# **Evidence Review**

## Outcomes for remote psychotherapy

### Key messages

- Studies show that online therapy, using videoconferencing or other internet-based tools can be as effective as face-to-face equivalent therapy, and is more effective when compared to waiting-list/inactive controls.
- The majority of research has focussed on common mental disorders such as depression and anxiety; limited trials for treatment of other conditions such as OCD, first-episode psychosis and eating disorders show some promise but at present are mostly small-scale studies and more research is needed in this area.
- Current evidence supports the use of CBT or therapies with a CBT foundation, there is limited evidence available on other forms of therapy.
- Online therapy has been reported to reduce barriers to accessing mental health support for some patients (for example those with disabilities or lacking access to transport), which has been rapidly accelerated in the current pandemic.
- Barriers to online therapies include the need for technological means to remain up-todate and usable, and individual social/educational needs such as computer literacy, access to computer equipment and home environment.
- Some studies have suggested that the development of rapport between the therapist
  and patient may take longer, or require different approaches, due to the electronic
  medium; equally recent papers have also highlighted the need for risk assessment and
  alternate ways to contact patients if concerns are raised.







**Month YEAR** 

REF: 20210302

### You asked

a review of outcomes for people offered psychological therapy by remote means such as telephone, skype, or Attend anywhere?

### The Evidence

Thomas N, McDonald C, de Boer K, Brand RM, Nedeljkovic M, Seabrook
L. Review of the current empirical literature on using
videoconferencing to deliver individual psychotherapies to adults with
mental health problems. Psychology and Psychotherapy: Theory,
Research and Practice. 2021

This review, prompted by the pandemic, explored both qualitative and quantitative evidence concerning the use of videoconferencing to deliver individual psychotherapy. The review found that there is an established evidence-base for using videoconferencing in treating the following mental health conditions: PTSD, anxiety and depression using cognitive behavioural therapies, or those utilising CBT foundations. Other trials suggest effectiveness for health anxiety, bulimia and OCD but less research is available in these conditions. There is not yet an evidence base for the use of videoconferencing in severe or complex mental health problems. Overall, videoconferencing demonstrates equal effectiveness compared to inperson therapy, and higher effectiveness compared to waiting list controls. The review also highlights findings suggesting that while therapists may need to adapt to this medium, particularly in terms of being able to read expression and body language, general outcome measures for therapeutic alliance are similar to face-to-face therapy.



2. McLean SA, Booth AT, Schnabel A, Wright BJ, Painter FL, McIntosh JE. **Exploring the Efficacy of Telehealth for Family Therapy Through** Systematic, Meta-analytic, and Qualitative Evidence. Clinical child and family psychology review. 2021

REF: 20210302

This review examined the evidence for the use of telehealth options in family mental health services. The reviewers examined both professionally published guidelines, evidence for efficacy of telehealth family therapy and qualitative information using information from experienced family therapists. Overall the reviewers found that guidelines for implementing telehealth services focussed on the practical application/operational matters with relatively little information about the therapeutic process. However the evidence suggested that compared to face-to-face therapy, telehealth interventions showed equivalent outcomes. The use of telehealth services showed improvement in outcomes in studies in which it was compared with written materials or waiting-list controls. The qualitative data highlighted however that telehealth could be slower to demonstrate effectiveness, with more time and additional accommodations needed to establish rapport. All 12 therapists contributing to the qualitative data agreed that managing risk via telehealth was "more delicate than managing risk in person [and that]... imminent safety risks would contraindicate suitability for TH therapy". Other potential barriers or concerns were discussed including the need to have other means of communicating with the client(s) in case of concern or of technology failures; positive aspectsincluding equity of access and improving accessibility of care for patients were also highlighted. The reviewers also offer recommendations for future study and improvement of services including training and more long-term follow up studies.





3. Thompson EM, Destree L, Albertella L, Fontenelle LF. Internet-based acceptance and commitment therapy: A transdiagnostic systematic review and meta-analysis for mental health outcomes. Behavior therapy. 2021

REF: 20210302

This systematic review examined the effectiveness of internet based acceptance and commitment therapy on anxiety, depression, quality of life, and its use across other individuals with different psychological/somatic conditions. On average, £interventions involved 6.75 modules delivered over 8.47 weeks" most common features of the interventions included in the review were personalised messages and feedback for participants, automated text or emails and downloadable "MP3 mindfulness or experiential exercises", with most studies compared against waiting list controls. Across all studies included in the review, small effects were found for all outcomes, and maintained at follow up. Interventions that included therapist involvement showed higher levels of effectiveness in improving depression and psychological flexibility. Overall the authors concluded that the interventions showed promise in offering accessible treatment, however more research is needed as the studies were generally small-scale.





4. Christ C, Schouten MJ, Blankers M, van Schaik DJ, Beekman AT, Wisman MA, Stikkelbroek YA, Dekker JJ. Internet and computer-based cognitive behavioral therapy for anxiety and depression in adolescents and young adults: Systematic review and meta-analysis. Journal of medical Internet research. 2020.

REF: 20210302

This systematic review aimed to provide an updated evidence review concerning the effectiveness of online/electronic CBT interventions in treating anxiety and depression in young people (aged 12-25). The review found that compared to active/face-to-face treatment controls, eCBT showed "similar effects regarding anxiety symptoms", regarding depression symptoms the results were less clear. Many of the studies were at high risk of bias and there were no standard outcome measures across the studies, more high quality research is needed, especially including long-term follow up.



 Fu Z, Burger H, Arjadi R, Bockting CL. Effectiveness of digital psychological interventions for mental health problems in low-income and middle-income countries: a systematic review and meta-analysis. The Lancet Psychiatry. 2020

Focussing on low and middle-income countries(LMICs), this review sought to examine the evidence concerning the effectiveness of digital or online interventions in reducing mental health problems. The review found that the majority of research focussed on "individuals with depression and substance misuse". For these groups, the evidence showed that digital interventions were effective compared to waiting-list control or "usual care" in LMICs, however studies and measures were heterogenous and more standardised outcome measures and larger studies are needed, along with further research for other mental health related conditions.





REF: 20210302

6. Domhardt M, Steubl L, Boettcher J, Buntrock C, Karyotaki E, Ebert DD, Cuijpers P, Baumeister H. Mediators and mechanisms of change in internet-and mobile-based interventions for depression: A systematic review. Clinical Psychology Review. 2020

This review examined studies reporting on the use of internet or mobile-based therapeutic interventions for people with depression. They found the majority of studies included were based on CBT foundational principles or themes. Overall the review found that the effectiveness of these treatments depending on several variables, but chiefly the cognitive skills of the user along with other behavioural and emotional variables, in a way "comparable to those mediators already identified in face-to-face psychotherapies". However more longitudinal studies are needed in this area.



7. Dellazizzo L, Potvin S, Luigi M, Dumais A. Evidence on Virtual Reality– Based Therapies for Psychiatric Disorders: Meta-Review of Meta-Analyses. Journal of medical Internet research. 2020

This review examined the evidence concerning the use of virtual reality interventions in treating patients. The review found that the most common use of VR in psychotherapy was for treating anxiety which showed generally positive effects compared to waiting list/inactive controls. Other conditions particularly neurocognitive disorders and schizophrenia were reported on, but evidence remains limited. Thus far, interventions have shown generally positive effects, particularly as they can be tailored to the individual patient's needs, however further research is needed and VR has not yet shown to be more effective compared with other evidence-based treatments.





8. Xiang X, Wu S, Zuverink A, Tomasino KN, An R, Himle JA. Internetdelivered cognitive behavioral therapies for late-life depressive symptoms: a systematic review and meta-analysis. Aging & mental health. 2020

REF: 20210302

This review examined intervention studies involving internet-based CBT interventions for symptoms of depression in older adults. Nine studies met the inclusion criteria, seven of which included some level of therapist involvement while two focussed on self-guided interventions. The review found that effect sizes reported in the study showed clinically significant improvement, suggesting that the interventions are feasible for reducing depressive symptoms, although effectiveness was shown to decrease the older the adults were, although the authors did consider this may be due to reduced technological proficiency/digital literacy, or other accessibility measures. Other evidence suggested that in some older adults the internet based intervention may be more effective in that they "may be more likely to adhere to treatment than their younger counterparts", and the online setting improved accessibility to treatment for those with disabilities or difficulty travelling.

Overall the reviewers found research suggested iCBT demonstrated some promise in reducing symptoms in older adults with mild-to-moderate depression, but studies were limited and those available were of generally low-quality indicating further research is needed.





9. Hanley T, Wyatt C. A systematic review of higher education students' experiences of engaging with online therapy. Counselling and Psychotherapy Research. 2020.

REF: 20210302

This systematic review examined what factors influenced higher education students' engagement with online therapy. The review examined reasons why HE students might engage or withdraw from online therapy. Over all the study found that students generally viewed the concept positively, particularly around notions of anonymity, avoiding face-to-face contact and allowing more accessibility but reported barriers to usage included "technological challenges ad persisting mental health stigma". Other concerns regarding the need for clear and transparent information about the services offered online along with the need for services to be secure and technologically up-to-date were highlighted.



10.Davies F, Shepherd HL, Beatty L, Clark B, Butow P, Shaw J.
Implementing Web-Based Therapy in Routine Mental Health Care:
Systematic Review of Health Professionals' Perspectives. Journal of medical Internet research. 2020.

REF: 20210302

This systematic review looked at health care professionals perceptions around the use of web-based therapy options, as well as barriers and facilitators to usage. The review found that studies on the whole showed health care professionals generally supported online therapy options, but only for patients who were low risk with "relatively straightforward diagnoses" and high levels of engagement and computer literacy. Many professionals advocated blended approaches with both online and face-to-face, in order to better build rapport and relationships with patients, and to help with active monitoring and follow up. Barriers to usage/implementation included the need for organisational support and the need for concerns about security and confidentiality to be addressed. Overall the authors concluded that although there was general support for the usefulness of online interventions, professionals felt that they would not be utilised without encouragement and support from healthcare professionals to enable patients to use them.



# 11.Lenferink LI, Meyerbröker K, Boelen PA. PTSD treatment in times of COVID-19: A systematic review of the effects of online EMDR. Psychiatry research. 2020

REF: 20210302

This short paper examined the evidence around the use of EMDR therapy for PTSD in the online setting, however only one open trial was identified specifically in this area. The reviewers highlight the urgent need for further research in this area, particularly the need for RCTs that compare EMDR with CBT or face to face treatment. Without sufficient evidence, the authors recommend that delivery "of internet-delivered EMDR seems premature, especially considering that internet-delivered CBT is available and has shown promising effects".



# 12.Stefanopoulou E, Lewis D, Mughal A, Larkin J. Digital Interventions for PTSD Symptoms in the General Population: a Review. Psychiatric Quarterly. 2020

This review examined the evidence concerning digital-based interventions for people living with PTSD symptoms in the general population as opposed to veterans and combat-populations. The review found that internet based CBT interventions produced consistently significant improvements in the studies included, compared to psychoeducation, psychosocial interventions, mindfulness and expressive writing among others, regardless of focus or the number of sessions. However the number of available studies for inclusion in this population was low and more research is needed across different clinical groups and settings, there also was a lack of studies in this population directly comparing online versus face-to-face CBT.



# 13. Tremain H, McEnery C, Fletcher K, Murray G. The therapeutic alliance in digital mental health interventions for serious mental illnesses: narrative review. JMIR mental health. 2020

REF: 20210302

This narrative review examined the therapeutic alliance in digital mental health interventions. The review discusses potential differences in developing the therapeutic alliance in digital therapy compared with face to face, and found that results showed that an alliance can be cultivated in digital interventions but may have "unique, yet-to-be-confirmed characteristics in digital contexts". The review highlights the need for further research into this aspect of therapy in digital settings, which may affect intervention design.



REF: 20210302

14. Hadjistavropoulos HD, Peynenburg V, Nugent M, Karin E, Titov N, Dear BF. Transdiagnostic Internet-delivered cognitive behaviour therapy with therapist support offered once-weekly or once-weekly supplemented with therapist support within one-business-day: Pragmatic randomized controlled trial. Internet interventions. 2020.

This randomised controlled trial compared the effectiveness of benefits of therapists providing support once-weekly versus therapists providing support once-weekly supplemented with a one-business-day response to all patient emails. The study involved over 400 patients who were enrolled on an 8-week internet based CPT intervention involving five core lessons over an 8 week period. Outcomes were measured at several points post-follow up and assessment also included patient experience and a focus group with therapists. Contrary to the hypothesis, the study found that although implementing the next-date response resulted in more emails being sent to patients, there was no association between this and improved outcomes- all groups showed positive outcomes for depression and anxiety, and improvements were maintained at follow up. Additionally, the implementation was seen as more time consuming and challenging for therapists without showing any marked benefits in patient improvement.





15.Lecomte T, Abdel-Baki A, Francoeur A, Cloutier B, Leboeuf A, Abadie P, Villeneuve M, Guay S. Group therapy via videoconferencing for individuals with early psychosis: A pilot study. Early intervention in psychiatry. 2020

REF: 20210302

This paper reports on a small-scale pilot study involving group therapy online for 14 patients with early psychosis, which came about due to the current pandemic. Although, as a small study, conclusions are limited, the researchers found that after dealing with technological barriers to usage, initial results were comparable to similar interventions more usually conducted in person. Researchers found the study offered promising results suggesting that more research is needed in this area and that the use of online videoconferencing for an evidenced-based group therapy in this patient group improved accessibility for patients without negatively affecting outcomes.



16.Murphy D, Turgoose D. Evaluating an Internet-based video cognitive processing therapy intervention for veterans with PTSD: A pilot study. Journal of telemedicine and telecare. 2020

This paper reports on a pilot study involving 27 participants who volunteered to take part in an online intervention involving 12 sessions of cognitive processing therapy delivered using video-conferencing software (skype). 79% completed the treatment, which was judged to be similar to outpatient services. Although a small-scale pilot, the results demonstrated improvement in mental health outcomes maintained at three-month follow up. The small sample size, and the fact that self-measured outcomes were utilised means that wider conclusions are not yet possible, but the authors concluded that results showed promise and more large-scale and RCT studies are needed.



## 17. \*Mersey Care Evidence Service\* Evidence Review "Online vs Face-to-Face group therapy" May 2020

REF: 20210302

This review was conduced by the team in May 2020. Although focussing specifically on group therapy, much of the findings apply more broadly to all online therapy, particularly with regards to outcomes, overcoming barriers to attendance, and challenges concerning developing rapport or cohesion. The review found that Online groups have shown positive outcomes for patients compared to TAU or waiting-list controls.

NB- the embedded articles will not be available in this embedded PDF, however if you would like a word-document copy of the original review please contact us



#### **Indicative search strategy**

Virtual; online; teleconf\*; videoconf\*; telehealth; remote; digital; telephon\*; internet; AND
"mental health"; "mental ill\*"; psych\*
AND
Therap\*

#### Sources searched

Cochrane; CINAHL; PsycINFO; Medline

A structured public domain search for unpublished research.

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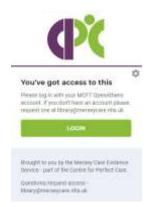


#### Mersey Care Evidence Service

This review is a summary of the best available evidence that has been selected using expert searching in order to answer a specific query. It may not be representative of the entire body of evidence available. No responsibility can be accepted for any action taken on the basis of the information presented herein.



BMJ Best Practice
Clinical decision making tool
and app



REF: 20210302

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