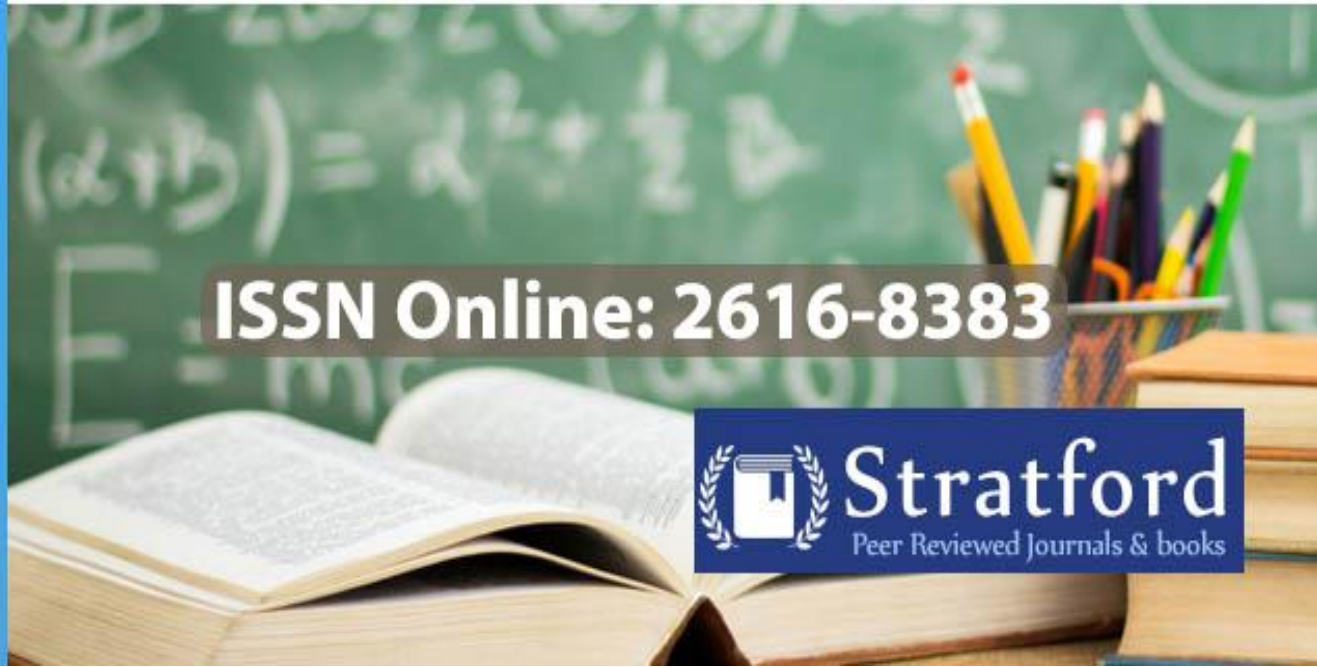


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The Influence of the Education Level on the Use of Internet-Based Psychological Intervention in The Face of COVID-19 On the Wazi Web Platform

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Abstract

The study sought to investigate the impact of education level on the adoption of internet-based psychological interventions, with a primary focus on "Wazi" online therapies. The COVID-19 pandemic necessitated various approaches to managing psychological challenges, highlighting the influence of different factors on the adoption of internet-based therapeutic interventions. Utilizing both quantitative and qualitative research methods, data was collected from 215 respondents, including 210 clients and five therapists, through simple random and purposive sampling techniques. An online semi-structured questionnaire was employed, and the data was analyzed using SPSS version 24.0 and MS Excel for complementary analysis. The findings revealed a strong positive correlation between the client's education level, socioeconomic status, and the effectiveness of internet-based psychological interventions ($r = 0.87$, $p = 0.04$). The study concluded that education and socioeconomic factors play significant roles in encouraging participation in online psychological interventions. It recommends that the government support training on necessary skills and scrutinize existing guidelines to improve computer literacy and education levels, thereby increasing technological efficiency. The outcomes of the study will benefit counselors, psychologists, and other mental health providers by offering new treatment approaches for quality mental health services through online platforms. Additionally, it will aid the government and policymakers in aligning mental health policies with current technological realities. These results will assist parents, guardians, and youths in preparing for online psychological interventions, thereby increasing access to mental health services and contributing to a healthier population.

Key Words: *Mental Health, therapy, psychological interventions, literacy*

1.1 Introduction

Spooner (2023) noted that 970 million people worldwide were suffering from one mental health disorder or addiction issue, with anxiety ranking as the most common mental illness, affecting 284 million people. In terms of gender, the same study found that mental illness affects more girls (11.9 percent) than males (10.1 percent). According to research, (women (24.5%) than men (25.2%). A fifth of years of life is lost to mental health, accounting for the global burden of disease and disability. The rate of suicide attempts in adolescents has reached almost 20%, taking over the leading position in the ranking of causes of death. People with mental health conditions experience various human rights violations, discrimination, and stigmatization despite efforts by some nations to achieve progress. Even though mentally ill patients can be remedied at a relatively small cost,

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the inequality that exists and needs vs. access to care provision persists. Including coverage of effective drugs still accounts for a small proportion of our Drug Bank (WHO, 2020). The estimate now says that mental health disorders constitute a main factor accounting for one out of five years of people's lives being lived with this disability. About one-fifth of all children or adolescents in the world are presenting with mental health conditions, and suicide is ranked the second most common cause of death for the 15-29-year age group. Medical residues from post-conflict settings suggest that about 10% of the population has some mental illness. Mental disorders like depression and Obsessive-compulsive disorder (OCD) are as rampant as ever all around the world, with a proportion of lifetime prevalence as high as 10%. It is no news that the poverty rate dropped in Nigeria from 0% to 47%. As much as 4 % of the annual disease cases are due to poor air quality in the U.S. (Kessler, 2007). According to Andersson et al. (2018), depression, anxiety, alcohol use disorder, schizophrenia, bipolar disease, and chronic mild depression have been recognized as major disabling conditions in the United States. It was additionally found that those with mental disorders usually have much higher mortality rates than the general population. Mental illnesses cause the largest share of this group's morbidity. They are a quarter of all annual deaths worldwide, amounting to approximately 8 million deaths every year, according to a study by Andersson et al. (2018).

The COVID-19 outbreak in the Americas led to an increase in mental health issues as many people found themselves in situations that promoted stress, anxiety, and depression. This was exacerbated by the social distancing and isolation brought about by lockdowns. Consequently, there was a considerable variation in counseling, scheduling of virtual sessions, chatting among individuals, and telepsychiatric sessions. These digital outlets channeled several therapeutic approaches, including online cognitive-behavioral therapy (CBT), which research has shown can help reduce symptoms of depression and anxiety (He et al., 2023). While these services are accessible, they have become a necessity during the pandemic, as they are now the primary means of providing care to people, regardless of pandemic limitations. Additionally, the interventions were designed to handle the unforeseen challenges of COVID-19, including dealing with the unknown and grief management (He et al., 2023).

The administration and health authorities in China saw early on that people's health and mental well-being could be impacted. They realized that the most efficient way to achieve this goal was to create a tech-based solution and involve many people in the work process. Internet-based interventions became instantly available, providing structured psychotherapy, mental health education, and psychological counseling (Brog et al., 2021). The purpose was to provide the services in a culturally acceptable way to the public, which was most likely to get media coverage through common social media platforms. The stepped care model was helpful, presenting different intervention levels according to personal needs. This strategy effectively dealt with the immediate negative effect of a pandemic on psychological health and helped build the mental resilience of the whole population (Brog et al., 2021). The high rate of these interventions has shown the government's positive approach to mental health and the creative utilization of technology to demolish barriers to access.

Regionally, Africa was reminded a couple of years ago of the disparity in terms of mental health resources and infrastructures through the pandemic. Although there were some setbacks, it also drove the development of psychological support methods. The Internet helped take public psychosocial response to the next level by introducing web-based interventions, the need for which arose during the COVID-19 pandemic (Saha et al., 2020). These initiatives, Mobile health (mHealth) applications, and online platforms have proved valuable in areas without limited

traditional mental health services (Saha et al., 2020). The use of mobile phones proved to have a pivotal role, especially because many mobile device owners were across the continent. Thus, interventions could be provided at the desired scale, reaching people in geographically remote and underserved areas. The interventions involved immediate help, such as stress management methods and coping techniques, while also telling the long-term ways well-being can be dealt with (Saha et al., 2021). Governments, non-governmental organizations, and private sector teams have been important in introducing and implementing internet-based psychological interventions in Africa.

In Kenya, the COVID-19 pandemic worsened an already complicated situation with an increased incidence of mental health problems due to isolation, lack of income, school closures, changes in family patterns, and an insufficient mental healthcare infrastructure incapable of meeting overwhelming needs. Kenya, a low-income East African country with a population of over 50 million people, faces tremendous challenges in providing healthcare services to its citizens, especially those residing in rural areas. It has a medical professional-to-population ratio of 13:10,000, which is critical as it is below the International Labour Organization's recommended minimum of 41:10,000 to meet the Sustainable Development Goals. The scarcity of the medical workforce is very evident throughout the healthcare system, particularly in mental health care, where there are only 116 psychiatrists and about 500 psychiatric nurses. Inadequate funding, underdeveloped health infrastructure, a limited number of therapeutic products, and socio-cultural stigma are underlying issues that hinder the standardization of online therapy. Despite this, very little research has been done on how the education level of an individual determines their readiness to adopt internet platforms for the treatment of psychological problems, hence necessitating this study.

According to an analysis by Powell et al. (2013), the Economic Research Service examined three independent telehealth activities: internet-based health research, internet-based health management, and internet-based health surveillance. ERS explored the potential socioeconomic factors that may impact the involvement of people in telehealth, including household income, level of education, age, and type and status of employment. The findings of a study indicate the contribution role of getting telehealth access to the increase in education (Wright & Griffiths, 2010). In 2015, participation rates in every telehealth activity were higher among those who had a higher education level. For example, the rural adults with college degrees were 50% higher than the rural average to conduct online health research and about 100% higher than the rural average to participate in telehealth activities. Kontos et al. (2014) in their study on technology use and health communication, argued that income might not be the best indicator of SES than educational level. The only SES variable found to be independently associated with virtual visits in this study was the percentage of households above the federal poverty level instead of the educational level. Since these virtual visit portals rely on data, a patient will need to have a smartphone, a tablet, or a computer with an Internet connection that is guaranteed to work.

Those with more education, whether or not they have a university degree, are generally more likely to look for online treatment. The following are the reasons for this: Virtual counseling could give you a feeling of more privacy, which in turn would encourage you to raise the tabooest topics. Patients and their therapists can work through difficult behaviours at "the scene of the crime," thus using the Internet to practice new skills (Wright & Griffiths, 2010). College students find online sessions more appealing than conventional in-person counselling because the sharing of video and text chatting more resembles their usual methods of communication with friends. In a 2020 survey

of 2555 Internet-based respondents' poll of U.S. adults, only 4% of participants represented a panel sample that had engaged in video conferencing encounters (The Harris Poll, 2020). However, while 49% reported that they would use videoconferencing in the future, the older ones and individuals with lower education found it inconvenient. Out of 1301 respondents who met the criterion (weighted percentage), 34 were of bachelor's degree or above. In 2000 (percent weighted at 4.4%), the number of immigrants residing in urban areas was at 80.6% (in 2010) (percent weight). The Harris Poll (2020) carried out an online survey, which involved more than 2,000 people, to assess the extent of telehealth usage and people's opinions on the technology. The data is weighted to be typical of the adult population in the United States across standard demographics. While age could be the critical driver of customer readiness for telehealth utilization, education level is seen as a factor raising telehealth uptake. Among college graduates, 69% are prepared to use telemedicine, while only 61% of those with high school diplomas are.

2.1 Theoretical Framework

Maslow's Hierarchy of Needs presents a theoretical framework that helps to understand the nature of human motivation and behavior. According to his model, individuals progress through a hierarchy of needs, beginning with physiological needs and culminating in self-actualization (Murphy et al., 2015). This theory can be utilized to better comprehend how people's priorities shift during life crises, such as those encountered during the COVID-19 pandemic, thus informing research on the influence of education level on the adoption of internet-based therapy. For example, individuals with lower education levels may prioritize basic physiological and safety requirements, such as food, shelter, and protection from the virus, over online therapy. In contrast, individuals with higher education levels might have already fulfilled these fundamental needs (Murphy et al., 2015). Consequently, they may be more inclined to pursue higher-end needs, such as self-esteem and self-actualization, through online therapy to cope with psychological problems.

Erikson's psychosocial theory of development considers different stages of psychological development, each accompanied by conflicts that must be resolved for healthy development. In the context of evaluating the impact of educational level on tech-based therapy adoption, Erikson's theory provides a background that illustrates how individuals at different stages of psychosocial development are likely to differ in their propensity to seek therapy. For instance, adolescents navigating the stage of Erikson's identity versus role confusion may be more inclined to explore online therapy as a means of asserting their identity and autonomy (Maree, 2021). Conversely, older adults in Erikson's generativity versus stagnation stage may opt for online therapy to stimulate their thought processes and enable them to take actions that contribute to the well-being of humanity (Maree, 2021). By reviewing developmental stages, researchers can reveal how educational levels intersect with psychosocial development to influence the selection of internet-mediated psychotherapy for various psychological issues

3.0 Research Methodology

The study employed a mixed-methods research design to investigate the influence of education level on the adoption of internet-based therapy for managing psychological issues. Conducted entirely online, the study was location-agnostic, allowing participation from individuals across diverse regions of Kenya. The target population consisted of approximately 300 clients who were actively engaged with the Wazi platform, including 210 clients and five therapists who served as the purposeful samples for the study.

Semi-structured questionnaires were utilized to collect data from the 210 clients and five therapists. Before the main study, a pilot study was conducted to measure the reliability and validity of the research instruments. The collected data was analyzed using SPSS for quantitative data and thematically for qualitative data. The entire research process adhered to ethical principles, including informed consent and confidentiality, which guided the collection and storage of data.

4.0 Findings and Discussion

This section presents the findings and subsequent discussion of the study.

4.1 Participants Level of Education

The research aimed to determine the level of education among the respondents. Education allows youths to engage in a system of social contact and access to technological resources and sites. Figure 1 presents the results.

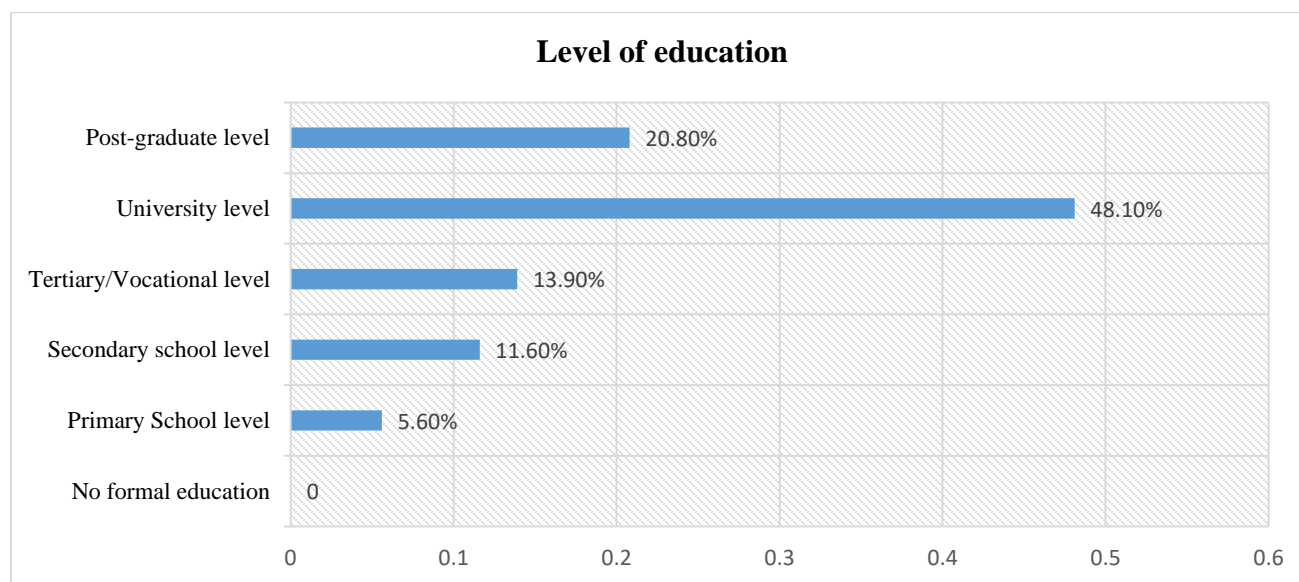


Figure 1: Level of education

Source: (Researcher, 2023)

The data shown in Figure 1 indicates that 48.1% (n=101) of the respondents had completed their education at a university, while 20.8% (n=44) had completed post-graduate studies. This suggests that most users of the Wazi online therapy platform were educated to at least a university degree. Additionally, 11.6% (n=24) had completed secondary schooling, and 13.9% (n=29) had reached the tertiary/vocational level. Only 5.6% (n=12) of the participants had completed only elementary school. Notably, there were no respondents without a degree. This suggests that a wide range of educational backgrounds were well-represented in the study.

4.2 Internet-Based Psychological Interventions

This study employed participants to determine whether they had gone through counseling on the web for internal well-being, which platform for the internet-based psychological intervention, and the frequency of use to uncover whether individuals faced any challenges during counseling on the Internet. Table 1, below provides the rate of use of internet-based psychological intervention.

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Table 1: Use of internet-based psychological intervention

Frequency of use	Frequency	Percentage
Intensive	55	26.3%
Weekly	40	19.2%
Periodic	51	24.1%
Consultative	64	30.4%
Total	120	100

Source: (Researcher, 2023)

Every respondent had engaged in the web-based psychological intervention, according to the study. Based on the data presented in Figure 1, the greatest proportion of participants-30.4% (n=64) used it consultatively, followed by 26.3% (n=55) who used it extensively, 24.1% (n=51) who used it occasionally, and 19.2% (n=40) who used it regularly. The study also discovered that a large number of patients encountered network outages and poor internet connections while receiving therapy.

4.3 Client's Level of Education

The study found that among users of the Wazi online treatment platform, the degree of education of the clients affected their utilization of internet-based psychological interventions. Table 2 below shows the outcomes.

Key: (4)-Strongly Agree (3)-Agree (2)-Disagree (1)-Strongly disagree.

Table 2: Client's level of education

Statements	4	3	2	1	Mean	S.D
Education has made it easy for me to use the Internet and technology	19.6%	80.4%	-	-	3.86	.395
Education has enabled me to navigate online therapy platforms much quicker and easier	1.2%	83.9%	14.9%	-	3.52	.393
Education has eased the use of devices used in online therapy sessions, hence increasing the effectiveness of online therapy	18.0%	78.0%	4.0%	-	3.97	.550
Education helps in saving the time required to understand therapeutic concepts during online therapy	11.4%	88.6%	-	-	3.71	.359

Source: (Researcher, 2023)

As can be seen from Table 2 above, the largest percentage of respondents (80.4%) agreed that having a higher education level made it easier for them to use technology and the Internet. Their standard deviation was 0.395, and their mean was 3.86. (19.6%). Furthermore, the majority of respondents (83.9%) concurred that knowledge had made it much easier and faster for them to use online therapy platforms.

A mean of 3.52 and a standard deviation of 0.393 suggested this. Online treatment had a mean of 3.97 and a standard deviation of .550, and a significant portion of participants (78.0%) believed

that their education level had made it easier to use gadgets in therapy sessions. Just 4.0% of respondents disagreed, however, 18.0% of respondents firmly agreed on the same. Ultimately, 88.6% of respondents agreed that education reduces the amount of time needed to comprehend therapeutic concepts during online treatment, with 11.4% strongly agreeing. 3.71 was the mean, and 0.359 was the standard deviation. The utilization of internet-based psychological therapies and the client's educational attainment were also investigated in this study.

Table 3: Relationship between Client's Level of Education and Use of internet-based psychological interventions

		Client's education level
Use of internet-based Psychological intervention	Pearson Correlation	0.87
	Sig. (2-tailed)	**0.03
	N	210

Correlation is significant at the 0.05 level (2-tailed).

The client's education level is a crucial factor and shows a strong positive correlation with the effectiveness of internet-based psychological interventions ($r = 0.87, p < 0.05$). The level of education is likely a determining factor for users of online therapy sites, with more tech-savvy individuals being the primary customers. The higher the education level of a client, the more convenient and effortless it will be for them to use web-based psychological intervention methods.

Therapists' responses to questions about how clients' education levels influence their use of online therapy platforms were revealing:

Mary (not her real name), a female therapist aged between 31-40 years old, a graduate with less than five years of experience, noted, "The customers whose education level is on the higher end are generally better with technology and understanding therapeutic concepts. In contrast, clients whose education level is on the lower end need additional support in using the platform and interpreting psychological concepts."

Esther (not her real name), a female therapist aged between 31-40 years old, holding a diploma with less than five years of experience, observed, "There is no need for people who are far from the clinic to attend our therapy sessions physically. However, some education should be provided to the clients first. The understanding and study of psychological concepts and methods are now much faster. It is a time-saving approach and resource-efficient. Additionally, clients can consult their therapists from anywhere. Working with clients who have higher levels of education is very easy when reflecting sentiments. However, for clients with less academic experience, it is challenging to reflect on complex reactions and emotions. Corresponding with the client's language and ensuring that the therapeutic process and techniques are understandable and, if necessary, translated, becomes a bit challenging."

David, not his real name, a male therapist aged between 41-50 years old, graduate with less than five years' experience, noted that: "Most educated customers prefer online therapy, whereas the greatest number of clients who are still coming to grips with technology prefer face-to-face therapy."

Joy, not her real name, a female therapist aged between 31-40 years old, graduate with less than five years' experience, noted that: "The Gen Z digital natives are accustomed to the Internet, which makes it their native habitat. I evaluate the level of education not only in terms of degrees but also on the knowledge of how to use the internet".

Pamela, not her real name, a female therapist aged between 31-40 years old, graduate with less than 5 years' experience, noted that: "The less educated the people are, the more difficult it is for them to understand how technology works. The respondents mentioned the education level of clients as a factor that causes the platform to be selected for online therapy. Altogether, people who hold a diploma were better with technology and knew about the use of therapeutic terms. The online platform for clients who are unable to attend in person requires some level of education. The use of online platform therapy for clients with low education levels is found to be slightly tricky as they have to grasp simple emotions."

5.0 Discussion

The vast majority of clients reported that education made technology and online therapy platforms much easier to use and navigate. Clients with higher education were well-versed in technological advancements and quickly acquired therapeutic and psychological concepts. In contrast, clients with lower levels of education required more assistance when using the platform and learning psychological concepts.

These findings align with the conclusions of Rochlen et al. (2004), who stated that flexibility and adaptability during the use of online therapy interventions demand clients with high educational capacities, in addition to possessing the skills and proper application of suitable tools and techniques to facilitate effective online therapy performance and effectiveness.

The study revealed a positive correlation ($r = 0.87$, $p = 0.04$) between a client's level of education and their use of internet-based psychological interventions. This suggests that a higher level of education makes clients more comfortable and adept at using internet-based psychological interventions. In contrast, clients with lower levels of education struggle more with these platforms and require additional support.

Moreover, clients with higher education levels were found to be more efficient in navigating the technological aspects of online therapy and grasping psychological concepts, leading to a more effective therapy experience. On the other hand, clients with lower education levels often needed extra assistance, which could potentially hinder their overall therapy progress.

This underscores the importance of considering educational background when designing and implementing online psychological interventions. Ensuring that clients receive the necessary support and education to use these platforms effectively can enhance the overall success of internet-based psychological therapies.

The clients observed that technology not only became easier to use but also to navigate online platforms within a very short time speeding up the process of online therapy. Clients who have higher education were able to feel more comfortable with high technology and learning about therapy types. In comparison, others with lower education needed more assistance on the platform using and understanding psychological concepts. The research showed that it was only possible for participants who rated their knowledge level higher to respond to clients physically prevented in person from attending therapy. These results reflect the assertions developed by Rochlen et al. (2004) who claimed that online therapy intervention demands clients to have enhanced educational

competencies and improved additional skills to utilize appropriate support resources. The study showed a strong positive correlation between the stage of education of the client and the use of Internet Psychological treatment tools ((0. 87, $p = 0. 04$). The availability of online psychological interventions is moderately affected by education level. The users with higher levels of education will feel at ease and accustomed to the internet-based psychological approaches.

Contrasting to this, it was discovered that this therapy platform was slightly hard to use for clients with a lower level of education, as some of them were found to have problems expressing their complex feelings. Similarly to these studies, Tsalavouta (2013) states that a high level of educational background of clients can contribute to therapist-patient communication because online therapists repeat or reflect clients' statements to enhance communication, increase understanding, and prevent the potential for miscommunication, which will promote positive communication and understanding between therapist and client. The study further highlighted the need for some level of education for clients who are unable to attend therapy in person while using an online therapy platform. The grasping of psychological concepts and the understanding of techniques is faster compared to traditional therapies and less money and time are spent on therapy as clients can choose to do it at their convenient place. In contrast, I face the challenge of grasping clients who have minimum educational backgrounds because they have problems with drawing an understanding of complex emotions. The level of terminology, the clients' idiomatic, and explanations become likely sources of confusion and misunderstandings in the process of deepening our therapeutic process and techniques, as more time is needed for translation. It aligns with the research conducted by Wright and Griffiths (2010), who concluded that the education level of clients had a positive impact on their online communication and engagement, which enhanced therapeutic processes, increased emotional connectedness, and led to improvement in therapy outcomes.

6.0 Conclusion

The study concludes that the client's educational level significantly affects the use of internet-based psychological interventions among clients using the Wazi online therapy platform. Education enables clients to log in and navigate internet sites with greater ease. More educated clients were more confident with the technology and had a better understanding of therapeutic processes. In contrast, less educated clients needed reminders to use the platform and help interpreting psychological knowledge. The findings suggest that higher education levels correlate with a more positive and less fearful attitude towards using internet-based psychological interventions.

7.0 Recommendation

The study recommends several measures to enhance the effectiveness and accessibility of internet-based psychological interventions. Firstly, it is recommended that the administration audit all regulatory policies to enhance computer literacy and the overall level of education in the country. This audit should focus on identifying gaps in current policies and implementing necessary changes to ensure that individuals at all education levels can efficiently use technology, especially in the context of accessing internet-based psychological interventions.

Secondly, the study recommends that the government support training programs aimed at improving digital skills among the population. These training programs should be designed to cater to various education levels, ensuring that everyone, regardless of their educational background,

can effectively navigate and utilize online therapy platforms. This will help bridge the digital divide and ensure more equitable access to mental health services.

Lastly, the study suggests implementing targeted policies to improve education levels, particularly focusing on areas that contribute to technological efficiency. By prioritizing education reforms that emphasize digital literacy and technical skills, the government can better prepare the populace to adapt to the increasing reliance on technology. This will improve the overall effectiveness of internet-based psychological interventions and other online services.

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