

Lab to Smartphone

eCounseling: New Technology to Fear or Embrace?

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“After the whole Tide Pod challenge, I knew this generation was doomed. Nothing good can come from being raised on a steady dose of The Facebook and YouTube.” This comment was made by an attending physician from an older generation after passing a waiting room full of adolescents with their heads buried in their devices. This statement expresses frustrations encountered amongst colleagues regarding young patients and their struggles to communicate verbally.

As a Millennial, I have heard this sentiment of technology as the enemy many times over. At first, I found myself fixating on innovative ways to curb its potentially negative impact on our society. But technology is not going to disappear, and if history is any indication, it will only increase and continue to permeate our lives, and thus, our practices. Instead of fighting the invisible hand in the “cloud,” maybe it is better to consider how we use technology in our favor to the benefit of our patients?

Today’s patients are more than the “Tide Pod Generation.” They are Generation Z, the “Digital Natives.” They are better versed in technology, the internet, and social media than some of its creators. This is where we can capitalize on some of their savvy. Today there is an app for anything and everything, from turning on your oven, starting your car, and there are even apps that help you find the best app. And, of course, there are now therapy apps that specialize in eCounseling. These are platforms available both online and in “app stores” on wireless devices. They allow someone to find and connect with a certified therapist via telemedicine. Will these things put us all out of business? Probably not. Recommending an app is just that, a recommendation to utilize additional therapeutic resources. It is not a replacement of the patient-physician relationship.

Most professionals agree that finding the “right” therapist can be a lengthy, challenging process, but once a patient finally does make a connection, their healing can truly begin. Unfortunately, we have yet to find the most optimal means of streamlining this search process. This can leave some patients to feel more isolated, vulnerable, and disinterested in seeking help. At the click of a button, eCounseling apps allow users the opportunity to search, filter, and compare among qualified affiliated therapists. Furthermore, in the event a patient no longer feels that their relationship with their current therapist is therapeutic, they can switch to another provider on that platform. Any information that was previously shared via text or email can be shared with the new provider, alleviating the need to start from ground zero.

Digital natives have grown up in the world of 2-day shipping and TV “On Demand.” They are accustomed to fast results. These apps can place a therapist at their fingertips and provide therapy that can be customized and tailored to their active lifestyle and their style of communication. Apps such as Teen Counseling and TalkSpace Teen take telemedicine to a new level with their multiple modalities of communication, including exchanging messages, chatting live, phone calls, and video conferencing. Although communicating via text message may not be the most elegant, formal, or informative means of communicating, this generation was raised on emojis. Let us not allow our thoughts of what “proper” communication should look like prejudice the significant impact eCounseling could have.

This area still requires substantial research.¹ eCounseling has not been shown to be capable of substituting traditional face-to-face therapy. Whether it is because of adolescents’ own thoughts and ideas around the stigma of mental health treatment, or because of the

lack of qualified counselors in their geographic region, the reality for many youths is that these apps may be their only access to mental health services.

One drawback to eCounseling is that most insurance plans do not cover any of the online therapy apps, and if they do provide coverage the insurance copay is often higher than the actual membership fee. However, the membership can be covered by a flexible spending account. These apps are relatively affordable, starting as low as \$128 per month.

When should we be thinking about utilizing these services? We all know there is a major shortage of mental health care providers, from social workers to physicians. This leads to increasingly long wait times for patients to begin engaging in psychotherapy. Perhaps this is an opportunity for additional research to be conducted on triaging care, helping identify patients that could most benefit from eCounseling vs. traditional face-to-face therapy. There may also be a place for a “hub and spoke” model, in which the hub is traditional face-to-face therapy and the spokes would be eCounseling.

As a community we need to recognize the value of these apps. Several countries with national health services are already utilizing technology as an effective treatment for mental health. Computer-assisted therapy (CAT) is evidence-based and has been around since the 1980s.² More specifically, internet cognitive-behavioral therapy (iCBT) has been shown to be effective at ameliorating symptoms of anxiety and depression in children and adolescents.³ CAT, iCBT, and eCounseling are supplemental and not a substitution for in-person therapy and are valuable for certain low risk populations. Some apps even explicitly state that they “do not provide any official diagnosis, fulfill any court order, nor prescribe medications.” Please see the Fall 2019 issue of *JAACAP Connect* for two articles that specifically address the use of CAT (Dunne *et al.*)² and iCBT (Nguyen *et al.*)³

As a third-year medical student I am frequently asked by an array of individuals in the medical field, “What field do you want to go into?” and when I respond with “Child and adolescent psychiatry,” I can almost always predict their response, “Wow, great, wonderful...we need more of them.” Doctors, nurses, and social workers alike, this is how they all respond. Knowing this, knowing there is a shortage in the workforce, knowing that even for practicing child and adolescent psychiatrists there are only so many hours in a day tells me that we need to seriously consider the emerging technology at our disposal to help our very vulnerable population. Furthermore, the coronavirus (COVID-19) pandemic has illustrated the importance of being able to utilize alternative means of communication. The heightened fear and anxiety associated with events such as this highlight how technology is invaluable and could allow us to respond more efficiently to future health crises. These apps can not and will not replace the years of training required to become a qualified child and adolescent psychiatrist, but they can be part of our toolkit to help bridge this Grand Canyon sized gap in delivering children and adolescents mental, emotional, and behavioral health care.

References

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