Trust in Online Therapeutic Relationships: The Therapist’s Experience

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Abstract

Trust is one of the most important constructs in Psychology to explain interpersonal functioning and outcomes of interactions. As with traditional face-to-face counselling it can be assumed that trust plays an important role in developing a working alliance in online counselling and therapy. However, due to the fact this is a relatively new field, most previous studies have only focussed on the analysis of factors influencing the therapeutic relationship in a face-to-face context. This qualitative study therefore investigates how online counsellors define and experience trust in online therapeutic environments and what affect the presence or absence of trust has on the therapeutic relationship online.

Using Interpretative Phenomenological Analysis (IPA), semi-structured interviews were conducted with six online counsellors who were accredited with the BACP and had at least three years post-qualification experience. Three main themes arose through the process of analysis: 1) The role of anonymity in trust online, 2) the impact of the medium of communication 3) similar issues to forming trust in face-to-face contexts. The findings have practical implications for the provision of counselling and therapy online.

Keywords: Online counselling, trust, therapeutic relationship, IPA
Introduction

Online counselling is a current and topical area and is also a growing medium of providing counselling. Within the UK, mental health services and professional counselling and psychotherapy services have developed a major presence online in recent years. In this context, several authors (e.g. VandenBos & Williams, 2000) have highlighted that it is important that Counselling Psychologists develop a presence in what appears to be a rapidly growing area. Given the firm grounding in the scientist-practitioner paradigm and the emphasis on the importance of the therapeutic relationship, authors such as Mallen, Vogel, Rochlen and Day (2005, p. 820) consider that “Counselling psychologists are in a unique position not only to extend their services to online modes of treatment, but also to conduct research in this area to determine whether online-counselling practices are therapeutically beneficial for clients.”

The aim of this paper is to shed light on a specific aspect of the therapeutic relationship that can be crucial for process and outcome in online-counselling – the development of trust between client and therapist. After a brief review of relevant literature the methods and findings of a study on trust in online therapeutic relationships from the perspective of therapists will be presented and discussed.

In a face-to-face context, the therapeutic relationship has long been an area of widespread interest. The working alliance between client and therapist can be defined as the extent to which both work collaboratively and purposefully and connect emotionally (Horvath & Lubarsky, 1993). From numerous studies on therapeutic interactions it has emerged that the therapeutic relationship is a key aspect affecting the process and outcome of a therapeutic intervention. It is considered to be the largest significant single factor affecting the outcome of successful therapy in face-to-face counselling (e.g. Krupnick et al., 1996; Robbins, 1992; Wampold, 2000; Lambert & Ogles, 2004), accounting for approximately 30% of the therapeutic outcome across theoretical orientations (Lambert, 2002).

That online counselling can be effective in reducing client’s presenting problems has already been shown by a number of studies (e.g. Cohen & Kerr, 1998; Day & Schneider, 2002; Glueckauf et al., 2002; Hopps et al., 2003; Lange et al., 2001). However, a number of authors highlight that there is uncertainty about the possibilities to re-create the important qualities of the face-to-face relationship that lead to change in an online environment without the benefit of contextual and non-verbal cues (eg. Goss & Anthony, 2006; Bambling et al., 2008). Cohen and Kerr (1998) and Cook and Doyle (2002) reported no significant differences in the therapeutic alliance between online and face-to-face interventions, whereas for example the findings of Hanley (2008) and Hufford et al. (1999) suggest that a considerable amount of online clients (21% in Hanley, 2008) are not satisfied with the therapeutic alliance in an online context. Knaevelsrud and Maercker (2006) found that, although it seems to be possible to establish a stable and positive therapeutic relationship online, this factor was a less relevant predictor of the therapy
outcome than in the face-to-face context. Such inconsistent findings indicate that further research is needed to attain a greater understanding of therapeutic alliance variables in online interactions.

Among the factors identified in psychotherapy research as important underlying and multi-faceted features of the therapeutic relationship is the client’s trust in their therapist and therapy (Marshall & Serran, 2004) and especially from a person-centred perspective, the therapist’s trust in the client (e.g. Mearns & Thorne, 1999). Trust is a multidimensional, complex concept that can be construed and understood in different ways (e.g. trust as person-centered disposition vs. trust as interpersonal orientation; Simpson, 2007). From a dyadic perspective, trust can be understood as a ‘psychological state or orientation of an actor (the truster) toward a specific partner (the trustee) with whom the actor is in some way interdependent’ (Simpson, 2007, p264). However, trust can have varying meaning and importance at different stages of a relationship. Koehn (2003, p3) states that trust is thought to be an action, an attitude or orientation, a state of character, a relationship or a choice. He highlights that trust has been described as cognitive (e.g., a matter of opinion or prediction that things will turn out in a certain way or that people will behave in a certain way), affective (i.e., a matter of feeling) or conative (i.e., a matter of choice or will).

Trust has been commented upon as being a particularly important aspect of online interactions, especially in regard to the fact that cues and signals such as facial expression, tone of voice and gesture are not available online. However, there are only a few studies investigating this factor in the context of an online therapeutic relationship.

Haberstroh et al.’s (2007) study of five clients who partook in online counselling sessions suggests that trust was important from the sample interviewed. They found that participants varied in their trust of a communication forum which was devoid of visual and auditory feedback. For some this seemed to alleviate inter-personal pressure and encourage self-reflection and a feeling of safety when disclosing personal issues, although for others, the missing interpersonal cues possibly had the affect of limiting their self-expression and level of trust. Young’s (2005) study on perceptions of clients who used online counselling also suggests trust is an important factor in online therapy. She highlights that the lack of perceived privacy and security during online chat sessions and the fear of being caught while conducting online sessions were significant concerns reported by e-clients.

However, little evidence is available regarding how trust in online therapy is experienced and understood by online therapists, although several authors have discussed the relevance of these issues for therapy process and outcome (eg. Rochlen et al., 2004; Leibert et al., 2006). This study therefore aims to explore trust in online counselling through analysing the views and experiences of online therapists. The main questions the study addresses are:

1) How do online counsellors experience trust in the therapeutic relationship?
2) How does trust in online environments differ with online counsellor's experiences of trust in face-to-face contexts?
3) What effect does the presence or absence of trust have on online counsellors' therapeutic relationships?

**Methods**
The study took a qualitative approach to investigate trust in online therapeutic relationships from the perspective of the therapist. People appear to construct their individual perspectives of trust very subjectively “to suit their own perceptions and needs” (Dutton & Shepherd, 2006, p435). This suggests a qualitative and phenomenological approach would be appropriate for investigating this. BPS Ethical Principles for Conducting Research with Human Participants were authoritative in conducting the research.

**Participants**
For this study, semi-structured interviews were conducted by the first author with six online counsellors in a face-to-face setting. The interviewees were all counsellors accredited with the BACP and all had at least three years post-qualification experience. All had worked online for at least one year and had experience of face-to-face counselling. One participant worked mainly from group 'chat room' situations and so only had experience of synchronous online counselling. All others had worked with both asynchronous and synchronous methods online. One of the six worked predominantly from a psycho-dynamic perspective and all others described themselves as working from either an integrative or primarily person-centred perspective.

**Procedure**
Participants were recruited via initial e-mail contact to ask if they would be interested in finding out further details of the study. Following a participant expressing interest in the study, online counsellors were sent a participant information sheet to consider. Before the interview occurred, they were asked to sign a consent form. Participants were told that they could withdraw from the interview at any time if they so wished. Interviews usually lasted about an hour. An interview schedule was used but, in keeping with the approach of Interpretative Phenomenological Analysis (IPA), this was used flexibly. Questions were adapted in response to participants’ discourse and the schedule was not always followed in the same order or the questions asked in exactly the same way. At the end of the interview, participants were de-briefed on the aims of the research and asked if they had any queries or questions.

**Analysis**
IPA (Smith & Osborn, 2003) was utilised as the method of analysis to investigate online therapist’s experiences of trust in their therapeutic work. This model of qualitative analysis was chosen, because it allowed for the deep exploration of an area with the aim of understanding personal experiences through the generation and analysis of narratives. The transcript of the interviews were analysed in accordance to the steps described by Osborn and Smith (1998).
Findings

Three master themes emerged from an analysis of data from six participants, each with a number of sub-themes. The three master themes included:

1. The role of anonymity for trust in online relationships
2. The impact of the medium of communication on trust
3. The same or similar issues as face-to-face therapy regarding trust

The themes often interrelate and so should not be viewed as discrete and independent from each other. The current discussion will focus on the first two master themes since they contain issues specific for online counselling: ‘The role of anonymity for trust in online relationships’ and ‘The impact of the medium of communication on trust’.

1. The role of anonymity for trust in online relationships

The role of anonymity for the development of trust in online therapeutic relationships emerged as a main theme in the interviews with all participants. Interviewees stated that they generally experienced a high level of trust in therapeutic relationships online and that their clients seemed to find the initial stages of therapy easier to establish when compared with face-to-face contact. This was related to the speed an online relationship seemed to progress and the amount of self disclosure at an early stage in the therapy.

“.they do seem very, very open and I don’t have to…, tease a lot of information out of them, err, especially initially. Normally, with face to face therapy, there’s certain, initial periods where everybody is feeling their way. Setting the stall out, and they’re.. you’re getting to know each other. But online, people seem very ready to go, almost from square nought.”

More specific issues that were discussed around the role of anonymity can be conceptualised in the following three sub-themes.

Leap of Faith

A theme that appeared linked with the phenomenon of ‘immediacy’ of trust is the therapists trust in self and the ‘leap of faith’ they described when working online. One interviewee discussed how working online could make trusting ‘easier’. They highlighted how trust was a pre-condition for working in an environment where there was a lack of cues which could inform feelings of trust to the other person. It was therefore necessary to start the therapeutic process with a “leap of faith” since therapists did not feel fully informed of the personal characteristics of the other.

“It can be, sometimes easier than trust in a face to face scenario because of trusting yourself and trusting the other person. And it being a leap of faith into an unknown journey with an unknown other person. Whereas face to face, you have got different clues or cues rather from the physical appearance and
the way someone talks and their accent and erm the words they choose etc. Whereas of course you haven't got that online."

Linked to the notion of a leap of faith was the feeling that online therapists needed to trust their internal representation of the client (mental picture). The participants expressed that when working with their clients there was a large element of uncertainty as regards this mental picture. The interviewees highlighted that there is no way to know how accurate the picture they have of the client was and that there is always the possibility to err or to be beguiled.

“I can only imagine… that's what it is, it's my imagination from what they are saying and the situation they are in and the details that I can tease out of them… I can build up a mental picture which I have no idea how accurate it is.. Absolutely none at all.”

Interviewees expressed that one way to cope with this uncertainty was to have trust in themselves and their clients. They expressed that their ‘leap of faith’ which they took with their clients, could aid the development of a meaningful therapeutic relationship.

Processes of disinhibition
Another sub-theme that can be discussed in the context of the immediacy of a trusting relationship online is ‘disinhibition’. Interviewees highlighted that online clients appeared to bring issues which they may not so readily bring to face-to-face counselling. The quote below highlights the role of disinhibition and contrasts interaction in a face-to-face environment.

“..I think a lot of the time people are quite embarrassed by particular things and I think they feel kind of guilty for feeling that way, and sometimes when you sit there face to face with somebody.. It’s quite difficult. Whereas online, they are not seeing you, they are never likely to see you, they can just come out with anything.”

The experience described here is aligned with observations from practitioners that clients are more direct and divulge problems very quickly in this medium. Stigmatised problems like depression, eating disorders and self harming behaviour appear to be disclosed more frequently online than in face-to-face counselling. It is possible that for many clients online counselling and therapy is the place where they share an experienced trauma with others for the first time (Vossler & Hanley, 2008).

Impact of therapist’s anonymity
The impact of the therapist’s anonymity on the therapeutic process in general and specifically on issues of trust seems to be twofold. On one hand, there is the feeling that as the therapist can not be seen in his/her online work, this was beneficial to forming trust with his/her clients, because the therapist could not be judged on the basis of his/her appearance.

“And you know our first impressions are important on what people think of other people. So if they looked at me.. they may say, cor, he looks big fat and
ugly. Right, which may well lead them to think: I don't know if I can trust this
guy. Where as online, they don't see me. So they don't know what I look like.”

However, the anonymity of the therapist also has the potential to raise
concerns regarding the accountability of online therapists, which refers to the
theme of safety in an online environment. This is illustrated by the following
quote on the anonymity online therapists in general.

“.. I have some concerns over people who will only work in an online capacity,
because I wonder if that is about them ... kind of almost like hiding behind the
computer.. It's faceless. They can preserve their own anonymity and I guess
they can't necessarily be judged. And I wonder if that is a good thing”.

2. The impact of the medium of communication on trust

The medium of communication was considered by all participants as
something which affects trust in online therapeutic work positively as well as
negatively. The experiences related to this theme can be clustered in the
following three sub-themes.

Control and power

The client’s ability to control at the touch of a button the length of the
communication and the amount of self-disclosure was considered unique to
the method of online counselling, compared to face-to-face counselling. The
following quote illustrates how this could have a direct affect on trust within the
online counselling relationship.

“…in a face to face situation, if the client doesn't trust you or loses trust in you,
then its still quite unlikely they would walk out. They would be more reserved,
but, I don't think I have ever had a face to face client walk out. Online, it’s
easier for the client to withdraw from the relationship and they can do that
literally by pulling the plug, leaving the session or, changing their e-mail
address.”

Online therapist may feel reassured that there is a trusting relationship only by
virtue of the fact that their clients remain online. This is related to their
experience that it is obviously much easier for online clients than for clients in
a face-to-face context to express their mistrust or discomfort with the
therapeutic relationship and to interrupt or terminate the therapeutic contact.
The greater autonomy and control online clients seem to have is possibly
afforded through the anonymous context of online therapy and facilitated
through the above mentioned processes of disinhibition.

Interviewees also stated that they felt the power balance was equalised
through the online medium and the related affects of this on the development
of the therapeutic relationship.

“With working on the internet, the context the client has chosen, the modality,
and because there isn’t the concept of two chairs and a box of tissues and
things like that,... the power balance is very much equal.”
The empowering effect of having more control through the online medium of communication is potentially reinforced by the absence of racial and ethnic cues in an online environment.

**The action on typing/writing**

Most interviewees commented how the action of typing had an effect on the relationship formed between counsellor and client. One aspect mentioned in this context was that through the process of typing, the typist was engaged with their thoughts and feelings in a way that was unique to the method of communication.

“What I think may be happening though is that people engage more readily with these deep, …feelings that perhaps in other circumstances they were very ashamed and they were avoiding talking about it in therapy. It’s more difficult to avoid online because online is very focussed.”

Interviewees also thought that the possibility to re-read text passages could be beneficial for clients. It is possible that through internalisation processes this method of communication acts as an aid to the therapeutic relationship and trust between therapist and counsellor.

“...when I have written my response, they can then study that and really kind of read that several times and think about that, whereas in face to face counselling..once its said, it’s then remembering all of what was said.”

**Technological limitations**

A further sub-theme identified was how it could be harder to build trust online because of certain difficulties and limitations inherent to the online medium. The lack of cues and methods specific to a face-to-face context was commented on by all interviewees. Many interviewees felt that this made understanding the client harder and that this in turn could impact on the development of trust.

“If a client is upset... They may say something like I’m crying, but with body language and personal contact, you can see to what extent that crying is. When they say they are crying they could just have tears running down their face or they could be fully sobbing. So, that’s difficult to evaluate, things like that.”

However, interviewees also described ways and techniques which could help to establish an effective and trusting therapeutic relationship even in the absence of cues and factors pertinent to the face-to-face environment. Acronyms and abbreviations for example were considered as alternative ways of conveying emotions:

“I like working with those, those facets of netiket (sic)....it makes the work a lot easier for me being in tune with the client at any given point. Whether they are sad, whether they can smile at something. Same for acronyms, ....if they joke, put LOL (laugh out loud) then I can trust that they are laughing.”
3. The same or similar issues to face to face counselling

This third master theme highlights how participants viewed trust in their online therapeutic relationships in a similar way to how they viewed trust in face to face therapeutic interactions. This included trust being seen as an integral part of the therapeutic relationship and how the core conditions (Rogers, 1951) are also central to building a trusting relationship online as they are face to face.

Conclusions and Implications

As discussed above, Mashall and Serran (2004) highlighted how trust is an important multi-faceted feature of the therapeutic relationship. This study also illustrates that trust is key to the process of therapeutic intervention online. Although trust was discussed as having similarities to the face-to-face environment, there were essential differences between trusting online and face-to-face. In particular, trust was discussed as being tied to the anonymity afforded by online counselling. Interviewees discussed how this affected the speed that online therapeutic relationships developed through processes of disinhibition, feelings of safety, a neutral power balance and a process of internalising the other. Similarly, on the basis of her research findings Anthony (2000) comes to the conclusion that “the rapport between counsellor and client in cyberspace is developed not by reacting to another person’s physical presence and spoken word, but by entering the client’s mental constructs via the written word” (p. 626).

The idiosyncratic aspects of the medium of communication were also discussed as having a number of key affects on the processes involved in building trust in the therapeutic relationship. In particular, this involved issues specific to the client’s control of the length of communication and the use of techniques specific to the medium of communication such as emoticons and writing skills to overcome the lack of cues available in the face-to-face online environment. Wright (2002) has highlighted the similarities between online counselling and writing therapy. She describes the “power of reflective, focused writing, which draws on imagination and creativity to enable some people to become much more knowledgeable about themselves and to increase their sense of agency” (p. 295).

The study findings could also be considered as representing broader facets of the online relationship. Cooper (2005, p. 87) discusses the concept of ‘relational depth’ as ‘a feeling of profound contact and engagement with another’ and highlights how the notion can be conceptualised as a form of ‘co-experiencing of person-centred core conditions’. The key themes arising from this study might also be considered representative of some of the factors supporting the development of online relational depth and they could be explored further as perhaps some of a number of themes, which compound this concept in online therapeutic contact.

It is important to note some of the limitations of the research. These include that one cannot generalise the results to online counsellors as a whole and the interpretations are made by the researchers whose outlook and approach
are unique to them. One could also argue that it is not surprising that the therapists commented on the importance of trust in their online relationships because most of the participants had training from a person-centred perspective where the importance of trust is emphasised. However, this is still a credible finding, but does emphasise the need for further research to explore issues arising from this study in more detail.

A question for future research will be how different therapeutic perspectives might impact upon the development of trust in online relationships. It is also important to explore experiences of trust in more detail from the client’s perspective, which could help to understand how such processes as anonymity and disinhibition might be related to trusting. Such issues have begun to be explored by some more recent studies (eg. Schultze, 2006; Haberstroh et al. 2007). It could for example be interesting to investigate if and how online clients create ‘trust-test’-situations (Simpson, 2007) to question whether they can truly trust their therapist. It is also important to explore the role of anonymity of the therapist further and address the question of how a lack of face-to-face contact with clients over a longer period might impact upon the therapeutic relationship. Other relevant research questions include how appropriate supervision and support for online counsellors working across cultural divides is ensured and the question of how web sites might affect the development of the therapeutic relationship. As technology changes and develops, it is also important that research tackles questions regarding the use of new technology such as ‘virtual’ methods of computer mediated communication. Such technological advances are likely candidates for new methods of synchronous counselling and the impact of this will need to be explored and understood.

The evidence to date suggests that research in online counselling is only beginning to tackle key issues and much further work is needed. An interesting question that this study highlights is if perceived limitations, (often cited are the lack of typical cues available in the online environment) might actually function as strengths as the respondents in this study have also suggested. Key questions related to this involve exploring in more detail how anonymity, disinhibition and other processes idiosyncratic to the method of online communication impact upon the therapeutic relationship.

On the basis of the findings it can be concluded with Grohol (1999) that trusting in the therapeutic relationship online should be considered different to trusting and relating in a face-to-face context, rather than better or worse. Particularly noticeable in this context are the empowering aspects of online counselling which subverts traditional power relations between counsellors and clients.
References


