, or if a psychiatrist or paediatrician refers you. There may still be a gap to pay.

A mental health treatment plan helps pay for up to 20 appointments with a mental health professional each calendar year. A doctor must refer you and you must have a diagnosed mental illness.

Find out more about [paying for mental health services](#).

Source: <https://www.headtohealth.gov.au/head-to-health-services>

Success stories: Australia

Online mental health programmes include:

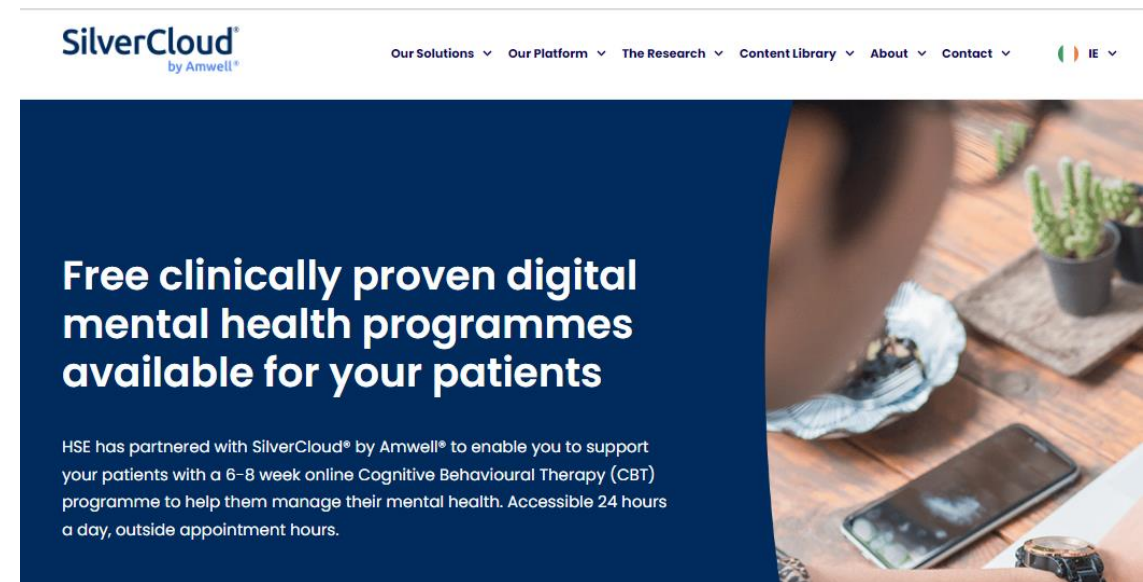
- headspace (for people aged 12 to 25 and their families) — call 1800 650 890 or chat online
- Beyond Blue (anyone feeling depressed or anxious) — call 1300 22 4636 or chat online
- Black Dog Institute (anyone affected by mood disorders) — online help
- SANE Australia (people living with a mental illness) — call 1800 18 7263 or chat online
- This Way Up (anyone with stress, anxiety and depression) — online courses
- MindSpot (people with anxiety and depression) — call 1800 61 44 34 or complete an online screening assessment.

**MindSpot supports more than
25,000 Australians each year**


Source: <https://www.healthdirect.gov.au/>

Success stories: UK, Ireland

- Improving access to psychological therapies (IAPT) → NHS Talking Therapies, for anxiety and depression
- Private companies e.g., SilverCloud providing services for Health Service Executive

A screenshot of the SilverCloud website banner. The banner features a dark blue background on the left with white text, and a photograph of a person's hand holding a smartphone on the right. The text on the banner reads: "Free clinically proven digital mental health programmes available for your patients". Below this, it states: "HSE has partnered with SilverCloud® by Amwell® to enable you to support your patients with a 6-8 week online Cognitive Behavioural Therapy (CBT) programme to help them manage their mental health. Accessible 24 hours a day, outside appointment hours." The SilverCloud logo is in the top left, and a navigation menu is in the top right.

SilverCloud[®]
by Amwell[®]

Our Solutions ▾ Our Platform ▾ The Research ▾ Content Library ▾ About ▾ Contact ▾  IE ▾

Free clinically proven digital mental health programmes available for your patients

HSE has partnered with SilverCloud[®] by Amwell[®] to enable you to support your patients with a 6-8 week online Cognitive Behavioural Therapy (CBT) programme to help them manage their mental health. Accessible 24 hours a day, outside appointment hours.

Barriers to implementation



Improving Implementation of eMental Health for Mood Disorders in Routine Practice: Systematic Review of Barriers and Facilitating Factors

Christiaan Vis ^{1,2} ; Mayke Mol ^{2,3} ; Annet Kleiboer ^{1,2} ; Leah Bührmann ^{1,2} ;
Tracy Finch ⁴ ; Jan Smit ^{2,3} ; Heleen Riper ^{1,2,3,5} 

- (1) the acceptance of eMental Health (eMH) concerning expectations and preferences of patients and professionals about receiving and providing eMH in routine care
- (2) the appropriateness of eMH in addressing patients' mental health disorders
- (3) the availability, reliability, and interoperability with other existing technologies such as the electronic health records are important factors for mental health care professionals to remain engaged in providing eMH to their patients in routine care.

Roundup

- Need for involvement of mental health professionals working in regular clinical settings.
- Need for higher effectiveness and better processes.
- Policy matters:
- EFPA survey on online psychological consulting could have hints on how to promote internet-delivered interventions.



Vilnius
University



Adopting internet-based psychological interventions for practice: Lessons to take away from three decades of intensive research

Dr. Jonas Eimontas

Vilnius University, Lithuanian Psychological Association

EFPA Project Group e-Health WEBINAR SERIES

15 June 2023, Thomas More University of Applied Sciences, Antwerpen, Belgium