Status of Teletherapy in Post COVID-19 Era

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The Corona Virus Disease (COVID-19) had several negative impacts on physical and mental wellbeing. It not only negatively affected the public such as stress, depression, fears, anxiety, anger, sleep disturbance, but also had same effects on mental health professionals. This stressful situation was continued for more than two years. A significant change towards digital treatment of mental health care has been brought about by the COVID-19 epidemic. Teletherapy is the practice of providing access to mental health services over long distances by using technology-based communication such as phone calls, mobile applications, emails, landline calls, and video-conference. Although, teletherapy has been in use for 20 years around, it increased in use during and after COVID-19. A handful of studies validated the efficacy of teletherapy before COVID-19 era, but recent researches show its most benefits and trends during and after COVID-19. Teletherapy is part of mental health treatment as the COVID-19 pandemic restrictions started (Gangamma et al., 2022).

In Pakistan as an under developed country, due to recent pandemic of COVID-19, especially with an unstable and inadequate health care system, has been compelled to turn to online treatment, besides food service delivery, and online learning. Social isolation, uncertainty about the pandemic catastrophe and the ensuing economic collapse may have a negative impact on mental health, especially in people who already have mental health problems. Teletherapy is best option in past, present and future to treat mental health issues, due to the worries and concerns around contracting the infectious or viral disease like COVID-19 (Akram et al., 2021).

Teletherapy is a practical and efficient treatment approach that does not obstruct the therapeutic alliance and appears to be broadly embraced by patients and Health Care Professionals (HCPs). It is useful for many mental disorders such as anxiety, depression, phobia, schizophrenia and for other psychiatric symptoms as well. Patients significantly get satisfied with teletherapy, but there are also some difficulties and barriers in the use of teletherapy. During the first wave of COVID-19, many patients paused in the continuity of their care due to low rate of infection, while others stayed in touch with their HCPs through teletherapy to prevent in spread of infectious disease. There are also many risks and benefits of teletherapy; benefits such as saving of time and money, removal of mental health stigma, minimization of risk of getting infection. On the other hand, risks can be network connectivity issues, lack of knowledge about teletherapy, less effectiveness, lack of privacy, confidentiality and some legal issues as well (Sanchez-Guarnido et al., 2022).

During COVID-19, teletherapy started worldwide with a higher rate of downloaded online services applications and continued till one year or till the resumption of routine activities of life. During the pandemic, teletherapy provided

flexibility and both public and HCPs got aware of the benefits of online therapy. After successful vaccination in the world, although the pandemic is not finished, some healthcare practices like teletherapy still continued and became part of normal protocols. After COVID-19, a significant percentage of people still preferred and continued teletherapy (Sanchez-Guarnido et al., 2022).

Researches have shown that continuation of teletherapy has multiple reasons till now. Its effective not only in mental health issues like anxiety, depression, stress disorders, phobia or other mental health disorders, but also effective in medical issues. However, people with more severe symptoms and illnesses are more likely to start and stick with using remote therapeutic services than they are to use in-person therapeutic services. Overall, teletherapy appears to be a powerful and highly practical technique that mental health professionals and other practitioners can use to stay in touch with patients during periods of social isolation (Dominguez-Rodriguez et al., 2022).

After the COVID-19, life routine has been changed in the world. Teletherapy unquestionably played a significant role. In middle and after pandemic, teletherapy enabled anyone who felt need to continue and they had different reasons to continue. Now, people feel comfort and safety in online services rather than to come in any office or institute. Some people may discover that communicating via a screen gives them a sense of security and meets their psychological needs. Especially those people who are forced to stay at home in early days of COVID-19, they still like to follow the care and precautions and they feel secure. Many people talk about areas of their lives in therapy that they have not shared with close friends or relatives. While sessions remain strictly between patients and therapist online, confidentiality is no longer a guarantee when a family member is free to enter at any time. Non-verbal cues, tone, non-verbal communications of patients can be challenge for the HCPs.

Therapists need to have specific training for offering evidence based teletherapy for different mental health issues. Teletherapy can be priceless service but it is unclear whether it will continue to meet patients' specific needs in the long run (Orlowski et al., 2022).

In Pakistan, during the pandemic, Nishtar Hospital Multan started online health services. Telepsychiatry is also included with other specialties for the welfare of patients and the public. Till now, these online services are continued for mental illness and disorders even after resuming the in-patients and out-patients services. Although its long-term success is still debatable but the psychologists in Pakistan need to develop competencies regarding the knowledge, skills, and abilities related to teletherapy to better practice teletherapy services (Khan et al., 2022). Besides, the specific ethical guidelines and teletherapy protocols still need to be developed for Pakistani psychologists and therapists (Tasmeera, 2021).

Contribution of Author

Bushra Akram: Conceptualization, Methodology, Investigation, Writing - Original draft, Writing- Reviewing & Editing

Conflict of Interest

Data Availability Statement

The data sharing is not applicable to this guest editorial as no dataset was used in the current study.

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