

Chapter 2

E-Therapy with Children and Adults

Jaema Hayes

The effects of e-therapy outcomes by age group deserve special attention. A meta-analysis done by Barak et al. (2008) showed that among four age group categories, client's age made a difference in terms of his/her ability to gain from the therapy given via the Internet. The findings showed that middle-aged adults (25–39) seemed to be more effectively treated than younger or older adults (Barak et al. 2008). However, these findings may be a temporary result of issues that are becoming less of a factor such as the availability and acceptance of computers, and usage skills associated with the Internet (Barak et al. 2008). In fact, researchers have shown that online therapy can be highly effective for children as well as senior adults (Hill et al. 2006; Lorig et al. 2006; Marziali and Donahue 2006). This chapter will explore the implications for e-therapy practice among adults and children with specific breakdown as follows: children (aged 3–12), adolescents (aged 13–17), emerging adults, (aged 18–25), young adults (aged 25–35), middle adults (aged 35–55), older adults (aged 55–65), and senior adults (aged 65 or older).

Introduction

The influence of the Internet on culture has been so powerful that it has been compared to the invention of the telephone in the 1870s and television in the 1950s (Chen and Persson 2002). Since its invention, the use of the Internet has become a way of life for millions of people all over the world. The psychological impact of Internet use among age groups has been studied with the majority of the research geared toward young adults who are generally more computer savvy (Chen and Persson 2002). The U.S. Census Bureau (2011) reported that over 70% of households in

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America accessed the Internet. Broken down by age group, the majority of Internet use occurred among young and middle adults between the ages of 18 and 44 (at 82 and 81.4 %, respectively), older adults around 72.4 %, senior adults at 45.5 %, and children and adolescents combined usage at 60.2 %

The effects of the age gap on computer usage and thus online-intervention effectiveness seem to be vanishing. Since cyberspace has become a major social outlet for children, adolescents, and young adults (Fox and Madden 2006; Hall 2006; Valkenburg and Peter 2007), it is not surprising to learn that Internet-based therapeutic interventions are highly successful for those age groups as well (Barak 2007; Hoffmann 2006; Mangunkusumo et al. 2007). Despite past resistance by some, the use of computers and the Internet by older people is quickly growing and should therefore lead to an increase in mental health support for the senior population, through online therapeutic interventions such as e-therapy.

Children

Despite the efficacy of cognitive behavioral therapy (CBT) interventions with mental illnesses such as anxiety, the vast majority of children do not receive treatment (Essau et al. 2000). This may be due to the family's failure to realize that there is a problem, lack of knowledge regarding treatment, lack of local mental health services, and lack of time or money (Booth et al. 2004). It is obvious that there is a need for easy access to mental health treatment for families and e-therapy could meet that need. Research shows that adult use of Internet-based CBT for a variety of mental illnesses has proven effective, especially when combined with regular therapist contact by phone, email, or face-to-face (Spek et al. 2007). There has been a lag in the development and evaluation of computer-based interventions for childhood disorders, which is surprising given that the Internet has already become a common source of help for adolescents (Nicolas et al. 2004) and children are usually highly skilled in the use of computer technologies (Calam et al. 2000). However, recent studies have shown that web-based CBT can have highly effective results on anxious and depressive children (Spence et al. 2006). Spence et al. (2006) found that Internet therapy with children was acceptable to families, had minimal dropout, and a high level of therapy compliance. These results are promising as the need for mental health intervention is pivotal for this age group to prevent further mental health issues as these children become adults.

Adolescents

Depending on age and other sociodemographic factors, a high percentage of adolescents, between 19 and 28 %, suffer from a variety of mental health problems (Patel et al. 2007; Central Bureau Statistics 200–2006; Ferdinand et al. 1995; Reijneveld

et al. 2005). These problems may impair adolescents' functioning and continue into adulthood resulting in difficulties in interpersonal relations, absence from work, higher risk of criminal behavior, and increased use of health care services (Wille et al. 2008; Caspi et al. 1996; Hofstra et al. 2001; Fergusson et al. 2005; Scott et al. 2001). Despite the prevalence of mental health problems, the majority of adolescents do not receive professional help possibly due to their reluctance to talk with adults in authority (Sourander et al. 2001; Verhulst and van der Ende 1997; Patel et al. 2007; Rickwood et al. 2007; Vanheusden et al. 2008; Zwaanswijk et al. 2003; Oliver et al. 2005).

The Internet could provide an option for adolescents to access behavior change intervention because more than half of all adolescents already use the Internet to seek health information (Borzekowski and Richkert 2001; Gould et al. 2002; Skinner et al. 2003). In 2009, 36 % of adolescents in the USA went online several times a day (Lenhart et al. 2010). Adolescents use the Internet to contact peers, access music, and play games but they search for information as well (Duimel and de Haan 2007). In addition, research shows that adolescents use the Internet to ask for help regarding mental health problems and reviews show that self-managed e-therapy appears to be effective with this population (Andersson 2009; Cuijpers et al. 2008; Stinson et al. 2009). The Internet promises to offer benefits to adolescents seeking help for mental health problems by providing information, self-tests for problems such as depression, and online help by e-mail or chat sessions with mental health care workers (Havas et al. 2009). When working with youth, health care organizations and social workers should take into account adolescents' need for online support and incorporate innovative online help for mental health problems (Havas et al. 2009). Factors that drive Internet use with adolescents include age, gender, education level, ability to recognize mental health problems, type of mental health problem, beliefs about mental health, and parent's ideas about their children's problems (Zwaanswijk et al. 2003; Vanheusden et al. 2008).

Adults and Mental Health

Mental disorders are common among adults in the USA with approximately 25 % diagnosed with one or more disorders and 6 % of Americans suffering from a seriously debilitating mental illness (Kessler et al. 2005b). Research shows that the prevalence of lifetime mental health disorders is 52.4 % for ages 18–29 (emerging adults), 55 % for ages 30–44 years (middle-aged adults), 46.5 % for ages 45–59 (older adults), and 26.1 % for senior adults over 60 years old (Kessler et al. 2005a). Of Americans with mental health conditions, only 36 % of those with a disorder are receiving treatment (Wang et al. 2005). The unmet need for therapy coupled with the barriers to traditional therapy such as cost, stigma, and inaccessibility, makes e-therapy an increasingly valid, alternate option for addressing the mental health needs for adults in America.

Emerging Adult and Young Adults

Arnett (2004) coined the term, “emerging adulthood” to describe the transitional period that occurs between late adolescence and young adulthood. This period is marked by individualistic character qualities such as accepting responsibility for one’s self, making independent decisions, and becoming financially independent (Arnett 2004). The two important developmental challenges of this age group identified by Arnett (2004) are identity achievement and the development of intimacy. Research has shown that emerging adults (aged 18–25 years) have a higher incidence of depressive disorders than any other age group, which may be the result of these developmental challenges as well as adverse events unique to these individuals (Voorhees et al. 2007; Kessler and Walters 1998; Klerman 1988; Klerman and Weissman 1989).

Preventative approaches during adolescence have been introduced in an effort to reduce the prevalence of depressive disorders during this transition to adulthood (Voorhees et al. 2007). Although free-standing Internet-based programs have effectiveness levels similar to one-on-one counseling, few emerging adults complete such programs without supervision. Therefore, coupling self-directed Internet-based programs with limited face-to-face contact may increase the efficacy of these interventions (Clarke et al. 2001; Christensen et al. 2002). Additional studies have shown that the use of computer-based intervention can lead to an increase in knowledge of issues faced by emerging adults such as college drinking. These interventions also provide a screening tool to identify those participants who need follow-up in the form of additional information or therapeutic opportunities (Wodarski and Long 2006).

Like emerging adults, most young adults (79%) look up health information online with many (33–38%) using the Internet to search for mental health, prescription, and alternative medical treatments (Gowen 2013). Young adults (aged 25–35 years) face additional complications as they try to manage their mental health, including stigmatization from themselves and others as well as a lack of access to health insurance after “aging out” of their parent’s policies (Gowen 2013). These barriers may leave young adults looking for alternatives to traditional methods of receiving mental health therapy. E-therapy is one possible alternative for young adults with mental health conditions (Gowen 2013).

Middle and Older Adults

It is estimated that two-thirds of American adults use the Internet, with 35% of that use being on a daily basis (Rogers et al. 2009). As more and more people integrate Internet use in their everyday routine, mental health professionals can benefit by understanding how e-therapy can be used as a tool for public mental health intervention (Ybarra and Eaton 2005). Researchers have found that 35% of adults use

the Internet to search for information regarding difficult life decisions and 26% for information about mental illness (Fox et al. 2000). Cognitive CBT is a widely used and highly effective form of therapy for a wide range of psychological disorders, from depression to anxiety, and is very suitable for adaptation to a computer format. Internet-based therapy, including CBT, has the advantage of anonymity and accessibility making it very suitable for adult populations with mental illness (Hollon et al. 2006; Spek et al. 2006).

Barak et al.'s (2008) meta-analysis of over 92 studies of Internet-based psychotherapeutic interventions showed that mid-age adults reported higher gain from the therapy than did any other age group. There were several factors considered in the explanation of these results including the pervasiveness, acceptance, and usage skills of computers associated with this age group (Barak et al. 2008). Various studies have shown the positive effects of Internet therapy with adults using intervention models such as cognitive-behavioral, psychoeducational, and behavioral therapies when dealing with mental health problem issues ranging from post-traumatic stress disorder (PTSD), panic and anxiety, smoking cessation, drinking, body image, depression to weight loss (Barak et al. 2008). Types of modality investigated by Barak et al. (2008) included chat, forum, e-mail, audio, and webcam as means of communication between therapists and clients. Barak et al. (2008) found that Internet-based therapy, on the average, was as effective as face-to-face therapy and that online therapy can be delivered effectively using various Internet applications and online communication options.

Senior Adults

Senior citizens are the most rapidly expanding group within the USA with an estimated 50 million people, age 65 or older, in 2010 and a projected 70 million in 2030, or approximately 1 in 5 people (Jones 2001; Polyak 2000; Federal Interagency Forum on Aging Related Statistics 2000). Senior adults comprise an underrepresented but growing group of Internet users who can look forward to 10–15 years of free time spent in better health than previous generations (Trocchia and Janda 2000; Schofield 1999; The Economist 2002). Research shows that today's seniors want an active retirement with 20% expressing a desire to participate in learning activities and 37% saying that continuing their education is important even past retirement. (Gardyn 2000; Trocchia and Janda 2000). The Internet can benefit seniors by helping them reconnect with others and access information. However, the elderly are less likely to use the Internet than other age groups due to several factors including their pessimistic attitude toward technology, (Modahl 2000), problems with physical dexterity, and resistance to change (Trocchia and Janda 2000). It may be that additional training for seniors will help change the attitudes of some toward computer technology which could then provide the opportunity for e-therapy to be available to a greater number of seniors.

Many seniors lead active and healthy lives but as the body ages, the minds can change. Depression is not a normal part of aging, yet it often co-occurs with other serious illnesses that senior adults face such as heart disease, stroke, diabetes, cancer, and Parkinson's disease (Fiske et al. 2009). Depression is often a consequence of these problems and it can have serious effects, such as social isolation, which can lead to a risk of suicide. Although suicide rates in the elderly are declining, they are still higher than in younger adults (Fiske et al. 2009). The propensity of risk of suicide, especially among white, elderly men, makes access to mental health treatment increasingly important as a person ages. Research shows that Internet-delivered, psychoeducational interventions can be a highly effective treatment for senior adults who suffer from chronic pain or psychological symptoms (Brattberg 2006; Hill et al. 2006) and for the development of self-management skills for the chronically ill elders (Lorig et al. 2006). Videoconferencing has also been found to be effective treatment for senior adults showing that the digital divide is indeed on the decrease (Marziali and Donahue 2006).

Mental Health of Children and Adolescents

In the USA, over 4 million children and adolescents suffer from a mental disorder that causes serious problems at home, school, and with peers (U.S. Department of Health and Human Services 1999). Only 20% of children with mental health disorders are identified and receive mental health treatment in any given year (U.S. Public Health Service 2000). Half of all cases of mental disorders begin by age 14, and if left untreated can lead to more severe and difficult to treat illnesses (National Institute of Mental Health 2005). Approximately 50% of students age 14 and older with a mental illness drop out of high school, many of whom end up in jails and prisons (U.S. Department of Education 2001). Over 65% of boys and 75% of girls in juvenile detention have at least one mental illness (Teplin 2002). Suicide, the third leading cause of death in youth, is another severe consequence of untreated mental disorders among children and adolescents (National Strategy for Suicide Prevention 2001). The fact that over 90% of children and adolescents who commit suicide have a mental disorder (Shaffer & Craft 1999) underscores the need for early identification and intervention, which can save the loss of critical developmental years and avoid unnecessary suffering and death.

Conclusion

The influence of the Internet has had a powerful effect on culture and has become a way of life for most Americans. Internet use has special considerations among age groups and has implications for e-therapy. Researchers have found that e-therapy seems to be more effective among middle-aged adults but age differentials are

decreasing. Each age group has its own strengths and barriers when it comes to seeking mental health care via the Internet and research shows that most age groups can effectively be treated through a combination of e-therapy and face-to-face therapy. Social workers need to be cognizant of the effectiveness of Internet-based therapies as issues of anonymity, cost-effectiveness, and accessibility lead people of all ages toward seeking alternatives to traditional mental health care.

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