

Telepsychology Deployment during Circuit Breaker in Singapore: A comparative evaluation of treatment effectiveness

Nigel V. Marsh*, Joanna C. Barlas, & Spencer Carr Psychology Clinic, James Cook University, Singapore

*Corresponding author: nigel.marsh@jcu.edu.au

Background

The advent of the COVID-19 pandemic and the resulting necessity for physical distancing has resulted in massive and rapid changes in service delivery systems throughout the world. Within health care the delivery of psychological treatment has been similarly affected and this has resulted in the widespread adoption of telepsychology models of practice. Telepsychology is the provision of psychological services using telecommunication technologies. This presentation examines the possible impact of moving to telepsychology services for clients at a university Psychology Clinic during the Circuit Breaker period in Singapore. Clients who completed treatment at the Psychology Clinic before and after Circuit Breaker were compared on three aspects of treatment effectiveness.

Method

The before Circuit Breaker group (n = 47) started treatment in 2019 and completed treatment in traditional (in person) mode. The after Circuit Breaker group (n = 19)started treatment in traditional mode but switched to, and completed in, telepsychology mode once Circuit Breaker commenced. The two groups were matched on age, gender, and number of treatment sessions. The three aspects of treatment effectiveness considered were psychological distress (Depression, Anxiety Stress Scales-21), psychosocial functioning (Outcome Rating Scale), and therapeutic alliance (Session Rating Scale). Measures were taken at the initial and final treatment sessions.

Results

There were no statistically significant differences between the two groups on any of the three measures at the commencement of treatment. Similarly there were no statistically significant differences between the two groups on the measures at the end of treatment. However a comparison of clinical outcomes suggested that the two modes of treatment delivery may not be equally effective. For the category of no psychological distress the outcome was 94% (traditional) versus 74% (telepsychology), good psychosocial functioning was reported by 49% (traditional) versus 32% (telepsychology), and strong therapeutic alliance by 72% (traditional) versus 65% (telepsychology).

Conclusion

Further research is needed to identify the variables which impact on the effectiveness of telepsychology.





















