

# THE EFFECTS OF INTERNET-BASED PYCHODYNAMIC THERAPY ON THE PROCESS (A Mixed-Method Systematic Review)

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#### Abstract

**Background:** Psychodynamic therapy is one of the oldest methods of psychotherapy. By focusing on the unconscious processes of the person, it aims to reveal self-awareness and the impact of past experiences on current behaviours. In the past of therapy, it is seen that it is done face to face. However, today's technology and problems cause therapy to be done internet-based. Technological developments provide convenience in internet-based therapy processes. In addition, the pandemic period experienced in recent years has prevented therapies from being carried out face-to-face in a compulsory way. Especially in post-pandemic therapies, face-to-face therapies have been replaced by internet-based therapies.

**Objective:** This study was conducted to determine the processes, results and impact levels of psychodynamic therapy on internet-based platforms.

Methods: Within the scope of this study, care was taken to ensure that the interviewees were psychotherapists who had continuous face-to-face meetings beforehand. Data were obtained by searching Pubmed, Science Direct, Scopus, Cochrane Library, Wiley Online Library, APA PsycNet and TR Index pages on the internet database between October 2023 and February 2024. The studies that were eligible for PICO(S) were examined, and research articles that were conducted within the last 5 years and shared the results of internet-based psychodynamic therapy in the subject content were included. 'Psychodynamic therapy', "internet-based" keywords and combinations were used. Descriptive studies, review articles and studies whose full text could not be accessed were not included in the study. This study was planned as a systematic review and was prepared in accordance with the PRISMA protocol.

**Results:** It is seen that 23.1% of the studies were conducted during the COVID-19 process. 61.5% of the studies were internet-based psychodynamic therapy studies conducted with adolescents. It is seen that internet-based psychodynamic therapy studies were conducted with individuals diagnosed with Depression, Anxiety and Social Anxiety. It is seen that 23.1% of the studies included in the research were conducted using qualitative method and 61.5% were conducted using quantitative research methods. It is seen that scales for depression, generalised anxiety disorder and mood disorders were used in quantitative studies.

Conclusions: Positive results were obtained with internet-based therapies in depression and anxiety disorders. It is thought that proving the usefulness of internet-based therapy contributes a lot to the field of therapy. Individuals in need of therapy have been freed from stress sources such as transport and cost. Internet-based therapies have provided a saving support for individuals who have difficulty in accessing therapists. Likewise, since the costs of internet-based therapies are lower than face-to-face therapies, it has been a facilitator for individuals to reach therapy sessions.

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### **Original Manuscript**

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#### **ABSTRACT**

**Background**: Psychodynamic therapy is one of the oldest methods of psychotherapy. By focusing on the unconscious processes of the person, it aims to reveal self-awareness and the impact of past experiences on current behaviours. In the past of therapy, it is seen that it is done face to face. However, today's technology and problems cause therapy to be done internet-based. Technological developments provide convenience in internet-based therapy processes. In addition, the pandemic period experienced in recent years has prevented therapies from being carried out face-to-face in a compulsory way. Especially in post-pandemic therapies, face-to-face therapies have been replaced by internet-based therapies.

**Objective:** This study was conducted to determine the processes, results and impact levels of psychodynamic therapy on internet-based platforms.

**Methods:** Within the scope of this study, care was taken to ensure that the interviewees were psychotherapists who had continuous face-to-face meetings beforehand. Data were obtained by searching Pubmed, Science Direct, Scopus, Cochrane Library, Wiley Online Library, APA PsycNet and TR Index pages on the internet database between October 2023 and February 2024. The studies that were eligible for PICO(S) were examined, and research articles that were conducted within the last 5 years and shared the results of internet-based psychodynamic therapy in the subject content were included. 'Psychodynamic therapy', "internet-based" keywords and combinations were used. Descriptive studies, review articles and studies whose full text could not be accessed were not included in the study. This study was planned as a systematic review and was prepared in accordance with the PRISMA protocol.

**Results:** It is seen that 23.1% of the studies were conducted during the COVID-19 process. 61.5% of the studies were internet-based psychodynamic therapy studies conducted with adolescents. It is seen that internet-based psychodynamic therapy studies were conducted with individuals diagnosed with Depression, Anxiety and Social Anxiety. It is seen that 23.1% of the studies included in the research were conducted using qualitative method and 61.5% were conducted using quantitative research methods. It is seen that scales for depression, generalised anxiety disorder and mood disorders were used in quantitative studies.

**Conclusions:** Positive results were obtained with internet-based therapies in depression and

anxiety disorders. It is thought that proving the usefulness of internet-based therapy contributes a lot to the field of therapy. Individuals in need of therapy have been freed from stress sources such as transport and cost. Internet-based therapies have provided a saving support for individuals who have difficulty in accessing therapists. Likewise, since the costs of internet-based therapies are lower than face-to-face therapies, it has been a facilitator for individuals to reach therapy sessions.

**Keywords:** Internet-based; Online; Psychodynamic therapy; Therapy.

#### INTRODUCTION

Psychodynamic therapy focuses on the unconscious processes that occur in the client's current behaviour. The goals of psychodynamic therapy are the client's self-awareness and understanding of the impact of the past on present behaviour [1]. In this context, the psychodynamic approach allows the client to examine unresolved conflicts and symptoms resulting from dysfunctional relationships in the past and to manifest themselves in the need and desire to use substances [2,3]. Many different approaches to brief psychodynamic psychotherapy have been developed from psychoanalytic theory and applied clinically to a wide range of mental disorders. A growing body of research supports the effectiveness of these approaches [4,5].

Psychodynamic therapy is known to have a very long history among modern therapies. Therefore, it is based on a highly developed, multifaceted theory of human development and interaction [6]. Psychodynamic therapies need to be applied face-to-face in a classical way under ordinary conditions. However, it cannot be ignored that there are some efforts to apply this therapy under extraordinary conditions. For this reason, it is seen that some current forms of brief psychodynamic therapies have been developed and application examples are included in the literature [1,7].

The most current form of psychodynamic therapies is internet-based therapy processes, which have become necessary especially during the pandemic. Internet-based therapy refers to internet-based psychotherapy or counselling services. Unlike face-to-face therapy, internet-based therapy allows you to connect with a licensed therapist or counsellor using any device with an internet connection such as a computer, tablet or smartphone [8].

Psychodynamic psychotherapy offered through live video on an internet-based therapy platform offers benefits that make it a strong choice for personal development. Both group and individual therapy can be effective in the treatment of self-examination and depressive disorders. The

current practice of internet-based therapy provides flexibility for people who cannot find traditional face-to-face therapy [9]. This study was conducted to determine the processes, results and impact levels of psychodynamic therapy on internet-based platforms.

#### **METHODS**

#### **Study Design**

This study was conducted to investigate the processes and results of the application of psychodynamic therapy on online platforms. Within the scope of this study, care was taken to ensure that the interviewees were psychotherapists who had continuous face-to-face meetings beforehand.

#### **Study Strategy**

The data were obtained by searching Pubmed, Science Direct, Scopus, Cochrane Library, Wiley Online Library, APA PsycNet and TR Index pages on the internet database between October 2023 and February 2024. By analysing the studies in accordance with PICO(S) (P: population - participants), (I: interventions - interventions), (C: comparators - comparison groups), (O: outcomes - results) and (S: study designs - research designs), research articles that were conducted in the last 5 years and shared the results of psychodynamic therapy online in the subject content were included. 'Psychodynamic therapy', "online", "psychodynamic therapy", "online", "internet-based" keywords and combinations were used. This study was planned as a systematic review and prepared in accordance with the PRISMA protocol. Established in 2009, the PRISMA checklist is a reporting guideline for the identification, selection, evaluation and synthesis of systematic review and meta-analysis studies. This guideline, which is recommended to present a systematic review and meta-analysis report in the international literature, is of great importance for the complete preparation of the report and is a guide for researchers.

#### **Inclusion Criteria**

The inclusion criteria are as in Table 1.

**Table 1.** Search Terms Used in PICOS Research

PICOS	Search Terms
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P (Population)	Psychotherapists doing psychodynamic therapy			
I (Interventions)	Psychodynamic therapy, online, internet-based			
C (Comparators)	Face-to-face therapy, internet-based therapy,			
	Comparison of psychodynamic therapy with			
	different internet-based therapies			
O (Outcomes)	Internet-based therapy usefulness,			
	Limitations of internet-based therapy,			

#### **Exclusion Criteria**

Descriptive studies, review articles and studies whose full text could not be accessed were not included in the study.

#### **RESULTS**

As a result of the keywords searched in the databases, the titles and abstracts of 879 studies were analysed. Repeated studies that could be accessed from different databases were removed (n=172). Those suitable for the purpose of the study were determined (n=14). After the full texts of the remaining studies were obtained, 13 studies that met the inclusion criteria were selected (Figure 1).

Figure 1. Selection process of the studies to be included in the research

Number of articles accessed as a result of the search: 879 Google Scholar: 723 Wiley: 102 Scopus: 25 Cochrane: 13 Index:1 PsycNet: 10 Pubmed: 2 Science Direct:3 Number of duplicate articles in different databases: 172 Number of articles not suitable for the study according to: 693 Number of articles accessed related to the study: 14 Number of articles whose full text was: 13

Of the studies included in the study, 53.8% were published in 2023, 23.1% in 2021, 15.4% in 2020, and 7.7% in 2022. 23.1% of the studies are studies conducted during the COVID-19 process. 61.5% of the studies are internet-based psychodynamic therapy studies conducted with adolescents. It is seen that internet-based psychodynamic therapy studies were conducted with individuals diagnosed with Depression, Anxiety and Social Anxiety. The rate of studies conducted with individuals diagnosed with depression is 53.9% (Table 2).

Of the studies included in the study, 23.1% were conducted using qualitative methods and 15.4% were published as case reports. The number of samples in studies using qualitative methods varies between 11 and 18 (Table 2).

It is seen that 61.5% of the studies were conducted using quantitative research methods. In the studies conducted with quantitative methods, the sample size varies between 23 and 272 people. It was observed that the reason for the difference in sample sizes was the preferred methodology. It is seen that 62.5% of the studies in which quantitative method was preferred were single-group uncontrolled studies (1 of which was a pilot study), 25% were randomised controlled studies and 12.5% were double-group controlled studies. It is seen that 62.5% of the quantitative studies used the Quick Inventory of Depressive Symptomatology in Adolescents (QIDS-A17-SR) Scale, 25% used the Generalised Anxiety Disorder Scale (GAD-7) and the other 25% used the Difficulties in Emotion Regulation Scale (DERS 16). The Mini International Neuropsychiatric Interview Form, Self-Assessment Techniques Inventory (MULTI-30), Mentalisation-Based Treatment Adaptation Scale for Children (MBT-CAS), Emotion Regulation Skills Questionnaire (ERSQ), Depression Patient Health Questionnaire (PHQ-9), Somatic Symptom Scale (SSS-8), Cambridge Depersonalisation Scale (CDS-2) and Liebowitz Social Anxiety Scale were the other scales used in the studies (Table 2).

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**Table 2.** Characteristics of the Studies Included in the Study

	Researcher Conducting the Study	Study Information	Scales Used	S a m p l e N u m b e	Interventions Applied to the Study Group and Study Type	Study Result
1	Benzel and Graneist. (2023) [10]	She qualitatively shared her experiences interviewing 24 psychodynamic child and youth therapists and 11 patients aged 15-23 in Germany during the COVID-19 pandemic.		1 1	Psychodynamic Therapy Qualitative study	It has been observed that internet-based therapy limits the therapy and causes aless developmental process in clients than face- to-face therapy.
2	Midgley et al. (2021) [7]	Examined the feasibility, acceptability and efficacy of adapting internet-based psychodynamic treatment (iPDT) for adolescents with depression into the English language during the COVID- 19 pandemic in the UK.	Quick Inventory of Depressive Symptomatology in Adolescents (QIDS-A17-SR)  Generalised Anxiety Disorder Scale (GAD-7)  Difficulties in Emotion Regulation Scale (DERS 16)	2 3	Psychodynamic Therapy Single group, uncontrolle d	It shows that Internet-based psychodynamic therapy appears to be effective in reducing depressive symptoms in adolescents.
3	Mechler et al. (2022) [11]	They compared internet-based psychodynamic therapy with a proven evidence-based treatment (internet- based cognitive behavioural therapy) in the treatment of depressed adolescents.	The Rapid Depressive Symptomatology Inventory for Adolescents (QIDS-A17- SR) Mini International Neuropsychiatric Interview	2 7 2	Psychodynamic Therapy Cognitive Behavioural Therapy Randomised Controlled	Internet-based psychodynamic therapy was not inferior to Internet-based cognitive behavioural therapy in terms of change in depression in the treatment of adolescents with major depressive disorder. This finding increases the range of accessible and effective

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						treatment alternatives for adolescents with depression.
4	MacKean et al. (2023) [12]	The expectations and experiences of adolescents regarding internet-based psychodynamic therapy for depression were investigated.	-	1 4	Psychodynamic Therapy Qualitative study	It supports the usability of the digitally enabled psychodynamic therapy model by highlighting the positive experiences of adolescents.
5	Leibovich et al. (2023) [1]	The effect of the techniques used in chat sessions on depression symptoms in an internet-based psychodynamic psychotherapy programme for depressed adolescents was examined.	The Rapid Depressive Symptomatology Inventory for Adolescents (QIDS-A17- SR) Self-Assessment Techniques Inventory (MULTI-30)	2 3	Psychodynamic Therapy Pilot Study	Internet-based psychodynamic psychotherapy works in adolescents with depression, consistent with the theory that mechanisms thought to be important for change in treatment predict outcome.
6	Lindqvist et al. (2024) [13]	In internet-based psychodynamic therapy treatment of adolescents diagnosed with depression, their perceptions of the relationship with the therapist were investigated.		1 8	Psychodynamic Therapy Qualitative study	In internet-based psychodynamic therapy, it is possible to establish a close and meaningful relationship with the therapist.
7	Coşkun et al. (2024) [14]	The outcome of the use of mentalisation-based interventions in internet-based psychodynamic child therapy sessions conducted during the COVID-19 pandemic was investigated.	Mentalisation-Based Treatment Adherence Scale for Children (MBT-CAS)	5 1	Psychodynamic Therapy Single group, uncontrolled	Interventions that focus on developing the basic building blocks of mentalisation can be effective components of therapeutic action in the internet-based delivery of psychodynamic child psychotherapy.
8	Lindqvist et al. (2020) [15]	Whether emotion-focused internet- based psychodynamic therapy is more effective than internet-based supportive control condition in reducing depression in adolescents analysed.	Quick Depressive Symptomatology Inventory for Adolescents (QIDS- A17- SR)	7 6	Psychodynamic Therapy Randomised Controlled	Internet-based psychodynamic therapy may be an effective intervention in reducing adolescent depression.
9	Feijo et al. (2023) [16]	In internet-based psychodynamic psychotherapy, interaction structures were examined in individuals with anxiety.	-	1	Case Study	This study suggests that a truly psychodynamic process can be realised in virtual environments.
1 0			Emotion Regulation Skills Questionnaire (ERSQ)			

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	Becker et al. (2023) [17]	Effective factors on programme adherence in patients participating in the internet-based intervention during psychotherapeutic treatment were examined.	Depression Patient Health Questionnaire (PHQ-9) Generalised Anxiety Disorder (GAD-7) Somatic Symptom Scale (SSS-8) Cambridge Depersonalisation Scale (CDS-2)	2 3 9	Psychodynamic Therapy Single group, uncontrolled	Adherence to the internet-based psychodimanic self-help programme ( <i>KEN-Online</i> ) was lower than in a previous clinical trial in the natural setting, but still enabled the therapy to be more effective.
1 1	Andreas et al. (2023) [18]	In long-term psychodynamically orientated psychotherapy, symptom improvement, the therapeutic relationship, non- verbal synchronous processes and intersession processes were analysed.		1	Case Study	There was no significant difference in symptom severity between face-to-face and video-based therapy.
1 2	Mechler et al. (2021) [19]	Immediate gains and improvements in internet-based psychodynamic treatment of adolescents with depression were examined.	Quick Inventory of Depressive Symptomatology in Adolescents (QIDS-A17- SR) Difficulties in Emotion Regulation Scale (DERS 16)	6 6	Psychodynamic Therapy Single group, uncontrolled	It suggests that Internet-based psychodynamic treatment is more likely to have favourable outcomes.
1 3	Lindegaard et al. (2020) [20]	The difference between internet-based psychodynamic therapy and cognitive behavioural therapy in social anxiety disorder was investigated.	Liebowitz Social Anxiety Scale	3 6	Psychodynamic Therapy Cognitive Behavioural Therapy Double group controlled	There was no difference between internet-based psychodynamic therapy and cognitive behavioural therapy for social anxiety disorder. Moderate to good improvement was achieved in both therapies.

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#### DISCUSSION

In this study, 13 studies conducted with internet-based psychodynamic therapy between 2020 and 2024 were analysed in order to investigate the processes and results of applying psychodynamic therapy on online platforms.

When the results of studies conducted with qualitative methods are examined, it is mentioned that internet-based psychodynamic therapy has the same functionality as face-to-face psychodynamic therapy in 66.7% of the studies [12,13]. However, 33.3% concluded that internet-based psychodynamic therapy was less useful than face-to-face psychodynamic therapy [10].

In the results of case report studies, it was concluded that face-to-face psychodynamic therapy is no different from internet-based psychodynamic therapy [18].

In general, quantitative studies have shown that internet-based psychodynamic therapy is beneficial [1,7,11,14,15,17,19,20].

In quantitative studies, when the results of single-group uncontrolled designs are examined; it is seen that internet-based psychodynamic therapy causes positive results in 100% of them [1,7,14,17,19].

In a double-group controlled study, no difference was found between internet-based psychodynamic therapy and cognitive behavioural therapy. It was observed that the sample group benefited equally [9].

In the randomised controlled studies included in the study, it was found that internet-based psychodynamic therapy had equal efficacy with internet-based cognitive behavioural therapy and internet-based supportive control treatment and provided benefits to the sample groups [11,15].

#### **CONCLUSIONS AND RECOMMENDATIONS**

In the literature reviewed within the scope of this research, it was found that internet-based psychodynamic therapy was not sufficient as a result of very few studies. The general literature mentions the usefulness of this therapy, especially in individuals with diagnoses such as anxiety and depression.

It is thought that proving the usefulness of internet-based therapy has contributed a lot to the field of therapy. Individuals in need of therapy have been relieved from stress sources such as transport and cost. Internet-based therapies have provided a saving support for individuals who have difficulty in accessing therapists. Likewise, since the costs of internet-based therapies are lower than face-to-face therapies, it has been a facilitator for

individuals to reach therapy sessions.

Based on all these data, it is recommended to support and conduct studies with evidence value in order to use internet-based psychodynamic therapies not only in individuals diagnosed with depression and anxiety, but also in the treatment of all mental disorders in need.

#### **Authors' Contributions**

BÖ and EK contributed to conceptualization, methodology, formal analysis, investigation, data curation, writing, reviewing, and editing of the original draft. BÖ contributed to supervision and project administration. The authors have read and agreed to the published version of the manuscript.

#### **Conflicts of Interest**

None declared.

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