

Online Therapy USER

Unit for Service, Education and Research

June
2016

Online Therapy USER

The Online Therapy Unit for Service, Education, and Research (USER) is led by Dr. Heather Hadjistavropoulos from the University of Regina. Online therapy programs were initially developed in Australia.

The Online Therapy Unit allows trained therapists to provide Online Cognitive Behaviour Therapy to residents of Saskatchewan who have difficulties with depression, generalized anxiety, and/or panic. The Unit also provides education and training to diverse registered health professionals and students on how to deliver services online. This unit is also responsible for conducting research on how to best train therapists and deliver online-CBT in Saskatchewan.



Director and Coordinator's Message

The Online Therapy Unit has seen some changes in staffing and we would like to welcome a few new faces to our team. Kim Larson and Kelly Adlam have started with us in a clinical capacity delivering the Wellbeing Course. Kim is currently working on her Master of Social Work at the University of Regina in vicarious trauma and has been practicing in mental health and child welfare for 10 years. Kelly comes to us from Ontario where she completed a Master of Education in 2005 and a Master of Social Work in 2007. Kelly has had the opportunity to practice both in adult mental health and the school system for 10 years. We are also very fortunate to welcome a new graduate student to the lab. Mike Edmonds will be starting his studies in the fall and comes from Waterloo, Ontario.

Annora Bourgeault, the pleasant voice you hear when contacting the unit, will be leaving us at the end of June to begin an M.A. in Counselling Psychology at McGill. We will miss her dearly but are excited for her to have the opportunity to move forward with her career. We are happy to announce that Adriana Arias will step into Annora's role. Adriana comes to us from Child and Family Services in Brandon, Manitoba, before that completing a Psychology degree in Columbia.

We are approaching the end of the project funded by the Canadian Institutes of Health Research, Innovative Medicine, and the Saskatchewan Health Research Foundation. In the last three years, we have been able to offer Internet-delivered Cognitive Behaviour Therapy to 900 Saskatchewan residents! You will see while reading the newsletter that we are in the process of publishing the results and disseminating the knowledge we have gained. We would like to thank everyone who has made this work possible. We are truly fortunate to have had the opportunity to work with such an amazing group of people, who are all interested in improving wellbeing in Saskatchewan through the Internet.

In March, we received some exciting news. The Saskatchewan Ministry of Health provided the Online Therapy Unit with \$200,000 in funding to support the continued operation of the Unit. This funding allows us to continue to offer services to Saskatchewan residents into 2017. We would like to thank Saskatchewan Health for their continued support of Internet-delivered Cognitive Behaviour Therapy.

With that, we wish you all a safe and happy summer from the Online Therapy Unit Team. As always, if you have any questions or comments please do not hesitate to let us know.

Heather Hadjistavropoulos, Ph.D., Director & Marcie Nugent, M.S.W., Coordinator

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The Online Therapy USER is now offering a Pain Course

This Pain Course has been designed to treat symptoms of pain, anxiety, and depression among adults who have difficulty coping with chronic pain. Developed by Australia's eCentreClinic for Emotional Health at Macquarie University, the course aims to provide good education and guidance on simple but effective evidence-based techniques for managing symptoms. The Pain Course is comprised of 5 self-led lessons presented in a slide show format completed over 8 weeks. The lessons include information about symptoms of pain, anxiety and depression, strategies for identifying and changing unhelpful thoughts, strategies for increasing activity, relaxation techniques, and additional coping strategies relevant to chronic pain management. Clients receive weekly individualized support from a guide over the phone or email under the supervision of a mental health professional. To apply or learn more please go to our website, www.onlinetherapyuser.ca.

New Publication in the Journal of Anxiety Disorders

Transdiagnostic Internet-delivered cognitive behaviour therapy in Canada: An open trial comparing results of a specialized online clinic and nonspecialized community clinics

The effects of Internet-delivered Cognitive Behaviour Therapy (ICBT) for anxiety and depression are not well understood in non-specialized compared to specialized clinics. This open trial examined the benefits of transdiagnostic-ICBT when delivered in Canada by therapists working in either a specialized online clinic or non-specialized community clinics that are primarily focussed on delivering face-to-face and secondarily offered ICBT. Symptoms of depression and anxiety were assessed at pre-treatment, post-treatment and at 3-month follow-up with completion satisfaction ratings high. Completion rates, satisfaction levels and outcomes did not differ whether ICBT was delivered by therapists working in a specialized online clinic or non-specialized community clinics. In addition, significant and large reductions were found on symptom measures. The findings support the public health potential of ICBT.

Keep up to date!



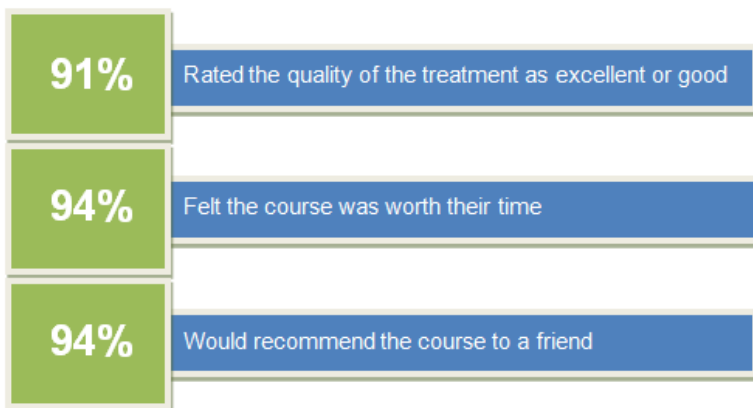
Online Therapy USER



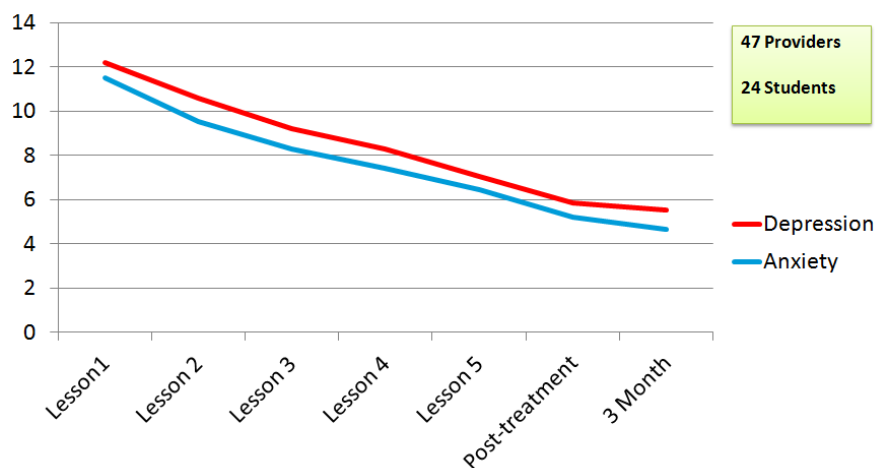
@TherapyUser

Current Wellbeing Client Outcomes

Treatment Satisfaction



Wellbeing Course - Symptom Change (n = 618)

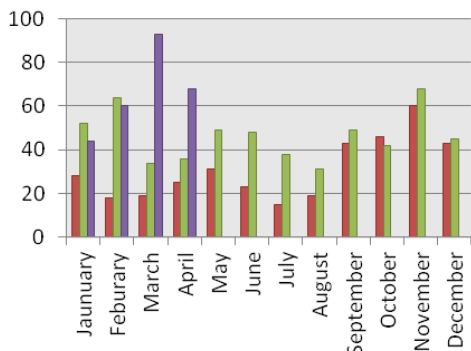


Graph demonstrates clients show significant improvements in depression and anxiety over time. At the end of treatment, clients report very low levels of depression and anxiety.

Participation Rates 2013-Present

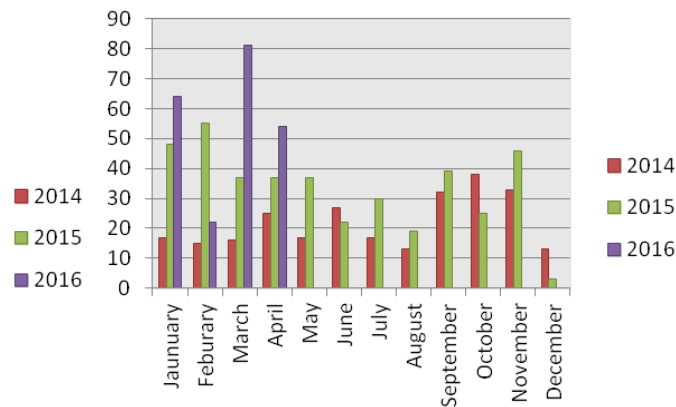
Participation in ICBT has been steadily increasing over time

Completed Telephone Screening



Total n = 1211

Intakes



Total n = 893

Coming Soon

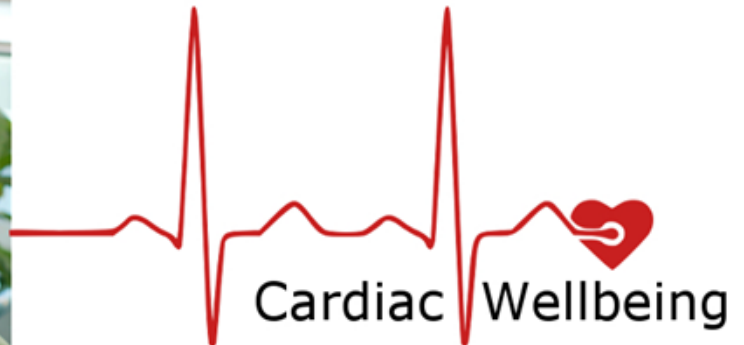
New Website!

We have contracted Look Agency to build a new website for Online Therapy USER! If you have any comments or suggestions to help us in this endeavour we would appreciate your feedback. Please call 306-337-3331 or email online.therapy.user@uregina.ca

Cardiac Wellbeing Course

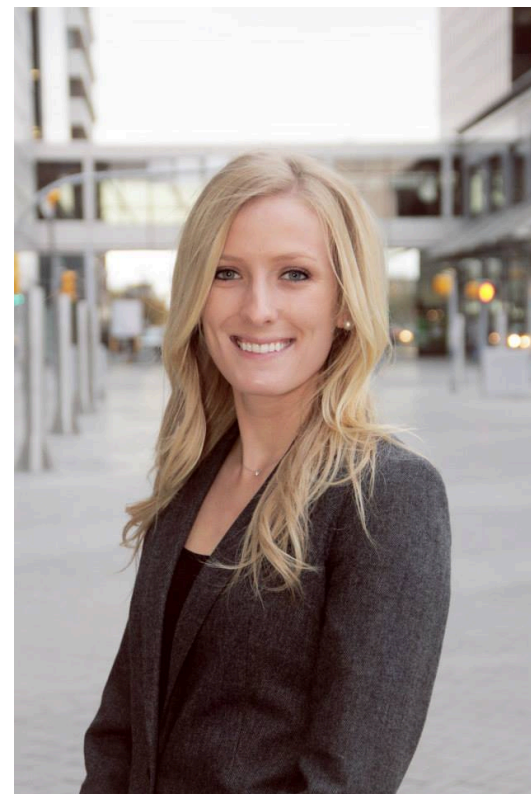
Are you or someone you know currently experiencing symptoms of anxiety and depression following a heart attack? This summer, Online Therapy Unit researcher Luke Schneider will be launching a Free Internet-delivered cognitive behavioural therapy program designed to help Canadians who have experienced a heart attack to cope with symptoms of depression and anxiety. To be eligible, participants must be experiencing symptoms of anxiety or depression and they must have experienced an acute coronary event (heart attack, angina) within the last 24 months. Participants must also be 18 years of age or older and a Canadian citizen.

This study has been approved by the Research Ethics Board at the University of Regina. For more information please contact Luke.Schneider@uregina.ca



Wellbeing After Cancer Course

Following the successful delivery of Wellbeing After Cancer (an online cognitive behavioural therapy program for cancer survivors with anxiety and depression) in Saskatchewan, Wellbeing After Cancer is now being offered to cancer survivors across Canada! The course is provided at no cost and will be accepting participants beginning Summer 2016. To be eligible, participants must be experiencing symptoms of anxiety and/or depression, been diagnosed with cancer in the past two years and have completed primary medical treatments (i.e., chemotherapy, radiation therapy, surgery). Participants must also be 18 years of age or older, and a Canadian citizen. This study has been approved by the Research Ethics Board at the University of Regina. To find out more information about Wellbeing After Cancer or to enroll in the course please visit onlinetherapyuser.ca or contact the primary researcher Dale Dirkse, at dirkse2d@uregina.ca



New Publication in Press: Internet-delivered Cognitive Behaviour Therapy for Depressive Symptoms: An Exploratory Examination of Therapist Behaviours and their Relationship to Outcome and Therapeutic Alliance

Luke Schneider, Heather Hadjistavropoulos, Nichole Faller

In this study, we systematically examined the frequency of therapist behaviours during the course of ICBT for depressive symptoms. We also conducted exploratory analyses to examine relationships between therapist behaviours, symptom improvement, and therapeutic alliance. Method: Data was obtained from a previously published open trial (omitted for review). A total of 1013 e-mails sent from therapists (n = 24) to patients (n = 41) during ICBT for depressive symptoms were analyzed. Therapist behaviours previously described by Paxling et al. were reliably identified in the e-mails using qualitative content analysis; the frequencies of these behaviours differed, however, from the Paxling study and three additional therapist behaviours were identified (administrative statements, questionnaire feedback, asking clarifying questions). Several therapist behaviours (e.g., administrative statements, task prompting) were associated with lower symptom improvement at post-treatment. Questionnaire feedback and task reinforcement were associated with higher patient ratings of therapeutic alliance. The study provides partial support for the generalizability of therapist-assistance across ICBT programs. Experimental research is needed to examine the impact of varying therapist-assistance on patient outcomes.

Doctoral Dissertation Defense: Examination of therapist behaviours in therapist-assisted Internet-delivered cognitive behavioural therapy for generalized anxiety disorder

Christina Drost

Therapist-Assisted Internet-Delivered Cognitive Behavioural Therapy (TAICBT) for the treatment of generalized anxiety disorder (GAD) is found to be efficacious. The nature of therapist-assistance, however, is not well understood. This research aimed to enhance understanding of the nature of therapist-assistance by examining: 1) therapist behaviours in emails sent to clients treated with TAICBT for GAD and the extent to which these qualitatively overlap with behaviours described in face-to-face therapy; and 2) if therapist behaviours in the current study (using a larger and more diverse therapist sample) compared to therapist behaviours reported in a past study of TAICBT for GAD (Paxling et al., 2013). Data was collected as part of an open trial investigating a 12 module TAICBT program delivered to 107 clients presenting with symptoms of GAD. Nineteen therapist behaviours were identified in the secure messages sent from therapist to patients. These behaviours qualitatively overlapped with therapist behaviours that are commonly observed in face-to-face therapy. Overall, preliminary evidence was found to suggest that: 1) there is both overlap and variability in terms of therapist-assistance provided in face-to-face therapy and across different TAICBT programs, and 2) the relationship between therapist behaviours, treatment outcome, therapeutic alliance, and treatment satisfaction is complex and needs to be examined further. The findings shed substantial light on the nature of therapist assistance in TAICBT.

To participate in online therapy in Saskatchewan, visit:

www.onlinetherapyuser.ca

1. Complete online screening located on the website. Receive an email confirmation that your online screening has been received and request an appointment time to speak with staff on the phone.
3. Take part in a telephone conversation with a Unit staff member to discuss if the Wellbeing Course or if another treatment method would best meet your needs at this time.

Recent Online Therapy Unit Publications:

- Hadjistavropoulos, H. D., Nugent, M., Alberts, N., Staples, L., Dear, B., & Titov, N. (in press). Transdiagnostic Internet-delivered cognitive behaviour therapy in Canada: An open trial comparing results of a specialized online clinic and nonspecialized community clinics . *Journal of Anxiety Disorders*.
- Hadjistavropoulos, H. D., Pugh, N., Hesser, H., & Andersson, G. (in press). Therapeutic alliance in therapist-assisted Internet-delivered cognitive behavior therapy for depression and anxiety. *Clinical Psychology and Psychotherapy*.
- Schneider, L. H., Hadjistavropoulos, H. D. & Faller, N. (in press). Internet-delivered cognitive behaviour therapy for depressive symptoms: Therapist behaviours and their relationship to outcome and therapeutic alliance.
- Pugh, N. E., Hadjistavropoulos, H.D., Dirkse, D. (2016). An efficacy trial of therapist- assisted, internet-delivered cognitive behaviour therapy for women with maternal depression. *PLOS one*, doi: 10.1371/journal.pone.0149186
- Hadjistavropoulos, H. D., Pugh, N., Hesser, H., & Andersson, G. (2016). Predicting symptom improvement in therapist-assisted Internet-delivered cognitive behavior therapy for depression and anxiety within an open dissemination trial. *Behavior Therapy*, 47, 155-165. Doi: doi:10.1016/j.beth.2015.10.006
- Holländare, F., Gustafsson, S. A., Berglind, M., Grape, F., Carlbring, P., Andersson, G., Hadjistavropoulos, H. & Tillfors, M. (2016). Therapist behaviours in internet-based cognitive behaviour therapy for depressive symptoms. *Internet Interventions*, 3, 1-7. doi:10.1016/j.invent.2015.11.002
- Jones, S. L., Hadjistavropoulos, H. D., & Soucy, J. N. (2016). A randomized controlled trial of guided internet cognitive behaviour therapy for older adults with generalized anxiety. *Journal of Anxiety Disorders*, 37, 1-9. doi:10.1016/j.janxdis.2015.10.006

Online Therapy USER Community Partners

Regina Qu'Appelle Health Region
Saskatoon Health Region
Five Hills Health Region
Sun Country Health Region
Cypress Health Region
Prince Albert Parkland
Health Region
Kelsey Trail Health Region
HealthLine
Saskatchewan Ministry of Health

Current Online Therapy Unit Team

Principal Investigator: Heather Hadjistavropoulos (Psychology U of R)

Coordinator: Marcie Nugent (Psychology U of R)

Co-investigators: Cory Butz (Computer Science U of R), Thomas Hadjistavropoulos (Psychology U of R), Nuelle Novik (Social Work U of R)

International Collaborators: Nick Titov & Blake Dear, Macquaire University, Sydney Australia; Gerhard Andersson, Linköping University, Linköping, Sweden

Provincial Collaborators: Kathy Willerth, Lorne Sier, Saskatchewan Health, Dave Nelson, Saskatchewan Division, Canadian Mental Health Association

Online Therapy Unit Staff/Students: Annora Bourgeault, Dale Dirkse, Nichole Fallor, Lindsay Friesen, Kim Larson, Marcie Nugent, Tori Owens, Luke Schneider, Joelle Soucy, Kelly Adlam, Adriana Arias

Web Development Team: Max Ivanov

Online Therapy Unit Volunteers: Casie Chang, James Colton Macdonald, Lindsay Shumay

Student Therapists: Dale Dirkse, Karmen Pearce, Luke Schneider, Joelle Soucy, Sarah Ivens,

Registered Providers: Amy Janzen Claude, Barbara Golden, Breann Hetherington, Cam Friesen, Carolyn Van Dyck, Chelsea Delparte, Dawna Karalash, Deanna Nilson, Erin Fogarty, Haley Francis, Heather Hadjisavropoulos, Hema Harrison, Jai Richards, Jill Zimmermann, JoAnne Salido, Katherine Owens, Kavita Ram, Kim Tucker, Marcie Nugent, Margaret Ralston, Meghan Woods, Mike Hodson, Patrick Welch, Patty Crassweller, Rosalie Meyer, Sarah Chan, Shelly Luchenski, Sheryl Fehr, Taneil Stevens, Tasha Skorlatowski, Victoria Walton, Wendy Martin

Community Advisory Panel: Dianne Ouellette, Catherine Fenwick, Justin Waldrop, Elita Paterson, Sandy Devine, Phyllis O'Connor

Funding

Funded by Canadian Institutes of Health Research Partnership for Health Systems Improvement Grant Competition - ~\$708,000 in funding from:

Strategy for Patient-Oriented Research (SPOR; \$294,118);

Rx&D Health Research Foundation (HRF; \$294,118)

Saskatchewan Health Research Foundation (SHRF; \$120,000)

Saskatchewan Ministry of Health (\$200,000)

Is Online Cognitive Behaviour Therapy right for everyone?

The support provided through online therapy is not appropriate for all clients.

Online therapy is not appropriate for clients who:

- Report plans to harm oneself or others
- Have recently harmed themselves or others
- Report delusions or hallucinations
- Are experiencing mania or hypomania
- Report primary problems with drugs or alcohol

Clients for whom online therapy is not appropriate are referred to other services.

The International Society for Research on Internet Interventions (ISRII) Poster Presentations

Messages in a digital world: comparison of community and student emails in an Internet-delivered cognitive behavioural therapy program for depression

Luke Schneider, Joelle Soucy, Heather Hadjistavropoulos

Detailed comparison of therapist-assistance in ICBT offered by students as compared to registered therapists has not been undertaken however. In this study, we examined data from a previously published open trial of ICBT for depression (12 modules) and compared emails sent to patients by students as compared to emails sent to patients by registered therapists. Results indicated that patients treated by students and registered therapists received a similar number of emails (average of 24 over weeks); the emails sent by students, however, were significantly longer than emails sent by registered therapists and included a higher proportion of statements classified as empathetic utterances but a lower proportion of alliance bolstering and self-disclosure statements as compared to registered therapists. The results of this study highlight potential differences among student and registered providers which may be important to consider when implementing ICBT.

Improving transdiagnostic internet-delivered cognitive behaviour therapy: process evaluation of common client questions.

Joelle Soucy, Luke Schneider, Heather Hadjistavropoulos

The aim of this qualitative study was to identify common questions clients ask when communicating with an internet therapist during ICBT. Messages from 35 clients who completed treatment were randomly selected from. A thematic content analysis was performed on all emails. While the majority of questions posed to therapists concerned thought challenging, a number of additional questions were asked, such as questions regarding increases or decreases in symptoms, concerns with ability to apply cognitive and behavioural skills, and technical issues with the program. Findings may help facilitate therapist training in ICBT by preparing therapists to answer questions. Additionally, automated responses to common questions can also be prepared to decrease time needed to respond to questions.

To Find Out More About
Online Therapy in
Saskatchewan:

Call: 306-337-3331

Email:

online.therapy.user@uregina.ca

Watch the video on our
website:

www.onlinetherapyuser.ca

Register online now to put
want your name on our
contact list.



Increasing favourable expectations of therapist-assisted internet-delivered cognitive behaviour therapy: importance of testimonial-based versus statistically-based information

Victoria Owens, Heather Hadjistavropoulos, Dale Dirkse

Many individuals have low expectations about ICBT given that it is novel. This presents a problem, as higher expectations of treatment have been linked to more favourable treatment outcomes. The goal of this study was to determine what type of information facilitates the greatest increase in positive expectations of ICBT and to identify potential correlates between participant characteristics and positive views of ICBT. Participants were invited to watch an educational video and complete questionnaires assessing perceptions of ICBT, and were randomly assigned to watch one of two videos with largely similar content. One video, however, contained client testimonials and the other contained statistical information related to symptoms improvement. The data revealed that regardless of which video the participants viewed, perceptions of ICBT were significantly higher post-video than pre-video; however, the difference between the two video conditions was not significant. Participant characteristics (e.g., age, sex, province of residence, education) were not correlated with positive expectations of ICBT. Positive perceptions of the video were significantly related to positive expectations about ICBT. Results suggest that educational videos are an effective way to increase expectations of this treatment, and the quality of information in the video is related to improved expectations.

In recognition of her poster on increasing favourable expectations of therapist-assisted ICBT, Victoria Owens received the award for Best Student Poster by the International Society for Research on Internet Interventions.

Advertise in your community!

Contact Marcie for promotional materials that you can distribute. Marcie.Nugent@uregina.ca or phone (306) 337-3331.

Contact your local media to inform them of the service - newspapers, radio, television. USER staff can help!

Reminder:

Those on a waitlist for in-person therapy can be referred to the Wellbeing Course. This is a great way for clients to learn cognitive behavioural skills before seeing a therapist in-person.



The Pain Course for Fibromyalgia: A randomized controlled trial of Internet-delivered cognitive behaviour therapy for individuals with fibromyalgia

Lindsay Friesen, Heather Hadjistavropoulos

Fibromyalgia (FM) is a condition that affects approximately 2 to 3% of the population. Depression and/or anxiety symptoms are present in up to three quarters of individuals with FM. The focus of this study was to assess the efficacy of an ICBT Pain Course (Dear et al., 2013) adapted for use for FM. The course was administered to a randomized group of 30 individuals with FM and compared to a group of 30 individuals with FM who received standard care alone. Symptoms were assessed at pre-treatment, post-treatment and 4-week follow-up. Completion rates (87%) and satisfaction ratings (86%) were high. Improvements were significantly greater in treatment group participants compared to waiting list group participants on measures of fibromyalgia (Cohen's $d = .70$; 18% reduction), depression (Cohen's $d = .63-.72$; 20-28% reduction), pain (Cohen's $d = .87$; 11% improvement) and fear of pain (Cohen's $d = 1.61$; 12% improvement). The changes were maintained at four-week follow-up. The findings add to existing literature and highlight the specific potential of Internet-delivered cognitive behavioural pain management programs for adults with FM.

An examination of therapists' experiences delivering transdiagnostic Internet-delivered cognitive behaviour therapy

Dale Dirkse, Heather Hadjistavropoulos, Nichole Faller

The goal of this qualitative study was to investigate therapists' experiences delivering ICBT to clients with anxiety and depression in clinical practice to understand and improve upon the delivery of ICBT. Fifteen registered psychologists and social workers from mental health clinics who had experience delivering transdiagnostic ICBT as part of their routine practice were interviewed regarding their experiences. Interviews focused on strengths of learning and delivering ICBT to clients, challenges in delivering ICBT, and suggestions for improving implementation. Therapists' responses were analyzed using thematic analysis. Therapists identified several strengths to delivering ICBT, including that ICBT improved therapist skills, saved provider time and resources, and improved care for their clients (e.g., accessible, effective, efficient). Nevertheless, therapists identified challenges in the provision of ICBT, including issues with balancing online and in-person clients, becoming familiar with delivering a new type of therapy, and difficulty establishing relationships with some ICBT clients given the online format. To address challenges, they recommended some modifications to training (e.g., spending more time on how to establish relationships online), patient screening (e.g., obtaining additional client information during screening), as well as organizational processes to balance online and in-person clients.

Is Online Therapy for You?

- Are you 18 years of age or older?
- Are you a Saskatchewan resident?
- Do you have access to a computer and printer in a space where you could work on the Wellbeing Course online?
- Do you have Internet access in a private space?
- Do you feel comfortable using the Internet and writing emails?
- Do you have symptoms of Generalized Anxiety, Panic, and/or Depression?

If you answered "Yes" to all of the above questions, then you may qualify to participate in Online Therapy.

