

ONLINE-THERAPY: IS NECESSITY THE MOTHER OF INVENTION?

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Abstract

During the COVID-19 pandemic, many therapists moved their practice to online-therapy. This study aimed to investigate the perceived experience of therapists in the transition from in-person to online-therapy, a year after the beginning of the pandemic. In-depth interviews with 47 therapists (psychologists, social-workers and educational counselors), aged 32-55 years, suggested that this was experienced as a forced challenge, which "will not stay here forever". The motivation for using the technologies was to find a solution to maintain a therapeutic continuum, under the circumstances of social-distance restrictions. This transition was described as demanding new skills and involving some unfamiliar dilemmas, while lacking any previous training.

The main theme regarding the transition experience was a decrease in intimacy, involving the screen and "others" inside the professional space.

The first experience noted by all interviewees involved the technical and practical barriers, on both sides, therapists and clients, such as: the computer was not available at the designated time for the zoom session, as all computers were used by the house-members for their studies or work; The quality of the internet lines was poor, the video or audio suddenly froze; Distractions by patients while "on screen" were frequent.

While the online-therapy was characterized by convenience and flexibility, a need for a paradigmatic change aroused. Meetings could be held anywhere, they were rarely cancelled, and therapists became available for shorter sessions. An exceptional familiarity of the therapists with their client's personal life (home, family, pets) became common, as well as a higher involvement (/intervention) of persons from the client's environment in the therapy process. Ethical issues arose, for example due to the presence of others in the room, especially during the lock-down periods. The therapeutic setting has been transformed. Boundaries, exposure and presence have changed definitions and meanings.

All participants mentioned a critical challenge of getting the whole picture: "You do not meet the human beings, it loses some of the therapeutic interest, in the end it is also not real. Do it once or twice, since there is no choice. But it is impossible to get the whole picture. Tiny particles are missed. And they are very significant in therapy". Therapists reported difficulty in assessing conditions, for example, whether to attribute psychological or technological interpretation to silence.

Under the circumstances of a forced transition, lock-down and a lack of pre-training, may we (temporarily) redefine settings for the forthcoming clients in the online age?

Keywords: *Online-therapy, Covid-19, transition, therapists' perspective.*

THE PERCEIVED IMPACT OF SOCIETAL CODES OF SHAME ON MALTESE PSYCHOTHERAPISTS

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Abstract

Anthropological literature indicates that Malta, by virtue of its central position in the Mediterranean, is somewhat structured by codes of honour and shame (Bradford & Clark, 2012; Schneider, 1971; O'Reilly Mizzi, 1994). Honour refers to claimed status by an individual and necessitates that the social group affirms that claim. It holds a positive social value. Shame may be understood in either positive or negative terms. When construed in a positive sense it indicates consideration of one's reputation and standing in the community's eyes. On the other hand, negatively, shame refers to loss of position and consequent mortification. Shame is also construed as an emotion involving an evaluation of the self as one that is inherently imperfect. Despite the awareness of the potential negative effects of shame on the psychotherapeutic relationship (Gilbert & Procter, 2006; Rustomjee, 2009), shame in psychotherapy has been largely under-researched. The current study is based on the results of a doctoral thesis which explored how Maltese psychotherapists understand and manage feelings of shame in a particular social context. A qualitative approach was taken to explore the individual perspectives of ten Maltese psychotherapists whose years of professional experience ranged between 6 and 28. Semi-structured