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## A PSYCHOTHERAPIST ONLINE. IN SEARCH OF PROFESSIONAL PSYCHOTHERAPY – PRELIMINARY REPORT

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psychotherapy  
Internet  
advertisement

### Summary

**Objectives:** The article is an attempt at a preliminary description of the way of presenting psychotherapeutic services on the Internet, and to find out to what extent people seeking help from specialists using search engines are able to receive adequate and professional help.

**Methods:** In the period between 18.11.2020 and 25.02.2021, the phrase “psychotherapy Kraków” was repeatedly entered into the Google search engine, which was followed by an analysis and assessment of the data contained on the websites based on an original questionnaire. Fifty-five online profiles of individuals providing psychotherapy were analyzed.

**Results:** The analysis of websites made it possible to distinguish information made available by therapists advertising their services on the web. Most of the analyzed profiles belonged to women (70%). The majority of therapists had higher education (92%), most often in the field of psychology (73%). Also, many of those who advertised were undergoing (58%) or completed (20%) comprehensive therapeutic training, offered online registration and provided a price list of services. A small percentage of the profiles displayed information about membership in psychotherapeutic associations and societies as well as professional experience. Some of the profiles allowed for assessments by patients/clients, which were almost entirely positive (98%).

**Conclusions:** Most of the analyzed profiles met the criteria of suggesting the possibility of receiving professional therapeutic care. The easiest information to obtain is related to the therapists' education, registration process or price list. The greatest information gaps were related to their experience, membership to scientific or professional associations and access to supervision. Few therapists post such information on their websites or do not belong to any association of psychotherapists.

### Introduction

Psychotherapy is an important method for treating most mental disorders and supporting people in various types of crises [1-8]. In the case of child psychotherapy, a specialization in child and adolescent psychotherapy has been created in recent years; its chaotic and

rapid introduction was received with caution by psychotherapists [13]. However, psychotherapy of adults in Poland is still lacking unequivocal legal regulations defining the scope of qualifications necessary to be called a psychotherapist [9-13]. Unlike terms such as 'psychologist' or 'psychiatrist', the term 'psychotherapist' is not sufficiently regulated in a way that would define who can be called a psychotherapist and what type of interactions can be called psychotherapy. This poses a natural question whether, in the absence of legal regulations and specializations (except for specialization in child and adolescent psychotherapy), it is possible to guarantee professional psychotherapeutic care. What is more, there are no rules for advertising, providing commercial information and ways in which information about psychotherapeutic services can be passed on to potential clients.

Contrary to the regulations on medical services, psychotherapy is not subject to any regulations regarding advertisement methods. It can be marketed like any other commercial activity not regulated by separate corporate laws.

On the one hand, there is training organized by psychotherapists' associations with several decades of experience, which have well-established principles of qualification, organization of training courses, and verification of participants' competency. Those associations take into account the requirements related to acquiring the skills necessary at work in a given psychotherapeutic model, as well as the development of the ability to build a therapeutic relationship [13-15]. On the other hand, there are reports on controversial, and sometimes even harmful, methods of conducting therapy by people who lack proper psychotherapeutic education [16].

For many years, information on where one could find services was gained from doctors or, for example, from someone who had had a positive experience with therapy. Psychotherapeutic care was also sought in people who were recognized publicly or in the media [9]. Other decisive factors included being an employee of a public institution that offered psychotherapy. Patients at public institutions continued their treatment with private therapists.

The last few decades have brought a significant change in the ways potential clients obtain information about people who might become their psychotherapists [17]. Growth of the Internet has significantly influenced how information reaches potential patients. The Internet is currently a key source for information on obtaining possible psychotherapeutic help [17].

Web search data indicate that Google is the most popular search engine in Poland. Almost half of the searches are related to the location (city, street). The average user searching a phrase, spends about 70 seconds on it, limiting themselves to viewing the results on the first page of the browser, and the decision to choose one of them is made by clicking on the link after about 14 seconds. Only 0.44% of people browse the second page of Google results [18]. This raises the following question: What information is necessary for those seeking psychotherapeutic help in order to choose the right specialist?

It can be assumed that making an informed choice of a psychotherapist should be preceded by receiving answers to several basic questions regarding both education and

experience of the therapist, information about the psychotherapeutic process, as well as membership in professional associations and additional skills or qualities of the therapist (Table 1).

**Table 1. Potentially important information when choosing a psychotherapist**

Therapeutic education	Professional experience	Information on the service rendered	Additional information
1. Comprehensive course in psychotherapy: a) completed b) year of training 2. Specialized courses 3. Obtained certificate 4. Affiliation to a society	1. Therapeutic experience 2. Specific clinical group experience 3. Work in the following types of institutions: a) educational b) health care	1. Model of therapeutic work 2. Supervision 3. Valuation of therapeutic services 4. Online registration 5. Client review	1. Level of education 2. Type of education

This information should be considered essential in the assessment of a psychotherapist's competence, as the person advertising themselves as a 'psychotherapist' in their profile is not a guarantee in itself that they meet the right conditions. At the same time, in the research on the population of Polish therapists, it was this information that best described this group of professionals [10, 11].

Recent years and the growth of the Internet have brought about a certain pauperization of the term 'psychotherapist'. It appears in such contexts as, for example: "an astropsychologist, a charismatic psychotherapist, a tarotist. Thanks to her analytical method and remarkable ability to reach everyone who needs help, she has grateful clients all over Poland and abroad. For many years, she has been teaching her original method of using Tarot Initiations. Her students become professionals with a broad esoteric perspective on the human personality and our everyday problems" [19]. Another example can be the "Professional School of Psychotherapy and Psychotronics", with courses on "numerology, non-invasive personality analysis, energy medicine, chacrotherapy, feng-shui, mandala, Family Constellations, naturotherapy, biotronics, radiesthesia, family therapy, inner child, hypnosis, lithotherapy, Slavic magic, astrology, Gestalt therapy, yoga; Ayurvedic, Balinese, and Lomi Lomi massages; coaching, shamanism, psychology, workshops on teaching skills, NLP, pendulum, candles and conch candles, reiki, tarot, kabbalah, clairvoyance, dream work, white magic, sociotherapy, psychology of advertising and persuasion". [20]. The appearance of this website, and other similar ones, may suggest that it is a School where you can receive psychotherapeutic help, especially since the name purposefully resembles that of the Institute of Applied Psychology of the Jagiellonian University. The branches of the described center are located in as many as six major cities in Poland: Warsaw, Kraków, Poznań, Łódź, Katowice, and Wrocław.

The aim of this study was to check to what extent the information contained in the psychotherapists' bios reflect in a credible and honest way that the services they provide

can actually be considered psychotherapy in the strict sense as a method of therapy administered by competent people who define themselves as psychotherapists.

We also tried to estimate how comprehensive the information provided by people advertising themselves as psychotherapists online is and to establish the link between advertising for psychotherapy and other activities, such as advertising for training, selling products, etc.

The latter issue is important because the modern world of online advertising is much more complex and interactive than we know it from television or paper publications [17]. When we search the word ‘psychotherapy’ using a web browser, it immediately updates our marketing profile and affects what ads we will be shown in the future, both indirectly and directly related to psychotherapy or directed at the population we are assigned to due to searching a given term. The position in which the results will be shown will be related to the expenses those psychotherapists or institutions cover in relation to search engine optimization (SEO), advertising, etc. that increase the online activity recognition. Just like with any other term, searching for ‘psychotherapy’ in popular search engines will decide what articles or websites will be shown to us and which will be ignored by the artificial intelligence algorithms.

### **Material and method**

In order to answer the research questions, we decided to Google the phrase “psychotherapy Kraków”. The search was carried out between 18.11.2020 and 25.02.2021. It was followed by using an original questionnaire, analysis, and evaluation of the data on the websites, which then were used to analyze the first 55 profiles appearing after entering the search term in the search engine – both individual profiles and those that were published on professional websites such as “Znany lekarz” or larger centers. The analysis included issues related to the education and profession of psychotherapists, the number and type of completed and ongoing training courses, obtained certificates, psychotherapeutic orientation, membership in professional associations, experience, areas of therapeutic work, workplace, and the use of supervision by the therapist. In addition, we took into account information related to the marketing and advertising of services, i.e., the amount and nature of feedback about the therapist, costs of therapy, the availability of online registration, the website’s visual appearance, and the publicly available photo of the therapist.

### **Results**

The analysis was carried out on 55 profiles of persons providing psychotherapeutic services. Seventeen websites were featured on the “Znany lekarz” portal. Others were on independent websites.

### Demographic data

Online profiles provide a small amount of demographic information. Psychotherapists do not disclose their marital status, age, or place of residence (which seems understandable, as in most cases this information does not have a significant impact on the therapy process). Most people showed their photo on the website (96%), which, depending on the updates, may provide information about their approximate age. From the point of view of psychotherapists who advertise themselves, it is their appearance (and not age, place of residence or marital status) that may be important for people seeking therapy. What was partly non-confidential information was the therapists' gender since they give their name. The majority of therapists advertising themselves are women (70%); with men being the minority (30%).

### Education

Apart from two people who did not provide information on their education, all of the respondents had higher education, with most of them having a master's degree – nearly 82%, the remaining 13% had a doctorate or a professor title. The majority graduated from psychology (73%), pedagogy (almost 11%), and about 3% of the respondents graduated from medicine (Table 2). In addition, the following majors were present as the second or third majors: sociology (1), occupational therapy (1), cultural anthropology (1), coaching (1), personnel management (1), sociotherapy (1), sexology (4), addiction therapy (2), speech therapy (1), management analytics (1).

Table 2. Education of the respondents

Education	Number	%
Level		
Master's degree	45	82
Doctoral degree	6	11
Professor	1	2
No data	3	5
Major		
Psychology	40	73
Pedagogy	6	11
Medicine	2	3
No data	7	13

### Psychotherapeutic training

Most people declare that they are participating in or have completed a comprehensive psychotherapeutic course allowing them to obtain a psychotherapist's certificate or that they are certified by the Polish Psychiatric Association or the Polish Psychologists' Association. At the time of the study, there was no information about obtaining the title of specialist in child and adolescent psychotherapy. The vast majority (except 13 people for whom no data are available) undergo training at recognized psychotherapeutic schools. For the majority of respondents, there is no data on their affiliation to psychotherapeutic associations, and out of the people who mention such affiliation: 6 people are members of the Polish Psychiatric Association, 1 person – of the Polish Psychologists' Association, 2 people – of the Polish Society for Psychodynamic Psychotherapy, 1 person – of the Polish Sexological Society, and 3 people belong to other associations (Table 3).

**Table 3. Training in psychotherapy and membership in psychotherapeutic societies**

Therapeutic training stage	Number	%
People still taking a course	32	58
Completed a 4-year course	11	20
Certificate of psychotherapy	2	4
No course	1	2
No data	9	16
Schools of Psychotherapy		
Schools with recognized accreditations	42	76
No data	13	24
Affiliation to an association		
Polish Psychiatric Association	6	11
Polish Psychologists' Association	1	2
Polish Society for Psychodynamic Psychotherapy	2	4
Polish Sexological Society	1	2
Other associations	3	5
No data	42	76

### Model of therapeutic work

The majority of people indicated an integrative/eclectic model of work or provided information indicating that they work using recognized psychotherapeutic approaches. Most therapists declared work or training using psychoanalytic and psychodynamic approach (31 people), followed by those using systemic approach (9 people) and cognitive behavioral therapy (4 people).

### Professional experience

In the analysis of professional experience, 17 respondents did not provide any data, while another 17 included internships in outpatient clinics and/or psychiatric wards as professional experience. The remaining people have been employed in various health care and/or education facilities: inpatient and day-care wards, mental health clinics, provincial center for addiction and co-addiction therapy, addiction treatment clinic, psychological clinic, community mutual aid center, adoption centers, family diagnostic and consulting center.

As for people who, apart from their private practice, work in institutions, 15 people work within the education system (6 of them – at higher education establishments), while 9 therapists are employed in health care facilities – mainly for outpatient treatment (Table 4).

Table 4. Experience in psychotherapy and place of work of the respondents

Experience	Number	%
Qualitative		
Internships	17	31
Work	15	27
No data	17	31
Quantitative		
given in years	3	5.5
Described as "less/more than 10 years"	3	5.5
Workplace		
Education system	15	27
Health system		
Outpatient clinic	10	18
Hospital ward	3	6
No data	27	49

### Supervision

The majority of respondents reported that their therapeutic work is supervised, and 18 respondents did not provide any information on this topic.

### Main areas of interest (therapeutic work)

The most frequently mentioned areas of therapeutic work are: broadly defined emotional disorders (27%), interpersonal difficulties (13%), problems in family relationships (11%), and working with a patient in crisis (7%). A small minority of people categorized their area of work by age groups (9%).

### Online registration

Only one person did not provide the option of online registration. The rest of the respondents offered such an option.

### Service price list

Only one person (the same one who did not have the option of online registration) did not disclose the online price list for their services. The other therapists made it publicly available.

### Feedback

In the case of 26 therapists, no patient feedback was available. The rest shared their patients' opinions, which ranged from 1 to 156 comments for a particular person. There was a total of 655 comments, with as many as 645 positive and only 10 negative ones. Only six therapists had a negative comment/rating (Table 5).

Table 5. **Patient feedback**

	Number	%	Mean	Median
Feedback	655	100%	22.5	14
Positive	645	98%	22.2	14
Negative	10	2%	0.3	0

### Discussion

The obtained results show that the majority of psychotherapists who were found using the search engine meet the basic requirements of professionalism. None of the 55 ana-

lyzed profiles suggested that psychotherapy is conducted by a person who does not have qualifications or uses unethical methods. This is, of course, positive news, indicating that people seeking psychotherapy are likely to receive professional care. It also indicates that despite the lack of legal regulations, the market, and the impact of the psychotherapeutic community itself affect the availability of professional therapists.

The bios are usually written in a rather similar manner. The type of data that was provided most frequently was information on the level and type of education, area of therapeutic work, registration options, and service price list.

The collected data show that in Kraków it will be easiest to find a female psychotherapist-psychologist who is in the process of therapeutic training and works using the psychodynamic or systemic model. This partly corresponds to the data on the community of psychotherapists in Poland, which indicate the predominance of women, psychologists and people presenting the psychodynamic model of work [10, 11], but it may also be related to the number of accredited centers located in Kraków that train future therapists in these models.

Most profiles have a photo. This raises a question to what extent the choice of a therapist is also related to their physical attractiveness or beauty. At the same time, psychotherapists avoid providing unnecessary demographic data.

Unfortunately, some of the phrases used leave room for guesswork rather than providing precise information. For example, when talking about experience, some people mentioned an internship (often those that are a compulsory part of the training process to become a psychotherapist) as their work experience in a given place.

Only few of the websites found contain all the necessary information to qualify them as websites providing complete information on the methods used.

The biggest gaps were related to information on membership in societies and psychotherapeutic work, and patients' inability to give feedback on their experience with the therapist. What is worrying is the fact that a very small number of therapists belong to psychotherapeutic societies (or publishes this information on their website) and few decide to apply for a certificate. At the same time, it is not certain whether such information is of interest to people seeking a psychotherapist. It seems, however, that therapists should not only respond to clients' needs (in terms of information that clients consider important), but also give information in their profiles that prove the professionalism of the care they provide (resulting, for example, from the fact of adopting the ethical standards of a given society). At the same time, most people report that the courses they have completed are accredited by one of the official societies. The fact that there is no requirement to apply for a certificate means that therapists rarely decide to try to obtain one (only 2 psychotherapists had a certificate). This does not mean that psychotherapists and their work do not undergo evaluation, because most of them declare that they are subject to supervision, but at the same time they do not decide to take the certification exam. This, in turn, poses a question whether obtaining a psychotherapy certificate is not very attractive for therapists or whether the effort involved in preparing for it is too strenuous.

Currently, in addition to certificates awarded by societies, there is an opportunity to obtain a specialization in child and adolescent psychotherapy. There are also plans to launch a specialization in adult psychotherapy. In the future, what may be interesting is the question whether it will be more attractive for psychotherapists to take the trouble of obtaining a certificate or specialization, especially considering the data on the number of applications for recognition of professional achievements and experience as tantamount to specialization in child and adolescent psychotherapy [13]. It is also interesting that most of the analyzed profiles probably belong to young psychotherapists (few people provide the number of years of their professional experience), which suggests that they are in training. Perhaps they are more willing to advertise their services on the Internet than the more experienced therapists. Therefore, a client seeking therapeutic help is more likely to find a person undergoing psychotherapeutic training than one who has completed it or has a certificate.

The inability to give feedback on the services and the vast majority of only positive comments about the therapists who offer such an option seem to require further reflection. It is not clear why there is such a large imbalance of positive and negative feedback on the profiles of psychotherapists. Do people dissatisfied with the therapy are not motivated enough to write a comment, or maybe people who moderate comment sections remove the unfavourable opinions?

It is necessary to urge the web portals helping in the search for medical services to authenticate their websites by introducing additional requirements for psychotherapists. It is important that people seeking psychotherapy have a chance to gain factual and competent knowledge about the assistance they can receive in solving their mental and emotional problems.

The data collected in the survey and the conclusions are only an introduction to the analysis of the situation of presenting the psychotherapy services online, and the analysis of the results suggested by search engines on the Internet has many limitations. The search was limited to only one city – Kraków, which is related to the authors' interest in their own work environment. At the same time, there are plans to conduct a similar analysis and compare the results in relation to five major Polish cities. Another limitation of the survey is the fact that only the phrase “psychotherapy Kraków” was checked because the search engine will give different results if we search the phrases “psychotherapist Kraków”, “female psychotherapist Kraków”, “adult psychotherapy Kraków” “psychotherapy office Kraków”. Of course, some profiles will be repeated, but there will also be completely new results. What is more, the results proposed by the search engine will be different if we use a desktop device and different when using mobile devices. The pace of changes in the digital world and the use of website positioning makes it extremely difficult to talk about stability in terms of results suggested by the search engine. Despite the many limitations, the presence of psychotherapy and psychotherapists in the digital world requires further in-depth observation and reflection.

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