1
THEORETICAL ASPECTS OF ONLINE THERAPY

INTRODUCTION

While it may seem elementary, we shall start with consideration for the definition of therapy itself. Many practitioners in the mental health field argue that *online* therapy is not, in the true sense of the word, psychotherapy or counselling. Penguin's *Dictionary of Psychology* offers these definitions:

> **Counselling**: a generic term that is used to cover the several processes of interviewing, testing, guiding, advising, etc. designed to help an individual solve problems, plan for the future, etc….var. *counselling*. (Reber and Reber, 2001: 162)

> **Psychotherapy**: in the most inclusive sense, the use of absolutely any technique or procedure that has palliative or curative effects upon any mental, emotional, or behavioural disorder. In this general sense, the term is neutral with regard to the theory that may underlie it, the actual procedures and techniques entailed and the form and duration of treatment … in the technical literature the term is properly used only when the treatment is carried out by someone with recognized training and using accepted techniques … the term is often shortened to *therapy* …' (Reber and Reber, 2001: 586–7)

Clearly, given these definitions, one can see that therapy delivered online, regardless of 'techniques entailed' or the 'form and duration of treatment', by a therapist with recognized training, is engaged in the art and practice of counselling and psychotherapy. It is important to bear in mind that online therapy involves a different method of delivery to more traditional methods, but the therapeutic process remains the same.

With that said, this chapter will discuss online therapy from the point of view of three major theoretical orientations, which experience shows work well online, albeit in different ways. The theories we shall concentrate on are psychodynamic perspectives, humanistic perspectives, and using cognitive-behavioural methods. Before even turning on a computer to access the Internet to provide a mental health service, it is vital to

understand and appreciate how one's basic theoretical orientation and beliefs – whether the practitioner provides therapy, welfare, advice-giving or just blogging thoughts for the interest of others – can be apparent as you exist in cyberspace.

There are themes common to all theoretical orientations within mental health, but an important knowledge if one wants to be an online practitioner is that existence in cyberspace requires a full commitment to knowing oneself thoroughly and being able to recognize dynamics that come into play as communication with others without a bodily presence takes place. To put this more simply, it is the ability to be oneself, without posturing or hiding behind words, that is one of the most essential factors in developing a therapeutic relationship when working online. To that end, it is this congruence with the actual self that enables a presence in cyberspace that is as fully part of an 'I–You' (Buber, 1923/1970) relationship as would occur when doing client work in the physical world.

When one sits with face-to-face clients, the successful relationship will only be possible if one can, within the boundaries of any therapeutic situation, be oneself. It is using the self to develop a mutual bond of trust and respect that will allow the client to use the relationship to explore their issues and work towards a better understanding of how those issues fit into their lives and can be coped with in order to sustain better mental health. The belief that the good therapeutic relationship between the client and the practitioner is the central element in enabling them to move on with their lives is generally considered to be an accepted position in the current therapy climate (Hick and Bien, 2008), and has a good evidence base in literature review as being the case in over 1,000 studies (Paul and Haugh, 2008).

Examining working in cyberspace from different theoretical perspectives and models is a fascinating process. It is sometimes easy to be sceptical about the modality being a fertile ground to develop a meaningful relationship with another human being or beings, when the relationship is conducted via a keyboard, mouse and screen. Critics of the online relationship as valid still exist (see reader's responses to Nagel, 2008). And yet,

> I believe I am the same person in cyberspace as I am within what is sometimes, paradoxically, called Real Life (RL). The fact that I exist within my writing over the Internet is what is important here, not the fact that I write. I use writing to convey myself to others because it is the easiest form of communication that currently exists on the Internet, just as the simplest form of communication face-to-face is the spoken word. I don't use technology for my professional work for the sake of using technology; it is just the communication system that works best for me for that client at that time. (Anthony, 2009)

So, that stated, we can move on to consider how our knowledge of therapeutic theory can be applied to working with text, from a humanistic, psychodynamic and cognitive-behavioural perspective. It is for the readers to experience each facet of the theory for themselves as they travel through cyberspace and build their experience of client work, and learn to adjust their own traditional theoretical orientation to allow for the sometimes different meaning that can be brought to the theory when working in a non-traditional setting such as working online. It is an exciting and challenging arena for theorists to explore.

HUMANISTIC PERSPECTIVES

The humanistic, or person-centred, approach to counselling is one of the orientations that sits best with this modality of communicating with a client, for precisely the reasons stated in the introduction to this chapter – its intrinsic belief that it is the client and therapist relationship that is central to the work. In considering the origins of this orientation in the work of Carl Rogers, and his belief in the work being client-led rather than practitioner-led, it is easy to see the correlations with the history of online therapy. This similarily is seen in the modality existing, developing, and growing almost entirely because there is a type of client who demands it, whether for reasons of necessity or preference over face-to-face or telephone work. Online work is usually a client-led experience rather than a referral experience – it is the client's choice if and how to work in this way.

Mearns and Thorne (1988) point out that person-centred counselling is often patronizingly thought of as an orientation that embodies everything that a good therapist should be anyway, 'before, that is, they pass on to deploy much more sophisticated techniques which can *really* deal with the client's problems.' (p. 5 emphasis in the original). In examining how person-centred or humanistic theory applies to online work before looking at aspects of CBT and psychodynamic theoretical application, it should be stressed that it is the integration of each orientation, *as it applies to the professional development of the practitioner*, that forms an ethical and effective way of working when using the Internet. One of the central tenets of humanistic work – the therapist's use of the self – is also central to the online practitioner. In this way, we can see why online work is inappropriate for the novice or inexperienced therapist (Anthony and Goss, 2009) – without the journey to self-acceptance and love that is gained through training, personal therapy and experience in working with clients, it is dangerous to try to create and maintain a solid therapeutic relationship using only text. It is the belief in and love of the self that frees the therapist to convey the core conditions of Rogerian theory in a modality that seems to preclude it at first glance.

When working with text over the Internet, the therapist's use of a strong, self-knowing persona is what enables the communication to free the client into therapeutic movement towards whichever place in their lives they want to be. The therapist's trust in what they are experiencing as being valid and important, and conveying this to the client, is central to the work. Obviously, this needs careful choice of words, and usually plenty of clarification, to ensure that the client can feel the accepting and respectful understanding where traditionally it could be conveyed by a look, a gesture, or a tone of voice.

Empathy

One of the core conditions is that the practitioner is not only able to have an empathic understanding of the client, but can also communicate this to the client. When working with text, it seems obvious to state that the communication of empathy seems

intensely limited – and indeed, early critics of the method indicated this, suggesting that practitioners were likely only to cut and paste the client's typing in order to reflect back to them what the client was going through and 'therapeutic interactions may be reduced to mere advice giving when face to face interactions are translated to the electronic medium' (Pelling and Reynard, 2000: 71). This view negates the concept of what is going on in the text-based therapeutic relationship – that the relationship exists first and foremost, and the technological base for communication is incidental, through necessity or preference. It is often useful to have the ability to use the client's words verbatim during the work, rather than attempting to paraphrase, sometimes erroneously, a previously expressed comment – but it dismisses the fact that the client is communicating with a human being rather than a computer program.

In many cases where the client has chosen to work online, there is already a sense of isolation in their lives for many different reasons. This could be the wheelchair user whose access to many physical spaces is already limited in a non-wheelchair friendly environment, the client with agoraphobia which means that leaving the house is difficult, or the client who cannot bear to communicate with another human being while being in their physical presence and having to look them in the eye. Being sensitive to clients' situations and being able to put oneself into their shoes is a skill in itself, already familiar to the reader. But being able to convey this to a client through typed text, and therefore diminishing their sense of being alone, is a skill that takes time and training to develop. This development takes the shape of not only being able to communicate using the written word effectively, but also being able to trust that the empathy felt for the client is correct without the further physical clues that occur when working face-to-face. Furthermore, the client who exists in cyberspace need not be isolated when access to the rest of the world is available to them through technological solutions, and this can often have a positive affect on their lives outside Cyberspace, for example, ingaining confidence within relationships. Add to this a therapeutic relationship that contains the core conditions, including empathy, and the client is no longer alone where it counts – in their thoughts and feelings about existing in the world.

Consider this response to a client whose lack of control over her anger leads to her destroying her possessions, and whose violence has led to isolation from friends and family. This client feels vulnerable in the face of her own behaviour and cannot understand why she breaks things and is seen as a person to be afraid of by those she holds close:

> It is very difficult when we do not understand why we feel this way. Often we feel frightened, alone and unable to talk about these emotions. Then what can happen is that these feelings all become too much to keep inside … it's like we need a way of releasing this pain. Sometimes our need to break things can reflect our own sense of feeling a little broken inside. (Brooks, 2003: 2)

This response from the therapist demonstrates how she has put herself in the client's position and used her empathic skills to reflect back to the client that, not only does she understand, but that the client is also not alone in her feelings. For possibly the first time, another human being has recognized that there is a person who is hurting

rather than one who wants to hurt. In addition, these words of empathic understanding now actually have a physical presence in that they exist on a screen and can be printed off and kept, which the client can then re-read when her feelings overwhelm her and know that not only is there someone who understands and supports her, but that she can often stop the behaviour by being able to examine her feelings rather than acting on them violently.

The client who has an empathic online therapist is no longer estranged from the human race. They are understood, have access to that understanding 24 hours a day in the printed word, and know that they are journeying with another human being with the skills and willingness to put themselves in their shoes and work together towards their better mental health. As the relationship grows and the communications flow, online therapists become more sure that their empathic understanding is true and will need less and less to check with the client that they have understood them correctly. In combination with the other core conditions of humanistic therapy, the written therapeutic relationship becomes extraordinarily powerful.

Unconditional positive regard

Conveying the potential for the therapist to have unconditional positive regard for the client is a process that can often start before any communication actually takes place when working online, through the use of the website to explain what this means and what regard the therapist *already* feels for the website visitor without having met them. This sounds facile, but it is the tone that is taken via the text while writing the website content that can convey this. Many people make the mistake of writing website content for themselves and how they would like to be, rather than being congruent (which we shall come on to) and writing for their potential client, considering the likely state of mind of the potential client. One can convey to the client that one expects to hear issues and problems that the client may feel embarrassed or ashamed of, and that as their therapist, one will think no less of them for having shared those issues. The website can state up front that the visitor is held in the utmost regard, that they are accepted and that there is a space for them to explore themselves and grow from the experience while being safe from being judged or ridiculed.

It is important to remember that the client can carry the therapist's input, literally, at all times, and therefore the text must be carefully constructed to avoid any ambiguous meaning that the client can use to fuel any self-fulfilling prophesies that she or he may have. Conveying unconditional positive regard throughout the email or IRC session can aid the interpretation of the text around it, which is often misread, unconsciously, to suit the client's agenda (Goss and Anthony, 2003). Acknowledging the client's worth and one's respect for them often renders misinterpreted text as incongruent and so the client will go back and re-read the text to better understand the meaning, as the misinterpreted text does not seem to 'fit' with their experience of the therapist thus far. In this way, the regard the practitioner holds for the client and the ability to ensure she or he understands this, underpins the whole tone of the text.

The online disinhibition effect (Suler, 2004), further defined in Chapter 2 often means that the more distressing or uncomfortable issues come up much earlier than they would in face-to-face sessions, and the practitioner may find that they are struggling with this information before they really 'know' the client and are able to feel that the unconditional positive regard is inherently in place. This process is crucial to the effectiveness of the therapeutic process – if one is not able to keep the reassurance of understanding and regard in place, the client will feel that they have 'gone too far' and they can be lost, since 'disappearance' on the Internet is facilitated so easily. It is important to indicate that, in the case of emails and forums, although a word count or length limit is appropriate, it does not mean that the content of the work is limited. Having unconditional positive regard for them means that you can trust that the pertinence of the work will emerge as the relationship grows, and that even where there is uncomfortable work going on at an early stage, this is not only expected, but welcomed.

Many humanistic or person-centred therapists will convey warmth and regard in a variety of physical ways, including smiling, appropriate touching, or leaning towards the client. Chapter 3 will focus on how this is done when working with text, but it is important to point out now that most of the physical tools that the person-centred therapist employs are entirely possible when working without a physical presence in cyberspace, even appropriate hugging (in fact, particularly the hugging (Anthony, 2000)). It should be noted that representation of physical contact or movement should be encouraged when online to assist the development of the relationship and convey the core conditions of humanism. The consistency of this warmth and regard will be important as the work continues, and any withdrawal of it will rebound negatively on the work. It is therefore essential that all representation of being a physical being is natural and personal, so that it occurs without thought or specific intention, unforced. This is only possible through the vital facet of online work, as mentioned at the start of the chapter, which is congruence.

Congruence

It is not enough to ensure that the text written to the client is an accurate reflection of what the practitioner is feeling inside in response to them, which implies that congruence is something that you are forcing into the work. Trusting one's inner state and letting it flow throughout the work is essential, and as such it should go unnoticed. For example, much of the authors' own therapeutic work offline utilizes humour, and it would be incongruent not to use it online. But it is only in reflection on the text that the humour becomes apparent, it flows within the sessions without being forced. If one was to try to be witty in the session because experience shows that it can be a useful tool, there is a lack of congruence and the lack of being genuine becomes blatantly obvious to the client. This in turn effects the relationship and damages not only that but also the work that has gone before, with the client thinking that if something doesn't ring true, perhaps it has all been a sham. This is intrinsic to the concept that using the Internet and text for therapy is merely a communication tool, not a method that is used for the sake of it.

Being genuine when working in cyberspace often means experiencing a perceived sense of safety with disinhibition, for the therapist as well as the client. This is not to suggest that self-disclosure by the therapist is any more appropriate, but rather that being congruent can often mean that disclosure of personal information is often seen as a way of being genuine where it would be inhibited in a face-to-face situation. Few clients want or need to hear a therapist's history, but a reference to personal information can often help the client feel they are understood. An example of this is where the therapist, in response to the client's fears that her mothering is not good enough, allows that client to know that she is also a mother and has experience of those issues.

In the same way that forcing congruence is damaging, withholding it is equally detrimental. In a situation where laughing out loud (LOL) in a face-to-face session is appropriate, it is not inappropriate to do this within an online session – the practitioner just uses the text to convey this rather than the voice, because in cyberspace the text *is* the voice. If the therapist were not to do this, because acronyms can often feel or appear trite to the untrained or inexperienced inhabitant of cyberspace, they are not being congruent. A further example is that of hugging the client online – where personally instigating a hug at the end of a face-to-face session would not be appropriate, it would not be so online either. However, where the client would instigate this face-to-face, and reciprocating is comfortable, it is a facet of congruence that is also applicable to online work – therefore returning a hug would be appropriate (see Chapter 3).

A further consideration under this heading is that of the client's congruence. An obvious, and lazy, criticism of online work is 'how can you know that the client isn't lying?' Responses usually point out that this can't be known for sure in face-to-face sessions either, but unconditional positive regard for the client means that the practitioner trusts them and will work with whatever the client presents. However, it is important to note that when a client is using the text to deceive within an otherwise congruent relationship on both sides, it is usually easy to spot, much like a forced physical laugh to hide pain is easy to spot. Having the skill to take risks in these situations, and bearing in mind that disinhibition can often make for clumsy intervention, is where the therapist's congruence and trust in the self becomes paramount in order to get the work back on track and examine why the client has felt it necessary to hide the true situation and his or her feelings.

Psychodynamic perspectives

It is not the place of this book to discuss the intrinsic value of psychodynamic theory or indeed necessarily to describe it at length – but these theoretical concepts are useful and interesting in relation to working online and without a physical presence. Simply put, the psychodynamic approach relies on knowledge of a client's past shedding light on what is happening in the present, and with online therapy there is a wealth of rich material going on that can make for better understanding of a situation and the client's reaction to it. The unconscious processes that are occurring

within the client's life and the examination of it within an online session can make for a fascinating interpretation of a client's psyche for the therapist with an interest in psychodynamic theory, which in turn can aid the therapeutic process.

Offering interpretations using the written word is a skill that takes time and care within a strong therapeutic relationship, and this should not be underestimated. The potential for offering premature interpretations that are potentially damaging for the client who will experience them outside of a face-to-face relationship, is huge, and this is particularly true in the case of the therapist's disinhibition facilitating clumsy interpretation. The speed at which online therapy tends to develop also makes for misunderstanding the level at which the client is ready to read and absorb, let alone use, an interpretation. However, done well, the use of unconscious processes and communicating this effectively to a client in writing can make for an effective shift in their thought processes. Unconscious patterns can develop in the written word as well as the spoken word, and attention can be made to consistent spelling errors ('Freudian typos') that can unlock realms of powerful imagery to aid the work. An example of this experienced by one of the authors is the client who consistently referred to the fact that her husband thought she was a 'slly' woman and that that was unbearable, a typo that put quite a different emphasis on the potential meaning of whether the hurt was caused by him thinking she was sly or silly. Not taking this typo at face value and paying attention to it developed much work, with the client assessing that 'being sly is a clever thing to be and therefore not silly at all – I prefer that'. By playing with the word via text, she was able to reframe it as something to be manipulated, and therefore less distressing.

It is possible to speculate wildly on how and where psychodynamic theory comes into play when existing in cyberspace, from the fantasies the client has about the therapist that s/he can neither hear nor see, to the transference and projection issues that the therapist has towards his or her own hardware and where this gets confused with the content of the email. By discussing some psychodynamic concepts here in relation to the online therapeutic relationship, we hope to open up some ideas around what is happening as the process develops, and so allow the work to become an enriching and fulfilling process.

Issues of transference and counter-transference

Transferential issues are an interesting concept when applied to online work, because in addition to the usual process for both the client and the practitioner, there is an added dimension to it in the form of the modality – that is, the hardware and soft-ware used to communicate. John Suler (1998, para. 10) in his paper 'Mom, Dad, Computer' argues, 'we recreate in our relationship with the computer some ASPECT of how we related to our family members' (author's use of capitals). Reactions (usually over-reactions) to email are often affected by how well hardware is performing and it takes a keen awareness of this in ensuring frustrations are not transferred to the communication. This sounds glib, but technological performance, or lack of it, can often provide interesting material within a therapeutic relationship.

If technological breakdown prevents a response getting to a client, their reaction in feeling let down, or ignored, or rejected, despite the reason for the lack of communication being entirely practical, often opens up the basis for examining where those transferential feelings are coming from. A further example is when the client's perception of availability over the Internet is as its being unlimited, as is the Internet itself, and makes for an idealization of the therapist as the perfect parent – available to the client 24 hours a day, seven days a week, for eternity. When this breaks down, it is often unbearable for the client in relation to being let down by the parent. This process is usually entirely unconscious and it is vital that the online practitioner remains aware of the potential for this happening in the simple event of technological breakdown.

Counter-transference online can also be realized by the therapist's reaction to the technological modality. In face-to-face work, the therapist can often only be contacted between certain hours on a certain day of the week – in other words, boundaries are in place. On the Internet, therapists can be contacted asynchronously around the clock and conceptually this is an exhausting prospect. Even though one can choose when to open client emails and choose when to respond, the act of being an online therapist means that at any point, and from anywhere in the world, someone may be talking to you as they compose their emails. This feeling of being always available to a client, and any possible resentment of that, may impinge on feelings towards the client when the therapist composes their responses, and this is a concept that should be borne in mind constantly.

Fantasy

We have already seen where the fantasy of the therapist as an ideal parent is apparent and useful in examining transferential issues, but the fantasy of the other person or persons in a therapeutic setting is another facet of the dynamic which should be paid attention to. Many practitioners have photos and descriptions of their personal circumstances posted on their websites, but these static images and words can never fulfil what the client wants to believe about their therapist. There is a fantasy of the therapist going on in any face-to-face relationship, of course, but without a physical presence or voice, the client often forms an idealized picture of the person who is sharing their journey – there are many gaps that the client wants to fill, and the picture they develop over the course of the relationship can vary in accuracy. With no physical clues given on a website, even the gender of the therapist can be mistaken if the name is ambiguous (Kim, Sam, Chris, etc.), and initial emails can set up a seriously erroneous fantasy that has the potential to be shattered when the truth emerges, often because the therapist has assumed the client 'knows' about him or her, and the relationship is often irreparably damaged. Consider the experience of a journalist, Sue Webster, who explored the concept of receiving online therapy and opened a therapeutic relationship with Kim Smith of www.onlinecounselling.co.uk. She had a fantasy that she was talking to a woman, writing:

> If it's hard to describe what took place in those sessions, that is only because the intangibles in any therapeutic relationship are its main point. But I felt accepted and understood, no matter how shocking or shameful the situations I posed might be. Of course I didn't see or hear Kim, but I responded to her challenges and felt her empathy. If I shilly-shallied with excuses, she saw through them; if I was self-pitying, she was ironic; but if I was honest and thoughtful, she seemed to embrace me through her words. She was the wise, generous mother I had always wished for.
>
> Although I knew on one level that this idealisation was a fantasy, I still felt let down when I eventually made telephone contact with her. In fact, I was absolutely furious. Kim Smith is a man. A very nice, sympathetic man with a northern accent who used to live on a boat and admits to wearing sandals with socks. He wasn't what I had in mind – but once I had adjusted to the new reality, I had to admit that this was surely a positive aspect to online counselling. (Webster, 2001: paras. 14–15)

Clients also have a fantasy about how their therapist sounds, reportedly sometimes giving them a voice that is calm, slow and gentle because that is how they read the emails or text chat as it appears on the screen in front of them.

All these fantasies have important implications for the therapist who feels that meeting face-to-face is viable at some point in the relationship – this can often damage the relationship because it is based on a fantasy of the practitioner that is the representation that works best for the client's therapeutic growth. We do not mean to suggest that it is ethical for a practitioner to deliberately mislead a client in allowing them to continue with a fantasy that is plainly wrong, once discovered, but the construction of a fantasy therapist, while allowing for the congruence of them to be apparent, can often help the therapeutic relationship enormously, because the reality of the physical presence (and all the biases inherent in that) is rendered redundant.

Many online practitioners will allow the client's visualization along, describing the physical environment that they are typing in (Anthony, 2000). This will feed the client's fantasy of them in a (usually) calm and controlled environment, possibly with sunshine flooding through the window and gentle music playing in the background, the aroma of fresh coffee percolating on the side of a mahogany desk as the therapist composes the response to an email. That the reality is quite different is immaterial, it is an idealized picture that is not possible in a face-to-face relationship, and therefore can be constructed by the client to aid their improvement.

Denial

The ability to work with issues of denial, and challenge, in online work is often more dynamic than in face-to-face work, simply because once the words are 'spoken', they don't fade away or get ignored – they are there in black and white on the screen or the printed page. The client's inner turmoil in repressing uncomfortable feelings and emotions is usually relieved by even the act of typing the repressed feelings, and the argument that online work is futile because the client can always rewrite themselves to appear better to the therapist is one that doesn't really hold water. If the client

types something, considers it, decides it is too much to admit to and then deletes the words, they have often brought it out of their unconscious by this act even though it is too early to vocalize it to another human being (by pressing the send button). In any case, this is often not the case when online clients are composing their work because of the disinhibition effect – the perceived safety of the distance between them and the therapist makes them much more willing to admit the uncomfortable thoughts. Some chat software programmes provide a function whereby you can see what the other party is typing as they type it, which means that deleted words can be seen as well. This is not recommended for therapeutic work; firstly as it could arguably be intrusive if clients do want to change their text, and secondly because it is distracting within a therapeutic session if you are watching for changes to the text.

Jacobs (1988) draws attention to the importance of the skill required to confront clients in challenging patterns of behaviour, and this is no less the case in online therapy, and is possibly even more important in this context. The client who is resisting change by rejecting accurate interpretations or challenges has many options not usually available to them in a face-to-face relationship. It is easy to change an email address or username such that they cannot be traced if they decide to end the relationship after such a challenge. It is even easier to hit a disconnect button or 'hide' in a synchronous text session. The anxiety for the online therapist in this situation is usually high – if a client wishes to leave a face-to-face session, there are often physical clues to this before they actually get up and leave the room. However, in online work, there are usually just two pieces of evidence that this has happened – a notification that a client ★★★has left the chatroom★★★ or a bounced back email. Even then, the therapist has no idea whether this is a technical breakdown or not. If it is not a technical breakdown, careful examination of what was going on in the session before they left is needed and learnt from, although the empathic therapist should be in tune enough with the client to know whether the challenge was appropriate or not at that point.

Displacement and projection

Displacement and projecting feelings onto others also have their own space online, and this is usually most evident in group forum work, where each member's defence mechanisms all come into play within the group dynamic. It takes a skilled facilitator to untangle what is going on when conflict occurs in an online group, which is discussed further in Chapter 8. The client who writes 'no-one ever responds to me, even seems to understand me, let alone *like* me, so why do I bother?' can be projecting his feelings of self-worth quite effectively. In the same way, displacing feelings of anger and turning them towards the therapist is very possible, particularly in email or forum work because the therapist has no immediate avenue of response and the client has the safety of distance and time lag. Again, this is where the therapist has to be extremely careful in extracting from the text exactly what is going on and being sure that his or her own defences do not get in the way of the work. Boundaries, which we shall discuss later in depth, are paramount here because the therapist has

to take into account whether they are in a therapeutic space of their own that is as comfortable as if they were in a face-to-face environment, and comfortable enough to deal with these issues.

COGNITIVE-BEHAVIOURAL THERAPY (CBT) TECHNIQUES

Cognitive-Behavioural Therapy is often seen as ideally suited to online work, because of the nature of it as being a focused and a more direct way of working – often essential when working online. The premise of CBT is that by reframing how we perceive life events we can make them less disturbing or traumatic (Beck, 1979). The concept of 'homework' in CBT ensures that the client is putting what he or she learns into practice, such as by writing assignments and self-monitoring using written ABC forms to challenge negative assumptions (A = Activating Event, B = Beliefs about that event, C= Consequences). Such work between synchronous sessions is ideally suited to online work as it can be emailed or sent before the next session and allows more room in the session to work on the written material and define new strategies within the therapy for the next set of homework required.

Michenbaum, in an interview for Derrig-Palumbo and Zeine (2005) emphasizes the importance of psycho-educational websites for clients as an adjunct to other forms of help, such as medication or more traditional delivery of therapy. In this case, psycho-education is as much about empowerment of the client in their recovery than anything else. Modelling is another important strategy for cognitive-behavioural therapists and their clients, which can be streamed from a website or supplied as a podcast. Andersson (2009) reports a CBT approach that gives the presentation of text via web pages with ongoing therapeutic support via email. Another similar example is taking place at the University of North Carolina, Chapel Hill (Hughes, 2008). A study is being conducted using internet-based CBT as an intervention for bulimia. In this study, clients are given information on web pages that would typically be given in workbook form. Instead, the clients read the workbook information online. The CBT text material is augmented with weekly group chat sessions facilitated by a therapist and hosted on a secure server. Other CBT practical strategies exist, such as the use of computers in art therapy (Malchiodi, 2000).

While not solely cognitive-behavioural approaches, homework assignments fall within the arena of focused interventions, regardless of the theoretical orientation of the actual assignment. Psycho-education and bibliotherapy are techniques that work very well with online clients, again from any theoretical orientation. The Internet is a perfect haven for a therapist to be able to utilize literature, both poetry and prose, to educate the client. Psycho-education approaches with written homework assignments lend themselves additionally to creating an evidence-based approach. Therapists whose treatment plans follow objective and measurable goals rely heavily on techniques pulled from cognitive-behavioural theory, brief solution-focused therapy, psycho-education and bibliotherapy.

Other brief approaches are adaptable to online work. For instance, Employee Assistance Programmes base most of their counselling approach on cognitive-behavioural and

solution-focused techniques and when delivering these services online, the same solution-focused strategies are applicable. These strategies can be implemented by therapists working in other settings as well. O'Hanlon and Beadle's (1999) Possibility Therapy and Cohen-Posey's (2000) *Brief Therapy Client Handouts* are good examples of techniques and tools ideal for short-term therapy delivered online. Possibility Therapy for example, combines aspects of Roger's humanistic approach with the directive approaches of Erickson and strategic therapies with an overall solution-focused approach (O'Hanlon, 2007). Possibility Therapy interventions can be easily adapted to text-based therapy. Cohen-Posey (2000) offers a book of brief therapy handouts on a wide range of topics. The book includes a disk so that handouts can be customized. The therapist can use the handouts with online clients by adding the information as an attachment within a chat or an email.

A MODEL

It is sensible to finish with a model of online therapy based on one of the first empirical studies of online therapy that can be applied to, or considered in light of, any theoretical orientation (Anthony, 2000).

Three research questions were posed in this study of online therapy: how therapists and clients perceive the relationship as therapeutic, how the lack of visual and auditory clues are compensated for, and whether the typed word can convey the sort of therapeutic intervention that may be called therapy. The work was undertaken in view of a relationship model that considers the mutual therapeutic journey between therapist and client to be the most important facet of the process, specifically the I–You relationship, as discussed. Therefore, to conclude that the online therapy relationship may be considered therapeutic means that the relationship should contain all the facets of the I–You face-to-face relationship, as well as compensating for the fact that client and therapist are not face-to-face.

The results yielded six main themes. Four of these – rapport, presence, openness and compensation for lack of bodily presence through written communication – are presented as fulfilling the I–You therapeutic relationship. The rapport that grows through entering the client's mental constructs of the world fulfils the concept of the relationship being a mutual journey of trust, empathy and genuineness toward the client's personal growth. This is facilitated by presence, the concept that client and therapist meet in a space not limited by the computer and keyboard, having a real relationship with each other. The openness that the Internet affords contributes to the relationship being honest, and bypasses some of the defences that the client and counsellor have as well as issues of the client's shame. The quality of the written communication compensates for the lack of bodily presence via conventions of the Internet called Netiquette, and also makes for an intentional way of working with text to be therapeutic, so that from a relationship model point of view this may be called therapy.

The results also yielded two further themes. The first of these was the issue of fantasy about the therapist and client, and whether this may be considered a form of compensation for the lack of bodily presence through visual and auditory representation.

The last theme was that of the opportunity and anonymity that the Internet fosters, as a consideration of a means of having (getting to) a therapeutic relationship online.

CONCLUSION

There are, of course, many theoretical orientations – estimates range from 130 (Hackney, 2000) to over 400 (Corsini and Wedding, 2008), and it is impossible to cover all of them in relation to online work. However, most online therapists choose an eclectic approach to online work rather than a purist one, as this fits and reflects the flexibility of online work. Therefore, while a psychodynamic perspective may inform a practitioner's thoughts on a case, the work also involves an I–Thou element with all the inherent humanistic qualities contained therein, and may also include practical exercise-based work which is borrowed from CBT. Integrative approaches to online therapy fit well and, as we have already described, one can adapt a purist theoretical approach or pull from various treatment techniques, depending on the therapist, setting the best course of action for the client.

We have discussed a sampling of theoretical orientations as applied to online therapy and have concluded with the model. Now we can begin to apply this integrative approach as we examine the *skills and considerations of online therapy* in Chapter 2.

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