Frontiers of Existential Humanistic Psychotherapy: Preserving the Human Element in Cyberspace

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Abstract

The internet has brought a vast new frontier into our lives, opening up easy access to previously unimagined possibilities as well as presenting us with many, as yet, incomprehensible complexities of operating our lives in cyberspace. Psychotherapy itself is confronted with new opportunities as it has moved from the tradition of the office, to the telephone, to email, and now to the Internet. Video-therapy is here. But how does psychotherapy fit into this new realm? What is the value of applying psychotherapy in this technological forum and what are the limitations of a psychotherapeutic approach via the internet? Can the human element be preserved in this new venue? It might be that psychotherapy in cyberspace offers great opportunities in terms of convenience, accessibility and the development of innovative approaches in the provision of service, but as this foray into uncharted territory develops it also presents challenges in terms of efficacy, ethics, consumer confidence and acceptance. My contribution to this panel is to share some of the emerging realities of pioneering psychology's newest frontier.

Introduction

By, “preserving the human element in cyberspace”, I am referring to an emerging concern of the profession of psychology regarding the consequences of (what might seem to be) an unlikely union of psychology and technology. As a Humanistic psychologist, who is preparing to offer services though Video-Internet-Conferencing as part of a broad-based health related Internet company, the application of psychological health related services via the Internet, has raised many questions for me. One of the most basic of which has been:

Can the Internet realistically provide the necessary kind of interpersonal exchange that would retain the human elements that are required for the process of psychotherapy to work? That is, can the nonspecific aspects of human interaction such as subjectivity and intersubjectivity, authentic presence and genuine empathy, be preserved while using this new communication medium?
Although I am currently unable to address this basic question from the position of having direct experience with actually providing psychotherapy services through the Internet, due to delays in the launch of the company, I can address this question on the basis of my experience of being on-the-way-toward providing psychological services on the internet.

In this presentation I intend to provide you with a brief description of this experience while sharing some information in order to establish a basis for reflection and the identification of a more fundamental concern that precedes this basic question and serves to demonstrate a key concept of Existential Humanistic Psychotherapy.

For me, the delays in launching this service have given me time to observe, reflect and identify a fundamental concern as we move toward providing psychological services in cyberspace. In reflection on the experience of preparing for launch, I have found that the very concept of “The application of psychological services via the internet” is itself an impediment to the actual provision of services. It is a difficult concept to grasp; it challenges the Traditional view of the profession of psychology.

It is our “resistance” to the concept of “psychology and the Internet” that is the most immediate obstacle in the preservation of the human element in cyberspace as we venture toward the discovery of innovative ways of using this new tool.

My Journey of Resistance and Discovery

My journey into the virtual unknown world of psychological applications in cyberspace has provided me with an understanding of the many forms of resistance we employ as we move toward incorporating the Internet as a new means of applying psychological services.

As I took on my role as acting clinical director of psychological services, my initial reaction to the idea of “psychological applications on the Internet”, was one of complacency. I had some thoughts regarding some of the possible benefits for the provision of this service in terms to convenience and accessibility. I also anticipated some challenges ahead, in terms of efficacy, ethics, consumer confidence and acceptance, as well as recognizing the necessity for the development of innovative approaches in the provision of service. But, my reaction at that time was one of basic compliance, as I joined into the process of development that was already underway.

However, as I began to imagine the possibilities for increased accessibility for people who were housebound or in remote regions of the planet and unable to receive the services of a psychologist, naive enthusiasm took me over. In fact, the results of market research proved to enhance my enthusiasm with reports of a high demand for these services. The facts are that there is an extremely high demand for health psychology services on the Net: the Harris Poll (1999) found that 7 of the top 10 most frequented search topics on the Internet were Mental Health related, with depression being the
most popular. The same poll also found that of the 60 million searches for general health information on the Internet, 40% were for Mental Health. Jupiter Communications speculates that online health care will create a 3 billion $ market in 2003. The demand for psychological services on the Net is almost incomprehensible. I was stunned and excited, but not for long.

As I began to imagine the mechanics of the process of looking into a camera, speaking to a microphone and seeing a client on a small flat computer screen, I rebelled, thinking that this whole idea was irrational and absurd, as if it threatened the very foundations of my work as a psychologist.

Later, as I attempted to actually test out video-conferencing I was quite disturbing to find myself trying to relate to a person whom I viewed on a computer screen as a poorly illuminated image, jerking around the screen in “clip motion”. I wanted to retreat to my office to do real therapy as quickly as possible, until I learned that “real-time” software had been designed that would resolve that problem. Gaber, the base platform communication software product designed by Microsoft that I was using did not provide “real-time” communication. It is now outdated and we are currently in the process of replacing this software with Grenich, a “real time” communication platform which was released last Fall. My opposition faded and my enthusiasm returned in a somewhat less naive form.

Throughout the past few months I have also noticed other forms of my resistance as I found myself wanting to dodge / avoid tech. meetings regarding subjects like web design, software development, and new Internet regulations that required delays to the launch, i.e., HIPAA, the new Health Insurance Portability & Accountability Act, that now regulates the guarantee of security and privacy and standards for health information storage of clinical records, becomes law on April 14, 2003. As well, the HL7-CDA standards for clinical documentation have been developed.

Then there were issues relating to marketing, sales, research, insurance for service providers and their contracts, systems management (which search engines will draw the most traffic), accountants, legalities, billing, funding, .... all of which were handled by other teams in the company.

Throughout this journey I would frequently find solace as I returned to my office and continued my familiar practice of being a “normal” psychotherapist with a real, not virtual, client. I looked forward to these moments of business as usual.

Feeling somewhat lost and alone in the midst of cyber-problems, and in anticipation of ethical issues, I searched for current information but initially found little help. I found myself experiencing a kind of lost and helpless feeling as I turned to the APA for guidance; although the Ethics Committee had addressed these issues, they stated that guidelines for practicing psychological services on the Internet are pending further research and simply refer to relevant sections of the existing guidelines. But then, as I researched further, in preparation for writing a recently published editorial in the BC
Psychologist, I discovered a Statement paper on psychology and the Internet in the APA Monitor by the Executive Director for Practice, Dr. Russ Newman. It is entitled “Not a question of “for” or “against”. My dependency needs seemed to be met as I gained much needed confirmation. In this paper, Dr. Newman clarified, that although “degree to which the application of new technologies, including the internet, is useful for delivering effective psychotherapy services remains an unanswered question” ...”the Internet can no doubt be a very valuable tool” ... “in the end, the profession must determine when the Internet is useful and when it is not”. Logically this made sense to me, and I found some comfort as I realized that its just a “tool” like the telephone, like email ... all of which I have become accustomed to.

In another article I found that many web sites have already been developed that provide psychoeducational information, support group chat lines, social skills workshops on the Net, psychological coaching, test administration and scoring, as well as a few attempts at virtual counselling. Some psychologists were already successfully carving out career niches online. I later found support in this journey as I discovered ATSP, the Association of Telehealth Service Providers, that offers the opportunity for discussion with others who are struggling with determining the use of the Internet in the application of psychological services.

Reflection On Resistance

At this point I will stop to reflect on this journey from an existential humanistic perspective.

Dr. Bugental (who has been unable to attend today’s Existential Forum) sheds some light on the importance of resistance to change in terms of the value it has to the Self-World construct systems that define who we are and what we do. He states that,

“...Without definitions of who we are and of what the world is and how it is constituted, we would be helpless - as helpless as infants physical and otherwise because they lack self-world construct systems”. (Psychotherapy Isn’t What You Think, pg. 125)

“Each of us must develop or construct a conception of who and what (we are) and of what (our) world is, how it operates, and how (we) can make (our) own way in it.” (The Art of the Psychotherapist, pg. 178)

By this he means that, the definitions that we accept about ourselves in order to make sense of the world as we see it, gives form to our lives. We define and limit ourselves as we compose a Self-World Construct System that allows us to be able to operate effectively with others. For instance, as a part of my way of being a psychologist I work within the definitions of the Practice Guidelines of my profession that enable me to provide service to my clients. Our accepted, Traditional definitions of our profession provide us with the necessary boundaries within which to practice in the
world as it is perceived to be. We necessarily maintain our Construct Systems and resist challenges to these definitions.

As Dr. Bugental further clarifies,

“Resistance is the impulse to protect one’s familiar identity and known world against a perceived threat.” (The Art of the Psychotherapist, pg.174)

The point here is that the providers of psychological services operate within a Tradition that gives definition to the world and offers an effective construct system to work within. However, faced with the the new technological frontier we are confronted with a seemingly free and open space where Traditional boundaries are unclear. Our Traditional Construct System is put into question as we try to translate what we do in unfamiliar terrain. In the process of entering this new space we can retreat to the familiar system, resist the new world, or step forward through our resistance to create and discover innovative ways to provide psychological services.

As Dr. Bugental puts it,

“It is in our nature to stretch, to reach, to search, and to test our limits. Yet it is also in our nature to feel the terror of absolute limitlessness. Indeed, one may propose that creativity itself is an exercise in modifying the balance between openness and limitedness - as we change limits, we propose new definitions of our lives' spaces, of what is possible, of how we define ourselves.” (Psychotherapy Isn't What You Think. pg. 122)

**Conclusion**

As I see it, the most fundamental and immediate obstacle in the process of preserving the human element in cyberspace, is not the Internet - the Internet is just a tool - the obstacle is ourselves: That is, that it is our ability and willingness to move from a Traditional understanding (of who we are, what we do, and how we work) and to pass through our resistances to accept the new limitations imposed by technology in order to discover creative uses for this new tool that can effectively enhance our provision of psychological services.

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Electronic Media and Health Psychology

The new electronic media has been providing many psychologists with a useful venue for the provision of some psychological services over the past decade despite what might seem to be an unlikely union of technology and psychology. Although the full extent of the possible applications of new technologies, such as the internet, is as yet undetermined in the delivery of psychotherapy services, many psychologists are finding innovative ways to employ this medium to expand their practices and provide greater access to a larger consumer base. Advances in electronic media have opened up new opportunities in health psychology as well as presenting challenges to our traditional view of how professional services are offered.

Two articles have been selected from the APA Monitor that represent the current state of health psychology in the new electronic age. The first article, entitled “Not a question of ‘for’ or ‘against’, presents the current status of the APA position on online therapy. In this article, Dr. Russ Newman, the Executive Director for Practice, directs the reader to question how applications of internet technology can facilitate the delivery of health-care services. In particular he points out that the extremely high consumer demand for mental health information on the internet indicates that it is a useful means for the dissemination of psycho-educational information, but he acknowledges that the provision of psychotherapy services on the internet is a more complicated issue and that many questions remain unanswered at this time. The second selected article presents a sampling of psychologists who have already begun to discover how they can expand their practices by carving out new career niches online. Examples of successful applications include the development of informational web sites for specific psychological disorders, online support groups, social skills training, psychological coaching, e-test administration and scoring, as well as virtual counselling.

Applications of health psychology through the electronic media are now an established and evolving enterprise that offer psychologists a means to enhance their professional activities. The extent to which technology can serve in the provision of health care services is, however, yet to be discovered. As Dr. Newman points out, “In the end, the professional must determine when the internet is useful and when it is not”.

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