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RESEARCH ARTICLE

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BRIEF PRESENTIAL AND ONLINE PSYCHODYNAMIC PSYCHOTHERAPY: PATIENTS' PERCEPTION

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ABSTRACT

In the last decade, different types of online activities have been growing exponentially and online psychotherapy is moving in the same direction. It is crucial to recognize this line of work as a facilitator for people in the contemporary world, especially after the COVID-19 pandemic in 2020. The purpose of this study was to compare the perception of patients who underwent brief face-to-face psychodynamic psychotherapy and online psychotherapy by a single therapist. The study had a quantitative-qualitative approach, exploratory and comparative, which used the clinical methodology. The appointments were systematic and respective, consisting of six daily face-to-face sessions, on consecutive days, except on Sundays; and six online appointments, using the same process for data collection; the extent of each session was between 40 to 50 minutes. For the data collection regarding the perception of patients on the brief psychodynamic psychotherapy care in person versus online, were tested the Inventory of Therapeutic Alliance (Working Alliance Inventory) with questions about the therapeutic relationship, after the end of 6 online sessions, and the Questionnaire Session Evaluation Questionnaire right after the end of each psychotherapeutic session, both in face-to-face and online situations. The results obtained demonstrated that there is equivalence in face-to-face and online care, regarding the therapeutic relationship built in both moments.

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INTRODUCTION

Since 1990, there has been a significant expansion of the internet, making distance communication accessible to most people. In Brazil, the emergence of the internet took place at the end of the 1980's and reached the entire population. In 2018, it was verified that 79.1% of private households already had internet. (BRAZILIAN INSTITUTE OF GEOGRAPHY AND STATISTICS - IBGE, 2018). According with IBGE's data (2019), the use of Information and Communications Technology (ICT) was 82.7% of the Brazilian population, mainly in urban areas. The internet use increased from 74.7% in 2018 to 78.3% in 2019 by subjects of 10 years old and older. In this context, one of the main objectives for using the network was to send and receive voice messages, text messages, and images by apps; noting that in 2019, about 95.7% of subjects aged 10 years and older handled the net. Irrevocably, the use of Information and Communication Technology (ICT) ranges from e-commerce to telemedicine. In Brazil, psychological services performed by technological means of distance communication were still prohibited by the Brazilian Federal Council of Psychology (CFP).

According to Resolution n. 011/2012 (CFP, 2012) that regulates computer-mediated psychological services, with emphasis on online psychological counseling with permission only for its use on an experimental basis, as a form of research until 2018. However, CFP n° 11/2018 resolution was published, which updated CFP n° 11/2012, about online psychological care and other works used by technological means of distance communication. The new rule increased the offer of Psychology works mediated by ICTs, authorizing the use of online psychotherapeutic care, keeping the rules recommended in the profession, associated with the individual registration and guidance of the professional with the Brazilian Regional Council of Psychology for possible steps, in cases of misuse of psychology. The demand for seeking psychological care online, in the last five years, has increased exponentially. This growth made several professional regulators of this section implement measures to regulate this type of work, in order to allow both the entry of the population and the improvement of the service provided. With the arrival of Covid-19, there were negative impacts on the mental health of individuals, raising their demands for emotional health care. In addition, the effects of the quarantine reduced the services provided in

person and made online services grow substantially, both in private and public services (VIANA, 2020). Also in this direction, Fiocruz (2020) emphasizes the psychosocial importance of remote care, as it follows the rules of social distancing during the Covid-19 pandemic, avoiding unnecessary displacement and, at the same time, ensuring psychosocial and psychotherapeutic care of excellence, emphasizing that the change from face-to-face to remote assistance requires adaptations of the techniques to be used by psychologists for the service, in this modality.

CASUISTRY AND METHOD

This is a study with a quantitative-qualitative approach, of an exploratory and comparative nature, which used the clinical method. The study is the result of research carried out as a Master's thesis in Health and Education. This study was carried out in a Psychology Clinic, located in Catanduva-SP, a city in the interior of the State of São Paulo. Data collection took place at the Psychology Clinic, mentioned above, starting with 6 sessions of brief face-to-face psychodynamic psychotherapy, on consecutive days. After completing the first phase of the research, 6 more sessions of brief psychodynamic psychotherapy were developed, in the online communication modality. To obtain data regarding the perception of participants (patients) about the attendance of brief psychodynamic psychotherapy face-to-face versus online, the Working Alliance Inventory (WAI-C) was applied, which assesses the therapeutic alliance and the Session Evaluation Questionnaire (SEQ), which considers the quality and feelings, which the patient has about the psychotherapeutic session. The SEQ is divided into two parts: the first part evaluates the quality of the session, and the second part evaluates the feelings, which the patient has about each session performed. Subsequently, there was a comparison of these data seeking answers regarding how the sessions were. Data collection occurred from June to July 2017, and there was authorization from the Ethics Committee in Research with Human Beings of the University of Ribeirão Preto, under No. 2.382,759, to develop the research. There was also a request for authorization of the research for online service to the Psychology Research Council of the 6th Region, since in the year of the research (2017), online service was still prohibited according to Resolution n. 011/2012 (CFP, 2012), which regulated computer-mediated psychological services, with emphasis on online psychological counseling and with permission only for its use on an experimental basis, as a form of research. The registration was made with the Regional Council of Psychology 6th Region, under protocol number 806248342.

LITERATURE REVISION

Transference, Setting and the Therapeutic Relationship and whether online psychotherapy is viable or unfeasible: The transference is classically recognized as the terrain in which the problem of psychoanalytic psychotherapeutic treatment occurs, because it is through its installation, its modalities, its interpretation that life can be re-signified. "What are transfers?" This was asked by Freud (1996, p.111), in the epilogue of Fragmentary Analysis of a Hysteria, written in 1901. And he replied: "They are re-editions, reproductions of the emotions and fantasies that, during the progress of the analysis, sound to wake up and become conscious, but with the characteristic (specific to the genre) of replacing a previous person with the person of the doctor". By analyzing the therapeutic behavior, the setting is a place, which is developed to promote a symbolic elaboration of a treatment practice and, it is in it, that the minimum technical conjunctures are associated to have a psychotherapist intervention (BARROS, 2013). In the study by Lauermann and Serralta (2021) "Factors Associated with Adherence to Psychoanalytic Psychotherapy: a qualitative study" they found that the Therapeutic Alliance had a fundamental role in the results regarding psychotherapeutic treatment, in addition to the setting influencing the maintenance of the patient's permanence in the sessions. The members of this study highlighted the importance of being able to talk about intimate issues in a safe and private place,

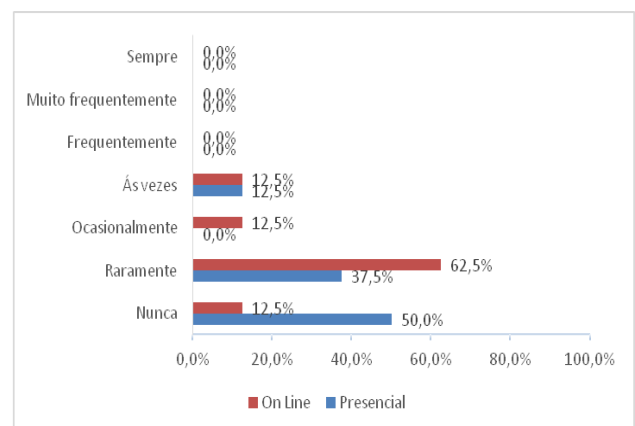
without the fear of being singled out or evaluated. Nóbrega (2015), in his study on "Online psychoanalysis - finally coming out of the closet?" makes it clear that the subject (online psychotherapy) is a delicate one, but his research leans that this new technology is inevitable and will be part of psychoanalytic treatment, as many psychoanalysts turn to this tool when in-office care cannot be done. However, this practice performed by psychoanalysts cannot yet be called psychoanalysis; more studies should be developed to reach conclusions, which prove its effectiveness. According to Calado, Morikoshi and Silvério (2021), the search for online psychotherapies is evident in 2018, increasing even more with the emergence of Covid-19. This situation demands a closer look at this practice, such as: work efficiency, recent practices, which appeared during Covid-19, adaptations in play therapy and applicability of psychometric tests, ethical issues, emergency care, among other aspects.

RESULTS AND DISCUSSION

Through the Therapeutic Alliance Inventory (Working Alliance Inventory - WAI-C) and the Session Evaluation Questionnaire (SEQ), the patients' perceptions were analyzed, initially in relation to face-to-face therapeutic sessions and, later, from online therapies sessions, allowing cross-referencing of information, comparing the two types of assistance. The subjects of this study were composed of 8 female students from the Psychology course at Instituto IMES – Catanduva-SP, aged between 19 and 40 years, with a mean of 26.5 years and a standard deviation of 7.68 years.

Patient Perception Analysis

Analysis of the answers to the questions of the Session Assessment Inventory Instrument (Working Alliance Inventory – WAI-C): Through the WAI-C instrument, issues related to the therapeutic alliance were discussed, allowing to compare the perceptions of the participants (patients) obtained from face-to-face and online psychotherapy during the research period. Emphasizing that this instrument was applied at the end of 6 psychotherapy sessions brief psychodynamic face-to-face and reapplied after 6 online brief psychodynamic psychotherapy sessions.

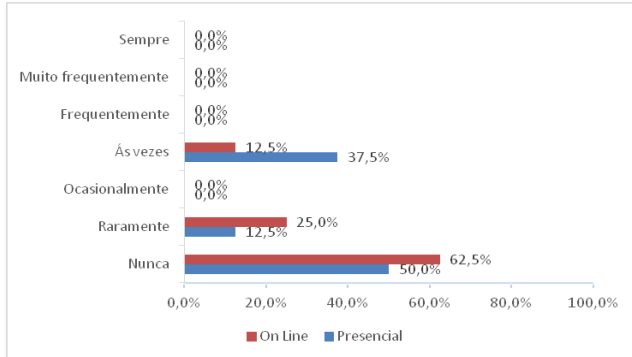


Source: Own authorship (2017).

Graph 1. Comparison of responses referring to patients' perception of face-to-face versus online brief psychodynamic psychotherapy to the question: I am concerned about the outcome of these sessions. Catanduva/SP, 2017

In Graph 1, there is a higher percentage of the answer "I am **never** worried about the outcome of the sessions" when comparing face-to-face care (50%) and online care (12.5%) by patients, but in online care there was a predominance of responses **rarely** by (62.5%) of the participants versus (37.5%) in person. It can be inferred that the difference verified in the answer is **never** related to the greater feeling of security provided by the face-to-face care, which was the first to be done, and may have created an initial positive transference, establishing greater confidence in the participant, however, patients

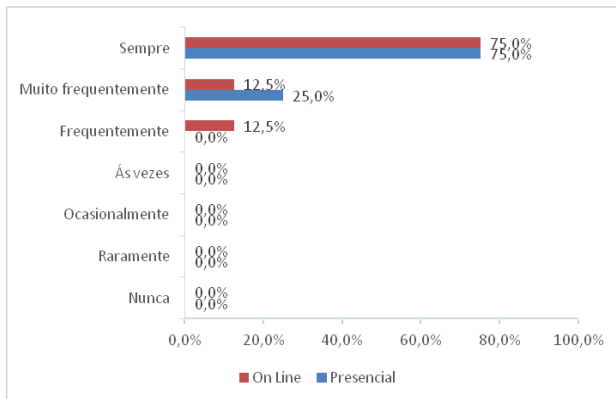
/participants were open to another type of service, online – verified in the graph (Rarely) in which online therapy had a percentage gain compared to face-to-face therapy, 62.5% against 37.5%. During the occurrence of the Covid-19 pandemic, the importance of new service models is highlighted, as suggested by Pontes (2021), because in a radical way we had to change face-to-face service to online due to the circumstances of the pandemic, adopting a way of still little known, such as online service.



Source: Own authorship (2017).

Graph 2. Comparison of answers referring to the patients' perception regarding face-to-face versus online brief psychodynamic psychotherapy, to the question: I find it confusing what I'm doing in therapy (Catanduva/SP, 2017)

In the responses **sometimes**, 37.5% of patients found face-to-face care confusing against 12.5% online, which confirmed the idea of the need to create a therapeutic alliance and transfer, which did not exist at first. The difference of 25% of those who found face-to-face therapy confusing in relation to online therapy illustrates a result that we can infer that this is linked to the condition that after the therapeutic alliance was created, the patient was less confused in the sessions, safer, calmer, welcomed, linked to the therapist.



Source: Own authorship (2017).

Graph 3. Comparison of responses regarding patients' perceptions of face-to-face versus online brief psychodynamic psychotherapy to the question: I feel that what I do in therapy will help me achieve the changes I want. Catanduva/SP, 2017

In Graph 3, it was verified the same percentage (75%) of positive responses towards the evolution of online psychotherapy. Those results will be able to contribute to the normalization processes of online psychotherapy, which could be introduced in Brazil as a tool for public health and to be offered, in a more accessible way, to the entire population. The observed data above-mentioned are in agreement with what Rodrigues and Tavares (2016) proposed, which aimed to extend the understanding of online psychotherapy and question its prohibition, when it is emphasize that there are no disadvantages greater than the advantages. That leads to questioning Resolution No. 011/2012, which prohibited computer-mediated psychological psychotherapies. Moreover, the internet is growing in Brazil and the demand for psychological services is increasing.

Analysis of the answers to the questions in the Session Evaluation Questionnaire (SEQ):

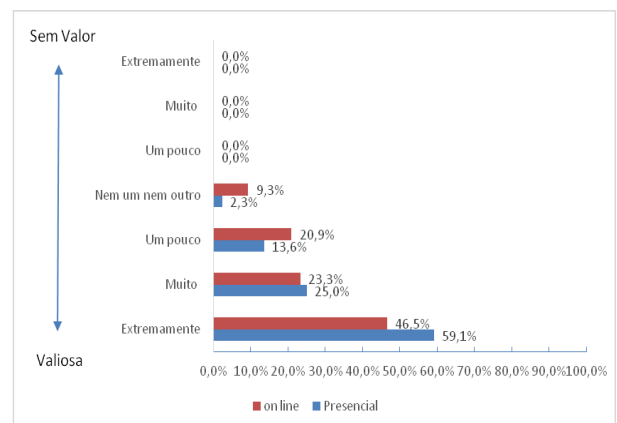
The Session Evaluation Questionnaire (SEQ) analyzed the quality of the therapeutic session through closed responses, considering the quality of the session (first phase) and the feelings that the patient has about each session held (second phase). In view of these data, comparative analyzes were made of the average of the 6 responses related to the evaluation of the 6 face-to-face sessions, as well as the average of the 6 responses related to the 6 online brief psychodynamic psychotherapy sessions. The SEQ assesses two main items related to therapy sessions: “how was the session” and “how do I feel now”.

Analysis of the first part of the SEQ: This session was

Graph 4. Comparison of patient responses referring to this session was - on the scale from extremely good to extremely bad, considering the brief psychodynamic psychotherapy session in person versus online. Catanduva/SP, 2017

Source: Own authorship (2017).

Graph 4 shows that there was a predominance of evaluation of the session as **extremely good** for (56.8%) patients in face-to-face care and (41.9%) in online care. This result may be related to the situation that the traditional setting may have influenced the patients' perception, mainly because the traditional physical setting is already well known, both for the therapist and for the patient. It appears that online consultations were still quite shy before Covid-19 and had a substantial increase soon after the beginning of social isolation. Surprisingly, many therapists who were not familiar with the online modality of psychotherapeutic consultations, confirming Cosenza's et al. the information, which states that the online therapeutic alliance was not the same as the face-to-face therapeutic alliance because face-to-face therapy has a more accurate eye contact, observation of body language, body expression, are much more palpable in face-to-face psychotherapy. All these conditions prove to be obstacles when the service is done online, and how the patient feels about the confidentiality of the consultation, how to deal with the technical issues of the information technology components, since the changes in the assistance were fast and there are limited knowledge about therapy outcomes. However, before the covid-19 pandemic, online consultations were few, so little was known, after the pandemic, new studies emerge to reaffirm whether face-to-face psychotherapy is much better than online, or if online psychotherapy surprises in a different way. Positively compared to face-to-face.



Source: Own authorship (2017).

Graph 5. Comparison of patients' responses regarding the session was: from extremely valuable to extremely worthless, considering the face-to-face versus online brief psychodynamic psychotherapy session. Catanduva/SP, 2017

The data illustrated in Graph 5 demonstrate that face-to-face psychotherapy is better accepted by patients participating in this research; however, the percentage of 46.5% as online service being valuable points in the direction of promising signs that the modality

of care is here to stay, especially due to the Covid-19 pandemic and the health measures for its control.

Analysis of the second part of the SEQ - now I feel: At this point, the responses of patients are analyzed to questions regarding “how I am feeling now”, after having had the brief psychodynamic psychotherapy session in person and online. In Graph 6, there is a predominance and similarity of the answers “I feel a little happy” both in face-to-face (27.3%) and online (27.9%) care, followed by very happy with (27.9%) and (20.5%) for online and face-to-face service. The participants manifested more positive feelings in online therapy when compared to face-to-face therapy, when asked how they feel now, after the psychotherapeutic session. However, when participants report being extremely happy, they score face-to-face therapy with a higher percentage (25%), to the detriment of online therapy (18.6%). This last result is from Azevedo, Silva and Ribeiro-Andrade’s study (2015), where they confirmed that most of the subjects surveyed recognized the importance of psychology for people’s lives. Although, it was observed that when the issue was the attendance psychological mediated by computer, research participants preferred face-to-face consultations because they /believed to be more confidential.

FINAL CONSIDERATIONS

In this study, it was possible to compare the perception of patients analyzing face-to-face and online psychotherapy using two instruments: WAI-C and SEQ. This has revealed promising results for the practice of online therapy, from the perspective of the participants, asserting online psychotherapy as one more modality for practice in psychotherapy. In this research, the data indicated equivalence in face-to-face and online consultations, featuring the existence of therapeutic relationship built in the two moments of the research. It was also found that the most articulated setting occurs in online service, no longer face-to-face, in a traditional physical environment. Also from the perception of patients/participants in the present study, at times, there was a preference for online therapy, mainly for convenience, which is effective when being able to provide care at home without the need to travel, especially on days when the lack of time, or even in the case of patients who are experiencing depression problems and lose, among other symptoms, the desire to leave the house. In this sense, online service can be offered to the patient to do their psychotherapy, through online communication. It should be noted that with the occurrence of the covid-19 pandemic from the year 2020 onwards, it provided a considerable increase in online psychotherapies, enabling an approximation of Information and Communication Technology towards its best methodological and technical knowledge.

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