Computer Based Psychological Interventions: 
Subject to the Efficacy of Psychological Services

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ABSTRACT

The digital world and technology have remained a very fascinating precinct in human life. This paper contains empirical evidence on the acceptance and efficacy of computer and internet-based interventions for mental disorders has increased. Despite growing evidence of effectiveness of digital interventions, it is still unclear how the practice of interventions should be measured, how this is associated with benefits, and how much interventions should be used in order to get health benefits. Guided computer-based interventions combined with face to face therapeutic sessions give a very prolific result in a long run. More empirical and research-based support is required to compare the benefits and drawbacks between computer-based and face-to-face assessment and therapeutic interventions. This article focuses on the various aspects of computer-based intervention and how these upcoming digital interventions are subject to the efficacy of traditional face-to-face therapeutic approaches.

KEYWORDS

Computer, Efficacy, Internet, Interventions, Psychological Services

INTRODUCTION

Digital world and technology have remained a very fascinating precinct in human’s life. From decades digital health interventions hold a promise of providing help and support more constantly and cost-effectively than traditional face-to-face therapies. Web-based computer-tailored interventions are increasingly being tested to target

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health-related behaviors, such as physical activity, dietary intake, and smoking (Brug, Oenema, & Campbell, 2003). Similarly, empirical evidence on the acceptance and efficacy of computer and internet based interventions for mental disorders has been increased. Several reviews and meta-analyses have shown that these interventions hold great promise in the treatment of adults with depression (Foroushani, Schneider & Assareh, 2011; Richards & Richardson, 2012; Kaltenthaler et al., 2008), depression and anxiety (Andrews, Cuijpers, Craske, McEvoy & Titov, 2010; Van’t-Hof, Cuijpers & Stein, 2009), anxiety (Cuijpers et al., 2009; Reger & Gahm, 2009), obsessive-compulsive disorder (Herbst et al., 2012; Tumur, Kaltenthaler, Ferriter, Beverley & Parry, 2007), and traumatic stress (Amstadter et al., 2009; Benight, Ruzek & Waldrep, 2008). Despite growing evidence of effectiveness of digital interventions, it is still unclear how the practice of interventions should be measured, how this is associated with benefits, and how much interventions should be used in order to get health benefits. Several studies have found that active usage mediates the effects of interventions, in both face-to-face and digital interventions (Patrick et al., 2011; Webber, et al., 2008; Lewis et al., 2008; Powell et al., 2013; Cavanagh et al., 2013). Active digital intervention usage has been associated with outcomes in several areas of well-being and health, including weight loss (Patrick et al., 2011), physical activity (Lewis et al., 2008), mental well-being (Powell et al., 2013), and depression and anxiety (Cavanagh et al., 2013). Preliminary evidence also suggests that computer and internet based interventions may be acceptable and effective interventions for adolescents with mental disorders (Richardson, Stallar & Velleman, 2010; Siemer, Fogel & Van Voorhees, 2011).

ASSESSMENT PROCEDURE

Computer based assessment methods and therapy plan have the potential to increase the cost-effectiveness of standardized psychotherapeutic management by reducing contact time with the therapist, increasing person’s participation in therapeutic activities outside the standard clinical hour. Furthermore, in computer or internet based interventions, a person may have the feeling of secure identity while disclosing personal, sensitive and many a times stigmatizing information than during a face-to-face assessments and therapies, allowing for more accurate estimates of mental health condition. Similarly, the Internet and computer make health care information and programs accessible to persons who may have financial or transportation issues or many other issues that limit access to face-to-face traditional approach. Psychosocial support and group therapy is another promising road in computer based psychological services. In group therapies, face-to-face sessions often are difficult to schedule the times and locations, and must accommodate inconsistent attendance patterns because of disparities in participants’ health status and schedules. These online services may have potential drawback as they lack the ability to identify various psychiatric and psychological conditions and emergencies. Precise and reliable diagnosis and assessment of symptoms is as
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