THERAPEUTIC SPACE: FROM THE FACE-TO-FACE SETTING TO THE VIRTUAL ROOM

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ABSTRACT

- Investigate how clinicians and patients dealt with E-therapy;
- Examine if psychoterapists felt efficient and comfortable using a virtual setting:
- Explore what both clinicians and patients appreciated or disliked regarding the therapeutic process and the new, different setting features.

INTRODUCTION

The current pilot study aimed to investigate how both clinicians and patients dealt with E-therapy during the lockdown.



METHOD

We developed an online therapistand-patient-report questionnaires, completed by 145 psychologists and 70 adult patients.



RESULTS: PSYCHOTHERAPISTS

Psychoterapists reported a good level of comfort and effectiveness.

Very comfortable 13%

Comfortable 62%

Not comfortable nor uncomfortable 13%
Uncomfortable 11%

Very uncomfortable 1%

Very effective 13%

Effective 68%

Not effective, nor ineffective 17%

Ineffective 1%

Very ineffective 1%

The theoretical approach didn't have a significant impact on the perception of the clinicians on the good result of their work. Limits seemed to be more related to practical issues (eg. a slow internet connection), the difficulty to find the needed privacy and the specific patient population (e.g. children, psychotic patients).

Psychoterapists reported the following areas as surprising and interesting:



Effectiveness and continuity 32%



Emotional closeness 20%





Adjustment 21%



RESULTS: PATIENTS

Patients reported to be comfortable and empathically understood and supported by their therapists. Most of them appreciated the possibility to continue the psychotherapy in spite of the physical distance. Limits were mainly related to a lack of privacy in their own homes and they missed the peculiarity of the face-to-face setting.

CONCLUSIONS

- Most clinicians felt comfortable and effective using the E-therapy. The theoretical approach didn't seem to have an impact on the results.
- Patients reported the perception to have continued effectively their therapeutic process and felt empathically supported.

Limits reported:

- Lack of privacy
- Unstable internet connection
- Unsuitable for specific patients (e.g. children)
- Unsuitable for specific disorders and psychopatology.

FUTURE RESEARCH AND APPLICATIONS

Most **clinicians** suggested that the E-therapy should be included in a formal training and best practices should be shared among clinicians.

Furthermore, the study allowed the **patients** to give a feedback on how they managed the different aspects of the E-therapy, which seems to be very promising to face not only health emergencies, but also other circumstances (e.g., movings, weather alert, pregnancies etc.).