Clinical Mental Health Professionals' Perception on Quality, Change, and the Industry Impact of Telecounseling

Whitney Boykin[1]

[1] College of Business Administration, University of the Southwest

E-mail: wboykin@usw.edu

Abstract

On March 11, 2020, the World Health Organization declared the COVID-19 pandemic, which is currently ongoing and has social and health consequences for everyone (Sheridan et al., 2021). More than 90% of the United States population was under stay-at-home orders during spring 2020—telepsychology quickly grew to become the primary option for Americans in need of mental healthcare (Greenbaum, 2020). The United States Government demonstrated a commitment to developing, promoting, and integrating technology-assisted care in the United States by awarding $15 million to support telehealth providers during the COVID-19 pandemic (Health and Human Services, 2020). The specific problem to be addressed in this study is counselors' lack of skills and knowledge in virtual counseling settings (Bernacchio & Wilson, 2018). The purpose of this phenomenological study is to gain knowledge of the experienced clinical mental health counselors' perception of preparation experience for teletherapy with the intent of providing recommendations for professional organizations and counselor education programs regarding virtual counseling. Experiences of clinical mental health professionals who engage in distance counseling were explored to understand how a lack of training and resources affects clinical mental health counselors' virtual counseling sessions with clients. Findings showed that counselors who were in the laggard category had difficulty adapting to change in the mental health industry, while the innovators, early adopters, and late majority excelled in virtual counseling.

Problem Statement

Telehealth's existence in the healthcare industry started in the early 1960s, and it continues to grow as emerging technologies advance mental health professionals' (MHP) ability to care for clients. According to Regueiro et al. (2016), humanity was ushered into a new era in the mid to late 1900s due to the evolution of the internet and computers. More than 90% of the United States population was under stay-at-home orders during spring 2020—telepsychology quickly grew to become the primary option for Americans in need of mental healthcare (Greenbaum, 2020). The United States Government demonstrated a commitment to developing, promoting, and integrating technology-assisted care in the United States by awarding $15 million to support telehealth providers during the COVID-19 pandemic (Health and Human Services, 2020).

The availability of the internet and advancements in technology have led MHP's to integrate technology into mental health counseling by using internet-based videoconferencing (Ostrowski & Collins, 2016). The general business problem to be addressed in this study is that counselors are not trained in video conferencing to provide clients with quality treatment (Springer et al., 2020). Current literature failed to describe adequate teletherapy training for MHPs to virtually deliver mental health treatment to patients (Springer et al., 2020). According to Bernacchio and Wilson (2018), continuing education units and e-learning curriculum should be readily available for counselors to help MHP's integrate techniques and strate-gies in a virtual environment. The specific problem to be addressed in this study is counselors' lack of skills and knowledge in virtual counseling settings (Bernacchio & Wilson, 2018).

Theme 1: Contingency Planning

An organization needs to ensure that information flows between all business units, creating a shared knowledge model for organizations to survive a crisis that team coordination is possible. In contingency planning, there should be an exchange of skills, tacit knowledge, team planning, interpersonal trust, and inter-organizational decision-making facilitated by using external resources for communication tools such as IT. Effective communication techniques support effective contingency plans during a crisis, enhancing shared mental models and improving performance when catastrophic events occur (Obrenovic et al., 2020). According to Obrenovic et al. (2020), sustainability is more likely to be achieved with distributive leadership. Individual roles in organizations should be flexible, and a certain amount of autonomy in decision making should be present in businesses. Employees will be able to step out of their usual activities and redirect their actions to meet the emerging requirements of the organization during the pandemic.

Correlation to the literature and conceptual framework

According to Garza, Munday, and Kupczynski (2018), the increase in online counseling sessions is due to the ethical obligation for counselors' preparatory courses. Professional development courses ensure counseling programs provide the necessary resources

to protect the development of self-efficacy and skill development among clinicians in training for teletherapy. Information was collected through phone calls from ten therapists who practiced teletherapy in Southeast Texas. The findings showed that counselors believed they needed technical skills to provide teletherapy and understand teletherapy's ethical implications post-covid. Garza, Munday, and Kupcynski (2018) said therapists feared the online counseling process because they were not convinced that they could successfully control the online counseling environment. Participants indicated they feared telepsychology because they were not taught how to do online therapy in their counseling education programs. The American Psychological Association defined telepsychology as the use of telecommunication technologies as a provision to psychological services (APA, 2023). Two counselors feared telepsychology because they did not have a lot of training with computers growing up or in their counseling education programs, which caused the participants to feel stressed when approached with conducting online counseling sessions.

Adapter categories played a significant role in how mental health counselors adapted to the forced change of using technology in counseling sessions during the pandemic. In this study, Roger's diffusion of innovation theory was used to evaluate perceptions linked with mental health professional's adaptation to technology in the mental health industry. There are five stages in the diffusion of innovation theory: innovators, early adopters, early majority, late majority, and laggards. The result of diffusion is that people who are part of a social system adopt a new idea, product, or behavior. People who embrace an innovation early have different characteristics than people who acquire innovations later, so the distributive leadership role in contingency planning is essential. Innovators influence creation and are the first people to try an innovation. These individuals are willing to take risks and are the first to develop new ideas.

The second stage is early adopters. Early adopters enjoy leadership roles and embrace opportunities that involve change. These individuals are aware of the need to change and are comfortable adopting new ideas. Strategies that appeal to this population include information sheets and how-to manuals on implementation (Sahin, 2006). The third stage is the early majority. This group rarely contains leaders, and they adapt to new ideas. According to Sahin (2006), these individuals want to see evidence of an innovation's effectiveness before they are willing to adopt it. The fourth stage is the late majority. Sahin (2006) stated that these individuals are usually skeptical and will only embrace an innovation after the majority has tried it. The late majority group wants information on how many people have been attempting the innovation and have successfully adopted it (Sahin, 2006). The final stage is laggards.

Laggards follow tradition and are very conservative. They are usually skeptical of change and are the most unlikely group to adopt innovations (Sahin, 2006). Laggards often fall behind and respond to being pressured by people in other adopter groups.

Theme 2: Technology Disruption

Disruptive technologies significantly impact clients due to the acceleration rate of change in an industry and redefine what performance means. Technologies that disrupt organizations challenge a firm's strategic management, impacting the business's operation (Soggard et al, 2018). The COVID-19 pandemic caused multiple interruptions in the mental health industry. Some issues that may occur are software or hardware failures, hacking incidents, electricity blackouts, and ransomware (Klumpp & Loske, 2021). If counselors are aware of how to conduct teletherapy sessions correctly, the mental health industry could improve clinical outcomes while promoting cultural competence, social accountability, and interprofessional care (Saeed et al., 2016).

All participants stated that patience and building rapport with clients was essential when conducting teletherapy services. Licensed professional counselors noted that patience is necessary when conducting teletherapy sessions because clients may struggle with using the software or technology in general. Some counselors stated that their clients would get on the video conferencing call but have interference, such as from someone in the client's background, which is a HIPAA violation. One counselor stated that there is nothing that can be done about clients allowing people to be in the environment of the telecounseling session. Clients reported to the counselors that they could not hear the therapist during teletherapy sessions due to having issues with the volume.

Counselors stated that one of the strategies they used to adapt from face-to-face counseling to teletherapy was to inform the participants that if video conferencing fails, they will be contacted by phone to continue the session. One counselor stated that text messaging was used to interact with her teenage clients who are not in a crisis. The therapists noted that text messaging is not billable, and the participant was not aware of the non-billable service due to a lack of training regarding virtual counseling services. Although some counselors had difficulty using telehealth services, all participants agreed that teletherapy is beneficial to society due to online counseling reaching rural areas and locations that lacked counseling services. Some participants stated that virtual counseling is helpful because clients will have a broader choice in what type of counselor they want. During the beginning of the pandemic, stay-at-home or-

ders were issued, which caused clients to be less desirable of attending counseling sessions in person, which forced private practices to either offer online counseling or to shut down. Two participants stated that their small private practices had to shut down due to their clients leaving because they went to another organization such as Betterhelp, which offered a more comprehensive range of technology. Betterhelp website offers clients text messaging services, chat, video conferencing, and phone calls. On Betterhelp, clients can change counselors until they find the right one; moreover, more than 15,000 therapists are on the site.

Correlation to literature and Conceptual Framework

According to Deming (2000), one of the most effective system changes in mental healthcare was integrating technology. The cycle Deming used for adapting to the disruption is planning, doing, studying, and acting. Deming's theories of change cycle can be completed by counselors accepting the risk in all online counseling sessions by planning for quality and safety. Licensed mental health professionals must prepare for technology disruptions when using telehealth services. Participants previously discussed their plan for technology disruption during a counseling session, which included calling clients to finish the discussion if technical issues occurred. Counselors studied technology in the mental health industry by taking continuing education units (CEU's) tailored toward teletherapy.

After taking CEU's, therapists used the knowledge they gained and applied it in their teletherapy sessions. Many counselors and their clients experienced audio issues when video conferencing. Participants stated that having audio problems when video conferencing clients is very stressful. According to Bunnell et al (2020), counselors identified a feature that should be improved to enhance telemental health services, such as audio and video quality and technical issues. The participants in this study stated that using telehealth is that people in areas that lack counselors can get better services and more choices online. Mental health providers who identified telemedicine's benefits had significantly higher odds of using telehealth services in the future (Bunnell et al., 2020). Benefits of telehealth include reaching patients who would not otherwise have received care, being at the forefront of innovative care, and expanding the practices of mental health professionals. Finally, counselors stated that building rapport with clients online is very important. Clinical experience and evidence suggested that teleclinicians can establish a therapeutic alliance and build rapport during telemental health sessions with clients (Goldstein & Glueck, 2016).

Theme 3: Future Education Programs

According to Kolog, Sutinen, and Vanhalakka (2014), telehealth has been around since October of 1972. Previously, counseling ed-

ucation programs did not offer residencies or courses geared toward telepsychology. Virtual reality is designed for counseling students to practice clinical skills of decision making, clinical reasoning, and critical thinking in a way that utilizes technology to create stimulation (Sampson, Hughes, Wallace, & Finley, 2021). Virtual reality simulation is a valuable means of rehearsing skills and clinical knowledge necessary for practice before exposure to teletherapy in a clinical environment. More universities utilize training simulations with both avatar and human actors in different ways, including engaging students in mock sessions to practice diagnostic, basic counseling, treatment skills, and student evaluation by professors. Research suggested that simulation training can be an effective tool in providing clinicians with practice and allows for more realistic engagement that is beneficial to student learning and faculty teaching. Therapists gave recommendations of what future counseling programs should incorporate based on the experiences and perceptions of the participants in this study.

Participants all recommended that counseling education programs have a course or include information and practice sessions about teletherapy services. All participants stated that future counselors need practice in online counseling services. Nine out of 12 participants indicated that internship should include teletherapy training because counselors can learn philosophy, background, and developmental theories in the textbook. Still, future counselors will not know what they are getting into with teletherapy until they practice it. One participant stated that the local University offers teletherapy training during student's practicum, and some assignments in courses are tailored toward online counseling. The participant indicated that students in the counseling education program must not use their personal phones to conduct teletherapy services and cannot text message clients when interning at a company that uses teletherapy services. Interns in counseling education programs at the local University in Jefferson County, Texas, can use phones if given a specific phone number or device from the site during the internship. All participants agreed that technology is the new way of life and nothing they can do about it except accept it.

Applications to Professional Practice

The strategies identified in this study through the analysis of lived experiences of licensed professional counselors conducting virtual counseling sessions in Jefferson County, Texas were applicable to professional practice in many ways. Participants provided insights into how technology impacted the mental health industry and what future counselors, and education programs should introduce to build technical skills in students. The researcher's findings supported Laurenza et al. (2016), which was digital technologies

are vital for improving efficiency and effectiveness in the healthcare industry. Digital tools such as video conferencing increased accessibility for healthcare services. Participants stated that technology is not going anywhere and that they need to get acclimated to virtual counseling. One participant noted that technology should have been incorporated more heavily in the mental health industry a long time ago. The research findings in this study revealed that how counselors adapt to technology use in the mental health industry depends on what adopter category they were. Rogers's (2004) diffusion of innovation theory has adopter categories: innovators, early adopters, early majority, late majority, and laggards. Two participants fell into the laggard category. Those participants stated that they would instead do face-to-face counseling because they did not grow up using computers and are not skilled with using specialized software. The laggards felt that they could build a better therapeutic relationship with clients in an in-person environment versus a virtual setting.

Laggards stated they would need training on how to do teletherapy effectively and expand their technical skills before fully integrating virtual counseling into their practice. Unfortunately, two laggards were unsuccessful in their private practice which was shut down immediately. The innovators were eager to do virtual counseling and felt like it was an easy transition from in-person sessions to online therapy. Early adopters jumped right into using technology in counseling sessions and reported that they enjoy being in a virtual counseling session due to all the benefits technology brings clients. Early majority participants stated that they network by talking to others they know in the mental health industry to assist them with using technology if help is needed. The late majority group was skeptical of using technology, but they stated that there was no choice. The late majority of individuals realized that technical skills were necessary and a forced change in the mental health industry during the coronavirus pandemic. Laggards lingered behind on training when it came to learning about software and video conferencing with clients. Instead, laggards choose to offer telephonic services to clients because that is what the therapists felt comfortable doing. One participant in the early adopter category stated that counselors must do what is beneficial for the patient and not what benefits the therapist when adapting to change.

Additionally, findings in this study provided insight into obstacles linked to teletherapy forcing a rapid change upon counselors and businesses. While teletherapy brought economic gain, the long-term sustainability of technology use in the mental health industry has changed forever. Clients were given a chance to experience teletherapy services during the start of the pandemic in 2020, which changed their views. One participant stated that his clients enjoy online counseling because they do not have to worry about getting themselves together to leave their homes. Another participant noted that the counselor is also a client and enjoys staying at home to do teletherapy services because it is comfortable and convenient. The participant and her husband attend virtual counseling sessions in the comfort of their home and the counselor stated that they would not ever go to an in-person session again. Participants in this study all struggled with getting enough clients in private practices, expanding technical skills to navigate online software for virtual counseling, or knowing all rules and regulations about teletherapy services. Findings indicated a need for industry diversification of innovating in the mental health industry by training students in counseling programs with technology and software to enhance their technical skills. Participants' experiences supported Maguire et al. (2019), who stated clinical mental health professionals lack experience and training in teletherapy. All participants indicated that they lacked experience in conducting teletherapy sessions and were not taught anything about technology use in their counseling education master programs.

Maguire et al. (2019) also stated inadequate educational resources associated with mental health professionals' negative attitudes. The data collected disagreed with Maguire et al.'s statement because participants said that more resources in online counseling were found after the pandemic came and stay-at-home orders were issued. Inadequate educational resources were not associated with clinical mental health professionals' negative attitudes. Data showed that negative attitudes stemmed from the adopter category the participants fell into. Laggards had negative attitudes toward virtual counseling, but other participants that fell in the different adopter categories felt that they must integrate technology in their counseling sessions because the world evolves around technological devices. Participants' attitudes toward technology use in the mental health industry depended on innovators, early adopters, early majority, late majority, or laggards. In the literature, Bemme (2019) stated that change produces actionable instead of accurate knowledge attuned to open-ended change, both unforeseen (adaptation) and desirable (impact). Consequently, applications to professional practice can be applied by organizations in the mental health industry based on findings of this study include the participant's attitude toward adapting to unexpected change, counseling education programs integration of technology to give students hands-on virtual experiences, and strategies counselors used to adjust to the rapid shift in technology use in the mental health industry. Strategies counselors used to adjust to the change of using telehealth services included having a secondary plan for technology failure, gaining information from professional development tailored toward teletherapy, being patient, networking

with other counselors who are technologically savvy, searching for information regarding teletherapy online, and accepting that the change must take place.

Implications for Social Change

The data from this study contribute to a positive social change by providing information to policymakers, higher education institutions, other counselors practicing teletherapy, executives in mental health industries, changes in the external environment, and adaptation to technology based on Roger's diffusion of innovation theory. Identifying strategies may lead to improved practices by providing new knowledge in the mental health field by providing new knowledge from counselors about adapting to change, preparing for, and conducting teletherapy services.

Technology adoption is a complex, developmental, and social process (Straub, 2009). According to Straub (2009), participants' unique yet malleable perception of technology influences counselor's adoption decisions directly impacts how they adapt to change in the workplace. Facilitating technology adoption addresses emotional, cognitive, and contextual concerns (Straub, 2009). The social impact of this study contributes to social change from a business aspect because the mental health industry responds to changes in the external environment which is the advancement of telehealth. Implications in this study positively impact counselors who conduct teletherapy sessions and also need help strategizing to improve technical and online counseling skills to be effective at teletherapy. Lastly, the results of this study have social change implications because the data collected led to new knowledge in the literature regarding therapist's adaptation to virtual counseling. A downturn of counselors not being able to adapt to rapid changes such as integrating technology in the mental health industry could have a detrimental effect on society, especially during the coronavirus pandemic. Technological developments in online counseling has become widespread since last decade (Zeren, 2015).

Recommendation 1: Contingency Planning

Based on the results of this research, licensed professional counselors who conduct teletherapy services must make sure information flows between all business units that create a shared knowledge model. Contingency planning involves tacit knowledge, exchange of skills, interpersonal trust, decision-making, and planning as a team which is necessary to survive in a crisis (Obrenovic et al., 2020). Communication techniques support contingency plans when unforeseen circumstances occur, which will improve the performance of mental health professionals when doing teletherapy services. When the coronavirus pandemic started, mental health agencies were not ready for stay-at-home orders, meaning businesses had to rely on

technology to meet clients. The participants stated that their organizations did not prepare them for teletherapy services. The counselors had to do professional development to understand the rules and regulations of conducting virtual counseling.

Counselors who were not technology savvy had difficulty adapting to teletherapy while the digital natives excelled in virtual counseling. Therapists with prior experience with technology was helpful to the counselors who had to implement virtual counseling. Distributive leadership leads to sustainability which can occur if individual roles are flexible in the mental health industry. Contingency planning recommends that organizations consider preparing for disruptive events. Contingency plans should include a step-by-step guideline on what to do when a disruption has occurred and how to handle the situation. Contingency plans should consist of counselors stepping out of their original roles and redirecting their actions to meet emerging requirements of the firm. According to Gallardo, Marqes, Bullen, and Jan-Willem (2015), digital natives are defined as an individual who have technology skills and high digital confidence. Individuals that are digitally competent will transfer technological skills to the work environment when technology is involved. Digital natives' ability to have the ability to assess and learn from technical resources are higher than others. For example, if there are digital natives, they should mentor counselors who are not technology savvy. Organizations should include networking in the contingency plan because mental health businesses should pull together and use their strengths to rise above all obstacles during a crisis. Networking will help counselors obtain knowledge in addition to online resources and professional development.

Recommendation 2: Industry-Specific Recommendations for Adapting to Rapid Change

After collecting data from participants, it is evident that adopter categories from Roger's diffusion of innovation theory are significant when it comes to counselors adapting to change in the mental health industry. Counselors who adapted to technology the easiest were innovators, early adopters, and the early majority. The laggards and late majority fell behind when attempting to adapt to using technology in the mental health industry. The recommendation is that organizations look at what adopter category employees fall into because the categories will determine what materials are needed for the counselor to accept the change and how quickly the therapists will accept the change. According to Deming's (2000) theory of change, counselors must commit to continual improvement when a change occurs, which means that ongoing training in teletherapy services is necessary for therapists. The laggard participants stated that they did not have training in virtual counseling and were plan-

ning to learn how to use virtual counseling software.

Instead of attempting to do virtual counseling with participants, they made phone calls to do distance counseling. The laggards stated that virtual counseling was not as effective as face-to-face counseling and preferred to see clients in person. Laggards indicated that play therapy was impossible to do virtually. At the same time, an early adopter stated that therapists could efficiently conduct play therapy online because counselors do it every day by playing games effectively. Play therapy is a therapeutic model in which using a playroom provide children with a natural environment to communicate insights and feelings about others, themselves, and the world (Portrie-Bethke, Hill, & Bethke, 2009). The participant noted that the camera must have a correct angle for virtual play therapy to occur. In this study, the laggards had negative views of change and were slow to adapt. Organizations should use innovators and early adopters as mentors for early majority, late majority, and laggards when using a contingency plan. Another recommendation is that firms should have evidence of an innovation's effectiveness for the early majority group, data on how many people attempted an innovation successfully for the late majority group. Firms should let innovators and early adopters put pressure on the laggards to adopt an innovation.

Recommendation 3: Preparing for Technology Disruption

Technology that disrupts organizations challenge a firm's strategic management, impacting the operation of businesses (Soggard et al., 2018). The COVID-19 pandemic caused interruptions in the mental health industry (Klumpp & Loske, 2021). Participants stated that software failure sometimes occurred when doing virtual counseling sessions with clients. Klump and Loske (2021) said that technical issues that may arise are hardware and software failures, hacking incidents, ransomware, and electricity blackouts. The recommendation is that counselors prepare for technical shortcomings ahead of time. Organizations and counselors should make a step-by-step guide for technology disruption and put it in the contingency plan. The technology disruption plan should consist of the following items:

1. Information should include what counselors should communicate to clients if ransomware has occurred and how virtual counseling sessions will continue if the usual platform closes.

2. A list of approved HIPAA platforms should be used as a plan B to keep virtual counseling sessions with clients if a software failure occurs.

3. Counselors should make phone calls or text clients if an electricity blackout occurs.

Suppose counselors plan to deal with technical issues that may arise with virtual counseling services. In that case, the mental health industry could improve clinical outcomes while promoting social accountability, interprofessional care, and cultural competence (Saeed et al., 2016).

Conclusion

A qualitative phenomenological approach was used to explore lived experiences of licensed professional counselors who conduct teletherapy services in Texas. Findings revealed strategic choices employed by mental health counselors when adapting to unforeseen changes and challenges associated with integrating technology in the mental health industry.

Successful integration of technology into the mental health industry includes improving awareness of technology and implications for training and practice. Seed et al. (2017) stated that there are barriers to counselors using technology, such as inadequate training and familiarity with expanding and using teletherapy, risks of using technology. Telemental health is a tool used to provide mental health services to advance the sustainability of rural communities and improve mental health care in rural areas (Holland, Hatcher, & Meares, 2018). According to Nagarajan and Yuvaraj (2019), perceptions of the mental health counselors included the adequacy of training in using technologies was lacking, such as tracking non-verbal cues, written communication, and imagining the client's presence.

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