

ONLINE COUNSELING: WHAT DO CLIENTS AND PSYCHOLOGICAL
COUNSELORS EXPERIENCE AND THINK?

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ABSTRACT

ONLINE COUNSELING: WHAT DO CLIENTS AND PSYCHOLOGICAL COUNSELORS EXPERIENCE AND THINK?

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This study examined clients' and psychological counselors' experiences, views, and suggestions regarding online counseling. Participants were approached through criterion sampling method. Those who experienced at least eight sessions via videoconferencing tools were included. Participants consisted of two separate groups: Ten clients (seven female, two male, and one non-binary) and ten psychological counselors (five female, four male, and one queer). Data were analyzed with interpretative phenomenological analysis. The superordinate themes that emerged for clients were ethical considerations that clients are concerned about, experiences with the online therapeutic process, conveniences that encourage clients to receive online counseling, struggles that discourage clients to receive online counseling, and clients' aspirations and suggestions to improve online counseling. Psychological counselors' superordinate themes were lack of control over ethical issues, experiences with the online therapeutic process, pushing the limits of creativity, conveniences that encourage psychological counselors to provide online counseling, struggles that discourage psychological counselors to provide online counseling, and psychological

counselors' aspirations and suggestions to improve online counseling. Results were discussed with the literature, and suggestions were given.

Keywords: online counseling, ethics, therapeutic process, creativity, suggestions



ÖZ

ÇEVİRİM İÇİ PSİKOLOJİK DANIŞMANLIK: DANIŞANLAR VE PSİKOLOJİK DANIŞMANLAR NE DENEYİMLİYOR VE DÜŞÜNÜYOR?

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Yüksek Lisans, Eğitim Bilimleri, Rehberlik ve Psikolojik Danışmanlık Bölümü

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Bu çalışmada, danışan ve psikolojik danışmanların çevrim içi psikolojik danışmaya ilişkin deneyim, görüş ve önerilerini incelenmiştir. Katılımcılara ölçüt örnekleme yöntemleri ile ulaşılmış ve video konferans araçlarıyla en az sekiz oturum deneyimleyenler dahil edilmiştir. Katılımcılar, on danışan (yedi kadın, iki erkek ve bir non-binary) ve on psikolojik danışman (beş kadın, dört erkek ve bir kuir) olmak üzere iki ayrı gruptan oluşmaktadır. Veriler yorumlayıcı fenomenolojik analiz ile analiz edilmiştir. Danışanlar için ortaya çıkan üst düzey temalar şunlardır: Danışanların endişe duyduğu etik düşünceler, çevrim içi terapötik süreçle ilgili deneyimler, danışanları çevrim içi psikolojik danışmanlık almaya teşvik eden kolaylıklar, danışanları çevrim içi danışmanlık almaktan caydıran zorluklar ve danışanların çevrim içi psikolojik danışmayı geliştirmeye yönelik beklentileri ve önerileri. Psikolojik danışmanlar için, etik konular üzerinde kontrol eksikliği, çevrim içi terapötik süreçle ilgili deneyimler, yaratıcılığın sınırlarını zorlamak, psikolojik danışmanları çevrim içi psikolojik danışmanlık vermeye teşvik eden kolaylıklar, psikolojik danışmanları çevrim içi psikolojik danışmanlık vermekten caydıran zorluklar ve psikolojik danışmanların çevrim içi psikolojik danışmanlığı geliştirmek için beklentileri ve

önerileri üst temaları bulunmuştur. Bulgular, alanyazın eşliğinde tartışılmış, öneriler sunulmuştur.

Anahtar Kelimeler: çevrim içi psikolojik danışma, etik, terapötik süreç, yaratıcılık, öneriler



To my lovely family Ülkü, Ece, Ayten and Nilgün



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LIST OF ABBREVIATIONS

ACA	American Counseling Association
ANT	Actor-Network Theory
APA	American Psychological Association
f2f	Face-to-face
IPA	Interpretative Phenomenological Analysis
LGBT	Lesbian, Gay, Bisexual and Trans
OC	Online Counseling

CHAPTER 1

INTRODUCTION

1.1. Background of the Study

Throughout history, there have been different revolutions for humanity in which we have witnessed many breakthroughs, from the wheel's invention to artificial intelligence. One may say that when these inventions entered our lives, people's living habits certainly changed. There is a slight suspicion that the internet led to the construction of new age, not only in information technologies but also in the business world (Baker & Ray, 2011). The working habits (Nie & Erbring, 2002) and the social and economic components (Rajani & Chandio, 2004) have been transformed. Also, romantic relationships (Pauley & Emmers-Sommer, 2007), friendship (Briggle, 2008), and the way people experience their lives in many other events may be affected by this change. So, when we look at the past years, the internet has been the most influential product in information delivery (Barak & Grohol, 2011). Presenting mental health services was also driven by the current development of the internet (Baker & Ray, 2011). The technological revolution resulted in opportunities in mental health services regarding flexibility, affordability, and accessibility (Heinsch et al., 2021). Therefore, two necessary conditions might emerge, quality of the technology and the internet as essential dimensions in the online counseling process.

The interest in online counseling as a new service has led to divergence among experts. Some experts have embraced its potential benefits; in contrast, others have withdrawn because of the limitations of online counseling (Agathokleous & Taiwo, 2022). There are currently different modalities like synchronized chat, videoconferencing, text messages, and asynchronized e-mail (Lau et al., 2013). These various online services are conceptualized in Suler's (2000) work. In this study, Suler (2000) stated that online communication could be experienced in different dimensions. One of these

dimensions can be composed of synchronous and asynchronous. The provider and the receiver communicate with each other at the same time in synchronous communication. Asynchronous communication is not happening at the same time. (Suler, 2000). Therefore, considering the available formats (e.g., e-mail, videoconferencing), timing is critical in separating the types of online counseling.

Online counseling literature consists of commentaries and evidence-based studies, leading to enmeshed research conclusions. This issue may be because online counseling practices were widely discussed before implementation. At the same time, many researchers and practitioners have discussed how technology might be suitable for psychotherapy practices over the past years (Rochlen et al., 2004). It may not be wrong to say that defining online counseling services has created confusion and led to debate (Lau et al., 2013; Rochlen et al., 2004). For instance, different terms were used to describe online counseling, such as e-therapy, cybertherapy, e-mail therapy, web counseling, cyber counseling, internet therapy, and online therapy (Alleman, 2002; Beidoğlu et al., 2015; Lau et al., 2013). Mallen and Vogel (2005) described online counseling as any behavioral and mental health service which includes consultation, psychotherapy, and psychoeducation. Also, Licensed professionals conduct it with the clients via technological communication tools (Mallen & Vogel, 2005). One of the recent studies that investigated professionals' views and experiences used the term videoconferencing technology in their study (Knott et al., 2020). This example may also indicate confusion. These various terms and explanations and the effects of technological enhancement on online counseling might cause more changes in definition and use. One of the examples of this argument is avatar counseling, a newly emerged type in which individuals use visual self-representations by creating appearances with humans, animals, or creatures (Witt et al., 2016). Therefore, these might show that online counseling is a very fluid mechanism rather than a static one.

Early topics in online counseling were mainly its ethical aspects and the therapeutic effectiveness, challenges, and opportunities (e.g., Mallen et al., 2005; Skinner & Zack, 2004). Ethical issues in online counseling were one of the primary concerns. Heinlen et al. (2003) show that websites that provide online counseling services are inadequate in terms of ethical demands because psychological counselors' qualifications could not

meet the %50 of ethical standards of the National Board for Certified Counselors. In addition, Maheu and Gordon (2000) stated that more than half of the sample in their study did not use any form of informed consent. At the beginning of the online counseling sessions, the consent form could help psychological counselors and their clients on various issues (e.g., harming themselves and others). However, more than 70 percent of the respondents lack ethical knowledge, and more than 50 percent do not know what to do about crisis interventions in online counseling (Maheu & Gordon, 2000). Typically, in face-to-face sessions, professionals with a counseling background use this form for professional and ethical practice in providing help. So, they show that this crucial implementation is lacking in the participants of this study.

Ethical issues in online counseling are still an ongoing debate. Confidentiality, privacy, information security, competency, communication issues, and crisis intervention were top problems in a recent literature review (Stoll et al., 2020). Apart from these concerns, Stoll et al. (2020) showed that the "research gap in online counseling" is another frequent and top issue discussed by authors before a crisis. Consequently, this revealed that the knowledge and research results in online counseling are limited, especially in terms of efficacy, effectiveness, and long-term consequences of online counseling compared to the face-to-face modality (Richards & Vigano, 2013; Stoll et al., 2020). These research gaps are probably affected by the dynamic nature of technology. The more technology changes and improves, the more online counseling service delivery may modify itself. As a result, the long-term online counseling process and its effectiveness need to be investigated.

The therapeutic effectiveness of online counseling services was still debated, although early literature considered this topic. For instance, Cook and Doyle (2002) state that comparison between online (e-mail and chat) and face-to-face modalities do not differ from each other in terms of setting tasks, establishing bonds, and meeting goals in the counseling with the issues of anxiety, depression, relationship issues, family topics, school problems, dependency issues, and grief/loss. These problems were studied comparatively with the technology of that time. So, it was suggested that online and face-to-face counseling comparability should be systematically discovered regarding different technologies, various mental issues, and symptoms (Stoll et al., 2020).

Before the pandemic, Amanvermez (2015) compared the studies in USA and Türkiye and showed that client perspectives in online counseling are less frequently studied in Turkish literature. So, more evidence-based research should address adaptability and effectiveness in Turkish culture (Amanvermez, 2015). Therefore, this brings us to the conclusion that the effectiveness of online counseling could be well-understood not only by considering psychological counselors but also by client accounts.

Likewise, online counseling literature faces the barriers of not having a suitable theoretical framework. This claim was reflected in many other researchers' works (Childress, 2000; Cipoletta & Mocellin, 2018; Piri, 2011; Richards & Vigano, 2013). Few studies studied online counseling by utilizing a theoretical framework that is related to technology, such as the Technology acceptance model (Venkatesh et al., 2016), Theory of planned Behavior (Ajzen, 1991), and Actor-network theory (Latour, 1996), (see Békés et al., 2020; Heinsch et al., 2021; Erdem et al., 2018; Heinsch et al., 2021; Lazuras & Dokou, 2016; MacMullin et al., 2020).

In this study, Actor-Network Theory was adopted as a theoretical framework. Actor-Network Theory is a theory that aims to explain the relationship within a network system, including human and non-human employers within the network structure (Latour, 1996). The crucial characteristic of Actor-Network Theory in information systems is that Actor-Network Theory can clarify a system with all its elements without differentiating between living and non-living things (Şeker, 2014). For instance, Actor-Network Theory presents a very suitable structure for studying systems having boundaries between people and machines or artificial intelligence or examining information systems that include human-based as well as software and hardware items (Şeker, 2014). As there is limited research in online counseling within a framework, more evidence-based research embodied with a theory could be supportive of filling the research gaps in the online counseling literature.

To conclude, online counseling has been discussed within a similar context in the past, and the issue, including ethics, the therapeutic relationship, advantages, and disadvantages, are still contradictory because some positives might not be suitable for others and vice versa. Also, since technology development is not a stable activity,

building a therapeutic relationship and ensuring ethical conduct over the internet might be influenced by this dynamism. By addressing more evidence-based research, adopting a theoretical framework, and employing a long period of experience in counseling comparatively, the contribution to online counseling literature might be achieved.

1.2. Purpose of the Study

The primary purpose of the study is to examine the views, experiences, and suggestions of clients and psychological counselors who have experience in online counseling via videoconferencing tools on online counseling. More specifically, their experiences with online counseling, challenges, concerns regarding online counseling, views on advantages, disadvantages, and feasibility of online counseling, and suggestions for increasing the effectiveness of online counseling were searched.

1.3. Research Questions

1.3.1. Research Questions for Clients

The recent study has five essential research questions for clients:

1. How do clients make sense of their experiences regarding online counseling compared to face-to-face counseling?
2. What were the clients' concerns in online counseling?
3. How do clients perceive the positive and negative sides of online counseling, considering their experiences and views?
4. What do clients think about the feasibility of providing or receiving help in the online environment?
5. How have clients' future expectations and suggestions for improving their online counseling practice been shaped by their online counseling experiences?

1.3.2. Research Questions for Psychological Counselors

The recent study has five similar essential research questions for psychological counselors:

1. How do psychological counselors make sense of their experiences regarding online counseling compared to face-to-face counseling?
2. What were the psychological counselors' concerns in online counseling?
3. How do psychological counselors perceive the positive and negative sides of online counseling, considering their experiences and views?
4. What do psychological counselors think about the feasibility of providing or receiving help in the online environment?
5. How have psychological counselors' expectations and suggestions for improving their online counseling practice been shaped by their online counseling experiences?

1.4. Significance of the Study

Research in online counseling has increased over the years, especially after the pandemic. Few academicians in Türkiye have studied the topic of online counseling before the pandemic compared to those published abroad. Although many studies focus on clients' and psychological counselors' experiences and views regarding online counseling, these studies mainly consist of either counselor or client discourses. (e.g., Bacıoğlu & Kocabıyık 2019; Özyiğit & Atik, 2021; Korkmaz & Şen, 2018). The current study is noteworthy in terms of addressing both the voices of clients and psychological counselors in one study.

As the worldwide experience in giving and receiving online help increased, the lived experiences in online counseling inevitably and increasingly entered people's lives. This consequence allowed the research of the samples who live the online counseling phenomena. Few studies before the pandemic were conducted with participants who had experienced online counseling widely. Before that, the studies primarily focused on the participants who were less experienced in this phenomenon as its use is not inevitable worldwide. The recent study was applied to people who had a particular time with online counseling via videoconferencing to examine their inner lived experiences. Therefore, this research also gains importance by collecting data from those cases.

In Turkish literature, limited studies were written regarding experiences of online counseling; thus, views without experiencing the phenomena were prominent. For instance, a comparison of face-to-face and online counseling was studied in the Turkish literature regarding therapeutic alliance from the perspective of in-training counseling students (Zeren, 2017). This study was well-established in terms of having experiences and opinions of candidates comparatively. However, since the study was done with counselor candidate participants through their practicum courses, participants have limited session experiences, especially in online counseling (Zeren, 2017).

Moreover, a study by Korkmaz & Şen (2018) consisted of 45 clinical psychologists and psychologists, but 15 of 45 participants provided online counseling services, and others had not experienced the phenomenon. Helvacıgöl (2019) also studied the opinions of mental health professionals, mainly those who do not currently practice online counseling, with only three among 12 providing online counseling. Additionally, in his thesis, Yılmaz (2019) investigated online counselors' experiences, and participants mainly consisted of psychologists and clinical psychologists. The study also covered the coping strategies of professionals with challenges they faced, but it was only conducted with a sample of mental health professionals. The current study was designed to collect information from professionals with a counseling educational background to search for the experiences of people specifically from this profession. In terms of these aspects, psychological counselors' use of skills, techniques, and approaches to online sessions might be explored precisely in the current study.

Some studies in Türkiye also focused on clients' perspectives and experiences (Buyruk Genç et al., 2019; Erdem et al., 2018; Zeren, 2015; Zeren, 2020; Zeren et al., 2022). However, studies regarding counselor and client experiences and views about online counseling are not widely studied among the client population in Türkiye (Amanvermez, 2015). One of the reasons for that the number of sessions experienced by the clients may not be experienced in an extended period. The duration of the pandemic forcibly allowed living online counseling deeply among people. Therefore, it facilitated practicing interventions and conducting extensive research on online

counseling (Agathokleous & Taiwo, 2022). The current study was designed to collect information from experienced clients apart from psychological counselors. It might be essential to examine online counseling experiences without receiving one-sided opinions. So, it is important to note that the recent study also addressed this issue.

There is an uncertainty in the literature that consists mainly of studies before the pandemic on society's views on online counseling processes. Comparison between online counseling and face-to-face modalities in terms of effectiveness and establishing a warm alliance between counselor and client in the online environment is slightly doubtful (Agathokleous & Taiwo, 2022). Therefore, in their well-established broader systematic review, Stoll et al. (2020) suggest that more research comparing it with face-to-face services is needed to explore online counseling in a better way. Notably, the current study's interview questions were scheduled and held by asking comparative questions about online and face-to-face counseling sessions. Only one participant has not experienced any face-to-face counseling before. The other 19 participants had both experiences of face-to-face and online counseling. Thus, the interview protocol facilitated participants' cognitively retrieving the helping process and making sense of their lived experiences during the interviews. By experiencing the online counseling phenomenon in duration, the views about it may change and develop in several ways. Thus, exploring experienced cases in online counseling might be critical to see how the helping process was changed after individuals encountered it. Also, they can examine their online experiences by comparing previous experiences. This aspect may show researchers and practitioners how online counseling needs to be improved for users' satisfaction.

The recent study is also unique in utilizing a contemporary qualitative analysis with large numbers of cases. One recent interpretative phenomenological analysis research that makes sense of both parties (one professional and one client) investigated therapeutic presence, skills, therapists' abilities, and insight processes in online counseling. However, researchers of this study claimed that in terms of interviews, their number of mental health provider participants, in contrast with the clients' number, could result in more practitioner-based results (Stange Bernhardt et al., 2021). Another interpretative phenomenological analysis study focusing on psychological

counselors' experiences during the pandemic found that psychological counselors often utilized attentive listening skills to foster the online counseling process and found that challenges and risk management are less controllable in online counseling. Writers of this study also emphasized that they used a limited number of cases, and larger samples need to be occupied for the voices of the therapists (Smith & Gillon, 2021).

Although recent studies use interpretative phenomenological analysis, the voices of the clients and psychological counselors involved in the process are still lacking. The current study is noteworthy as it occupied both sides' sense-making about the experiences. By utilizing interpretative phenomenological analysis with larger and separate groups, the recent study tried to figure out these gaps that previous authors mentioned in the online counseling literature. In terms of this aspect, separate groups were investigated in one research to increase the significance of the study.

Lastly, the literature also suggested that holistic explanation is absent within a theoretical framework for online counseling (Childress, 2000; Cipoletta & Mocellin, 2018; Piri, 2011; Richards & Vigano, 2013). This study utilized a social constructivist theory called Actor-Network Theory as a theoretical framework to explain the online counseling process. This is where the present research gains more importance by considering an equal number of clients and psychological counselors as well as reaching two dyadic participant experiences and views and addressing their suggestions for improving online settings.

Inevitably, the internet and technology might get into our lives more in the future. Future work transition and adaptation may not be feasible without knowing both users' technological readiness and abilities. Traditionally, one may say that a counseling session includes at least one client and counselor. As a result, it might be vital to understand the online counseling phenomena from the two parties' involvement to understand and improve this modality. That is why understanding practitioners' and receivers' voices are crucial to developing and helping these settings for future ethical, educational, and practical manners within a framework.

To sum up, there is a scarcity of research that simultaneously investigates clients' and psychological counselors' views, experiences, and suggestions within the same study

in the literature under the researcher's knowledge. The COVID-19 process functioned as a catalyst to reach some level of expertise in understanding and interpreting online counseling as a phenomenon. The global pandemic made online counseling a compulsory intervention and shifted professionals' work habits (Agathokleous & Taiwo, 2022). Improvement in mobile information technology enables new opportunities and practice areas for solving issues within the mobile settings in the online health care system (Nymberg et al., 2019).

1.5. Definition of the Terms

Online Counseling: It is a form of counseling modality that utilizes the internet and computer for interaction between psychological counselors and clients in individual, family, and group counseling processes (Gladding, 2017).

Actor-Network Theory: It is a social constructivist theory and methodology in sociology that explains the societal dimensions of a network, including human and non-human actors, rituals, and cultural aspects (Callon, 2001).

Professional ethics: Professional ethics is the thoughts on actions and behavior regarding guided professional practices (e.g., ACA Code of Ethics) (Gladding, 2017).

Code of ethics: Principles and standards (e.g., counseling relationship, confidentiality, privacy, professional responsibility, supervision, and training) formed by the organizations to help the members of the profession in working with the individuals in society (Gladding, 2017).

Therapeutic Relationship: The therapeutic interaction between client and counselor enables them to develop understanding towards each other and form a helping relationship between the two. It includes effective alliance, collaborative relationships, establishing bonds, and setting goals and tasks (Gladding, 2017).

Therapeutic Presence: It is a mindful approach that constitutes the therapist's way of being with the client by fully engaging at the moment (Geller, 2013).

CHAPTER 2

LITERATURE REVIEW

This chapter outlines relevant literature with the definition of online counseling and its types, historical roots and the prevalence of online counseling, the description of actor-network theory and its literature within online counseling, ethical issues, development of the therapeutic process in it, positive and negative sides, and training and suggestions of online counseling.

2.1. Definition and Types of Online Counseling

Online counseling has been named in many ways throughout time. Different terms have been used: E-mail counseling, e-therapy, web counseling, internet psychotherapy, internet counseling, e-counseling, e-psychotherapy, or online counseling/psychotherapy (Alleman, 2002; Beidoğlu et al., 2015; Heinlen et al., 2003; Lau et al., 2013). There are different definitions for online counseling in the literature. For example, Mallen and Vogel (2005) suggested that online counseling is any mental health and behavioral support that includes technological integration with devices such as the internet, telephone, e-mail, and chat. They also added that online counseling does not only include therapy; it also includes psychoeducation and consultation. Richards and Vigano (2013) defined online counseling as providing therapeutic interventions by a trained professional counselor for clients in a virtual world. Both sides utilize computer-mediated communication systems through this process. National Board for Certified Counselors (2016) chose to use the term "distant professional services" rather than their old phrase, "internet counseling." They defined it as facilitating from electronic tools such as computers or telephones for counseling, education, consultation, and supervision. To conclude, technological advancement has changed the terminology and definitions of online counseling with time.

Although the definition of online counseling varies, its' services can be divided into two main categories: synchronous and asynchronous. In synchronous help, the provider and the receiver instantly establish communication simultaneously. In asynchronous support, the exchange of communication messages between the provider and receiver is not simultaneous. So, there is a time gap between sending and receiving messages (Elleven & Allen, 2004; Suler, 2000).

In addition to this basic categorization, there are different types of online counseling. These include videoconferencing, telephone counseling, text chat, e-mail, mobile device apps or social media tools, and avatar counseling. Firstly, videoconferencing counseling enables psychological counselors and clients to hear and see each other's lives. There is also sending and receiving written messages option. Since both individuals are present at that moment, videoconferencing is also synchronous. (Mallen & Vogel 2005).

Secondly, telephone counseling is a synchronous interaction between both parties remotely, and the information is provided only through audio (NBCC, 2016, p. 2). Thirdly, text chats are generally synchronous chats. Individuals type a message and send it to the receiver, but the difference is that both parties are online. The receiver responds instantly to the message from the sender when it is seen. The reason why this process is called synchronous is that the conversation between two people happens at the same time (Mallen & Vogel 2005). Fourthly, e-mail counseling can be defined as online counseling in which a sender sends a message via e-mail to the receiver. The receiver needs time to see and respond to the message. The reason why it is called asynchronous is that there is no need to be online at the same time for both parties. Communication can occur at different times (Mallen & Vogel 2005).

Fifthly, in mobile device apps, the help occurs through remote interaction, both asynchronous and synchronous for the individuals, using social networking tools. (NBCC, 2016, p. 2) Lastly, in avatar counseling, the counselor and the client have visual self-representations called avatars created through computers to communicate. These avatars' appearance and motion could be similar to humans, mythical creatures, and animals (Witt et al., 2016). Therefore, different types of online counseling may

depend on humanity's technological enhancement, and these variations may change more in the future with the development of new technologies.

Different types of online counseling provide enormous opportunities to revise and increase our understanding of psychotherapy and counseling. Options in flexibility and accessibility in online counseling help practitioners extend their practices by going beyond the traditional approaches in face-to-face sessions (Agathokleous & Taiwo, 2022). These opportunities with different formats enabled psychological counselors to utilize diverse helping occasions. For instance, a recent study examined the preferences of psychological counselors: 86% videoconferencing, 38% telephone, 29% online chat, 22% text message, and 11% e-mail for the communication modalities for performing online sessions (Java et al., 2021). Videoconferencing is the most preferred type of online counseling, especially by professionals. As a result, the researcher chose the current study to design and investigate the experiences of those who provided and received online counseling through videoconferencing tools (e.g., Zoom, Skype, WebEx).

2.2. Historical Roots and Prevalence of Online Counseling

As two robust dimensions, technology development in offering help in healthcare services and increased demands of receivers lead mental health practitioners to inevitably acquire innovative approaches appropriate for improving their scientific, educational, and practical assistance and policies (Maheu et al., 2012). Technology development and specific living conditions may also affect the counseling field. For instance, one of the third movement therapies, Dialectical Behavior Therapy, utilizes telephone coaching and strictly emphasizes the change in technology and acceptance processes for therapists' skills. Telephone coaching includes teaching phone skills to clients, improving clients' social interaction abilities, and building a solid therapeutic relationship (Linehan & Wilks, 2015).

Many online counseling platforms evolved by the beginning of the 1990s, when internet use and people's access improved (Hanley, 2021). Nonetheless, Skinner & Zack (2004) insists that taboos over internet use in helping are misleading as indirect approaches in psychology have started in the past with Freud's letters. Technologically, the involvement of computer technology in counseling began in the

1960s with a trial computer program named "ELIZA." It was written even before the internet started to be used by people. ELIZA was a software program acting as a person-centered counselor and would respond to the client's statements, choosing among the various responses it had in its memory (Weizenbaum, 1966). A primitive program that did not gain commercial or practical use, it was the first example of how individuals could interact with or through the computer to receive counseling help (Binik et al., 1997). However, current software programs used in online counseling (i.e., Zoom and Skype) depend on a program called CU-SeeMe, which was founded in 1994 at Cornell University. It was a desktop computer program for both Macintosh and Windows and ran through Internet and IP networks with the monitor and video camera (Han & Smith, 1997).

Although video conferencing tools and online counseling were not new (Gonzalez, 2022), they have become more widely studied and turned forcibly into a phenomenon practiced by clients and therapists during COVID-19 (Békés & Aafjes-Van Doorn, 2022; Gonzalez, 2022). It was a challenging transition experience to shift towards online practices among clinicians at the beginning of the pandemic (Farrer et al., 2022; Feijt et al., 2020). Mental health services in different settings also have been affected significantly after COVID-19 across countries (Boldrini et al., 2020, Silver et al., 2021, Velykodna, 2021). Many associations from various countries, including the UK and Türkiye, review their ethical standards and provide professional guidelines (e.g., BACP, BPS, Turkish Psychological Counseling, and Guidance Association).

A survey report among 130 countries shows significant partial and complete disruptions in mental health, neurological, and substance use interventions and services. According to this report, school mental health programs have disrupted almost 80% of these countries. More than 70% of the countries also reported work-related mental health program disruptions. Mental, neurological, and substance use-related services for children and adolescents were disrupted in more than 70% of these countries, whereas this rate is 70% for the services of older adults. Lastly, Psychotherapy, counseling, and psychosocial interventions encountered disruptions between 60% and 70% of the countries (WHO, 2020). As a result, digital components and communication instruments like online interventions and videoconferencing tools

created a chance to continue health care (Dores et al., 2020), both mentally and physically, by spreading these services when individuals were isolated in their homes and by reaching their country.

Recently, receiving online help from mental health professionals became a common practice among clients by utilizing technological devices like mobile phones, computers, and tablets (Gonzalez, 2022). Thus, coronavirus widely caused video conferencing in e-mental health settings for therapists and clients. Since the pandemic caused the adoption and more practice of online counseling, it is possible to perform remote help after the COVID-19 era (Wind et al., 2020). One of the reports shows that 94% of providers predict online health implementations will continue after the pandemic era with a 23% increase rate compared to 2019 as well as 71% of them also suggest that distance health interventions are the main priority for their businesses. This rate was 59% in 2019 (Teladoc Health, 2020).

It is also important to note that as an essential technical feature to receive help, having a qualified internet is a crucial tool. Internet access has changed throughout history and development statistically. According to the International Telecommunication Union (ITU) (2022), 54% of the world's population used the internet in 2019. Internet usage rate by individuals increased over the past as this rate was 15.6% in 2005. This rate gradually increases as 4.9 billion people, comprising 63 percent of the world, use the internet. According to this data, 2.9 billion people worldwide are still restricted from using the Internet (ITU, 2022). So, governments and lawmakers may be an essential part of online counseling along with practitioners and associations for distributing to society because having appropriate technology and the internet may not always be accessible for everyone in the community.

Statistics about internet use in Türkiye differ from the worldwide context. For instance, it has gradually increased throughout the years around Türkiye. In 2011, internet access in households was 42.9%. The latest report shows that this rate increased to 83.8% in 2018 and 94.1% in 2022 in Türkiye (TÜİK, 2022). By 2022, the rate of individuals who regularly use the internet expanded to 85.0% (TÜİK, 2022). In terms of purpose use by individuals, video or telephone calls over the internet were 55.1 %

in 2013. This rate increased to 69.5% in 2018 and 91.3% in 2022 (TÜİK, 2022). As a result, the internet has become a vital technological priority for receiving and providing online help.

2.3. Actor-Network Theory (ANT) and Online Counseling

There are two essential elements to understanding Actor-Network Theory. The first one is the *network*. To clarify the description of a network in Actor-Network Theory, Latour (1996) suggests that networks are not big or small, distant or close; their boundaries do not require a space that defines the insides or outsides of a network. Actor-Network Theory deals with the distribution of goods among human or non-human entities, their connections, circulations, and converting process between these goods (Latour, 1996). Network, therefore, is the balanced relationship process between actors and their translations (Callon, 2001). Actor-Network Theory benefits from fundamental network characteristics and uses them to perform among actors. (Latour, 1996).

The second important element is the *actor*. Callon (2001) suggests that actors are the things (both human and non-human) that affect the scientific process within the network. For instance, it includes scientists, their backgrounds, social rules, methods and techniques, daily routines, instructions, instruments, and external objects. In between actors, some interactions and relations that some actors can change the other actors are defined as translations (Callon, 1986). Thus, the end-product between actors, the output of the translation process, is called inscriptions (Johnson, 1988). An actor not necessarily needs to have a lived-cognitive and mental aspect; instead, it requires abilities to make actions for the intentions within the entities (Callon, 2001). Through this process, the network determines the actors' role and performance in the network system, and the entity tries not to enter other relations or actors when establishing a network (Callon, 2001). Sometimes, actors can facilitate or change the transactions between other actors. Thus, an actor that acts as an influencer is called the mediator. Mediators are the things that can change or alter the other actors and aspects of actors within the network (Latour, 2007).

Actor-Network Theory was created to examine circumstances challenging to divide humans and non-humans and where the actors have varying shapes and abilities. (Callon, 1999). Actor-Network Theory is used in several studies. For instance, these included studies on digitalization, the online environment, and technology (e.g., cyber victimizations) (see Van der Wagen & Pieters, 2020). In online counseling, various domains like the internet, technical instruments, and other non-human factors, the involvement of psychotherapists, and the technologies taking part in online counseling (MacMullin et al., 2020). This process is part of the network in clients' experiences and tele mental health practices (MacMullin et al., 2020).

In one of the rare studies on online counseling utilizing Actor-Network Theory, McMullin et al. (2020) explained the influence of the actors on the therapeutic process in technological environments. They conclude that therapists are responsible for boundary settings, establishing trust in the online space, psychological counselors' availability from clients' perspectives, and cultural expectations in using technological tools are critical dimensions in online counseling networks. Also, providing/receiving online counseling and technical devices create a network of online counseling using human and non-human entities (MacMullin et al., 2020).

McMullin et al. (2020) also discussed Latour's "black box" analogy which means some actors are engaged in the system so detailly; thus, they may not be observable (Johnson, 1988). They introduced that it could be involved in the online counseling process in which counselor and client may not recognize the specific elements that contribute to performing online counseling sessions effectively.

The researchers also conducted more recent research on ethical issues in online counseling. For instance, a case study also discovered moral and ethical motives behind the decision of suicidal thoughts from the view of Actor-Network Theory. The research revealed that relational ethical decision-making and behaviors are related to both human and non-human factors for the unfolding of disclosing suicidal thoughts (Heinsch et al., 2021).

The current study adapted Actor-Network Theory to online counseling settings in several ways. In traditional individual counseling, the agencies participating in the counseling process occur in a physical room consisting of the counselor and the clients. From this perspective, the room, the client, and the counselor are in the same context, and they have more ability to control what will happen in the sessions. However, in online counseling, both human and non-human agencies have more roles in the network of online counseling. For instance, the quality of the internet, the computer, the camera, and the room's shape are examples of non-humans in the online counseling environment. Thus, the recent study considers online counseling as a dimensional network that includes more agencies than face-to-face, including non-humans.

More importantly, these actors may not be in a single space. Clients have actors in their homes, and psychological counselors have them in their places. Therefore, these create actors that are derived from different environments. Moreover, not only the non-human actors in the online counseling network, the people at the place where the help was received or given online counseling might play vital roles in practicing efficient online counseling sessions. It might be challenging to experience counseling where other people live. So, the current study examines online counseling as a phenomenon between the client, the counselor, and the other actors at home.

Additionally, the actors in online counseling networks may not be limited to in-session dynamics. One may need technological instruments that were designed by software developers to practice online counseling. The secure applications, then, depend on the responsibility and the roles of the information system developers. This issue might not be related to the psychological counselors' or clients' responsibility as they may not have the ability to know all of the detailed processes (black boxes) of the utilized videoconferencing program in online counseling. Moreover, associations and governmental agencies may play critical roles in transmitting these services and ensuring the appropriate practices. As a result, the current study also goes beyond the actors' roles in the sessions. Thus, it investigates the mediators, translations, and other actors' roles outside the online counseling sessions.

2.4. Ethical Issues in Online Counseling

The most concerning topics among practitioners who deliver online counseling are legal and ethical conduct and prescription of behavioral acts in these services (Mallen & Vogel, 2005). The awareness and knowledge of the ethical conduct and procedures in online counseling are less and create uncertainty among practitioners (Barak & Grohol, 2011; Blumer et al., 2015; Borcsa et al., 2021; Chester & Glass, 2006; Cipoletta & Mocellin, 2018; Glueckauf et al., 2018; Haberstroh et al., 2008; Knott et al., 2020; Rummell & Joyce., 2010; Tanrikulu, 2009). Ethical issues and concerns in online counseling are similar to face-to-face counseling. However, some problems in online counseling may put more pressure on the experts due to not being physically in the same environment as in face-to-face counseling.

Different associations worldwide have revised their guidelines after facing COVID-19 due to emergencies. However, it is possible to say that institutions talked about online counseling even before this crisis. For example, American Counseling Association (2014) covered the topic under the section named "Distance Counseling, Technology, and Social Media" (ACA, 2014). More recently, the Turkish Psychology Association (2020) published telepsychology guidelines. The Turkish Psychological Counseling and Guidance Association (2021) reviewed its ethical codes and provided information about online counseling.

There are various ethical issues in online counseling, and some may be related. While some ethical issues are the same with face-to-face sessions, some may differ. First of all, several studies proved that maintaining confidentiality is one of the most complex ethical problems in online counseling (Békés et al., 2021; Borcsa et al., 2021; Blumer et al., 2015; Chester & Glass, 2006; Cipoletta & Mocellin, 2018; Glasheen et al., 2013; Haberstroh et al., 2008; Ipsen et al., 2012; Knott et al., 2020; Nagarajan & Yuvaraj, 2021). In psychological help, confidentiality is described as an ethical principle that limits mental health providers' information about receivers' identity, issues, diagnosis, and evaluation addressed in the helping process, according to the APA dictionary (n.d.).

In the literature on online counseling, confidentiality has been recognized as a form of ethical concern for several reasons. Some studies highlighted the problem of keeping information secure within the technologies used by individuals. On the other hand, few have considered the environment's conditions and the possibility of other people in this environment when receiving or providing online counseling. Some also declared that mental health providers lacked the knowledge to conduct online counseling sessions confidentially. For example, a descriptive study shows that psychological counselors who provide online counseling via e-mail and chat are less aware of ethical issues. In addition, only half of these counselors use encryption tools to protect privacy (Chester & Glass, 2006). Moreover, another qualitative study on chat-based online counseling discussed that professionals might have difficulties with setting professional boundaries if they do not live alone at home during online counseling. This study indicates that there may be confidentiality problems due to other people in the home environment (Haberstroh et al., 2008).

Apart from these subjects, more specifically described areas of providers and their confidentiality concerns were studied in the literature as well. For instance, one of the mixed-method studies conducted with vocational rehabilitation counselors indicates that one-third of the counselors have uncertainties regarding protecting confidentiality in their online counseling practices and consider e-mailing, chatting, and internet settings unprotective mediums (Ipsen et al., 2012).

Moreover, a quantitative study shows the school counselors' intention to use online counseling. This study indicates that psychological counselors' perceived efficacy did not significantly predict the tendency to use online counseling. Less confidence in online counseling did not affect the use of the practice. However, ensuring confidentiality, legal and ethical issues, and control in online counseling predicts intention to use it. They intend to use online counseling less when they can less manage these factors. (Glasheen et al., 2013). Another research with family counseling practitioners indicates that mental health providers are concerned about confidentiality and require precise information about steps to follow to protect clients' information and confidentiality in online counseling (Blumer et al., 2015).

Furthermore, in a study including systemic family practitioners across European countries, %75 of the participants declared that they have confidentiality concerns within the web systems regarding keeping clients' information (Borcsa et al., 2021). In addition, a more recent descriptive analysis showed that confidentiality is also a problem among Italian mental health practitioners in terms of data transferring and keeping securely, as the context of ethical and legal guidelines is also limited in this culture (Cipoletta & Mocellin, 2018). Besides, Knott et al. (2020) studied the views and experiences of psychologists within the context of barriers to conducting online counseling. Participants of this study practiced online counseling via videoconferencing tools. They expressed that confidentiality is perceived as a critical concern as ensuring a secure internet connection is a matter of problem for violation of confidentiality.

Similarly, in a qualitative study, mental health providers had reservations about using technology in counseling practices. They have doubts about retaining confidentiality and providing cybersecurity for their client's data. (Nagarajan & Yuvaraj, 2021).

Some evidence-based research also investigated confidentiality concerns of mental health providers during the COVID-19 era. For instance, Békés et al. (2021) showed that the ethical considerations of psychological counselors formed between the start of the pandemic and 3-months later. In their exploratory factor analysis, one of the main factors was covering difficulties regarding confidentiality. They found that this factor was also significantly and negatively related to the therapists' age and therapy experiences. They also found that perceived challenges, including clients' confidentiality problems, significantly declined after three months of follow-up. This study indicates that experiencing online counseling enabled practitioners to ensure and manage ethical concerns that depend on confidentiality.

As a result, these studies show that confidentiality is a core ethical concern before and during the pandemic. Thus, although the culture, settings (e.g., school, family, individual), time, and format (e.g., e-mail, chat, videoconferencing) of online counseling changes, confidentiality remains a challenging ethical problem worldwide.

ACA code of ethics (2014) suggests that conversations on clients' confidential material should be held only by securing the privacy settings of the client. More detailly, privacy is also the clients' right to choose what information will be disclosed to other parties, including participating in counseling sessions (Gladding, 2017). Thus, privacy concerns are another ethical issue in online counseling related to confidentiality. Privacy of the clients is a profoundly critical concern discussed in the literature (Békés et al., 2021; Blumer et al., 2015; Cipoletta et al., 2018; Cipoletta & Mocellin, 2018; Glasheen et al., 2013; Khan et al., 2022; Nagarajan & Yuvaraj, 2021; Stoll et al., 2020; Young, 2005).

Clients' privacy was discussed in the online counseling in terms of different perspectives, such as problems with ensuring security and clients' home management to be alone during sessions. For example, Young (2005) found that clients prefer to utilize online counseling as it could enable them to remain anonymous in terms of being seen by their families, friends, and colleagues. 96% of the clients consider online counseling a good option since they could avoid being seen by others in the therapist's office, and the helping process they receive is unknown to loved ones. More than half of the clients feared that their private information would be collected on the internet and seen by others around them. Besides technological security concerns, 31% of clients also mentioned that they are anxious in their home or work environment because others might catch them while receiving help (Young, 2005). Glasheen et al. (2013) also showed that among school counselor professionals' only a few (13%) of counselors believe their abilities to achieve protection of their client's privacy. This data is accurate in terms of private psychologists (n=289) in another descriptive study; practitioners did not ensure security and privacy in online counseling, and 22.8% percent of them did not know how to respond to questions about protecting the security and privacy of the clients. Only 18 participants revealed data tools to secure session information (Cipoletta & Mocellin, 2018).

Additionally, Blumer et al. (2015) found that the privacy protection of the clients was one of the significant issues in which family counseling practitioners do not have enough knowledge. Similarly, Nagarajan & Yuvaraj (2021) found that psychological counselors believe that they and their clients have doubts about ensuring cybersecurity

in online sessions. Cipoletta et al. (2018) studied their research with two practitioners and five clients to understand their online counseling experiences. Their study showed that the environment and its conditions are a part of the therapeutic process in online counseling, and privacy is affected by the environment where clients cannot talk about their issues all the time.

More recently, Stoll et al. (2020) established a comprehensive systematic review study regarding ethical issues in online counseling. Their review showed that some ethical considerations support online counseling, whereas slightly more ethical issues are against it. Their final sample consisted of 249 published papers and privacy, including similar issues like confidentiality and security found as one of the top five ethical problems. This study also shows that privacy can be both advantageous and disadvantageous regarding ethical issues in online counseling. While clients can receive online counseling more anonymously and privately, data protection may not be applicable and can be concerning (Stoll et al., 2020).

Similar to the confidentiality evidence in their longitudinal study, Békés et al. (2021) discovered that perceived difficulties regarding clients' privacy significantly decreased after three months follow-up study. The therapist who believed online counseling was less effective at the beginning of the pandemic reported more challenges regarding privacy issues. Ensuring clients' privacy is one of the major factors that this research investigated, and more experienced therapists in face-to-face counseling had fewer privacy concerns than less experienced practitioners (Békés et al., 2021). Consequently, this may deduce that therapists' competence in ensuring privacy might be related to their experiences throughout time, regardless of face-to-face or online practices.

Different from pointing out that privacy is a prominent concern of online counseling. Khan et al. (2022) revealed that the psychological counselors' concerns regarding privacy and confidentiality did not differ in face-to-face counseling. Whether the practice is online counseling or face-to-face, privacy and confidentiality are prominent issues. As one of the study participants stated, "...The reality is that people can hear through the walls where I worked, phones can be tapped, and medical files can be

stolen. I do not perceive the online risk as being any different." This data shows that privacy and confidentiality issues do not only belong to online counseling, and they are not only data security difficulties (Khan et al., 2022). As a result, privacy is not only an issue with physical and environmental drawbacks in online counseling literature, but technological problems also play essential roles.

These issues bring a new ethical concern, security, which may lead to doubt in clients' and psychological counselors' minds when technology enters sessions as another dimension in online counseling. Since online counseling is performed in the digital environment, technological security issues are also very concerning area (Blumer et al., 2015; Borcsa et al., 2021; Cipoletta & Mocellin; 2018; Glueckauf et al., 2018; Knott et al., 2020; Nagarajan & Yuvaraj, 2021; Stoll et al., 2020; Young, 2005). For instance, a study by Knott et al. (2020) indicates that professionals consider technological security a critical issue in distance counseling services. However, they do not have sufficient expertise in understanding encryption and introducing knowledge to their clients about this process. Similarly, ensuring cybersecurity is a big question for providers in Asia (Nagarajan & Yuvaraj, 2021).

As previously indicated in the paragraphs above, competency is another major ethical issue in online counseling. ACA (2014) discussed these standards under the "professional responsibility" category. It was mentioned that psychological counselors need to practice in a specific area after receiving adequate knowledge, supervision, skills, and education. Thanks to this, they guarantee their competence level to avoid any possible damage to others. In their study across a variety of countries in Europe, Borcsa et al. (2021) found that family practitioners are aware of the information security problems in utilizing synchronized tools (e.g., Skype). However, they tend to continue to do practices because these practitioners believe that they do not know what they can do technologically to provide security for the sessions. Thus, this may create inconsistency between the competency standards of a helping profession and practicing it. Consequently, the security problem may not be a concern related only to confidentiality and privacy issues but also the professional competency and knowledge of the practitioners about technology. Providing a competent practice in online counseling can be more fluid than the specialization areas (e.g., Rogerian, CBT,

Psychoanalysis); counseling practitioners should consider the appropriate steps and standards (Mallen & Vogel, 2005).

Several studies in the literature investigated the issues regarding competencies of the practice in online counseling in terms of having sufficient technological proficiency and general conduct of online practice. For instance, one of the qualitative studies conducted by Haberstroh et al. (2008) shows that professionals who use chat-based tools during online counseling reported that they require an adequate level of knowledge and skills in dealing with clients with fewer computer skills. Professionals wanted to be prepared for the steps to follow in the possible corruption and learn about the potential technological problems such as hardware and software issues (Haberstroh et al., 2008). Moreover, Finn & Barak's (2010) study shows that although psychological counselors are happy with online practices, there is a need for training and supervision. They do not have any specific education, which bolsters their competency in the online environment. In their study, Cipoletta & Mocellin (2018) asked professionals about the most effective reinforcement for spreading online counseling. Most participants believed this could be possible with the clearance within the ethical standards, deontological features, and unblurred regulations.

In addition, the study conducted by Glueckauf et al. (2018) indicates that among 164 practitioners, 98% percent responded that mental health providers need training about ethical and therapeutical issues in online counseling. 98% of the participants declared that this education should include technical issues about providing online support. Also, another recent quantitative research on psychological counselors investigated practitioners' self-efficacy levels regarding online counseling practices. Asri et al. (2022) revealed that licensed and registered online counseling providers had greater self-efficacy than those who did not, regardless of age and counseling experiences. Apart from private practitioners, a study shows that school counselors are less confident in following ethical and legal procedures of online counseling than in face-to-face counseling (Glasheen et al., 2013). As a result, all these studies indicate that a competent counselor in face-to-face counseling may not necessarily qualify in online counseling settings (Zack, 2008). Online counseling practitioners might have different needs to make things clear both in and out of the sessions. Thus, the level of

competency and required skills to conduct tele mental health services are one of the core issues alone and are both related to other ethical concerns.

Not having enough knowledge and training is a core issue for some practitioners. Much related to this, there are doubts about assessing risks, verifying the client's identity, and crisis intervention in online counseling. According to APA Guidelines for Psychological Assessment and Evaluation (2020), assessment means a complicated activity combining different aspects such as clinical decision-making, knowledge, psychometrics for testing, and reliable supporting data from interviews, observation, and third-party statements within the competence in a field of professional conduct.

Understanding clients' conditions and diagnosis procedures may not always be easy. Research by Mallen et al. (2011) indicates that online psychological counselors are competent to identify when one issue is diagnosed (86-90%). However, when the clients have multiple symptoms, their rate of identifying symptoms and making correct diagnoses decreases (36%). Similarly, a study conducted by Wood et al. (2021) suggests that risk and control are two of the main concerns among practitioners during online sessions of text-based counseling. Practitioners' risk assessment concerns in online support are also valid for videoconferencing settings (Trabucco et al., 2021). In addition, Harrison & Wright (2020) found that one of the significant ethical concerns of practitioners is a lack of confidence in assessing risks in online counseling. In a qualitative study by King-White et al. (2019), ten online school counselors participated in this study to investigate the ethical concerns and dilemmas regarding online counseling. Participants were concerned about knowing and following the school crisis plan or policy, properly managing crises, and reporting to children's services. Although eight participants noted no main differences between counseling in traditional and online settings, two indicated that making referrals, dealing with crises, and involving children's services become more specific ethical dilemmas in online counseling. Thus, assessment procedures become an essential course of action to understand the clients' characteristics and circumstances in time and distance.

Besides these studies, client verification might be a critical issue to solve and ensure healthy practices regarding beneficence in online counseling. ACA (2014) highlights

the importance of client verification in distance counseling settings. They defined that counselor takes action to verify clients' identity at the beginning of the therapeutic process when they have contact with their clients via technology, social media accounts, and online counseling. It was also suggested that these verification processes could include using code graphics, numbers, words, and other identification methods.

In the literature, Khan et al. (2022) revealed that client identity might also be an ethical concern, although it might be advantageous for some clients. One of the participants in this study was concerned about the clients' misinformation about their true identities. Although this is not only valid for online counseling practices, screening, registration, and ensuring the client's identity could be critical for the benefits of the session (Khan et al., 2022). This data shows that psychological counselors may need to be careful and well-aware of the possible causes or harms that will occur when there is insufficient knowledge regarding clients' identities. Likewise, Cipoletta & Mocellin (2018) emphasized that one of the online counseling providers' difficulties is verifying clients' identities (67%). However, they also showed that verifying the client's identity is not the only problem. Verifying the licensed professional is also a vital issue reported by participants (63%) (Cipoletta & Mocellin, 2018). As a result, identity verification could be a critical component of ensuring ethics in online counseling.

Another ethical problem is crisis intervention, as it may be challenging to assess and intervene in an emergency while delivering online counseling services from a distant space (Mallen and Vogel 2005). ACA code of ethics (2014) suggests that emergency protocol should be designed to follow in distance counseling settings in case of the absence of the provider. Gladding (2017) stated that high-risk clients who prompt acts of suicide, homicide, violence, abuse, and criminality are perceived as clients at high risk. Several studies pointed out that this is critical in online counseling.

In their study, Maheu and Gordon (2000) suggested that only half of the practitioners had plans to follow in any crisis. So, practitioners do not know what to do in critical moments in online counseling. For some practitioners, online counseling ethically does not seem to fit for clients with suicidal and psychotic (Chester & Glass, 2006). This issue might be because these topics produce difficulty following ethical steps in

any possible issues faced during the crisis and challenging moments. Recently, Cipoletta and Mocellin (2018) suggested that 64.68% of 289 practitioners reported reservations about what to do when there is a need or crisis in online counseling. There is a time interval in those studies. However, this issue is still a current issue regardless of technological development.

Moreover, Glueckauf et al. (2018) had similar descriptive results, with 52% out of 164 practitioners reporting that they do not have sufficient educational background for practicing skills to overcome emergency issues in online settings. To manage risks, practitioners need knowledge about what kind of diagnoses are appropriate for online, and a physical presence of their clients is required to control the possible situations (Knott et al., 2020). This issue might be because they may only be able to manage to observe their clients when they are physically close. More recently, Stoll et al. (2020) also found that the fifth top opposing ethical arguments in online counseling in the reviewed articles were emergency issues among 32 arguments. This result may prompt various ethical concerns in online counseling, but emergency issues are prominent in the literature. Consequently, these studies show that crisis intervention is one of the biggest concerns because unclear procedures and environmental distance might create more complex situations for practitioners. There is a need to discuss and gather contact information from clients to avoid possible harm issues (Mallen & Vogel, 2005).

Except for these ethical concerns, some studies have taken attention to the boundary settings in online counseling as an ethical difficulty (Békés et al., 2021; Drum & Littleton, 2014; Haberstroh et al., 2008; Hurford, 2021; Negretti & Wieling, 2001; Stoll et al., 2020). According to ACA (2014), professional virtual boundaries consist of utilizing technological devices and applications such as social media tools to ensure professional boundaries of the client relationship. They also stated that these accounts should be for business purposes and not be able to be related to personal accounts that result in a personal virtual relationship that means damaging professional boundaries (ACA, 2014).

Studies discussed boundary issues from different perspectives in the literature. For instance, Negretti & Wieling (2001) shows that family practitioners had difficulties

regarding boundaries with their clients in telephone counseling. Practitioners in this study revealed that clients attempt to contact them at inappropriate times. They also found that the therapists who did not receive enough training in face-to-face counseling encountered more difficulties managing boundary violations. It was also reported that some clients call therapists continuously, whereas others are too reserved about calling them (Negretti & Wieling, 2001). These issues may cause an imbalance in the relationship and boundary issues.

Unlike the clients' attempt to violate the boundaries of the relationship, Haberstroh et al. (2008) indicate that professionals' managing their environment also breaks professional boundaries if they cannot manage to be alone. A study conducted with school counselors emphasized that counselors frequently use remote counseling modalities for individual and group counseling sessions as well as psychoeducational practices, peer help interventions, and consultation processes (Steele et al., 2018). This study also illustrates that the involvement of technology affects the balance between personal and professional boundaries of the counselors as participants indicate that their work and home lives are influenced negatively in terms of time. 73% of the participants did not mention the limitations of working hours with the families and students in this study (Steele et al., 2018). Though it was not a top concern, Stoll et al. (2020) also discussed in their review that online counseling might cause possible boundary issues. Drum & Littleton (2014) suggests that boundaries might be affected by communication that is not professional due to social, less formal, and chat-type conversations and therapists' relaxed attitudes regarding time and space. The reason for this could be that a chat conversation is also a typical type of communication that people do with anyone, not necessarily setting a sense of responsibility, respect, and formality towards the relationship. Nonetheless, the boundaries may become formal when practiced for a long time. For instance, Békés et al. (2021) showed that difficulties in setting therapist boundaries significantly decreased from the beginning of the pandemic and after the three-month follow-up in their longitudinal study.

As a result, these studies reveal that adequate time may help practitioners to adapt their professional boundaries with their clients in online settings. Also, practitioners may not be aware of the circumstances that may result in boundary issues in online

counseling. Additionally, it can be deduced that practitioners are aware of the boundary issues. However, managing them becomes very difficult, primarily when the personal contact information is provided once and if they cannot find a place where they could sit within professional boundaries environmentally.

To sum up, various ethical concerns such as confidentiality, privacy, competency, assessment, emergency issues, verifying issues, and boundary settings in online counseling were addressed in the literature. Most online counseling literature research has aimed to explain ethical concerns, with quantitative and qualitative studies conducted to identify and introduce ethical issues.

2.5. Therapeutic Process in Online Counseling

2.5.1. Therapeutic Relationship in Online Counseling

The working alliances or the therapeutic relationship originate from psychoanalytic therapy, which is also performed for other types of therapies (Bordin, 1979). An effective therapeutic relationship includes establishing alliances, goals, empathy, client feedback, collaboration, and positive regard (Norcross & Wampold, 2011). Apart from these, therapists' interpersonal acts are crucial to client satisfaction with the therapy (Moors & Zech, 2017). Therefore, it is essential to understand the therapeutic relationship in online counseling because the primary course of action is to meet the client's aspirations and choices in counseling by establishing bonds and trust (Agathokleous & Taiwo, 2022).

There are doubts and questions over the online interventions' efficiency and whether the warm relationship between clients and therapists could be the same as in face-to-face practices (Agathokleous & Taiwo, 2022). Research on the therapeutic relationship in online counseling is controversial. This controversy is because some research claims that the therapeutic relationship can be reachable in online counseling. On the other hand, others claim the relationship is not relational. Instead, it has some missing elements, such as a more static and informative process, the inability to observe nonverbal cues, problems with physical intimacy, and general dissatisfaction with the helping process.

Various research studies have investigated the therapeutic relationship in online counseling services. For example, a review of 23 studies concluded that online counseling does not differ from face-to-face in establishing the therapeutic alliance between clients and psychological counselors, even though the quality of the internet is not enough for both parties (Simpson & Reid, 2014).

Unlike review studies, a qualitative study found that empathy, establishing rapport, and creating an environment for interpersonal connections were perceived as barriers to building a therapeutic relationship among online practitioners. (Knott et al., 2020). Participants in this study stated that they feel less empathy in online counseling because of physical distance from the client. Establishing rapport is challenging due to missing facial expressions and internet connection freezes in online counseling. Lastly, nonverbal and verbal cues are missed during online counseling. This issue results in a decrease in the value of interpersonal connections (Knott et al., 2020).

More recently, (Trabucco et al., 2021) examined practitioners' (psychiatrists, psychologists, and psychotherapists) understanding of forming the therapeutic relationship in online counseling. They asked how professionals rate their perceived feelings regarding switching face-to-face settings to online ones. 57% of the providers reported that they considered their clients appreciated this process due to introducing compassion and acceptance in the relationship during the social isolation times regardless of the physical absence. Nonetheless, 43.9% of the professionals declared that their clients' preferences are highly rated for returning to the face-to-face modality. Notably, 42.5% of the professionals stated that clients seemed not close and withdrawn in their relationship, mainly if they lived with others at home (Trabucco et al., 2021). From the provider's point of view, although most providers were reassured with the continuity of the therapeutic relationship in online counseling and participating more in their home lives, they reported problems with communication, concentration, and recognizing clients' clinical conditions (Trabucco et al., 2021).

In Turkish literature, Zeren (2017) examined counselor candidates' opinions regarding establishing the therapeutic alliance in a qualitative study. It was found that nine out of eleven psychological counselors described the goal-setting process as cooperative

conduct between client and counselor, whereas two experienced challenges with this prospect. In terms of reaching goals, nine of them introduced the goals that were achieved during online counseling. However, three reported difficulties in reaching goals, two revealed dropouts, and two indicated that client goals have changed during the helping process (Zeren, 2017). Psychological counselors were also asked whether the clients' problems were resolved during online help. It was found that eight psychological counselors out of 11 reported problems in terms of understanding their clients in solving the issues (Zeren, 2017). So, although some points of the therapeutic relationship were achievable, others might be considered problematic by the counselor candidates.

In the literature, there is a significant difference among three modalities: Face-to-face, videoconferencing, and telephone, and found that therapists were primarily satisfied with face-to-face services (Zentner et al., 2022). Similarly, a comparison of the relationship satisfaction between face-to-face and video conferencing modalities showed that the means of video conferencing was significantly less than the face-to-face, indicating that technology influences lowering understanding, warmth, and empathic performance (Rees & Stone., 2005). Leibert et al. (2006) also studied the client's perception of the therapeutic relationship. The working alliance of the clients significantly predicted satisfaction with receiving online help. However, those who received face-to-face service have greater satisfaction with the working alliance than those who receive online counseling. Thus, these might indicate that face-to-face counseling and physical interaction have unique communication opportunities, and people are more familiar with them.

There were also studies indicating different results in the literature. In a qualitative study, client satisfaction with online counseling was found to be quite like face-to-face counseling (Zeren, 2015). Moreover, a study with more younger individuals' satisfaction in Asia (9-12) found that online counseling is effective as the qualitative results showed that emotional support and expression, establishing the therapeutic relationship, and problem-solving were achievable during the sessions. Children felt comfortable with online modalities and its feature of interaction (Kit et al., 2019). Similarly, another study shows that clients reported high satisfaction with online

counseling (Zeren et al., 2022). They established the therapeutic relationship with psychological counselors in online counseling by achieving goals, settings tasks, and bonding (Zeren et al., 2022).

Additionally, a mixed method study investigated the pre- and post-therapeutic intervention processes between face-to-face and online modalities. There were no significant differences in the therapeutic alliance before the intervention was established. However, after the intervention was settled, it was found that there were significant differences in the therapeutic alliance between face-to-face and online counseling settings; face-to-face has a significantly better establishment of the therapeutic alliance among clients (Rotger & Cabré, 2022). Thus, in the literature, the issue of a well-established therapeutic relationship is quite debatable regarding online counseling, as there are different results. Also, it may depend on various factors like technological and technical requirements and developments, having skills to transmit the therapist's abilities to the online space, and the type of online counseling.

2.5.2. Therapeutic Presence in Online Counseling

Developing a therapeutic presence in online sessions could be a way to offer improvement in providing online counseling services (Rathenau et al., 2022). Presence is a vital factor in the effectiveness of the counseling process. It is defined as "being totally at the moment and directly experiencing one's being in multiple levels including physical, emotional, mental and visceral — from a grounded and centered position within oneself" by Greenberg and Geller (2001). They also mentioned that therapeutic presence focuses on the therapist's presence in which the therapist aims to be with and for the clients. Moreover, it fosters clients' safety, being listened to, and being understood in the environment where therapists hold sessions (Greenberg & Geller, 2001). Geller (2013) suggests that the therapeutic presence is the first movement for forming empathy, a requirement for experiencing empathic understanding. As it was suggested that therapists' presence is associated with the therapeutic relationship, and perceived therapist presence by clients is a crucial part of the positive outcome and the therapeutic process. (Geller, 2013).

Therapeutic presence studies were not common in the online counseling literature, but this topic was studied in face-to-face counseling. For instance, McCollum and Gehart's (2010) study shows that practicing mindfulness exercises helped counselor students to gain more therapeutic presence during sessions. Their level of attending inner experiences, awareness with clients, calming, internal chat, taking slowly, and connecting boundaries between sessions increased when they practiced mindfulness-based practices. Moreover, the therapeutic presence was also investigated in children. It was discovered that cultural humility, therapeutic presence, and reduced attachment anxiety strongly predict therapeutic alliances among children who experienced interpersonal trauma (Grad, 2022).

Few studies focused on the therapists' presence experience during distant counseling occasions. In the middle of the COVID-19 crisis, Geller (2021) published a paper that covers suggestions for managing the therapeutic presence before and during online counseling sessions. This article recommended several aspects of the therapeutic presence in tele mental health. These include safety and security, being consistent with the place where the counseling session is conducted, arranging distance with the screen and lighting, dressing professionally, and checking the client's present conditions.

Evidence-based research was also conducted slightly on the topic. For example, the therapeutic presence in online counseling significantly predicts the therapeutic bond during eight or 12 sessions of cognitive behavioral therapy. Thus, it was found that presence is crucial for establishing bonds (Bouchard et al., 2007). A more recent study also found that perceived abilities regarding using skills like empathizing, using silence, and information security are significant predictors of ensuring the therapeutic presence among tele mental health providers (Rathenau et al., 2022).

Additionally, an interpretative phenomenological analysis study shows that therapists' presence by totally listening to their clients is related to their theoretical orientation (Stange Bernhardt et al., 2021). Holistically being with the client positively influences the therapeutic relationships (Stange Bernhardt et al., 2021). Therapists' attention and focus might be necessary for the therapeutic presence. Psychotherapists' attention

difficulties and concentration are also affected due to the distractors during online counseling sessions (Trabucco et al., 2021).

As a result, the therapeutic presence is a discussion point in face-to-face and online counseling. As the development of online counseling improves with time and technology, fostering the therapeutic presence in online counseling modalities might be more crucial. Clients who enter counseling with a computer-based practice expect a similar relationship with face-to-face counseling settings. Therefore, psychological counselors should establish an ethically, legally, and efficiently organized virtual presence in an online environment (Jencius, 2014).

2.6. Use of Counseling Skills and Techniques in Online Counseling

Therapists' actions, techniques, and abilities in the sessions are the indirect fostering elements for clients' perception of therapeutic experiences (Agathokleous & Taiwo, 2022). Few studies focused on adapting skills and techniques to online counseling (Cipoletta & Mocellin, 2018; Khan et al., 2022; Trepal et al., 2007; Wood et al., 2021).

In a study by Khan et al. (2022), professionals reported that skills and techniques that identify the competency of psychological counselors were not extensions of traditional counseling skills. Those skills should be expressed differently in online counseling settings (Khan et al., 2022). Also, in this study, psychological counselors said that different types of online counseling might facilitate varying skills, like focusing more on verbal techniques in only audio-utilized online counseling (Khan et al., 2022). Additionally, psychological counselors introduced the use of different implementations in conjunction with traditional skills in online counseling to solve physicality problems, such as clarifying questions to detect nonverbal behaviors that might indicate anxious feelings of the clients. (Khan et al., 2022). A qualitative study also found that psychological counselors' practices mainly utilized attentiveness and listening skills in online counseling (Smith & Gillon, 2021). Consequently, the efficient and more utilization of verbalized skills and techniques in online counseling might be necessary for understanding clients' physical and spatial conditions during sessions.

Making a proper transition from face-to-face to online counseling modalities in terms of skills and techniques could be crucial to effective online counseling conduct. In the literature, it was suggested that practitioners have difficulty arranging their face-to-face skills and techniques in the online environment (Wood et al., 2021). They had reservations about therapeutic implementations in online counseling (Cipoletta & Mocellin, 2018). For instance, in a study, students who transitioned from face-to-face to online counseling during a pandemic perceived that online counseling is valuable in developing their skills for future employment within technology-utilized practices. However, they revealed that role-playing activities in the online environment are less authentic than face-to-face (Young et al., 2021).

The psychoeducation and self-help aids of the counseling may also play a valuable role. It could be possible to guide clients in an online environment to perform some psychological techniques, especially during crisis times when the need for psychological help is at its peak. For example, one of the experiential studies investigated whether online self-help relaxation and mindfulness techniques effectively reduce anxiety during the COVID-19 era. This study discovered that both mindfulness and relaxation techniques are effective in online counseling. However, it was found that online mindfulness techniques were more effective than self-help relaxation techniques (Suranata et al., 2021). Similarly, Quigley et al. (2022) discovered that self-help mobile health intervention that includes sending messages to modify unhealthy behavioral patterns significantly decreased graduate students' anxiety and depression levels. So, when adapting techniques and skills to an online environment, professionals may need to be well-competent to use techniques that cultivate self-help strategies.

Using unusual methods to conduct sessions by utilizing technology as well as online platforms may require the ability to the adaptation of techniques and skills. Thus, this could be an emerging concern among professionals as few studies directly investigate the creative use of techniques in tele mental health settings (Bolton et al., 2021; Hurford, 2021; Tribe et al., 2021; Quigley et al., 2022). For instance, virtual-based creative play therapy strategies were discussed in the literature, such as using sand trays, the videogames and setting up virtual offices offered as ways of practice (Bolton

et al., 2021). The implication of these activities depends on the technological and material accessibility, tolerating computer-using skills of the children, modifying virtual sessions by considering children's developmental levels, and drawing borders of the online sessions (Bolton et al., 2021). In addition to that, Hurford's (2021) research on a case study who suffered from alcohol addiction during COVID-19 showed that the availability of variables in the households constitutes a creative form of counseling by using pets, encouraging the client to create a Facebook page from dog's point of view and fostering him to use humor. Tribe et al.'s (2021) study shows that creativity-based intervention programs result in improvement among clients who experience mood and anxiety issues. However, only a few clients developed substantial clinical improvement in well-being and mood scores. Nonetheless, these studies were mainly conducted in the face of the pandemic, and further research on the creative use of techniques may need to be addressed more in the literature.

To conclude, online counseling enables professionals to change and find new ways to practice their techniques and skills. Whether it is increasing classical techniques by adapting them to the online environment, use of self-help strategies, or fostering creative skills, there might be a need for structuring new methods in conducting online counseling sessions.

2.7. Advantages of Online Counseling

The most widely discussed topics regarding online counseling might be its opportunities and drawbacks. It is interesting to note that some advantages could turn into disadvantages, whereas some disadvantages could be advantages under different circumstances. Indeed, there are various opportunities in online counseling, such as remote access (Chester & Glass, 2006; Fang et al., 2018; Richards, 2009), convenience (Chester & Glass, 2006; Vongtangswad et al., 2017), clients' openness (Khan et al., 2022). Also, flexibility (Amos et al., 2020; Chester & Glass, 2006; Fang et al., 2018) and affordable costs (Centore & Milacci, 2008; Chester & Glass, 2006) are some advantages of online counseling in addition to these opportunities initially mentioned (Barutçu Yıldırım et al., 2021; Chester & Glass, 2006; Lau et al., 2013).

Many studies explore the benefits of online counseling in the literature that indicate similar results. One of the most frequently argued opportunities is the accessibility of online services (Baker & Ray, 2011). According to Sussman (2004), one of the advantages of online counseling services might be reaching individuals who live in geographically isolated areas. Apart from this, those who are physically disabled and seriously ill people who cannot leave their homes may have access to this service with the help of online counseling. Additionally, people with responsibilities related to their children or elders may get help more easily without thinking about how they will arrange their time (Sussman, 2004). Having an opportunity to reach any time in the day creates a unique opportunity in online counseling in terms of accessibility, and this helps professionals get the individuals that otherwise may not be accessible (Mallen & Vogel, 2005). These suggestions are valid as some recent evidence-based studies indicate that psychological counselors perceive escaping from geographical barriers as the most valuable advantage in online counseling (Cipoletta & Mocellin, 2018; Nagarajan & Yuvaraj, 2021). Additionally, a study conducted in the Australian context shows that practitioners are less comfortable using online counseling than in-person services. When they look from the client's perspective, online counseling contributes to social justice values by reaching remote areas, rural people, and individuals who suffer from their issues (Knott et al., 2020).

Different from accessibility, another topic regarding the advantages of online counseling is its convenience, flexibility, and comfort in terms of time and space. For instance, it was claimed that with the asynchronized form of online counseling, it would be possible to overcome time boundaries between therapists and clients (Baker & Ray, 2011). In the literature, practitioners believe that one of the highly rated benefits of online help is to optimize time for the clients and psychological counselors (Cipoletta & Mocellin, 2018). The counselor's availability was increased by avoiding the requirements of physical being in the environment (Cipoletta & Mocellin, 2018). A study by Nagarajan & Yuvaraj (2021) also indicates that mental health providers also consider the online counseling practice as a very convenient, in other words, easy and comfortable practice to perform in terms of physical conditions and time.

Another discussed issue in online counseling was its economic advantages. It was suggested in the literature that online counseling enables mental health professionals to escape renting an office. Therefore, it would be possible to provide and receive more affordable help for both parties (Centore & Milacci, 2008). Nevertheless, it is a controversial advantage as half of the sample rated affordability for the clients in another research (Cipoletta & Mocellin, 2018).

Online counseling might help avoid social stigmatization and self-stigmatization issues. Being anonymous could positively affect clients' defensiveness in the sessions (Chester & Glass, 2006). One of the types of research on this topic is a case study. Mitchell and Murphy (1998) indicate that receiving online counseling services for those worried about stigmatization would be easier. They also added that text writing might be helpful since the writing experience can be considered a practice of therapeutic intervention. So, online counseling could be advantageous for clients who worry about being seen by others in counseling offices. They may feel more comfortable and safer in online counseling sessions since they will receive this service at home (Sussman, 2004). Similarly, clients who suffer from severe issues like sexual abuse, rape, and violence may choose online counseling since it would provide a more encouraging and safer environment to express themselves (Joyce, 2012).

A recent study by Tirel et al. (2020) shows different advantages and usage of online counseling, except for crisis issues like a pandemic. Their research indicates that online counseling usage increases or decreases depending on the season. The study shows that people are more likely to seek online help in winter than in the summertime. Using hybrid counseling modalities, including face-to-face and online help interventions, would be beneficial. Weather conditions and difficulties with the road in those conditions may foster to conduct of sessions efficiently.

Supporting this claim, a more recent mixed-method study by Chan (2020) focused on the different features of online, face-to-face, and hybrid counseling among youth and emerging adults. The quantitative results show that hybrid counseling is a better form of counseling than online and in-person as it can overcome the disadvantages of other modalities. The qualitative part of the study shows that both online and face-to-face

counseling have different characteristics. Thus, online counseling can be beneficial in terms of psychological and personal issues in general. On the other hand, the face-to-face modality is more likely to be helpful when physical closeness is more necessary in counseling sessions.

2.8. Disadvantages of Online Counseling

There are several disadvantages in online counseling literature, which are sometimes embodied with ethical issues. Sometimes these are separately explained by the researchers. It might be essential to note that the type of challenge can be changeable depending on the type of online counseling (e.g., videoconferencing, e-mail, or text-based). In counseling, Alleman (2002) proposes that nonverbal behaviors can be beneficial and troubling simultaneously. While they may be helpful and give additional information about the client, they may also lead to distraction, confusion, and misguidance since the counselor's behavior influences the client (Alleman, 2002). So, one of the discussed disadvantages of online counseling is the lack of nonverbal cues and behaviors that cause challenges in at least one of the communication dimensions, like building trust, establishing rapport, understanding, and getting information about the client's body experiences. (Alleman, 2002; Callahan & Inckle, 2012; Mallen & Vogel, 2005; Tanrikulu., 2009; Trabucco et al., 2021; Zeren, 2017). Regardless of the online counseling type, this issue may create trouble among professionals because some body parts are unseeable, even in videoconferencing tools.

Whereas accessibility is considered an advantage of online counseling, some practitioners think that some communities and rural areas may not access decent internet to receive help (Knott et al., 2020). One of the recent reports showed that the psychological help receivers' rate among adults with mental issues in the US is 46.2%. (NIHM, 2020). This rate might be perceived as relatively low in terms of the year of this report and technological development worldwide. Regarding social justice in the counseling field, the online counseling process demands technological assets that should be reachable to clients and psychological counselors (Amos et al., 2022). Thus, the equal chance needs to be attributed to online counseling despite clients not having the required devices to access these services without socioeconomic barriers (Simpson et al., 2021).

Gonzalez (2022) suggested that the only problem is not just receiving and reaching psychological help, as there might be barriers regarding high prices and lack of low-cost implications. Also, the education level and people's awareness may not be adequate. Thus, this may cause less help-seeking behavior, or there may be no opportunity to reach providers or have sufficient mental health requirements in the living region (Gonzalez, 2022). Thus, the “access” as technology cannot be accessible for every receiver with price, internet access, and computers (Reljic et al., 2013).

As researchers consider these issues, professionals need to be aware of social justice issues among the client population worldwide in online counseling (Knott et al., 2020). Consequently, integrating technology into counseling education is a valuable course of action for providing help and creating cooperativity in multicultural perspectives (Ilieva & Erguner-Tekinalp, 2010).

Another issue discussed in online counseling literature might be time issues. Technically, asynchronous e-mail-based online counseling might lead to time delay issues that lead to clients thinking about the delay's reason. As a result, clients' anxiety may increase, although it might be helpful to think about more accurate responses (Rochlen et al., 2004). The client's safety might be critical as there is no guarantee that the counselor will respond immediately to the client's e-mail, so psychological counselors may not be capable of dealing with this situation entirely (Mitchell & Murphy, 1998).

Technological and technical issues also may create another challenging aspect while providing and receiving online counseling services. In the literature, therapists stated that limits in clients' computer skills lead to difficulties conducting online counseling services (Haberstroh et al., 2008). Also, Cipoletta and Mocellin (2018) show that professionals are frustrated with the technical issues that happen during online sessions after losing nonverbal signs in communication.

2.9. Preferences for Online Counseling

One of the arguments in online counseling is whether it is applicable and appropriate for any specific issue. Researchers discussed that issue in the literature. Some indicated

that severe topics are not suitable and preferable in online counseling, and others claimed the opposite. For this purpose, researchers studied specific issues in the literature by considering theoretical orientations. For example, in a quantitative study with solution-focused brief therapy in online videoconferencing for mild to moderate anxiety among undergraduate students, the outcomes were effective in both online and in-person treatments (Novella et al., 2022). So, the comparison of both services showed that they are both effective in dealing with anxiety issues.

Similarly, a broad umbrella review covered additional issues of anxiety. The study found that online and computer-based interventions effectively decreased symptoms of stress, anxiety, depression, and eating-related issues (Harith et al., 2022). Moreover, an experimental study during lockdown stages from Italia suggests that decreasing negative affect and state anxiety is achievable within one online session. Psychoeducational approaches would be beneficial in online practices. Still, they found that a single online counseling session is not enough to show the change in positive affect and well-being of individuals (Carbone et al., 2022).

Severe issues were considered a complex implementation area for online counseling (Chester & Glass, 2006; Connolly et al., 2019; Farrer et al., 2022; Tanrıku, 2009). Issues related to depression, trauma, suicide, divorce, grief, and behavioral disorders are not preferable for online counseling sessions (Tanrıku, 2009). This issue might be related to different reasons such as satisfaction from the sessions, managing them, and providing/receiving a proper helping process. These reasons may vary from one issue to another, and the type of online counseling might influence the preferences. For example, e-mail counseling did not fulfill the therapeutic requirements while working with people with breast cancer (David et al., 2011).

Additionally, a comparison study indicates that a positive and durable therapeutic relationship can be established with individuals with trauma issues during online counseling. However, the therapeutic relationship in online counseling is less predictive in terms of counseling outcome than in face-to-face counseling (Knaevelsrud & Maercker, 2006). This result from the study may indicate that trauma

can also be worked through online settings when the therapeutic relationship's healing feature is considered. However, face-to-face counseling is still a better modality.

Moreover, online mindfulness-based therapy was found efficient and feasible for people with late-stage bipolar disorder (Murray et al., 2015). People with eating disorders benefit from internet-based implications because of the anonymity, easy and quick accessibility, and reaching the help through writing form (Moessner & Bauer, 2012).

Addiction issues were also addressed in the literature. For example, Tanrikulu (2009) revealed that psychological counselors tend to choose guidance interventions over counseling practices for addiction issues (Tanrikulu, 2009). More recently, a study investigated substance use among families and how they benefitted from online counseling (Dilkes-Frayne et al., 2019). Contradictorily, they found that online counseling helps families to take a step toward initial contact with the services. Online counseling services also enable families with substance use issues to decrease stress, be action-oriented, increase communication, find appropriate follow-up methods and contact local help settings. In this study, online counseling helped families avoid societal stigma and obstacles. It was also found that families expressed their experiences much more comfortably than through face-to-face communication (Dilkes-Frayne et al., 2019).

Online counseling could be a better option for young individuals since they perceived power balance in the therapeutic alliance and felt less anxious and stressed (Bambling et al., 2008; Chan, 2020). It is familiar with the young people's lifestyles and answers to youth's interests and requirements (Chan, 2020). However, another study with young individuals revealed that psychological counselors tend to use online counseling as an adjunct to face-to-face services (Dowling & Rickwood, 2014). Their clients are unsatisfied with the online counseling sessions by attending only one or two sessions (Dowling & Rickwood, 2014). It was also discussed in the literature within a single online counseling session that there might be a lack of depth about the issues discussed during the sessions with adolescents (Chardon et al., 2011). The session process in the transcripts is more likely consisted of giving-receiving information, and there was an

absence of action-based goals and goal settings (Chardon et al., 2011). Furthermore, Glasheen et al. (2016) also found that in the school context, students who seek support tend to choose online counseling rather than face-to-face counseling for fragile issues that are hard to discuss and express, like sexuality. However, the wide application of which topics are appropriate in line with the therapeutic approaches and techniques in the literature is not investigated adequately.

Researchers also paid attention to examining romantic and couple issues in online counseling. For example, a recent study (Nelson et al., 2022) discussed intimate partner violence and attitudes towards online counseling preferences of people. The study showed that individuals who experience intimate partner violence prefer fewer online help modalities compared to face-to-face ones. This research also included the LGBT individuals' intimate partner violence and their perception of openness to online help-seeking. It was found that their openness is higher than those who do not consider themselves a part of the LGBT community, possibly because of the social stigma towards this community (Nelson et al., 2022).

The literature suggests that in online counseling, less severe and guidance-type topics such as career problems, procrastination, and time management would be preferable compared to challenging topics and issues (Tanrikulu, 2009). In parallel with this, in an experimental study about the role of hardiness and psychological capital on career decision-making via online career counseling, it was discovered that face-to-face and online counseling groups share similar therapeutic factors (Pordelan & Hosseinian, 2021). Additionally, it was found that online counseling services allow young people to revisit and see the materials about the conversation held with therapists. (Chan, 2020; Pordelan & Hosseinian, 2021). As a result, although there would be some reservations and risks on severe issues, it might be helpful for some key issues and types of clients. It can be deducted from the literature that preferences of online counseling for the topics among professionals mostly align with controllable problems so that they can avoid possible harm and severe consequences and perform effectual help.

2.10. Training, Education, and Suggestion in Online Counseling

Traditional counseling education includes basic skills learning based on face-to-face communication styles. With technological development, online counseling and utilizing technology for these practices may lead to being competent indifferently. Training for therapists in the online counseling field is still a developing area, and there is a lack of sources that can be trustable to receive training. (Anthony, 2015).

The research on this topic is rare, as one study shows that only 0.9% of the ACA journal articles emphasized technology use in counseling. However, growing sympathy toward technology use among practitioners in these few articles became prominent (Woo et al., 2020). This result may indicate that the counseling field needs further research on training regarding technology use in counseling. One of the early studies in online counseling introduced strategies to use and teach counseling skills during online counseling (Trepal et al. 2007.) However, more recent studies may be needed because when technology develops, online counseling types may also shape by these technologies. The manifested professionalism for workers in health and social help is transforming into combined professionalism (Silvennoinen, 2020). It contains both manifested and unmanifested work strategies as the digitalization of job procedures. Thus, Increased quality requirements in work result in competency methods in using resources, adopting both synchronous and asynchronous work, global technological practices, and providing solutions (Silvennoinen, 2020). The future of providing counseling may not be different from other working areas.

The COVID-19 process forced associations and professionals to pay attention to problems about how to provide online counseling services. Training guidelines and education for mental health professionals by some institutions and associations were prepared to help them in providing appropriate. For instance, the Board Certified-Tele Mental Health Provider (BC-TMH) certification was developed to assist experts in guiding their online help. It was created by the Center for Credentialing & Education, a fellow of the National Board for Certified Counselors (NBCC), in meeting with heads in the area. BC-TMH supplies the information, education, and credibility that practitioners need, qualifying them to pursue the most promising preparations to present secure and sufficient helping processes in online counseling (CCE, n.d.). These

attributions are new approaches for training psychological counselors in online settings.

Some organizations did not provide training and education. However, some associations and institutes have been established for the online helping process before COVID-19, such as the International Society for Mental Health Online and American Telehealth Association (ATA). Although some organizations previously covered guidelines in online counseling, their licensure and training are not well-established. Recently, only some organizations have distributed these certification processes abroad, like Telebehavioral Health Institute, Association for Counselling and Therapy Online (ACTO), and Telehealth Certification Institute.

Telebehavioral Health Institute (TBHI) gives training regarding online mental help settings. It was suggested that they also reduced training fees during COVID-19 to help a group of therapists' practices and accessed 51% of the population of professionals and client profiles globally (TBHI, n.d.).

In addition, ACTO also published a paper about counseling young people in online settings and introduced their plan regarding these. Their statement includes the competency criteria results from experienced online practitioners' discussions in a panel, and they plan to use blogs to make a further addition to these panels (ACTO, 2022).

Online psychological help training might be crucial. Working in the virtual space will gain vitality, and being a competent provider will become a fundamental need when helpers graduate and start to practice online counseling (Anthony, 2015). It may not be a lie to say that the pandemic indirectly fostered this experience for mental health professionals. As a result, it might be a concern for providers who benefit from technology to train and practice since there is a limited number of evidence-based research on integrating efficient technology utilization and counselor education and training (Woo et al., 2020).

Suggestions in online counseling are generally established around non-evidence-based articles (e.g., commentaries) in the literature. Recommendations were given by researchers' inferences based on their findings and looking over the literature. One of the rare evidence-based studies covers the implementation of internet interventions. It was declared that practitioners expect to see training that teaches using counseling skills when they need to deal with the absence of nonverbal cues in online counseling in the future (Menon & Rubin, 2011). Similar to this research, Nagarajan & Yuvaraj (2021) discovered that practitioners consider their face-to-face counseling education ineffective in dealing with issues, such as imagining clients' presence, text communication in online counseling, and how to follow nonverbal cues clues in the online environment. Therefore, it might be assumed that professionals desperately suggest a need for specific online counseling training to cope with these difficulties.

As a result, there is a scarcity of evidence-based suggestions that raise the question of "what might be the practitioners' and receivers' ideal effective help?" among people. After they lived with numerous online counseling experiences during the worldwide pandemic, it may be critical and meaningful for the researchers and the practitioners to establish their online counseling practices within the suggested dimensions from lived experiences.

CHAPTER 3

METHODS

In this chapter, the research design, participants and sampling method, data collection instruments, data collection procedure, data analysis, research trustworthiness, and study limitations are explained, respectively.

3.1. Research Design

This study aims to understand clients' and psychological counselors' experiences, views, and suggestions regarding online counseling. To reach this aim, the researcher adopted a phenomenological research design, one of the qualitative research designs. The purpose of qualitative methods is to understand the phenomena's nature and interpret it from the eyes of the people who live this phenomenon (Langdrige, 2007). According to Heidegger (2010), the term phenomenology originated from two Greek words, which are "phenomenon" and "logos." The first one has a meaning that is "to show itself," whereas the latter is described in terms of different meanings but something that has a sense of "relation" and "relationship." Phenomenology attempts to reach the essence and purity of the transcendental object. This process was achieved by avoiding the things that lead to bias and influencing presuppositions (Moustakas, 1994). Phenomenological research design deals with the lived experiences of individual groups (Creswell, 2007). It starts with curiosity and questions that aim to find unusual in usual and differences in the similarities (van Manen, 2016).

3.2. Sampling Method and Participants

Criterion sampling, a subcategory of purposive sampling with the snowball sampling technique, was used to select study participants. There were two common inclusion criteria for psychological counselors and clients. The first inclusion criterion is

providing or receiving online psychological counseling using videoconferencing tools (e.g., Zoom, Skype, WebEx, etc.). The second is to have an experience of at least eight online sessions. In phenomenological studies, data sources are individuals or groups who experience the phenomenon. For this reason, the present study's sample consists of psychological counselors and clients who have experience in online counseling via videoconferencing.

The snowball sampling technique was utilized during the sample selection process to find new participants who met the criteria through referrals from current participants (Fraenkel et al., 2012). Snowball sampling was helpful, especially in reaching out to clients for interviews. Some psychological counselors referred to their clients as study participants.

3.2.1. Participants of the Study

The number of participants should not exceed ten in phenomenological studies (Yıldırım & Şimşek, 2018, p. 71). On the other hand, interpretative phenomenological analysis typically suggests smaller sizes (see Smith et al., 2009). Moreover, Smith (2011) reviewed the research with interpretative phenomenological analysis in psychology and found that there are also promising studies that have high-quality with relatively larger samples, generally ten or more (e.g., Turner et al., 2002; Murray & Rhodes, 2005; French et al., 2005; Reynolds & Lim, 2007; Dickinson et al., 2007, 2008).

Since an individual counseling session consists of two people (counselor and client), the researcher believed that understanding the essence of the participants' online counseling experiences is essential to reaching experiences, views, and suggestions of two sides. The current study's sample was reached by considering the studies that operate interpretative phenomenological analysis and suggested sample sizes, particularly for phenomenological studies. Thus, the sample of the current study included two groups. The study participants were ten psychological counselors and ten clients with at least eight online session experiences via videoconferencing.

Participants in the clients' group came from different statuses, such as students, e-commerce entrepreneurs, marketing workers, research assistants, and clinical psychologists. Seven were female, two were male, and one was non-binary. The minimum number of online sessions a client participant had was 10; the maximum was 70. Clients' demographic information was summarized in Table 3.1.

Table 3.1

Demographic Information of Clients

	Gender	Age	Education or Occupation	Duration of Experiences		Number of Sessions	
				f2f	OC	f2f	OC
C1	Female	24	B.S. student	1 month	5-6 months	4	21
C2	Male	26	M.S. student	21 minutes	2.5 months	3	10-11
C3	Female	24	B.S. student	6 months	7 months	6	25
C4	Female	26	M.S. student	2 years	1 year	100-150	50
C5	Non- binary	24	B.S. student	1 year	3 months	12-13	12
C6	Female	27	Marketing worker	3-4 months	1.5 years	15-20	100
C7	Female	26	Marketing worker	5-6 months	1-1.5 years	10-17	55-70
C8	Male	36	E-merchandise	3.5 years	2 years	55-60	55-60
C9	Female	30	Software merchandise	0	4-5 months	0	18
C10	Female	30	Clinical psychologist	3-4 months	2-2.5 years	12-15	100

Note. C=Client, f2f=face-to-face counseling, OC=online counseling, B.S.=Bachelor of Science, M.S.=Master of Science.

Participants in the psychological counselor group worked in different institutions, such as private counseling offices, university settings, public institutions, and schools. Five were female, four were male, and one was queer. The counselor's average age was 33.9. The minimum number of online sessions a counselor participant had was 40; the maximum was 600. Psychological counselors' demographic information was summarized in Table 3.2.

Table 3.2*Demographic Information of Psychological Counselors*

	Gender	Age	Education	Years of Experiences		Number of Sessions	
				f2f	OC	f2f	OC
PC1	Female	30	M.S.	3	1.5	600	300
PC2	Male	42	Ph.D.	10	2	1500-2000	500-600
PC3	Male	40	M.S.	17	2	5000-5500	600
PC4	Male	42	Ph.D.	21	2	500-600	150-200
PC5	Female	27	M.S.	2	1	200-300	40-50
PC6	Female	26	M.S.	2	1	50-100	120-150
PC7	Female	34	Ph.D.	11	4	370	60-70
PC8	Female	38	Ph.D.	11	4	720-900	250-300
PC9	Male	28	B.S.	2	1.5-2	50-70	70-90
PC10	Queer	26	M.S.	3	2	100-110	145-150

Note. PC=Psychological Counselor, f2f=face-to-face counseling and OC=online counseling. B.S.=Bachelor of Science, M.S.=Master of Science, and Ph.D.= Doctor of Philosophy.

3.2.2. Background of the Participants

3.2.2.1. Client 1

Client 1 is a sociology student. Her previous face-to-face counseling experience was with a psychologist or clinical psychologist; she did not remember the details of the professional's background. She received help for family issues, romantic relationships, and career/vocational choices. She searched the professionals on the internet and found them there. She was not checking the providers' backgrounds to verify. In the online process, Client 1 received online psychological help from a different psychological counselor. She received support from the university facilities where she is a student. Her reason for getting help was anxiety, family, and social issues. She and her psychological counselor utilized Zoom to conduct sessions, and she did not consider checking the psychological counselors' expertise area since the university provided the help. It seems to be trustable professional in that sense.

3.2.2.2. Client 2

Client 2 has received education in different fields and is now a master's student in human resources. Client 2 was unsatisfied and unfortunate with his face-to-face counseling sessions. When he received face-to-face sessions, he was a nurse at a hospital and received help from the hospital's psychiatrist. Because he was working in the same place where his psychiatrist offered help, he already knew the professional. So, there is no need to verify and understand the professional's background. He got counseling for vocational and career choices at that time. He received help from a different psychological counselor known by their friends in online counseling. He reached the psychological counselor through social media and checked the provider's background in detail as he also comes from the helping profession. He received help with anxiety and anger management in online counseling. He and his psychological counselor used Zoom to conduct sessions.

3.3.2.3. Client 3

Client 3 was from the sociology field. She also received several face-to-face help from different psychiatrists during her face-to-face helping process. She went to the national and private hospitals to get help and did not check the background and proficiencies of the providers. She suffered from stress, panic attack, and depression during that period. The counseling process was also started for anxiety and fear of depression relapse. She was searching for a professional on the internet and saw a social project that aims to help individuals who cannot receive help on Instagram. She received service from a psychological counselor and held meetings by using Zoom.

3.3.2.4. Client 4

Client 4 was a research assistant in the psychology field. She was aware of choosing and checking the professionals' educational backgrounds. She received face-to-face and online counseling services from the same professional. They switched to online sessions because of the pandemic. She reached her clinical psychologist via her lecturers' recommendations. They made the meetings by using Skype. The reason for getting help was trauma, family, and issues with social anxiety in both formats.

3.3.2.5. *Client 5*

Client 5 described herself as a non-binary individual. She is a sociology student and is working with HIV individuals. She received help from different psychologists during the whole helping process. Initially, her family took her to therapy during the face-to-face counseling process. She trusted the family about the practitioner. She received help with relationships, family conflicts, stress, and career issues. In online counseling, she reached her therapist via a web network in the psychology field, checked the professional's CV, and sent it to one of her friends to ask about the expert. During that process, she applied for help for family conflicts, sexual orientation, break up and career adaptation issues. She and the psychologist held meetings in Zoom.

3.3.2.6. *Client 6*

Client 6 was working at a business company, and she was a merchandiser there. Topics she applied for in face-to-face help were family, trauma, and relationship issues. She was receiving therapy from a psychologist at the hospital at that time. In online counseling, she reached another psychologist via the suggestion of the previous helper. This time her topics were academic issues and family issues. She used the web to look for their educational backgrounds to choose each provider.

3.3.2.7. *Client 7*

Client 7 was a psychology graduate student doing her master's degree in cognitive sciences in Germany. Her face-to-face experience was from university facilities. She checked the expert's background at that time but was unsure whether the professional was a psychologist or a clinical psychologist. At that time, she was suffering from depression and anxiety. In the online process, she asked for help on relationship issues, stress, anxiety, depression, and adaptation to life in Germany. She received support with a specific app that was developed and named Hiwell. Sometimes they switched to Zoom to hold meetings because of some problems in the app. The professional was a clinical psychologist appointed by the program by client issues. She found this app on the internet while searching in Google Play.

3.3.2.8. Client 8

Client 8 was an e-commerce entrepreneur. He also received help from the same professional in face-to-face and online helping processes. He found his psychiatrist with the recommendation of his wife, who is a psychologist. During the face-to-face helping process, he suffered from work stress, sleeping issues, relationship issues, anxiety, and alcohol use. Their meetings were held on Zoom and FaceTime. The components of the sessions were the stress and anxiety he was experiencing.

3.3.2.9. Client 9

Client 9 is a software merchandiser. She was different from all the participants as she had never received face-to-face help. She received support from a psychological counselor. She mentioned that the reason for receiving help was being traumatized after the divorce. She reached the psychological counselor by the reference of a friend that works in the same setting as the psychological counselor. She did not apply any further checks for psychological counselors' educational backgrounds. She used Skype for the sessions.

3.3.2.10. Client 10

Client 10 was a clinical psychologist, and she also received help from a clinical psychologist. She also experienced face-to-face and online helping processes with the same expert. They started with the topics of relationships, family, and academic issues. She reached the provider with the reference of a friend. Also, she asked directly about the expert's specialties and searched the internet about the professional's educational background.

3.3.2.11. Psychological Counselor 1

Psychological counselor 1 was a psychological counselor who worked in university settings. She uses Zoom during online counseling sessions, although she believes it is not a secure app. She did not receive any online counseling education before conducting sessions. She utilizes Solution-focused Therapy and Cognitive Behavioral Therapy approaches in online counseling and face-to-face counseling sessions.

3.3.2.12. *Psychological Counselor 2*

Psychological counselor 2 was using skype during online sessions. His counseling orientations were mainly mindfulness-based approaches with Acceptance and Commitment Therapy and Cognitive Behavioral Therapy. He also did not receive any education about the online counseling process.

3.3.2.13. *Psychological Counselor 3*

Psychological counselor 3 adopted Rogerian, Acceptance and Commitment Therapy, and Cognitive Behavioral Therapy approach in his practices. He admitted that the orientation techniques are less effective in emotions in online counseling and did not receive any training. He uses Zoom and FaceTime for his sessions. He is also the psychological counselor of Client 1.

3.3.2.14. *Psychological Counselor 4*

Psychological counselor 4 described himself as a professional that uses an eclectic approach in terms of therapeutic orientation. His eclectic approach includes Humanistic, Cognitive Behavioral Therapy, Gestalt, and Psychodrama tools. He thought that the action-based interventions in online counseling were hard to work. He mentioned that he also learned about online counseling without receiving training.

3.3.2.15. *Psychological Counselor 5*

Psychological counselor 5 utilizes Emotion-Focused Therapy and Cognitive Behavioral approaches during her sessions. She mentioned that CBT interventions work more than the ones she used in Emotion-Focused Therapy to make manageable sessions in terms of emotional intensity during the sessions. She did not receive any online counseling education. Formerly, she thought Google Meet was a more secure application because Google previously supported it. However, then, she started to use Zoom.

3.3.2.16. *Psychological Counselor 6*

Psychological counselor 6 is a family counselor and an individual counselor. The therapeutic orientation that she adopts was described mainly as an eclectic orientation.

She specifically utilizes Systemic Family Therapy and Cognitive Behavioral approaches in face-to-face and online counseling sessions. She stated that her lecturer touched upon online counseling in one of her master's classes but did not provide comprehensive information. She uses Skype for meetings with her clients. She is the psychological counselor of client 9.

3.3.2.17. *Psychological Counselor 7*

Psychological counselor 7 utilizes Cognitive Behavioral Approaches, Solution-Focused Brief Therapy, and Acceptance and Commitment Therapy approaches in her theoretical orientations. She was knowledgeable about online counseling as she participated in online counseling conferences. She started online sessions by using Skype and then continued with Zoom for her online sessions.

3.3.2.18. *Psychological Counselor 8*

Psychological counselor 8 utilizes Family Constellation Therapy and Eye-Movement Desensitization and Reprocessing and Psychodynamic tools in her counseling. She did not receive any education about online counseling. She allows clients to choose which platform they are comfortable with while getting counseling sessions. Respectively, she uses Zoom, WhatsApp, and Skype.

3.3.2.19. *Psychological Counselor 9*

Psychological counselor 9 also utilized systemic family therapy and Rogerian approaches for his counseling sessions. He also uses tools from the psychodynamic approach, Positive Psychotherapy, and Emotion-Focused Therapy. He participated in training at the beginning of the pandemic, and this training included the ethical considerations of online counseling, its drawbacks, and how to cope with them. He utilizes skype as he thinks the quality of the internet works better. If his clients do not use Skype, he uses Zoom. In some conditions, he also provides sessions with WhatsApp.

3.3.2.20. *Psychological Counselor 10*

Psychological counselor 10 introduced himself as a queer individual that provided help to people from different cultural backgrounds. He utilizes Gestalt, Cognitive Behavioral, and Existentialist approaches. He revealed that online counseling was mentioned negatively during his undergraduate years. His instructor said online counseling could not be a type of counseling. He also provides sessions with Zoom.

3.3. Data Collection Instruments

In this study, data were collected through two semi-structured interview forms. These forms are parallel. The researchers developed Online Individual Psychological Counseling Interview Form for Clients (see Appendix D). Online Individual Psychological Counseling Interview Form for Psychological Counselors were also developed (see Appendix E). These forms were designed to collect data about participants' experiences, views, and suggestions concerning online counseling.

The interview forms were developed in three stages. In the first stage, relevant literature was reviewed, and questions were written and discussed with the supervisor. In the second stage, two expert opinions for the forms of psychological counselors and two for clients were received. These professionals had Ph.D. degrees in psychological counseling and had a lot of online counseling experience. During the expert reviews, they were asked about the interview questions' clarity, comprehensiveness, structure, and leading features. After the directions and feedback that were received from the experts, the semi-structured interview questions were organized again. In the third stage, cognitive interviews were employed with two psychological counselors with at least one year of online counseling experience and two clients who received at least eight online counseling sessions via videoconferencing. Participants of the cognitive interviews were asked how they responded to the questions, whether the questions represented the topic researcher wanted to ask and get, and whether the questions were straightforward in understanding and giving specific answers. After these cognitive interviews, a few changes were also employed, and the final instrument was prepared for psychological counselors and clients.

The forms have two parts. The first part of these forms contains demographic information (age, sex, education, profession, and years of experience). The second part includes questions about experiences, views, and suggestions concerning online counseling. This section includes questions about the comparison between face-to-face and online counseling, therapeutic process, preferences of online counseling, advantages and disadvantages, social justice, technology use and competence, ethics, skills, and suggestions questions. Few changes were administered between the forms. The main difference between the psychological counselor form and the client form is that the counselor form involves questions about the use of therapeutic techniques and skills (See Appendix D). Also, the client form contains questions about reaching, checking the professionals, and the content of the help (See Appendix E).

3.4. Data Collection Procedure

Data collection procedure starts with data collection procedures started with receiving permission regarding the appropriateness of the study from the Middle East Technical University, Human Research Ethics Committee. The protocol number of the current study that the committee accepted was 189-ODTU-2021 (See Appendix A).

The participants were reached through e-mail or phone by the interviewer. The interviewer introduced the announcement statement in the e-mail. The participants in this study were generally contacted by phone first. Only a few participants preferred to learn about the research through WhatsApp. So, these participants were informed through this communication platform. The appropriate time for both interviewer and interviewee was arranged usually days before the interview. After the time was organized, the interviewer informed clients that the informed consent would be sent via Google Forms, the information given would only use for research purposes, and the personal and private information would be kept. The researcher sent the informed consent half or one hour before the interview. This process was applied in the near time of the interview. The reason is that participants could read, understand, and approve the material if everything was fine. The informed consent form included the purpose of the study, how the interviewee could help, information

about participating in the current research, and contact information regarding researchers. The permission for audio recordings was collected through this form.

After participants' permission, data were collected through semi-structured interviews with ten psychological counselors and ten clients between October and December 2021 via the Zoom program. Thus, the recordings were performed through Zoom. Zoom records data as two recordings which are video and audio recordings. The researcher informed participants that the video recording would be deleted after the interview, as audio recordings were adequate for the research. The shortest interview was 40 minutes, whereas the longest was one and forty-seven minutes. The researcher conducted all Interviews via headphones at home in a private environment. So, any risks of being heard by the people were eliminated. The other people who lived with the researcher at home (mother, grandmother, and aunt) were also well-informed about the cruciality of data privacy. They stayed in separate rooms with closed doors during each interview. After three months, the data collection procedure was completed by the first day of January 2022.

3.5. Data Analysis

Participants of the study were coded in abbreviations. Clients were coded with the letter "C." Psychological counselors were named "PC." The data were analyzed by utilizing interpretative phenomenological analysis. Phenomenological research distinguishes itself from the phenomenological approach. It deals with describing the phenomenon by asking "what" and "how" questions (Patton, 2002). In contrast, the researcher adopts hermeneutics for making the reflection of the phenomenological experience (van, Manen, 2016). This process aims to make attentive interpretations to describe, explain and analyze the experiences (van Manen, 2016). Therefore, the method of phenomenology turns into hermeneutics if the process is interpretative and initially follows the way of explaining scripts explicitly rather than straightly following the lived experiences (van Manen, 2016).

The interpretative phenomenological analysis is a phenomenological approach because it investigates the unique experiences of individuals. It also utilizes hermeneutics since it goes beyond the idea that understanding a personal experience

needs to include an interpretive stage for the researcher and the participant (Smith et al., 2009). The interpretative phenomenological analysis suggests that it is impossible to analyze by only first-person description (Larkin et al., 2006). One must take part in constructing the researcher and the participant (Larkin et al., 2006). Thus, to understand a phenomenon, a study with interpretative phenomenological analysis needs to be a hermeneutic process (Smith et al., 2009).

The interpretative phenomenological analysis also suggests a third area to administer in its approach. It adopts the idiographic approach, which offers case-by-case analysis rather than nomothetic or group level (Pietkiewicz & Smith, 2014). In other words, interpretative phenomenological analysis deals with exploring an individual's single and unique world by employing in-depth analysis. In this process, core aspects of the idiographic approach are separately examining each case and then generalizing across subjects (Pietkiewicz & Smith, 2014).

In this study, the researcher wanted to choose interpretative phenomenological analysis. It has become a widely and frequently used methodology shortly after its invention as one of the qualitative inquiries developed in recent years in psychology research (Smith, 2011). The researcher engages with the cores of psychological literature in interpretative phenomenological analysis (Langdridge, 2007). The scientist focuses on describing a phenomenon but also gives a more excellent account for conceptually interpreting the phenomenon (Langdridge, 2007). This analysis tends to be widely used by researchers for topics regarding psychological interventions recently. For example, in his review, Smith (2011) identified published papers that used this analysis between 1996 and 2008. He found that studies with interpretative phenomenological analysis increased over the years (Smith, 2011). These studies were widely studied in health psychology (Smith, 2011). They are primarily on psychology-related topics (e.g., psychological distress, clients' therapy experience, therapists' experiences, occupational psychology). One of the most frequently used key terms in these studies was clients' therapy experiences. Terms of therapists' experience also appeared moderately (Smith, 2011). The researcher in the current study wanted to study the lived experiences of online psychological counseling from the perspectives of clients and psychological counselors. The analysis was thought to fit appropriately

with the current research's purpose. The study areas of the interpretative phenomenological analysis literature could be well-suited.

As mentioned before, the data collection was completed during the first days of January 2022, and the transcription process has completed by February 2022. Voice records of the interviews were listened to throughout time and transcribed by the researcher carefully. Interpretative phenomenological analysis has six stages through the data analysis process: (1) Reading repetitively, (2) taking initial notes, (3) constructing emergent themes, (4) examining relations among emergent themes, (5) shifting to the following case, (6) searching for patterns across the cases (Smith et al., 2009).

In the first step, the researcher started by familiarizing himself with the data and getting used to them. In this stage, he read the material several times, took some exploratory notes to the right column, and went back for each case separately, as suggested by the interpretative phenomenological analysis. In this analysis, operating three types of exploratory commenting strategies were offered: (1) descriptive comments, (2) linguistic comments, and (3) conceptual comments. Descriptive comments focus on describing the content of what participants have said, linguistic comments include how specific language was employed (e.g., metaphors), and conceptual comments consist of a more upper level. In the latter, the researchers form their pre-understandings via initial comments (Smith et al., 2009). This process might be more interrogative and interpretative levels of analysis. (Smith et al., 2009).

After spending time with the cases separately, the researcher started constructing a note-taking system while reading transcripts individually in MAXQDA22 (VERBI Software, 2021) to make comments as a second step. In the code system of MAXQDA22 (VERBI Software, 2021), the researcher installed three coding sections and then used the paraphrase section to take line-by-line initial notes about the transcribed material. The researcher was a novice in interpretative phenomenological analysis and qualitative study. He frequently utilized descriptive and linguistic comments compared to conceptual comments. He was cautious and hesitant to use so many conceptual comments during the analysis as he may end up with biases rather

than the findings. After the initial notes, emergent themes were constructed within the case. The researcher then investigated connections across emergent themes and put together these themes emphasizing similar contexts.

After all these processes, the researcher continued with the following case and applied steps 1 to 4 to each case separately. In the last step, patterns occurring across cases were investigated separately for each study group: psychological counselors and clients. The recurrent themes of each study group were introduced separately. This coding process was suggested for relatively larger sample sizes in interpretative phenomenological analysis (Smith et al., 2009).

3.6. Trustworthiness of the Research

Lincoln and Guba (1985) suggest four areas for establishing trustworthiness in a qualitative study; (1) credibility, which stands for internal validity, (2) transferability, which substitutes for external validity, (3) dependability, which corresponds to internal reliability and (4) confirmability which represents external reliability.

Several techniques were used in this study to enhance the trustworthiness of the research and avoid possible biases. As the researcher decided to study the topic of online counseling, he aimed to spend sufficient time preparing himself to organize accurate items, find appropriate participants and then analyze the data. Designing a data collection instrument is vital for reaching complete, reliable, valid, sensitive, and unbiased data (Collins, 2003). As mentioned earlier in the study, the initial construction of the interview questions with the literature review was established as a first step. The researcher received two expert views for psychological counselor forms and two for clients' documents separately. In line with suggestions and contributions from the experts, interview questions were revised to introduce the participants to cognitive interviews before reaching the study participants. Two cognitive interviews for each psychological counselor form and client form were organized to increase the quality of the instruments and check whether the interview questions were clear, understandable, and comprehensive sufficiently to receive reliable and valid answers from participants.

This study examined clients and psychological counselors engaging in the counseling process, their tastes, and views of online counseling regarding similar issues they experienced. Since two different groups were interviewed on the same phenomena, triangulation of data sources was utilized to increase the research's credibility. According to Erlandson et al. (1993), purposive sampling is one way to increase research transferability. This research aims to reach a particular target group, having at least eight counseling sessions in online video conferencing, mental health professionals from counseling educational backgrounds, and individuals seeking help from online mental health providers.

To have good research dependability, the researcher provided preliminary findings and comments to an external audit without revealing the participants' personal information and held meetings with him to discuss the codes. The external auditor was a research assistant in the psychological counseling field at a Turkish university and has the experience and published research papers in qualitative research. Within two weeks researcher received guides and recommendations from the external audit on coded data. Among 20 participants, five psychological counselors' and five clients' codes were reviewed and designed with the suggestions of the external audit. Other participants' codes were also checked with the help of construction, and components of the audit reports were provided for half of the participants. All findings were not only articulated by considering the feedback from the audit, but also the researcher's interpretations and descriptions were considered after discussing with the audit. Therefore, dependability was tried to be achieved by utilizing the external audit. The triangulation of sources and the reflexivity increase the research confirmability (Lincoln & Guba, 1985). In addition to these two, the external audit helped improve the current study's confirmability (Lincoln & Guba, 1985).

The interpretative phenomenological analysis also highly emphasizes the importance of Yardley's (2000) criteria (Smith et al., 2009). These criteria were stated for performing proper and satisfactory analysis in the research (Smith et al., 2009). It underlines sensitivity to context, which is ensured by engaging and being sensitive to the data in this study. Additionally, it adopts commitment and rigor that was tried to be achieved by idiographic engagement of the researcher with the participants

separately and by showing different voices through the writing process of the study. Also, it emphasizes transparency and coherence that was tried to be accomplished by describing the research process in detail. Lastly, it highlights impact and importance, which is tried to be performed by introducing some unique parts of the study's results. The interpretative phenomenological analysis also highly underlines "bracketing" (Smith et al., 2009). Bracketing aims to decrease biases and previous assumptions and conceptions during the research (Smith et al., 2009). It also helps the researcher have a much deeper understanding and increases the researcher's reflexivity (Tufford & Newman, 2012). Tufford and Newman (2012) outline three ways of bracketing (epoché) strategies in research: (1) writing memos during data collection and analysis, (2) bracketing interviews, and (3) reflexive journals to have rigorous qualitative research. In addition to Yardley's (2000) criteria and other stages in the analysis, the researcher utilized the first strategy, which is writing memos, as a bracketing method to reduce his presuppositions about the data during the analysis process.

3.6.1. Researcher Reflexivity

The researcher has a personal interest in transition stages in people's lives. The question that he would like to ask himself from time to time is, "how a possible expected phenomena and experience (e.g., transition to work, graduation, having a child, divorce) is considered as crucial as the ones that were unexpected (e.g., traumas)?" That is the researcher's primary reason for willing to investigate the transition process of face-to-face counseling work to online counseling.

After the global pandemic alarmed worldwide, the sudden shift to online practices changed people's life dramatically in education and health services. The researcher and his classmates also experienced this transition by taking classes remotely. One of the classes that researcher needed to provide was field practice in group counseling, and the researcher did it with all obstacles and opportunities in the online environment. Transitioning from face-to-face to online methods was perceived as complicated by the researcher during that time.

After the summer holiday, the researcher had field practice courses in which he had the chance to help an individual via online counseling. The experience was challenging

for him because he was anxious about the conduct of online support. Firstly, the ethical procedures were completely unclear, with a question mark in his head about how the initial sessions will be done in an online environment (e.g., informed consent). As the sessions continued, the researcher experienced the difficulties of online supervision and using some techniques in the online environment. Communication in the online environment was interestingly tiring and difficult with technical instruments, understanding non-verbal behaviors, and adapting what is known in face-to-face counseling to the online environment. As a result, he felt less competent, skillful, and knowledgeable about the online counseling phenomenon compared to the face-to-face one. That is why he aimed to understand the lived experiences of the professionals and clients with the backgrounds of both parties so that it can help the development of online counseling.

3.7. Limitation of the Research

The study is not without its limitations. The first limitation is related to sample size. Smith et al. (2009) suggest few sample sizes for data analysis. The interpretative phenomenological analysis is very detailed within the line-by-line analysis and steps before constructing emergent themes (Smith et al. 2009). In this study, the researcher utilized a relatively large sample size (ten psychological counselors and ten clients). Smith and colleagues (2009) recommend these sizes for more experienced researchers or specific large projects. Because the sample was relatively large in the current study, the researcher may have missed important points during the analysis, which may have limited the study's findings.

The second limitation of the study was the researchers' less use of conceptual comments compared to linguistic and descriptive comments. The interpretative feature might be less evident in some parts of the study. The third limitation of the study was related to the data collection instrument. The researcher took many people's (e.g., expert views and cognitive interviews) opinions to prepare the interview form; this may lead to more structured questions, although the interviews are held within semi-structured protocols.

Apart from these, the other limitation could be related to the participants. In this study, participants were approached through criterion and snowball sampling methods. Clients were mainly reached by snowball sampling with the help of clients and psychological counselors. Psychological counselors whose educational background was approved before were mainly approached through criterion sampling. While using snowball sampling, some clients were referred to the researcher by the other clients. So, it is possible that these people may not experience the investigated phenomenon but claim about it. Although the interview process and the experiences conveyed by the clients do not leave such an impression on the researcher, it is worth mentioning this possibility.

Additionally, some clients were from helping professions (e.g., clinical psychologists). A person who is both the provider and the receiver of a helping profession might have a biased opinion from the one-sided role. Although they could try to answer questions as a client, they might not separate themselves from their profession. In our cases, C10 may have this difficulty as she is also a clinical psychologist who is currently providing sessions to people. So, there might be helper-biased answers in such cases.

Lastly, related to the cases in the study, the client participants were mainly female. The researcher tried gender variation in the sampling process to avoid gender bias during the research process. However, the number of male participants who participated was still lacking compared to females. Besides, some individuals described themselves different than the traditional sex roles. This issue may affect the responses in the whole sample. However, the idiographic approach is the particular individual experience essential to the interpretative phenomenological analysis. So, it could also be a strength of the study in terms of having varying responses.

CHAPTER 4

RESULTS

This chapter introduces the results of client and psychological counselor participants separately. Firstly, clients' results will be presented in the order of superordinate and subordinate themes derived from recurrent themes in the data set of clients. Secondly, the following section will deliver psychological counselors' results that the researcher separately applied the same procedures. Lastly, the two groups' results will be summarized at the end of the chapter.

4.1. Clients' Results

Clients' results consist of five superordinate themes: Ethical considerations that clients are concerned about, experiences with the online therapeutic process, conveniences that encourage clients to receive online counseling, struggles that discourage clients to receive online counseling, and clients' aspirations and suggestions for improving online counseling. Table 4.1 summarizes both superordinate and subordinate themes.

Table 4.1

Clients' Superordinate and Subordinate Themes

Superordinate themes	Subordinate themes	<i>f</i>
Ethical considerations that clients are concerned about	Clients' privacy problems originating from the environment	7
	Confidentiality concerns	7
	Confusion about boundaries	4
Experiences with the online therapeutic process	Role of the external factors on the therapeutic presence	10
	Development of the therapeutic relationship in online counseling	7

Table 4.1 (Cont'd)*Clients' Superordinate and Subordinate Themes*

Superordinate themes	Subordinate themes	<i>f</i>
Conveniences that encourage clients to receive online counseling	Flexible scheduling	10
	Time-saving	8
	Exceeding spatial limitations	6
	Economically affordable costs	5
	Safety and comfortableness in own place	5
	Continuity of the sessions under challenging	3
Struggles that discourage clients from receiving online counseling	Management of technical problems	8
	Lack of readiness for online counseling	5
	Inequality in accessing/ using technology	5
	Inability to observe nonverbal behaviors	4
	Hesitancy to talk about private topics in online counseling	4
	Risks of manipulation and misuse	4
Clients' aspirations and suggestions for improving online counseling	Format preference for interaction and flexibility	7
	Arranging technical equipment and environment	6
	Suggestions for developing online platforms	4
	Need for resolving insecurity	4
	Clear procedures and standardization	4
	Checking online psychological counselors' actions	4
	Informing clients about technical difficulties	3

4.1.1. Ethical Considerations that Clients are Concerned about

This superordinate theme involves clients' privacy problems originating from the environment, confidentiality concerns, and confusion about boundaries. This theme revealed the necessity of understanding the occurrence and reasons for ethical problems by considering clients' perspectives.

4.1.1.1. Clients' Privacy Problems Originating From the Environment

Out of ten clients, three of them did not have privacy concerns during their online counseling experiences. Two participants could maintain a private environment because they live alone. One participant received online counseling from a university counseling center that has already provided an isolated private place. Although these three clients did not have privacy concerns, they mentioned that privacy might be challenging for those who do not live alone or do not have a private space.

The remaining seven clients talked about their privacy concerns during online counseling sessions. They have difficulties creating a private space in their home environment, including family members/home mates/pets. They need an area that is free from distractions and can talk freely and comfortably about their psychological issues. Clients admitted that they tried to prepare and control the environment where they received online counseling.

Extract from C3, C6, and C8 illustrates clients' challenges in maintaining a private environment. C8, who experienced face-to-face counseling before, admitted how he was frustrated with finding a place in the office, home, and outside to make a private environment to conduct sessions:

Sometimes, I had to do the session in my car. My car was in the parking area. I drove near the sea to do sessions a few times. I had pulled over to the seaside a few times, but beggars were knocking on the car doors in Izmir. My wife is at home; others are working in the office. So, what are you going to do when it is raining? You go to the car, what will you do if there is no car? I know people that do this while walking outside.

C6 stated:

I could not adjust to the environment during the online meetings very well. Generally, there was someone at home. I was watching my door and thinking that they could hear our conversation. Sometimes I needed to talk about something related to them (family members) in the sessions. I censored myself a little so that some problems would not arise.

C3 also mentioned the issues with creating a private environment:

Sometimes, the atmosphere was not sufficient. I know someone is outside of my room. Let us say there is a guest at home [...], my roommate's guest. That is why I could not feel completely comfortable. I can cry while speaking with my psychological counselor, but I do not want my roommate to see me crying when I leave my room.

Quotations from the three participants above reveal their condition while receiving online videoconferencing sessions. Participants suffered from an uncomfortable and inappropriate environment, generally a home condition where they could not be alone. They are doubtful about speaking openly with their mental health professionals.

4.1.1.2. Confidentiality Concerns

Participants mentioned confidentiality concerns in parallel with privacy concerns originating from environmental difficulties. Most clients emphasized that when they had a personal or private topic to discuss with a psychological counselor, they could not discuss this issue comfortably because they thought the conversation could not be kept entirely confidential. The reason presented by the clients is mainly due to fear of being heard (7). The concerns with the record leaking (5) were less. Some clients mentioned that they had to censor what they would say to their psychological counselors, which was difficult for them because of the people in the environment. For example, C10 stated that:

For example, I was stuck on the headphone issue! For instance, is my therapist alone in the room when she did not use it? Does my voice go somewhere? So, I think these issues should be given much attention [...] or whether the door is closed. I do not know; I only see this part (the view from the camera) of the room. How do I know what is going on, on the other side?

Five clients (C2, C4, C5, C9, and C10) have confidentiality concerns because of the recordings on the online platform and information leaking risks during online counseling. For instance, C2 illustrated his experience at home:

For example, audio recording may fall into the wrong hands. Because I am from a similar profession, my psychological counselor and I know many people in common. It may have been in the hands of one of them. This concern is the simplest example that sticks to my mind and bothers me.

4.1.1.3. Confusion about Boundaries

Apart from the confidentiality and privacy concerns, some clients seemed confused about their psychological counselors' visibility on social media after they directly contacted their psychological counselors. Four clients (C3, C4, C7, and C10) reported that unintentional self-disclosure and direct contact with the therapist might lead to problems with boundary settings. C3 illustrates how she had difficulties in her psychological counselor's unintentional self-disclosure and the confusion that she felt:

I do not know exactly, but I do not know if it happens when we are face-to-face. I had my psychological counselor's phone number, and because I have

the number, some things appear on social media, or mine also appears to my counselor. For example, when your number is registered to your phone, your Instagram directly appears in my suggestion list. Also, your Facebook appears in front of me. I do not know; maybe mine also seems for the psychological counselor. So, sometimes I think there should be such a limit [...] I never preferred to follow my psychological counselor because, for me, our relationship should always stay in the counseling session. However, it may not be the same for others, so they may follow you and suddenly enter your life. I think this could happen.

Although clients stated concern regarding boundaries in this study, they were hesitant to exceed the boundary limits and disclose beyond the counseling process. During interviews, clients mentioned that setting boundaries might be challenging for psychological counselors in online counseling.

4.1.2. Experiences with Online Therapeutic Process

This superordinate theme covers how clients experience therapeutic relationships during online counseling. There are two subordinate themes: The role of the external factors on the therapeutic presence and the development of the therapeutic relationship in online counseling.

4.1.2.1. Role of External Factors on Therapeutic Presence

All of the clients mentioned that they experienced the therapeutic presence of their psychological counselors except for physical presence while receiving online counseling. However, they stated that therapeutic presence was less in online counseling than in face-to-face counseling because there were more external distractors such as notifications, seeing themselves on the screen, doorbells, and pets. They censored their conversation because of fear of being heard at home and technological issues. For instance, C1 and C4 pointed out attentional problems regarding therapeutic presence. C1 stated that:

I knew my psychological counselor was listening to me, but I was very distracted. What is the reason for it? I see myself on the screen!

Also, C4 shared her experiences:

I have a particular example in my mind. Once, the doorbell insistently rang when I was in an online session. I walked to the door with the phone in my hand in anger. The cargo arrived [...] Someone can knock on the door. So, I

think it is frustrating because I want to focus on the session, but the doorbell rings. It was something that made me angry.

C2, C3, C7, C9, and C10 believed that the presence of environmental distractors affects the sessions. However, the fundamental thing for having a therapeutic presence is being listened to and understood by the psychological counselor. For instance, C10 illustrated that:

When you are face-to-face, you may say, "oh, how good it smells." All of this involves the presence process. However, the most significant presence I need as a client is being seen in terms of myself and my feelings, and I do not think any circumstances can change that. So, for example, in a challenging moment, I could call my therapist on the phone, and she was still there. If you have a good relationship on-screen or face-to-face, it does not matter. Even if my psychological counselor texts me on the phone, s/he is my psychological counselor.

In summary, clients are highly distracted by external objects, technology, pets, and other things that voluntarily or involuntarily participate in online counseling sessions. These factors affected their perceptions of psychological counselors' therapeutic presence. Half of the participants explained that the well-established therapeutic relationship determines the therapeutic presence though many difficulties were encountered with external components.

4.1.2.2. Development of the Therapeutic Relationship in Online Counseling

One client did not have face-to-face counseling experiences before and was satisfied with the therapeutic relationship in online counseling (C9). Six clients (C1, C2, C3, C4, C7, and C10) were pleased with the therapeutic relationship they established in online sessions. Three client participants (C5, C6, and C8) explained that at least one of the core elements of their relationship was lack (e.g., intimacy, bond, and closeness). Thus, seven clients were satisfied with the relationship they built in online counseling. Still, they added that they would like to establish a therapeutic relationship with the same psychological counselors they have in face-to-face counseling. They stated that face-to-face counseling leads to a more effective therapeutic process. Extract from C7 illustrated how the relationship determines satisfaction rather than the format:

I found online counseling much more efficient and effective [...] I am unsure whether it is due to the difference between online counseling and face-to-face. I think it is more about the therapeutic relationship I have established with my psychologist rather than this comparison. I could not feel understood or express my feelings and opinions in face-to-face counseling. I was uncomfortable in the therapy room (talking about face-to-face sessions); it was not productive.

Similarly, C9 illustrated that their trusting relationship is not affected negatively because of the online environment:

It did not make me feel like our relationship is absent just because it is in the online environment [...] I did not feel anything like that [...] When I get into private topics, I do not want anyone to hear about them. I have never experienced such fear: "Is anyone around my psychological counselor?" "Is anyone listening to us?" I did not even question. I did not feel anything like that because she gave me that trust.

Three client participants (C5, C6, and C8) explained that at least one of the core elements of their relationship (e.g., intimacy, bond, and closeness) is less in online counseling when compared to face-to-face sessions. This issue resulted in a lack of effectiveness. For example, an extract from C6 illustrates the experience with *intimacy* in online counseling:

I felt that there was more personal intimacy in face-to-face counseling. For example, I would typically say what I will do today in face-to-face counseling. When we met in face-to-face sessions, I could tell my psychologist: "today I am going to go here and do this" [...]. There were different dialogues, maybe because we live in the same city. That is why online counseling seemed a little colder to me. I felt like we had very cold communication, but I do not know whether it was because of online or not.

Similarly, although C5 felt that she could be able to establish a good therapeutic relationship with the psychological counselor, she had a negative experience regarding setting *bonds* because of being in the online environment:

I think face-to-face counseling is more effective in going to the session room, the way my psychological counselor controls my facial expressions [...]. Even from my breathing, the psychological counselor could understand the stress and tension much better. That is why psychological counselors could ask questions that could pave the way for the issues, and we could talk about more

profound things in face-to-face counseling. However, in online counseling [...]. For example, something like "what should we talk about today?" happens. This issue is because we cannot establish that bond in the online environment. That is why I said face-to-face counseling is good or better based on this reason.

C8 admitted that he had experienced both online and face-to-face counseling from the same professional, and there was an absence of *physical closeness* in his online experience for him:

I think the main point is that we are human. Human contact [...] No matter what, we like to see and feel more. I believe that it is the same for all people as human beings. So, do not look at the new generations. You know, young people aged 15-16 may not understand this very well, but those born in the 80s, early 90s, and 90s generation can understand what I say. Contact and seeing each other [...], when you visit a friend from a distance on the street, you immediately smile, so I think the face-to-face conversation is very different. Whatever it is, it is very different.

Among ten participants, three (C4, C8, and C10) also mentioned that they would have more challenging experiences in building a relationship if they did not begin sessions face-to-face. They switched to online counseling after face-to-face counseling. For instance, C4 illustrates how it was easy for her to receive online counseling because the professional in face-to-face counseling was the same person:

Not having the comfort of the counseling room would have slowed my establishment process with the psychological counselor. I think it would slow my adaptation. If I had started online directly, I believe I could not get used to the process faster, and maybe that person would be slower. You know, seeing that person in front of you is different. The psychological counselor is more like a living creature; you can see that the psychological counselor is human in face-to-face counseling. The psychological counselor does not consist of just an image in one or two dimensions. When I look at the process from my point of view, it was beneficial for me to establish that bond in face-to-face counseling.

To sum up, most of the clients were satisfied with the therapeutic relationship that was established in the online environment. Some clients had missing parts in the therapeutic relationship related to bonds, intimacy, and physical closeness (C5, C6, and C8). C1, C2, C3, C4, C7, C9, and C10 have positive experiences during online counseling. However, they mentioned that this is not because of online or face-to-face

counseling but because the therapeutic relationship determines the effectiveness of help. The theme's results show that the therapeutic relationship was established well in online counseling for most clients. All clients have a will to see their psychological counselors in face-to-face sessions since they believe that face-to-face interaction might be better than the relationship in online counseling.

4.1.3. Conveniences that Encourage Clients to Receive Online Counseling

Most of the clients have positive views and experiences regarding online counseling. Participants mentioned that online counseling has various advantages: Flexible scheduling, time-saving, exceeding spatial limitations, economically affordable costs, safety and comfortableness in their own place, and continuity of the sessions under challenging periods.

4.1.3.1. Flexible Scheduling

All clients were satisfied with the flexible scheduling of the sessions. In online counseling, clients have more opportunities to schedule their sessions quickly than in face-to-face counseling. Flexible scheduling contributes to the counseling sessions' continuity. Extract from C6 illustrates the easiness of scheduling sessions in her experiences:

It (talking about online counseling) becomes much more flexible. My psychologist was not that much busy, I guess. However, we still had a fixed day for our session. We meet on Wednesdays. If a problem arose, if something happened, we could change the day [...] however, if we were meeting face-to-face [...]. I would say there were also a few psychologists, and because of the density of the room, I think sessions might be overlapped. That is why I say there was a room problem, so online counseling was more flexible for me.

C8 also revealed that it is an opportunity for both clients and psychological counselors:

I do my own business but finding an appointment with people like you or others who work in the private or public sector is more complicated. The psychological counselor needs some extra time to arrange the appointment. Online counseling is also easier for psychologists, psychiatrists, and therapists to arrange meetings.

Thanks to scheduling sessions quickly, clients thought online counseling was more convenient for them to receive help and continue the process in online counseling. Clients also mentioned that flexible scheduling is an opportunity for psychological counselors because finding a suitable time for attending sessions is a complex process.

4.1.3.2. Time-Saving

Eight participants underlined that online counseling allowed them to save time because of the difficulties, such as city traffic. Participants seemed thankful for not spending time on the road to visit the place of the professionals. Eight out of three highlighted that it is also an opportunity for psychological counselors. For instance, C9 expressed her thoughts on the time advantage of online counseling:

The most crucial factor is time. It is accessible from anywhere. So, there is no need to go to a different place. Time is lost until you go somewhere. That is why I would say that online counseling saves time.

C3 also stated that she had difficulties reaching help in big cities with transportation:

I think it is also a problem in big cities. I live in Ankara, and I come from a small town. I see the difference between Ankara and Istanbul from others. Online counseling would be helpful if you went a long way to reach the professional.

Client participants were satisfied with their experiences with online counseling as they did not have to spend time accessing practitioners. Four out of eight mentioned that consuming time on the road has been challenging in recent years within the cities' building plans. The other four participants also declared that online counseling is time-saving but did not detail what aspects of online counseling save the time.

4.1.3.3. Exceeding Spatial Limitations

Six clients also stated that reaching their psychological counselors in online counseling is easy. C7 illustrates how the accessibility of the psychological counselor affected the process of online counseling:

First, as we talked about, I have many different possibilities thanks to the convenience of online access. When I need to travel or go somewhere or when there are sudden changes in my life, in this way, I can easily reach my psychologist.

C10 also states that accessing from a different place enables the client to reach the psychological counselors and vice versa:

For example, if I live in a small city such as Kütahya, Bartın, etc., as a client, it may not be easy to find a qualified therapist in small towns. Therefore, online counseling can be more advantageous in reaching good services.

The online modality helps clients to access psychological counselors without geographical limitations. Possible dropouts due to location change might not increase. C4 mentioned that she started face-to-face counseling and then had to change the city she lived. She could continue to receive counseling from the same professional in the online counseling process.

4.1.3.4. Economically Affordable Costs

Four clients state that the costs are the same for online counseling and face-to-face counseling. Two clients received free online services from university centers. Half of the clients discussed that online counseling would be more affordable for clients, but only three have experienced cheaper costs. Two out of three mentioned that they would not be able to receive help if the help was not online due to high prices and their current economic condition. They said that they were able to receive service thanks to the online opportunity. For instance, the extracts from C5 and C3 illustrate their chance to receive support due to their economic condition. C5 stated that:

So, the price of everything has increased a lot. That is why it was like it must be online for me right now.

C3 also benefitted from a social project advertised on social media. This project offers online counseling at a low cost. Her experience and views on the received support were introduced below:

In the project, they offer face-to-face and online counseling for those who cannot afford the price of these services. Client candidates can mention the fee

they can afford. Based on this project, there was a fundamental difference between face-to-face and online counseling. Face-to-face one was over a hundred Turkish Liras. However, mine was under 100 Turkish liras, and they had accepted it [...] I preferred online counseling because it was financially the most affordable for me. I could not say, "I want it to be face-to-face counseling and want to give more money." Even if I wanted to receive face-to-face counseling, I somehow had to accept online counseling due to my financial situation.

As it was introduced, four of ten clients believed fees did not change in online and face-to-face counseling because the service is the same. One out of five even stated that online counseling might result in inequality between clients in Turkey and abroad in terms of fees because of exchange differences. C10 illustrates these differences that create inequalities between people:

Unfortunately, I have to say this. You know, the price is increasing in oversea sessions. The session fee is much more affordable to people who live abroad. Let me tell you this, let us say that the Euro is 20 Turkish liras. Here, a session costs 200 Turkish liras. So, the person can get that counseling service for a minimal fee. In other words, the client here receives counseling in much more difficult conditions regarding wages and exchange differences. This process becomes a convenience for that client who lives abroad.

For some clients, online counseling was the only way to get help with their financial conditions that did not enable them to get help continuously during the pandemic. C3 mentioned that even if there was not a pandemic situation and he wanted help from a professional, he might not be able to get it since the costs are very high. Consequently, the affordable prices of online counseling would be beneficial for the clients.

4.1.3.5. Safety and Comfortableness in Own Place

Five clients emphasized that their environment, particularly home, is much safer to talk about their issues with great comfort. Three among them also stated that it might be safer for a psychological counselor. C10 illustrated her thoughts and experiences on this:

Suppose you are a client with concerns about others' observation of your body movement, including walking and putting your arms/legs. You cannot simply put on your shoes and take them off while sitting on the sofa. I have sessions with my therapist while there is a blanket over my knees in some online

counseling sessions. This event is such a beautiful thing. I am comfortable. Of course, it depends on this relationship. this thing is not like I am spoiling the session. I do not go to bed and continue sessions there, but that is the comfort of my home. Feeling safe, I guess this is my issue. In that sense, I feel comfortable in online counseling sessions.

C10 also stated that she had an advantage of online counseling in weather conditions:

I hate going out in the rain. Umbrella..., Bag..., It is perfect for me to receive the service from home, especially in cold weather. Other clients may say, "It is raining today; let us do it online today" if they are doing a hybrid. If I were making a hybrid, I would say, "oops, let us do it online today or something." In that respect, online is convenient.

C3 highlighted the reason for the effectiveness of online counseling:

Why was it effective? I felt much more comfortable in my room.

C7 illustrates how online counseling would be safer for psychological counselors in challenging and risky conditions:

Let us talk about anger and addiction. These people also need counseling, but being in the same environment with them can be risky for the psychological counselor, as they cannot gain specific awareness and perhaps cannot control certain impulses. Therefore, when psychological counselors meet with them, online platforms might be more advantageous and safer than being in the same place.

To sum up, clients felt comfortable and safe during their online counseling sessions and revealed that this was a factor for them to have efficient help. It is also important to note that not all participants felt safe and comfortable to the same degree. For some clients, it is a privacy concern because they have difficulties discussing their issues in the presence of others at home.

4.1.3.6. Continuity of the Sessions Under Challenging Periods

Three clients mentioned that they had an opportunity for continuity of the sessions thanks to online counseling. One of the reasons for avoiding dropouts and contributing continuity was accessibility in loss of interest moments. C3 shared her experiences

regarding the continuity of the sessions. She suffers from depression with a loss her interest and is unable to move on anywhere:

I received online sessions for thinking that I was depressed. When you feel depressed, leaving your home and attending a face-to-face meeting is tough. I mean, when you are not able to do anything.

C10 also stated that if she were suffering from depression, she would choose to attend online sessions because of a loss of interest during depression periods:

If I am depressed, I may not want to get up. I find it very difficult to take a shower, get ready, get dressed, and go to the office. These are complicated things for a depressed client. So, it is much easier to open your device and contact the therapist online.

C6 illustrates the situation that she experienced and how the desire to go to sessions changes in the online environment compared to face-to-face one:

Sometimes I did not want to get up or go to sessions. A year is a long process. [...] In these situations, your mood changes, and you have some problems. So, getting up and going to the table (to receive help) is not demanding much, but getting ready and going out is sometimes very difficult. [...] Even though I have not had a severe problem, I may not always continue with the same desire because [...] That is why there are situations like I do not want to tell too much today where I hold back a lot. That is why getting up and leaving is sometimes more difficult. It was tough to adjust to this situation. So, online counseling allows you to make less effort. It is essential for the continuity of the conversation. Maybe if we met face-to-face, I would feel exhausted and say something like, "I will not come." However, when I am in online counseling, I do not think there is a need to say that. I can push myself a little more.

To conclude, this result suggests that the online counseling format might be helpful for clients suffering from depression, loss of motivation, and loss of interest issues. Some psychological counselors also stated that they worked with depression issues very efficiently in online counseling when their clients could not show sufficient effort to receive help.

4.1.4. Struggles that Discourage Clients to Receive Online Counseling

This superordinate theme highlights which kind of clients' focal point was discouraging for receiving the online counseling process within their perceptions and lived experiences. The subordinate themes are management of technical issues, lack of readiness for online counseling, inequality in accessing/using technology, inability to observe nonverbals, risks of manipulation and misuse, and hesitancy to talk about private topics in online counseling.

4.1.4.1. Management of Technical Issues

Almost all clients have experienced at least one of the technical issues during the online counseling process, such as sound and visual problems, internet connection issues, and problems resulting from devices (headphones, phones, and computers). As an example, the extract from C10 illustrates the difficulties she faced:

One of the things I am nervous about most is interruptions. Your voice goes away; there is no internet, and something happens. My therapist's image tingles [...] It is an annoying thing. When you think about it, you are telling something very important, precious. Even if it is not, why is it cutting off? You feel anger or something.

C7 also states the issues that she encountered with the program that she was used for receiving help:

There were some sound-related issues with the platform. Also, when I receive a call in the app, I can click and open it via my e-mail, but recently I have been unable to access it, especially over the internet. When you enter the room, the text appears, but when I click, I cannot enter. It was weird..., or even if I joined, there were problems with the sound. There was a sizzle; these problems disappeared when I switched to the Zoom platform. However, I think this reduces the efficiency of the session because time is wasted in that process.

To conclude, this theme illustrates the importance of technological devices' involvement in online counseling sessions for succeeding in satisfying counseling. Technical issues lead to disruptions in online counseling. Although they are manageable to a certain extent, their force and quality have appeared crucial.

4.1.4.2. Lack of Readiness for Online Counseling

Half of the clients mentioned that the effectiveness of the therapeutic process was affected by the absence of preparation for online sessions. The quick accessibility of online counseling decreased their level of session readiness. Although accessibility is considered an advantage in online counseling, clients illustrated that they had much more readiness to prepare themselves for what they will talk about in face-to-face sessions. They had the opportunity to think broadly about the issue discussed in the counseling session room. C2 expressed his feelings like that:

When you go to the counseling room, you leave the house for a purpose, and while on the road, you have time to think about what you will do there until you get there. [...] However, when I go online in psychological counseling, there are moments when I run out of bed and try to turn on the computer immediately to connect sessions. I do not know what to talk about in online counseling. I press the button, and it opens. You know, everything happens at that moment. Is this a minus side? Maybe I expressed myself better. I do not know about it, but I could probably tell more logical things if I could think about it until I got there. It would be more consistent.

In the following extract, C6 express her feeling by revealing how clients' readiness is vital for the effectiveness of sessions:

In face-to-face counseling, the most critical part is getting up and going there, and it makes me feel like, "I took a step towards that, and now I feel stronger because I am going to figure it out." In online counseling, it is a little bit unclear.

To sum up, clients value counseling sessions' preparation and readiness process. They believed that the instant connection to sessions in online counseling negatively affected their preparation and readiness for the sessions. The ritual of preparedness in face-to-face counseling (e.g., welcoming the client, the client's courage, and making an effort to go to the sessions) seemed to be a valuable behavior that is partially absent in online counseling sessions.

4.1.4.3. Inequality in Accessing/Using Technology

Participants were asked how they see online counseling from the social justice perspective. Three participants were unsure whether online counseling increased the chances of getting help for everyone living in a society. Five clients suggested that

online counseling creates more inequality than facilitating equality for the community because of the technical material needed to conduct online counseling. For example, the following extract from C8 emphasizes the increase in inequality in receiving help for people due to the need for online counseling:

After all, I am doing this meeting with a ten-year-old mac book now. I have an iPhone or something else; brands do not matter. So, I can do it with any device with a front camera. Forget the camera, but some people need psychological counseling and do not even have a phone. Of course, there are also phone calls, but I do not think you can make the first counseling session with a phone call. You can do it, but it is instant support; it is not counseling, in my opinion. Because of this, online counseling is not creating equality; it discriminates against people from each other, maybe ten, maybe five percent of the society, but it distinguishes [...].

Two of the participants discussed the social aspects of online counseling. One of them was an LGBT individual, and the other participant was a migrated student who lives abroad and experienced immigration psychology. Both emphasized that their chance of getting help is positively increased with online counseling and creates more equality in their conditions. For instance, C7 illustrated the difficulties that she experienced culturally and linguistically while living in abroad:

I am also very grateful for receiving online counseling. In my position, I do not currently live in Turkey. That is why I have limited access to such opportunities. However, even in a different country, I can reach many people much more quickly in my mother tongue or someone from the same cultural background. So, if I did not have an online counseling chance, it might take time to get such help, or it would be much more interrupted and disjointly happened, or I could not reach someone with the professional I expected.

She also admitted her thoughts that online counseling creates an opportunity for people who do not choose where to be born:

I think it certainly makes it more equitable. Because, for example, I could not choose where I was born, and it might not be fair to me that it is so difficult to access mental health. If I had noticed the advantages or awareness of online counseling earlier, I could have come to a better or psychologically more empowered position in the past. That is why I think that online meetings provide more justice and equality in terms of affordability and access because certain good psychologists live in certain places. People will inevitably say, "Why should only people there have access to good professional help?" That does not sound fair.

C5 was a non-binary individual who had a thought on online counseling in terms of migrants, people with HIV, and the LGBT community. The views and experiences of the client shared about starting sessions online and then holding a hybrid format are given below in the first passages:

We (the LGBT community) are very okay to access counseling, so we do not have a question mark about this issue, at least for people or me I know. However, I think it can be a good step for people who are afraid of accessing counseling or have an utterly taboo. I mean, it is debatable how productive the continuation will be, but I think it is both a more equal and a good first step for a start [...]

C5 also admitted that in a situation of body surgery for an LGBT individual who is ashamed of it, facilitating online counseling would be a very beneficial process:

I know many people who have a lot of trouble and embarrassment while building their bodies and even hesitate to leave the house when necessary. When this is the case, accessing online counseling at first would be beneficial, and after that, they can go to face-to-face sessions with that motivation [...]. So, online counseling or hybrid counseling can be helpful. The same is true for a refugee, but especially for someone with sex reassignment surgery because of body construction.

C5 worked with people with sexually transmitted diseases and emphasized that these individuals are hesitant to receive help, but online counseling would increase opportunities for support:

Also, this applies to people living with HIV, living with AIDS, or having any sexually transmitted infections, especially if this person is an LGBT individual. They are directly stigmatized and may hesitate to even go to the hospital. It is vital to get counseling during these processes. I also work in this field, and only 2% of people in Türkiye receive counseling during the whole process. However, online counseling can be a critical format to increase this; it can be very constructive.

In conclusion, two clients believed that online counseling contributes to society in terms of disadvantaged people with some issues such as accessibility for migrants, LGBT community issues, and having a sexually transmitted disease. Three clients mentioned the accessibility of professionals but were unsure whether this contributes to social equality. Half of the clients mentioned the need for technological/technical

materials in online counseling. Because an affordable fee is yet to make changes to contribute to inequality, online counseling lessens the equality of getting help among society rather than equal chance.

4.1.4.4. Inability to Observe Nonverbals

Four participants mentioned that they had a drawback with nonverbal difficulties such as explicit facial expressions, touch, eye gazes, body postures, gestures, and mimics. Most of them reported that this is not only a disadvantage for them but also the psychological counselors. C9 describes the disadvantages side for the psychological counselor:

The psychological counselor may not be able to follow the hand-arm movements of the person easily. Because there is such a thing as observing body language the facial expressions in your job, you may not be so effective when you are talking.

Whereas C10 explains the situation she faced from a client's view:

I can see my therapist much more entirely in face-to-face sessions. For example, I can see her drinking her coffee; I do not know, he greets me at the office door. We walk together from the entrance to the room; that is, we do all these processes together. However, if we think about online counseling sessions, she enters into the conversation via the internet and can only observe a tiny part of me.

In sum, clients did not seem so unsatisfied with the nonverbal issues; however, they were aware that this issue is a disadvantage and obstacle for both sides and affects the effectiveness of the counseling process.

4.1.4.5. Hesitancy to Talk about Private Topics in Online Counseling

As seen in Table 4.2, clients reported they would choose to receive relatively less severe and private issues for online counseling rather than face-to-face counseling. Adaptation issues (school, work, a new social environment, new life transitions), career, health, motivation, attention, stress management, and work issues were the topics for both formats. Therefore, the clients declared that they would choose these topics both for receiving online and face-to-face counseling. It was fair enough for

clients to receive help in online settings if the situation was not so profound, severe, and private issue. Clients have more tendency to choose online counseling for economic and academic issues. Some clients want to receive online counseling for economic issues because they believe it is more affordable than face-to-face counseling. Also, several clients said that if they had an issue with money, they might not have a chance to pay the transportation costs, so they would prefer to receive help via online counseling.

There were also other topics: Relationship issues (family, romantic, friendship, or break up/divorce), severe cases (grief/crisis/trauma, abuse, sexuality, anger management, addiction, depression, cyberbullying, and bullying), and some topics that need observations (e.g., body image) may need behavioral interventions (e.g., phobias). These issues were primarily preferred for face-to-face counseling by the clients. However, clients in this study received online counseling primarily for relationship issues and severe problems. In this study, most of them illustrated that the online counseling process was efficient in building relationships and feeling understood by their psychological counselors for resolving their issues. However, they would still prefer face-to-face interaction with their mental health providers as a priority.

Table 4.2*Clients' Format Preferences by Subject*

	<i>M</i>	<i>SD</i>
Sexual abuse	4.7	0.95
Family issues	4.7	0.48
Addiction	4.2	1.13
Crisis/disaster/trauma	4.2	1.03
Sexual orientation	4.2	0.91
Bullying	4.1	1.00
Anger management	4.0	1.15
Romantic relationships	3.9	1.19
Cyber-bullying	3.8	1.61
Loss/grief	3.8	1.47
Phobias	3.8	1.03
Break up/divorce problems	3.7	1.56
Depression	3.7	1.33
Body image	3.7	0.95
Relationship issues with friends	3.7	0.95
Issues with sexuality	3.5	1.50
Anxiety	3.3	1.05
Health issues	3.2	1.39
Internet usage	3.2	1.55
Attention problems	3.2	1.23
Work issues	3.2	1.22
Stress management	3.1	1.20
Career issues	3.0	1.24
Adaptation issues	3.0	1.15
Motivation	3.0	1.15
Academic issues	2.8	1.22
Economic issues	2.6	1.26

Note. 1=I definitely prefer online counseling. 2=I probably prefer online counseling. 3=I prefer either online or face-to-face counseling. 4=I probably prefer face-to-face counseling. 5= I definitely prefer face-to-face counseling.

Four clients primarily focused on wanting to be in the same place with the psychological counselor for the issues that even they cannot talk about with themselves or issues that they did not want to be heard by other people although they are alone at home. For instance, C9 illustrated that she has some untold issues she does not want to tell even herself. Although she did not receive face-to-face help and had a good relationship with her psychological counselor, and it was a beneficial process for her, she would prefer face-to-face to talk about some inside things with her psychological counselor:

More personal about some sexual experiences in the past, it is like..., You know, there are some topics I do not want to be discussed in the technological environment. I am afraid someone will hear it, even if I am one hundred percent sure no one is there. I cannot talk about things I never want anyone to know in the online environment.

C6, who experienced a traumatic event and received counseling sessions, also stated that:

I guess the most suitable environment is the home or wherever that person is talking. That is why, on more personal issues that I do not want the people around me to hear, for example, there might be sexual orientation..., or the problem that s/he intends to keep more secret..., or if s/he has been abused..., this can be in the same way. Such big things that those around the client do not want to hear would be more effective in face-to-face counseling.

Also, C5 mentioned that she answered the questions regarding Sexual Orientation intentionally for face-to-face sessions as she thinks it could be beneficial to start sessions with LGBT individuals in online counseling. However, she would prefer them to be more visible in face-to-face sessions to receive help. Clients' online counseling choices depend on perceived severe and private issues they mentioned during the scale. Although it worked well with online counseling, face-to-face counseling is primarily preferable.

4.1.4.6. Risks of Manipulation and Misuse

Four clients (C1, C2, C7, and C10) mentioned that online counseling is very open to misuse and manipulation by psychological counselors because the practitioner's background is not transparent and trustable. They felt that the counseling profession was negatively affected because it degraded the profession itself with awkward promotions. C2 mentioned that he was tired of seeing professionals opening Instagram accounts and reaching people over there and stated the concerns with ensuring psychological counselors' expertise area:

Everyone is doing online psychological counseling when I go to Instagram right now. There were some difficulties in doing psychological counseling before. Someone was going to arrange an office, a place, etc. S/he had to have savings, which at the same time had to be savings that s/he could risk. Other than that, he had to get an education. However, now, s/he is not risking

anything that he gets in front of the computer and starts talking. In other words, who this person is, whether he is a psychological counselor, a psychologist, a psychiatrist, a coach, or a magician, is not clear, and he is trying to provide this service.

C2 also explains that the picture of the counseling profession was negatively influenced after she saw some services like online market applications that seemed unusual to her:

There are some services that I do not remember their name. When there is an emergency, you can directly enter the phone, get the application and receive that service at that moment. You can get that service online with a doctor. It is like, “you order something from the market.” I think it is a bit risky [...] when you get an emergency; how can you do this with the information you have just found there? So okay, the score is high, and so on. It is very annoying and insulting. It is like I am buying a bag from Trendyol.

C10 also mentioned that she was frustrated when she saw that some websites enable clients to buy sessions, and that affects the clients' right to drop out:

There are online therapy sites, such terrible methods. You buy a package of eight sessions or something. So, there is a vast ethical flaw. What does it mean to buy an eight-session package? In other words, you take away the client's right to quit sessions.

To conclude, these clients were frustrated, annoyed, and seemed angry about what they saw through the online counseling websites, apps, and social media. That resulted in an enormous ethical confusion in clients' minds and set an obstacle for perceiving online counseling as a professional area. It is important to note that C2, C7, and C10's backgrounds depend on the helping professions. As a result, their tendency to be aware of misuse and manipulation could be higher than other client participants in the study.

4.1.5. Clients' Aspirations and Suggestions for Improving Online Counseling

This theme represents the clients' thoughts on developing online counseling and what they wish for an effective counseling service soon. This superordinate theme involves the format preference for interaction and flexibility, arranging technical equipment and environment, suggestions for developing online platforms, the need for resolving

insecurity, clear procedures and standardization, checking online psychological counselors' actions, and informing clients about technical difficulties.

4.1.5.1. Format Preference for Interaction and Flexibility

Clients were asked which format (videoconferencing, telephone calls, live chat, text message, e-mail, and voice records) they would prefer for receiving online counseling. Participants mentioned that their first choice would be videoconferencing, and the second would be telephone calls. Their third choice was voice records or live chats, whereas telephone messages and e-mail were at the end. Clients were also asked about the reasons for the order of their preferences. They chose the format depending on the closest ones to face-to-face interaction, and more synchronized types of online counseling were primarily preferred. Some clients (C3, C4, C7, and C8) mentioned the waiting process for answers, not understanding the psychological counselor without tone of voice, gestures, and mimics, and a late response to the text message and e-mail, which may arouse their anxiety level. C3 illustrates how she would get nervous if she were in asynchronized communication for the counseling:

Text messaging from the phone and e-mail seem very formal to me. Even when texting my friends, I get nervous because I cannot understand your intention from the entire message. That is why it is more stressful for me, especially if this is my psychological counselor. I place the phone, text message, and e-mail at the end.

Participants were also asked, *"Which format would you prefer in the future for receiving counseling among face-to-face counseling, online counseling, and hybrid format?"* Most of the clients (7) preferred a hybrid format for receiving counseling. All participants admitted their desire to have a live interaction in the face-to-face help. However, to continue sessions and to make time to receive support in a busy life, most participants (7) mentioned that the hybrid format was the most appropriate choice for their future counseling experiences (see Table 4.3). Three participants declared that face-to-face counseling was their first choice as face-to-face sessions' interaction and environmental comfort do not match the atmosphere in online counseling. Two asserted that online counseling would be their last choice because of privacy concerns. Four stated that online counseling was their third choice for positive reasons like time

management, accessibility, and comfortability. Since accessibility or current life routines are not appropriate for receiving help, 3 participants also mentioned face-to-face counseling as their last choice. The flexibility within the hybrid format predicted that soon, online and face-to-face counseling could be utilized for continuity, time, and comfort, as described in the extract from C9:

I prefer hybrid first. In the second place, I prefer online out of necessity. As I said, I do not think I can spare much time in my busy work schedule to go somewhere physically.

Table 4.3

Clients' Preferences on the Formats of Counseling

	Order of Preferences			Reasons for Preferring Counseling Formats		
	1	2	3	1	2	3
C1	H	f2f	OC	Comfort	Live interaction	Comfort
C2	H	f2f	OC	Time	Live interaction	Privacy concerns
C3	H	OC	f2f	Continuity	Access	Interaction
C4	H	f2f	OC	Continuity	Comfort	Time
C5	f2f	H	OC	Flexibility	Time	Comfort
C6	f2f	OC	H	Comfort	Scheduling	Confusion
C7	H	f2f	OC	Continuity	Safety	Practical/ access
C8	f2f	H	OC	Live interaction	Talking freely	Privacy concerns
C9	H	OC	f2f	Time	Time	Continuity difficulties
C10	H	OC	f2f	Time	Continuity	Live interaction

Note. OC=Online counseling. f2f=face-to-face counseling. H=hybrid format, which includes online and face-to-face counseling.

In summary, busy life conditions make online counseling a preferable format, but clients also highly want to be in face-to-face interaction. Because of this, a mixed approach for counseling sessions would be durable and manageable in terms of time and comfort in receiving help.

4.1.5.2. Arranging Technical Equipment and Environment

This theme explains the responsibility of technical equipment and the environment that depends on clients. C3, C4, C5, C7, C8, and C10 mentioned that some duties need to be administered by the clients during online counseling, although they have control over their environment not to do it. C8 illustrates that he is careful about muting the phone and not smoking during sessions:

As a principle, for example, when I make an online call, I mute my phone and do not answer the phone when they call me. Apart from that, for example, I love smoking a lot; I love it very much. I am a smoker, but I do not smoke during counseling.

C5 and C10 needed to arrange their conditions. C5 illustrated how clients should use the camera during sessions as well as experiences with the pets:

Another thing is to look at the camera at that time. Because even when you do this [Looking below]. I feel like -not only as a student but also when I teach- "Is s/he looking at his phone, or do they listen to me? [...]" Also, keeping the camera open is essential to give the impression that "I see the person in front of you, okay, I hear you, I am listening." I think it is essential to be doing this with each other.

[...] Apart from that, we all have different conditions, but it is possible to shape the environment accordingly. For example, I said there is a cat and a dog at my house. You may give one of them a toy and put another in a different room. Arranging the place could be helpful.

C3 and C10 mentioned that using headphones is crucial to increase the feeling of safety during sessions. It might be applied as a rule parallel to confidentiality and privacy risks. As a result, this theme emphasizes that the need for technological instruments for online counseling is crucial. The responsibility to arrange the environment accordingly is also vital because mental health professionals' control of the clients' space is minimal.

4.1.5.3. Suggestions for Developing Online Platforms

Four clients (C1, C3, C9, and C10) suggested that it would be beneficial to have ethical, controlled, and specific platforms that bring clients and psychological counselors together for online counseling. Confusion about which platform should be

used seemed to influence clients negatively. That is why one program or platform was developed under the guidance of mental health professionals suggested by the clients. Extract from C9 illustrates that it would be beneficial to have a topics-specific matching system in developed programs.

Maybe a platform can be established..., There should be a website where I want to get help, and I can find who can provide specific support on which issues. There may be a list of this; maybe there is, I do not know. You know, something like this, think like Facebook, Instagram. You see, it is a platform; I am going to use that platform and find..., let us say, experts on grief or trauma or abuse..., So, I can see which psychologist can help with these issues.

She also emphasized that anonymous surveys after each session would be beneficial for psychological counselors to improve their skills for online counseling:

A survey can be done at the end of each session. After all, the professionals must develop themselves and see the value of the process. Maybe clients do not say it in the sessions, so they do not want to hurt the psychological counselor. However, a questionnaire is sent to that professional anonymously, and only the professional can see the answers without knowing who responds.

Apart from the C3, C9, and C10, C1 has an entirely different view that a controlled environment was achieved in online settings as she received online counseling from a place that the practitioner controls:

There could be something like internet cafes to improve the accessibility of this service. Do you understand what I mean when I say internet cafes? It is like having rooms, so everyone reaches the accurate services..., Like the one I received. This kind of practice also makes things more severe and formalized. It would benefit your feelings regarding "that is why I came here."

During interviews, these participants suggested that there is a need for control and check by the professionals in the mental health area. Thanks to this, they believe that the quality of online counseling can increase, their concerns can be lessened, there could be more opportunities to reach individuals, and the chance for improvement of psychological counselors by developing platforms.

4.1.5.4. Need for Resolving Insecurity

Four clients (C5, C8, C9, and C10) reported some uncertainties regarding protecting personal data in the online space, creating anxiety among them. They feel insecure because of the probability of sharing their personal information unintentionally. C9 admitted that personal data storage by the programs is very complicated and needs to be resolved. She added that there might not be a solution for this:

Personal Data Protection Law..., You know, such as unauthorized recordings. Frankly, there is not much that can be done to prevent them. I wish something were done about it. While talking to you in Zoom, I cannot record this without your permission. However, as I said, I can record it with another device from outside, and no one can prevent it. You know this is something that malicious people can do. Well, I do not know what else can be done to improve. There is this security issue.

In summary, this theme emphasizes that not feeling safe during online support is a question mark for clients at the back of their minds. The complication of the Personal Data Protection law was creating anxiety as C10 stated that "Zoom is a foreign program and the recorded data goes abroad, so how would you solve this with the Turkish Law?". They felt unprotected regarding the information they gave during the session in online counseling.

4.1.5.5. Clear Procedures and Standardization

This theme illustrates the clients' need for a standardized way of receiving online counseling and uncomplicated procedures. Four clients introduced that this type of help may need time to develop. They admitted that online counseling is more complicated and ambiguous than face-to-face counseling. For example, C2 illustrated his thoughts on standardizing the online counseling process

:

Maybe the legal gap will be closed by putting the criteria of online consultancy service into it. So, there will be minimum requirements. Perhaps more experience will be desired there. I mean, to be able to give counseling there. For instance, it will be necessary to provide face-to-face counseling in an office for three years and then go there because online counseling is straightforward and accessible to everyone. It is essential to inhibit it a little bit. I think that not everyone should be able to give online counseling anymore.

Need for procedures will need to be developed through time with discussions among professionals as C3 suggested:

There should be rules for this, the effectiveness should be discussed, and I think this needs a few more years. In other words, I think this should be addressed continuously to be placed objectively.

To sum up, the client perceived online counseling as a developing area that needs attention from lawmakers, associations, and providers. They suggested that giving specific rules and procedures might be helpful for efficient sessions.

4.1.5.6. Checking Online Psychological Counselors' Actions

This theme states the need for professional regulation of mental health professionals as online counseling is very open to abuse, in parallel with the previous theme on misuse and manipulation of professionals in the online space. Some clients suggested that this issue needs to be resolved. For instance, C7 illustrates the risks while searching for an online mental health provider:

I think it should be better structured. Because while I was searching, the things I found on the internet were not very well structured, and sometimes different psychologists gave different price information on certain websites. So, OC had become an open market. However, it does not seem right to me that this is the case. In other words, some psychologists I saw were saying, "I am cheap, come to me," and they did not have the qualifications for these services. When people who do not get support, who want to get it, search the internet like me, they may come across a person who will abuse themselves. There is no guarantee of this; maybe they will be scammed. In other words, if I say I am a psychologist, provide online support, and set up a website, who will check this process?

Clients mentioned that too many individuals offered online counseling services, especially during the pandemic. So, they seemed very annoyed with how mental health providers use it. The situation made it even harder to differentiate who the verified professional was or not. As a result, having no clear rules and procedures created a manipulative environment for giving online counseling services.

4.1.5.7. Informing Clients about Technical Difficulties

This theme shows that increasing technical readiness for clients for anxiety and emotional arousal is considered necessary by clients. Because after clients experienced corruption with technical issues like internet connection, voice problems, and visual freezing, they were uncomfortable in online counseling sessions. Four clients mentioned they needed information about the possible technological drawbacks during online counseling. It would be helpful because they felt abandoned, stressed, and had difficulties with the emotionally intense moments when internet connection issues occurred. C5 expressed the feelings that need during these challenging moments:

For example, some things that make me very nervous. Here, the internet connection problems are making the situation very tense. That is why I said I would connect to the internet from my phone's internet. There might be a relaxation process for clients. This process might be good because all people cannot have great internet. Yes, we will enter 2022, but it is not. I think a little bit of tolerance and relaxation would be helpful.

C7 also expressed her feelings and thoughts about how she was annoyed with the internet problems during sessions:

My psychologist was in a different place, and there were interruptions on the internet due to my psychologist's internet connection. It bothered me because I did not cause it, and this situation reduced the efficiency during the session [...]. It may be essential to make preliminary preparations, which can be a faster alternative in technical matters.

C10 described the emotional expression process in online counseling using metaphors and said, "it is like a car motor; in the online environment, you warm up late and freeze late." He was also one of the clients that were very annoyed with technology while experiencing intense emotions during the sessions. He mentioned that he felt awful after the internet connection was corrupted. In brief, preparing clients for the technically challenging moments during online counseling could be vital since they could experience feelings like distress, neglect, and anger. Improving the structured plans for these moments would help to increase the effectiveness of practices, although they are not entirely preventable.

4.2. Psychological Counselors' Results

Psychological counselors' results consist of six superordinate themes: Lack of control over ethical issues, experiences with the online therapeutic process, pushing the limits of creativity, conveniences that encourage psychological counselors to provide online counseling, struggles that discourage psychological counselors to provide online counseling, psychological counselors' aspirations and suggestions for improving online counseling.

Table 4.4

Psychological Counselors' Superordinate and Subordinate Themes

Superordinate themes	Subordinate themes	<i>f</i>
Lack of control over ethical issues	Clients' privacy problems originating from the environment	8
	Confidentiality concerns	7
	Lack of knowledge and practice of security	6
	Careful screening and assessment procedures in online counseling	4
	Concerns about crisis interventions	4
Experiences with the online therapeutic process	Easiness of violating boundaries	3
	Role of external factors on the therapeutic presence	7
	Applicability of basic counseling skills during online counseling	6
	Well-structured initial sessions in online counseling for setting rules	5
	Need for more time to establish the therapeutic relationship in online counseling	5

Table 4.4 (Cont'd)*Psychological Counselors' Superordinate and Subordinate Themes*

Superordinate themes	Subordinate themes	<i>f</i>
Pushing the limits of creativity	Raising verbal skills and techniques	7
	More focus on perceptible/observable parts of clients	3
	Adaptation of physical/behavioral practices	3
	Turning unintentional disclosures into positives	3
Conveniences that encourage psychological counselors to provide online counseling	Time-saving	10
	Safety and comfortableness in own place	9
	Exceeding spatial limitations	8
	Increasing the chance of touching people's lives	7
	Economically affordable costs	7
	Flexible scheduling	4
	Continuity of the sessions	4
Struggles that discourage psychological counselors to provide online counseling	Hesitancy to use online counseling for severe and private topics	10
	Management of technical issues	10
	Inability to observe nonverbal behaviors	8
	Technological barriers to emotionally deep sessions	7
	Lack of readiness and responsibility for online counseling	7
Psychological counselors' aspirations and suggestions for improving online counseling	Format preferences for interaction	8
	Suggestions for developing online platforms	7
	Training for ethics, techniques, and process	6
	Standardized rules, regulations, and laws	4
	Adapting online counseling to the counseling curriculum	3

4.2.1. Lack of Control over Ethical Issues

The first superordinate theme explains how psychological counselors questioned the ethical problems of online counseling. The counseling room in face-to-face was changed in the online counseling process. It consists of separate places for clients and psychological counselors in terms of responsibilities in providing ethical issues. Thus, this creates an atmosphere where the psychological counselors' ethical control over the sessions lessens. The theme involves six subordinate themes: Clients' privacy problems originating from the environment, confidentiality concerns, lack of knowledge and practice of security, careful screening and assessment procedures in online counseling, concerns about crisis interventions, and easiness of violating boundaries.

4.2.1.1. Clients' Privacy Problems Originating from the Environment

This theme illustrates psychological counselors' privacy concerns regarding clients' areas while providing online counseling services. Their concerns are similar to clients' privacy concerns. Seven psychological counselors emphasized that they control their environment to protect privacy. However, because of being in different places and not having control over clients' environments, professionals declared that they had suspicions and privacy violations due to clients' environmental factors. PC1 described her experiences:

There were several times when we needed to talk about family members. That is what we were supposed to talk about in the sessions. However, they could not speak; they said, "let us express it in writing." The typing process just got a little bit slower. I said there was no problem, but they expressed themselves differently when writing than verbally. [...] Unfortunately, we had this disadvantage because of the lack of personal space.

Not only concerns about being heard by the client in less private space were a problem for some psychological counselors; for instance, PC5 experienced direct involvement of third parties during sessions:

I have experienced the presence of a third person a lot, and I have experienced many interferences in our conversations. It did not happen while working with my clients who live alone, but I had this problem.

For some psychological counselors, the involvement of a third party sometimes creates unintentional disclosures by the clients. It gives a chance to observe clients' relationships with their family members. As illustrated in the words of PC6, she tried to turn this privacy situation into a positive thing:

We cannot always arrange that environment because my client's child always comes and interrupts; what the woman is talking about or something like that [...] However, as I said, how we use the disadvantages here is essential. For example, you see the bond with the child and the relationship [...] This is also a clue to you. Ultimately, it is a positive or negative, disadvantage or advantage. It is a matter of how you put these in your toolbox and how you will reflect your clients within sessions.

To sum up, the inability to control clients' environmental stimulus produced adverse scenarios in which psychological counselors were the only side that ensured the privacy of their environment.

4.2.1.2. Confidentiality Concerns

This theme demonstrates that psychological counselors are uncertain about protecting confidential information because of the uncontrolled and different settings rather than security concerns with the program and internet. Some psychological counselors stated confidentiality issues were the most feared thing they could experience in online and face-to-face counseling. Seven participants appeared unconvinced about whether they could protect sessions' confidentiality as they had minimal sources to control clients' home stimuli. PC7 illustrated that she was indecisive about providing complete confidentiality during sessions in the pandemic:

When you conduct online counseling sessions with clients during the pandemic, you can arrange your environment for the client (talking about her own home). You provide a quiet and safe environment by yourself, but I have heard much from clients about this issue (mentioning clients may not arrange this easily). For example, one client I worked with online counseling during the pandemic mentioned, "Today the house is a little crowded, that is why I will not be able to talk very comfortably." [...] the face-to-face environment is very confidential; you are safer than in an online environment. You can provide confidentiality. You are so sure about it.

PC9 also stated that ethical frameworks of online counseling are minimal due to the lack of control in online counseling compared to face-to-face counseling:

For example, a friend of mine asked how I was so sure there was no one else in the clients' room. I said, "I am not." So, someone could be sitting behind the computer and listening to us. The client may also want this to happen.

PC10 also stated that he directly experienced the uncontrollability of recording issues while providing online counseling, although he introduced the rules well initially. He expressed that he felt unsafe, and his trusting relationship was negatively affected by his situation. He was not sure that this violation had happened before either:

I said, I mean, I saw your phone. Did I see it wrong?" For something like that. As the process progressed with the client, we also had a relationship of trust,

which was going very well. The client said, “I want to listen to them again, so that is why I am recording.” [...] I saw this randomly; maybe the client may have taken this recording before. He may have shown it to his friends, not to himself. He may have shared it on social media [...]

In summary, this theme shows the importance of confidentiality, which is not being able to be controlled entirely. Psychological counselors seemed to be very uncertain about avoiding confidentiality risks. Some psychological counselors mentioned that not only are clients in danger, but psychological counselors have become much more unprotective and unsafe in online counseling than in face-to-face counseling.

4.2.1.3. Lack of Knowledge and Practice of Security

This theme involves psychological counselors' technological data security knowledge and how it affects them. Although psychological counselor participants generally consider themselves competent practitioners with the technology to conduct online counseling sessions, they seemed to have limited data security knowledge through the used applications or programs. Psychological counselors were asked about how they ensure the security of the sessions. They use virus programs and personal computers just for online counseling sessions. Some of them agreed with clients to receive the informed consent via e-mail. It was observed by the interviewer in this study and declared by the psychological counselors that they do not take any precautionary action or do not know if there is anything they can do.

For instance, PC2 wants to learn more about the background of the security knowledge regarding programs because it is risky to have sessions in a technological environment:

It is about technological things. So, there may be a need for knowledge related to cybersecurity. Even though I think it is safe, the most significant question mark is for me, "what if something happens?" After all, there is no such thing as a hard copy like in face-to-face counseling. There is no format, so there is always this risk in technological things.

Some psychological counselors emphasized that they do not perform any precautions for the security of the sessions. The following extract from PC6 illustrates how mental health providers lack programs' data security information. Though many psychological counselors perceived themselves as competent in using technology during practice, they lacked background knowledge on personal data storage:

I do not have clear protection, explicit knowledge about it, you know, I do not have anything extra. No action was taken. I am just keeping my notes away from anyone. I am cautious about privacy, but in terms of technology, I am trying to run sessions only via Skype. I use other programs in challenging situations.

Psychological Counselors think that data security is another uncontrolled situation embedded in the online environment. Unsurprisingly, psychological counselors do not have enough security knowledge regarding the programs they use in the online sessions. As they expressed, they had limited sources during the pandemic, and their educational background in the counseling profession did not provide enough knowledge about information security. Their technological precautionous practices were restricted to using virus programs, IDs, and passwords.

4.2.1.4. Careful Screening and Assessment Procedures in Online Counseling

This theme is an ethical consideration that outlines psychological counselors' increased need for more meticulous work to identify the possible risky behaviors so that they cannot cause unethical conduct. Five participants revealed that they were and had to be more careful about screening and assessment procedures because of the online environment's weaknesses that produce a lack of chance to intervene in risky situations such as suicide and self-harm. It was stated that they did not prefer online sessions for clients with severe issues to avoid the likelihood of a big crisis by psychological counselors. It was very vital for psychological counselors to employ screening and assessment procedures more cautiously. PC4 mentioned how he is monitoring his competency of himself in the online environment and avoids crises by careful assessing procedures:

I think the main issue here is to choose the clients well. I think I did this well. The subjects I work on are the interventions I have made about counseling [...] I do not do play therapy; for example, I never do Filial Therapy, I am a Filial Therapist, but I do not use it. Can I do this online? Yes, it can be done. It is possible, but I chose not to. I have limited the area and usually make a reasonable assessment when I get a client in online counseling. For this reason, I can say that I mostly feel good because I choose appropriate clients more. So, I can say that I feel competent enough.

Similarly, PC9 reflected on his thoughts and feelings about assessment procedures. He tends to make referrals when felt incompetent with the topics in online counseling:

Firstly, I do an intake session, and as soon as I think I am not competent enough to work with that person immediately make a referral. These two ethical issues are critical to me in the online counseling process.

To conclude, as the participants discussed during interviews, psychological counselors who provide online counseling consider assessment, screening, and interviewing processes more crucial to provide non-maleficence, which is one of the core ethical rules of counseling.

4.2.1.5. Concerns about Crisis Interventions

This theme explains the condition of intervening in crisis moments during online counseling. Four psychological counselors emphasized that although they do not experience a crisis in the middle of the sessions, they have concerns about how they will react to crises in virtual environments. Some psychological counselors were afraid of the possibility of this event; some had feelings of unsafety. As PC4 illustrated his sense of unsafety in the extract below, online counseling is considered a more unprotected area for psychological counselors as behavioral controls are less:

Behavior controls, you can be exposed to suicide attempts; this is quite dangerous in online counseling. In other words, it is an area where the psychological counselor cannot protect himself easily [...] Therefore, in online counseling, there are many risks...., Of course, you may not always notice all the risks. However, if you do not notice some risks, I think you may encounter some experiences that can give you severe headaches in the professional sense.

After it was asked about ethical situations in online counseling, PC5 had difficulties recalling ethical issues; when the interviewer introduced some possible ethical issues, she also stated she would be helpless in a crisis:

This emergency part caught my attention because there may be nothing to do there. The client is not with you. How can it be intervened in this situation? Of course, information about his relatives is obtained in the preliminary meeting, but as a result, he will be alone; that is, he will not be with me at that time. This example caught my attention right now. So, it is not something I have experienced, but I think this might be a big miss in online counseling.

In summary, this theme illustrates how the quickness of online counseling could not give a solution for intervening in severe actions because of physical distance. Psychological counselors seemed to be cautious regarding crises in online counseling (e.g., suicide, harming others, self-harming issues). In this study, psychological counselors tended to choose severe topics for clients for face-to-face sessions. Consequently, behavioral controls in online environments are minimal, and being protective of the clients could not be possible all the time due to distance and the inability to provide instant support by psychological counselors. It is important to note that this issue may cause harm to the clients, but, in some sense, professionals also could be affected by this when providing help under unethical conditions or not cautiously, as mentioned by the psychological counselors.

4.2.1.6. Easiness of Violating Boundaries

This theme explains that psychological counselors experience difficulties setting boundaries in online counseling. In this study, some psychological counselors do not have staff (e.g., office secretaries) to contact clients. Some use social media pages and e-mails to have contact with clients. Since they have direct contact with the clients, and the communication has started through virtual settings, they stated that the relationship boundaries and roles were negatively affected. However, they assured me they were trying to be careful with the structuring processes and introducing rules. Extract from the PC9 illustrates the insistency of the clients on exceeding boundaries:

In face-to-face counseling, boundaries are clear [...]. Things like telephone and e-mail are much more straightforward [...] In online counseling, the relationship is first established over social media or an e-mail and exists there. Of course, the person can also contact you in face-to-face counseling via e-mail, but the face-to-face meeting starts immediately after a preliminary interview. It is not available in online counseling. Since this is not the case in online counseling, the client tries to be more flexible within those limits [...] For example, some clients reach out to me from my professional Instagram account, and when I contact them via e-mail, they persistently reply to the e-mail via Instagram.

Starting a relationship in a virtual environment creates an illusion among clients to break the rules of the sessions. In terms of boundaries, PC10 also experienced protecting the relationship with some clients due to their attempts. He declared that when psychological counselors provide a direct contact number, the client might

consider that the psychological counselor is always accessible., This issue leads to inappropriate communication outside the sessions:

Boundaries are challenging, so sometimes, they can be crossed. For example, the client connects from Zoom, but somehow, s/he could not join the microphone. There is the video image, but somehow, it did not work. Well, I said at the end, if you want, here I am, let me call you on the internet, on my phone. We gave our numbers to each other. We talked over WhatsApp, but it was something that had an incredible impact on the process. It is entirely out of control. We switch to the phone, and he can text at night or in the morning; this is not a big problem for me, but it is a problem regarding the therapeutic relationship because the relationship continues. The client thinks that s/he can continue the relationship at any moment. There would be another thing, if s/he wrote at night, let us say I could reply in the morning. It is not a problem for me. However, the client has a question mark, like "why he did not write to me, why didn't he answer me, etc."

To conclude, different voices of psychological counselors were introduced in this theme about clients' challenges to exceeding boundaries limits in online sessions. The illusion of psychological counselors' availability all the time and a continuous relationship due to accessing different communication channels made it difficult for psychological counselors to set clear boundaries with their clients.

4.2.2. Experiences with Online Therapeutic Process

The second superordinate theme contains four subordinate themes: The role of external factors on therapeutic presence, the applicability of basic counseling skills during online counseling, well-structured initial sessions in online counseling for setting rules, and the need for more time to establish the therapeutic relationship in online counseling.

4.2.2.1. Role of the External Factors on Therapeutic Presence

This theme emphasizes the therapists' presence experiences in terms of emotional, physical, relational, cognitive, and spiritual dimensions. In online counseling, psychological counselors tend to have more difficulties because they lack control. Even if they were controlled meticulously, it is still more likely to lose "the moment" in online counseling. Several psychological counselors stated the importance of external factors for cultivating the therapeutic presence in a virtual environment.

They underlined technological issues' effects on the therapeutic presence process. Most of them highlighted the absence of physical presence and its cruciality. Some considered that there is no difference at all. However, most psychological counselors emotionally and cognitively have cultivated the therapeutic presence, but their behavioral and physical presence is always lacking. For instance, PC2 mentioned that therapeutic presence depends on professional experience. However, he stated that technical difficulties also play essential roles in cultivating therapeutic presence in online counseling:

If internet connection issues affect visuals or something, I squint my eyes and ask myself, "did s/he receive my voice?" When you want to focus on the client's emotional state, focus on what s/he is feeling at that moment; I am asking myself, "what does s/he feel right now? Wait a minute, what is going on there?" Well, when you are trying to focus on it, that thing can affect you in losing the moment a bit.

Like PC2, PC8 illustrated the different accounts of external factors, which are about the virtual environment and transferring physical existence to the screen rather than technical corruptions:

The presence decreases somewhat. Because a screen intervenes between us, you do not breathe the same air. For example, I am looking out of my window right now. I see cars and buildings. If my client looks out the window in face-to-face counseling, s/he sees the same thing from a different perspective. Our landscapes, the environment we are in, the air we breathe... So, I think we all have an energy field, the way we feel it. These things do not happen; they do not go through the screen.

Difficulties in tracking nonverbals are the limitations of online counseling. Some participants also lacked physical presence and closeness towards their clients. As PC7 explained this challenge in the following extract by using "the doctor" metaphor, she declared that it is affecting the effectiveness of the sessions:

This process is like "the doctor will do the surgery, but there is no patient," so it does not happen. It is always lovely to be there physically.

To sum up, this theme introduces how external factors such as technology, technical instrument, and physical distance play a vital role in cultivating therapeutic presence. Although it was a state of being spontaneous and experiencing a mindful way of being together with clients, online counseling is very dimensional. The involvement of other factors has a critical role in the effectiveness of the therapeutic process.

4.2.2.2. Applicability of Basic Counseling Skills during Online Counseling

This theme illustrates the difficulties in applying counseling skills in online counseling. Some psychological counselors mentioned that basic counseling skills like silence (3) might be misunderstood in the technological environment (e.g., internet connection problem.). Some are more hesitant to use confrontation (3) as they believe developing a therapeutic relationship takes more time. Some noted that active listening (3) is sometimes affected by distractors. For instance, PC10 describes how silence is misunderstood or ignored by the clients in online counseling:

In online counseling, for example, something happens when we both stop; we are saying that “ah. the internet connection just cut off, or can you hear me?” You know, it can be turned into something different, or the client can also use this when s/he cannot find anything to say. Since silence in online counseling is not entirely natural, the process can have been affected in that sense.

Some psychological counselors said they might be unable to listen to their clients actively due to technical issues or environmental distractors. PC6 illustrates these issues:

I have to mention the attention issue [...] in active listening; the focus is essential. If clients cannot arrange their environment, the focus may shift there. The psychological counselor can be affected negatively while using active listening skills.

Some practitioners mentioned that they are more hesitant to use confrontation skills in online counseling or prefer to use them in further sessions after a strong relationship is established. PC9 illustrates this intention with the following words below:

Establishing a therapeutic relationship in online counseling is more challenging than in face-to-face counseling. That is why I find the confrontation technique a little more complicated in online counseling. A person may not always be

open to this. Because in online counseling, one cannot consistently maintain the same attention in front of a screen, and since it takes a long time to establish that therapeutic relationship, confrontation is a technique that worries me a little.

To sum up, some psychological counselors have encountered difficulties in terms of skills in online counseling, especially in using silence, active listening, and confrontation during online counseling. More complex or insight skills were harder to implement for the psychological counselors.

4.2.2.3. Well-Structured Initial Sessions in Online Counseling for Setting Rules

This theme defines the structuring process as a crucial element of online counseling. Five psychological counselors disclosed that clients sometimes show less responsibility towards session rules in online counseling, the initial structuring of the sessions and session rules becomes even more vital than in face-to-face counseling. Consequently, they were trying to be careful about structuring processes and introducing rules at the beginning. Extract of PC7 illustrates the vitality of structuring, especially for online sessions, to avoid ethical difficulties:

I go over the rules one by one in the intake interview. We read together; I share it on the screen. I receive signed documents when I understand that the client has read them all. We always say this in face-to-face counseling during the intake. I pay great attention to these ethical parts, but as I said, I pay special attention to recording the session and privacy for counseling, and s/he is responsible for this issue. [...] It is necessary to inform your clients well, especially in online counseling.

Psychological counselors highlighted that they were cautious with “structuring sessions” in online and face-to-face counseling. However, they had to be much more careful in virtual space as the rules tend to be broken by clients intentionally and unintentionally.

4.2.2.4. Need for More Time to Establish Therapeutic Relationship in Online Counseling

This theme shows that establishing therapeutic relationships in online counseling requires more time, as establishing *trust*, *bond*, and *rule setting* also need more time.

The virtual environment has some barriers to developing communication. The communication in online counseling encounters interruptions. The limited physical appearance has resulted in developing therapeutic and trusting relationships lately.

Five psychological counselors mentioned that developing a *trusting relationship* between the psychological counselor and the client in online counseling requires patience and enough time. The extract from PC5 illustrates the differences between face-to-face and online counseling in sincerity and comfort.

I am saying that that therapeutic and trusting relationship can be a little late. Inevitably, seeing the person, seeing the human body, meeting face-to-face, and receiving what we call that energy also contributes to the process. Well, I think that is the same for everyone. When I even met a friend of mine. It makes me feel more comfortable and sincerer if it happens in face-to-face counseling. So, it is a little late in online counseling. I have experienced this from time to time, and it is not pleasant to say something like, "I am sorry, I could not hear you, I could not hear your voice, or I am so sorry that your internet is disconnected." It also affects the therapeutic process negatively.

PC6 illustrates the need for more time in the therapeutic relationship in the extract below. She emphasizes that the involvement of technical instruments was dominant at the beginning of the sessions. However, when the *trust* is established, the dominance of technical issues goes behind the relationship between psychological counselors and clients:

Of course, face-to-face counseling will help you establish a faster therapeutic relationship [...] After the trust is set and the client gets used to these technical issues like the interruption of the internet and the freezing issues. These problems do not take us out of that area (mentioning the relationship). I mean, they do not completely detach us from the session.

PC10 revealed that the accessibility of a therapist in an online environment is giving clients a harmful opportunity not to establish *bonds*. Since they always have alternatives, clients lack the responsibility to commit and develop a bond with the psychological counselor in online counseling. Because of this reason, the therapeutic relationship takes a long time to establish:

When you are in face-to-face counseling, even if you have not started that relationship, even if it is the first meeting, I think the client imposes commitment to the sessions. Even if you have not met yet, s/he says, "this is my psychologist, this is my psychological counselor." A commitment to the session and a relationship develop even before the process starts. Here (in online counseling), the development of the therapeutic relationship takes longer, and clients can give up more quickly in this process. In other words, I interpret this dropout situation like this: clients probably know that they have different alternatives in online counseling.

In conclusion, this theme illustrates that establishing the therapeutic relationship requires more effort in online counseling sessions. Some psychological counselors related this issue to the bond. Some thought that it is related to trust, and some stated that communication is affected by the limitation of the online environment and the effects of technical problems. The experiences of half of the psychological counselors showed that the relationship has begun in earlier sessions and is easier compared to online counseling, in which the relationship develops in further sessions.

4.2.3. Pushing the Limits of Creativity

This superordinate theme illustrates how psychological counselors adapted their techniques and skills in limited conditions in online counseling (e.g., physical absence). It also highlights how their creativity needed to be essential in transferring what they already knew to online counseling. It includes four subthemes: Raising verbal skills and techniques, more focus on perceptible/observable parts of the clients, the adaptation of physical/behavioral practices, and turning unintentional disclosures into positives.

4.2.3.1. Raising Verbal Skills and Techniques

This theme illustrates that psychological counselors had problematic experiences in online counseling for applying the techniques and skills they have already used in face-to-face sessions. The limited environment, limited observation of the clients, and inability to exist in the same place with the clients forced psychological counselors to use more verbal techniques and skills than the skills that contain physicality and behavioral applications. They used metaphors more in online counseling than in their face-to-face experiences to close the gap between online and face-to-face sessions. Seven participants indicated they used more verbal skills and techniques in online

counseling. So, the verbal interventions were increased during online counseling in contrast to face-to-face verbal implementations because they worked well than the behavioral ones. For example, an extract from PC4 shows how lack of control over nonverbal observation, getting emotional moments, and inability to apply behavioral interventions made way for using more vocality-based approaches:

Especially in action-based interventions, it is impossible to do online counseling in interventions where the client needs to do something. It is also tough to follow that emotional intensity in online counseling via a computer. It is not easy to track the mimics, movements, and posture. For this reason, I can say that there are severe limitations, especially in action-based interventions in online counseling. That is why we had to practice online counseling more with verbal interventions.

PC1 also emphasizes how expressions were changed in online counseling:

Maybe I cannot lean forward (talks about sitting position), but because this expression can be challenging, we started to express it with verbal methods in online counseling. Typically, maybe it is something you can give through your body language, but now we have begun to show it with verbal signs, turning it into a vocal technique. I started to express it with verbal ones. Clients also sensed what I did and noticed that I cared and was aware of the difficulties they experienced.

PC3 also indicated that he had experienced difficulties with techniques and skills that involved behavioral implementation. Still, he expressed that since the techniques of CBT are more directive than other approaches and some implementations are more based on the client's behavioral activities, these techniques worked well compared to ones that are bond-based, need for insight, and past-oriented. So, relationship-based approaches and techniques that need to show the psychological counselor's abilities were challenging for him in online counseling:

You are looking at the camera or the screen, and the client can realize whether you are listening or not. So, that bond between us may not be formed well. Therefore, counseling or other skills may not work very well in online counseling. Behavioral assignments, on the other hand, still work well. I think differentiating exercises on exposure are still working. Because there is a process in which you activate the client a lot. Therefore, when your intervention is not strictly psychological counselor-oriented, it does not differ much from face-to-face.

Unlike PC3, PC9 expressed that online counseling is a very complex area, and unexpected things could occur; because of this reason, working with verbal-based techniques works well for approaches like psychodynamics. He realized he used more metaphors during online counseling:

I often use stories and produce very metaphorical things in online counseling; for example, if a person has a problem, I give him an example with some natural events, primarily nature-based. The person, let us say, does not express emotions and constantly inhibits feelings. For instance, I say, "After a while, these emotions will gush like a geyser and have the potential to burn everything around them. Because the accumulated emotions cause somatic pain in us." For example, I find such metaphoric things more in online counseling, but I do not know why I can realize more of these. Such symbolic approaches do not come into my mind in face-to-face counseling as much as in online counseling.

He also believed that verbal psychodynamic tools are more appropriate for online like free associations:

I think online counseling is not a very mechanical thing. For example, I believe a dynamist can work well because there are too many distractions in online counseling [...] I use the dynamic approach more in online counseling than face-to-face counseling. Using it in online sessions gives me a little more freedom of creativity because we use free associations.

This theme described the increased use of verbal skills adopted by psychological counselors. Also, it shows how these difficulties caused the increase in the use of more creative approaches, like using more metaphors, directive approaches, and language-based techniques to solve physical and behavioral barriers. Some participants did not mention that using verbal skills were necessarily caused by their creativity; however, some participants who used more verbal techniques declared that they have to adapt and find solutions for the drawbacks of online counseling.

4.2.3.2. More Focus on Perceptible/Observable Parts of the Clients

This theme focuses on how psychological counselors' creativity limits force them to increase their senses about what they see about the client on the screen while providing online counseling. Three psychological counselors discussed that as they could not observe clients, they tried to increase their observation of facial expressions and

observable parts of the clients. They tried to turn this disadvantage into a helpful tool. PC1 expressed her experiences on this by using an analogy of "a person with disabilities":

I realize that I focus more on body language during face-to-face counseling. I noticed that after online counseling, I started to experience more sensitivity to sound and asked myself, "I wonder if the client's tone has changed? Does s/he seem to be shaking a little more now, or is it just me?" So, I realized that I was focusing more intensely on the part of the body that I saw and heard. I use reflection for what I was able to see and hear [...] We miss some points in online counseling. Yes, but I noticed that I pick up more from the client's tone of voice to understand what s/he experiences at some points. It is like people with visual disabilities being more sensitive to smells and sounds.

The following example of PC9 more detailly illustrates why the facial expression gained more importance to observe during the online counseling process and triggered his facial expression observation to explore the emotions of the client:

PC9: A client was having difficulty expressing their feelings, and all I did at that moment was a joke. I was just kidding about something.

I: A joke?

PC9: Yes, I followed his smile there and then reflected it on him [...] Because it was a client we worked with dull feelings. I think it was a creative event. Afterward, there was a situation like a bit of embarrassment; this time, we realized that this feeling was revealed there. Because that feeling was also a hidden feeling, this was a trigger. So, he has experienced that feeling. We realized what emotion came after this experience. Because he had experienced the laugh, he felt shame. It has been a big deal for us to see this come out in counseling.

I: How does this relate to online counseling?

PC9: For example, maybe this is because I only focus on the face in online counseling. The client's face has triggered me over his facial expressions. Because we were working over various emotions, there was no other posture I could focus on in online counseling. I could not pay attention to the physical position of the body, and I could not pay attention to other things. I only have what I focus on the person's face.

To sum up, an imperative and quick adaptation to online counseling triggered professionals to change their views and practices to increase their understanding of clients and help them. Participants stuck with being with the clients emotionally all the

time during online counseling. As a result, they use different methods to invite clients to open up their thoughts and feelings.

4.2.3.3. Adaptation of Physical/Behavioral Practices

Some psychological counselors did not benefit from the sensible parts as much as others. Instead, they have adapted physical and behavioral techniques of their face-to-face practices to online sessions. For instance, PC10 illustrated in the extract below that he had to use play doughs and drawing materials to help his client to explore his feelings:

For example, when a client who is not expressing his feelings comes to me, I can give him/her many directives to express his emotions expressively, generally in face-to-face counseling or in different ways to communicate through his/her body. However, even if I do these in online counseling, it may not work. The effectiveness of this process may decrease. For example, I suggest something to my clients: "let us buy some play dough and do something together for the next session." We draw pictures. We do these kinds of things. You know, to make that expression stronger.

PC10 also tries to bring clients' emotions to light. He admitted that he is not doing these practices with clients during face-to-face counseling. As he adopts the Gestalt approach, he mentioned using more body-based techniques if the case were in face-to-face counseling. A different account from PC4 is using an empty chair practice. He said that he used the clients' space for practicing this technique, and it was a functional practice in his opinion because even the empty chair technique needs physical instruments; it is a cognitive process in the end:

I asked which side you would like to choose. I changed my position like this (the psychological counselor moves to the right of the screen via his chair). For example, she spoke as a prosecutor and explained why she had to break up with her boyfriend. Then he changed his place and passed here (moving his chair to the left). Here, she discussed why, as a lawyer, he should not leave him. And then I said, "step back, now two figures are in front of you." The mind always works with symbols, even if we study these things in online counseling. So, it is interesting that the mind can alter these. She physically pulled back her chair, and I said, "you see, here is the prosecutor, here is the lawyer. You heard what they said; what would you like to say? How do you evaluate it?" In this sense, it was a functional practice in online counseling.

Another experience with the material adaptation to online counseling was from PC6. This psychological counselor used a genogram during her meetings, and she emphasized that using a technological tool to create a genogram makes the genogram more durable and more precise, even after the sessions:

For example, it is much more difficult when I draw on the board in face-to-face counseling. The board does not fit with the size of the genogram. The reason for this, what we call intergenerational transfer, is not just one thing. It is not one generation; it may not fit on the board when you draw by hand. I think that level of aesthetics in this practice also contributes a lot. In online counseling, everything is the same size in place. It is so clear to practice. All we have to do is to look at it. It is also a bothering process that we think, "did we draw that variable incorrectly, or did we draw it incompletely? Should we draw it in black or red?" It is a little bit difficult in face-to-face counseling. It almost takes two or three sessions in face-to-face counseling [...]. Such practices are permanent and transparent materials in online counseling. If clients want me to send it, I send it to them. Later, when something happens in their lives, they can open it and look at it again. For example, I got feedback from clients about this opportunity.

In the above lines, she describes that since the material is aesthetic and straightforward in online counseling, clients have the opportunity to look after the sessions and understand more precisely. To conclude, some psychological counselors could adapt the material needed more practice than others. The mental health providers interpreted behavioral or action-based interventions as more difficult practices in online counseling.

4.2.3.4. Turning Unintentional Disclosures into Positives

This theme illustrates how some psychological counselors perceive the limitations and ethically stressful issues in creative ways. Three psychological counselors utilized the clients' unintentional disclosures during online counseling. In online counseling, receivers/providers open their homes to each other. They see the things that are out of the sessions. They utilized the clients' unintentional disclosures during online counseling for the session's benefit. An extract from PC6 shows that privacy was broken when she was annoyed with the interruption of a child. However, she focuses on the chance to observe the relationship between the child and the mother:

For example, a mother who continues a session with her child at home. We cannot always arrange the environment completely because her child always comes and interrupts what the client is talking about [...] However, as I said, how we use the disadvantages here is essential. For example, you see the bond with the child at that moment. There is someone who is experiencing a relationship, and this is a clue to you as well. That is, it is a positive or negative, disadvantage or advantage. Ultimately, it is a matter of how you put these in your toolbox and how you will reflect your clients within sessions.

PC10 shared that a client was silent and did not talk during the sessions. He admitted that he used the guitar appeared behind his client to start conversations and get to know him better:

Let us say he has not comfortable with defining himself; it is very tough for him. He cannot talk about what he does in his free time. In online counseling, for instance, a guitar hangs at the client's back. I may say, "Oh, I see a guitar in the background. Would you like to talk about it? Are you playing the guitar?" For example, this opens a door for the client to explain himself in such difficult moments.

Similarly, PC8 also has an opportunity to observe the client's daily environment:

I do not know what a client's room looks like in face-to-face counseling, but I think it provides a great advantage. For example, I have a male psychological counselor. He was staying in a dorm and had a messy bed in the back. It is always messy. It is incredibly messy, and he gives me information about what he is experiencing, but I am not involved in such experiences that much in face-to-face counseling.

These psychological counselors perceived that disadvantageous, unwanted disclosures in face-to-face sessions were parts of the sessions. They also suggested that they do not use such things during face-to-face sessions. For instance, PC9 explained that it would be weird if he were talking about the clients' shoes during face-to-face counseling.

4.2.4. Conveniences that Encourage Psychological Counselors to Provide Online Counseling

This theme constitutes which convenient aspects of online counseling encourage psychological counselors to provide online counseling. It involves time-saving, safety,

and comfortableness in own place, exceeding spatial limitations, increased chance of reaching more people, economically affordable costs, flexible scheduling, and continuity of the sessions.

4.2.4.1. Time-saving

This theme intensifies how providing online counseling could save much time compared to face-to-face practices. Like client participants, all psychological counselors said they could use time more effectively than face-to-face counseling practices. They do not spend time on the road or the traffic, which reduces the sufficient time for providing help, especially in big cities. PC3 shares his idea on that opportunity:

15-20 minutes of preparation before the session is enough in online counseling. However, if you are in face-to-face counseling, greetings, the secretary taking the necessary actions, your physical preparation... There are many agendas, and there are many things to do. In face-to-face counseling, half an hour, 40 minutes, or 45 minutes for each meeting is needed for preparation. Even in terms of transportation, a minimum of one hour may be required for each session.

PC9 has been living in Istanbul, and going to his work is very challenging.:

Apart from that, it is beneficial for me in transportation. I do not have to change my places.

To sum up, online counseling was helpful for psychological counselors in this study in terms of scheduling their meetings more easily by using time more efficiently and mainly because of the preparation and transportation periods both in going to the workplace and returning from there.

4.2.4.2. Safety and Comfortableness in Own Place

Nine psychological counselors mentioned that they and their clients could talk more comfortably. One of them particularly said that she feels she is more comfortable in terms of wearing casual clothes. Two had fewer concerns over providing counseling by working from home. Those two controlled their conditions in their home environment and reached their clients in their relaxed environment. Eight out of nine

revealed that clients are more comfortable about expressing themselves in online counseling with the help of a possibly perceived-safe place, home. As their experiences help them to observe their clients' conditions, some psychological counselors stated that clients' home environment is a safe and more relaxed place to talk about issues only if the client has a chance to be alone in this situation. As an example, for the psychological counselors' comfort, PC 8 stated an honest reflection about the advantage of comfort for the psychological counselor and described how the home environment shaped her during online counseling sessions:

The same comfort exists for us too. So, my top side looks like this (showing the clothes that appear from the psychological counselor's chest), but sometimes I wear pajama bottoms. I mean, to be honest, I have to say this. After that, when I get clients in a row, I do not try to catch myself from one place to another. I am in my house; I am not wasting time. It is a comfortable thing.

In terms of decreasing safety concerns, PC4 stated that distance might be protective for psychological counselors:

Maybe, since the issue of physical contact is not possible in online counseling, it may protect us a little more in this sense, especially regarding claims such as harassment.

In face-to-face counseling, there is more anxiety, but in online counseling, psychological counselors could be more relaxed, as mentioned by PC9:

I am much more worried about how the session will work before the session starts in the counseling room when I am in face-to-face counseling. Of course, when I thought about it too much, I saw that my anxiety had increased slightly. That is why I go an hour before the session and relax there, but I do not have this kind of anxiety in online counseling.

Most psychological counselors pointed out that clients can open their issues more comfortably, safely, and expressively if they can manage the environmental conditions in online counseling. Extract from PC2 explains that it is more comfortable and safer to open conversations for clients about serious issues in a secure environment:

People who talk about their trauma, abuse, and crises can get help while sipping their coffee in their seats, mostly at home, where they feel safe. I think this is a significant advantage.

Similarly, PC9 states that a perceived-safe environment for a client is an essential part of the counseling that could achieve in online counseling:

Some clients experience high-level anxiety or fear in face-to-face counseling. For example, objects like Winnicott's transitional object can still be seen among adults. So, rather than bringing that object to face-to-face counseling, this object's presence in online counseling may relieve the client a bit [...]. For instance, I had a client. There were times when the client felt very comfortable and safe. Even when his anxiety level increased, the room was in a safe zone for him, he perceived the room as a comfortable place, and the room's physical structure pleased him. In face-to-face counseling, this may not be possible sometimes. The physical shape, other distractors in the room, and other things can affect this comfort.

Being in a home also helped clients bring immediate expressions in a comfortable way regarding an experience or issue discussed in the sessions. Such an example from PC4 illustrates this opportunity:

Something happened to me the other day. While discussing a subject with one of my clients, we had a topic about social relations, such as feeling neglected at work. As soon as we discussed it, I asked the client, "Do you have an earlier memory about this feeling, like an experience of being excluded?". A photo of the client in kindergarten came to the client's mind. S/he said, "Can I share it with you?". I said, "of course." S/he went to another room and took her photograph. Then s/he sent the photo to me on WhatsApp, and we talked about how long s/he felt neglected in the image. You do not have a chance to do this in face-to-face counseling.

To conclude, this theme illustrates that psychological counselors and clients have comfortable and safe experiences from the perspectives of psychological counselors. Various extracts were given to show different accounts, perceptions, and experiences. Most psychological counselors also suggest that the clients are more relaxed in the home environment if they can ensure being alone. Moreover, the expressions of an emotion/ issue can be more potent for clients thanks to the perceived safe and comfortable place.

4.2.4.3. Exceeding Spatial Limitations

Eight psychological counselors declared they were pleased with the accessibility of online counseling and the time advantage. Thanks to online counseling, they reached out to more clients, and their clients more easily reached out to them, too. For instance, PC9 explained that he reached the areas beyond the big cities:

While it may be much more difficult to find and reach clients with face-to-face counseling, I can easily conduct with someone from Ağrı or Hakkari. I can touch the lives of the people there at some point.

PC6 also mentioned the quick access without needing to be in the same place:

Online counseling can be reached quickly. For example, I can interview tomorrow with a client referred to me today.

In addition to that, PC4 stated that it gives people more freedom to access competent practitioners:

It has a severe advantage in reaching more professional people, especially in other cities. For example, finding good professionals was more challenging for people who live in the countryside, but that is what online counseling does for them.

Most psychological counselors think they are more accessible for clients who want to apply for counseling with the help of online counseling services. As they mentioned that geographical conditions, having a qualified provider, and reaching the professional in necessary conditions make online counseling convenient for both sides.

4.2.4.4. Increasing the Chance of Touching People's Lives

Psychological counselors were asked how they view providing online counseling from a social justice perspective. Three psychological counselors (PC9, PC4, and PC3) stated that they consider online counseling supportive in reaching more people. However, they illustrated that it needs to be arranged by the governmental system. Otherwise, only providing online support would not be beneficial. Four psychological counselors (PC2, PC6, PC7, and PC10) suggested that they reach more and more divergent people to help, thanks to online counseling. They also emphasized that

online counseling could be supportive in terms of society. For instance, PC2 revealed that he perceives online counseling as a socially contributed prospect:

I also look at the social dimension of online counseling. Honestly, I consider online counseling much more functional and pragmatic in delivering help to people who cannot reach services and cannot come to help. Otherwise, it is hard to get help from a village in the world or a place in Türkiye by coming to Ankara or Istanbul. It is helpful for people who cannot go to an office to find time and money. It seems a little more sympathetic to me in terms of this perspective, as there is a possibility that it can be offered under more economical conditions [...] I mean, I always feel we are deceiving ourselves a little in a society where people who already have money get therapies from the best places. What happened at the end of the day? Whom did we serve, and what benefits did we provide regarding community mental health? [...] The thought that people could get help in online counseling, maybe at half price, maybe at lower prices, or free with the support of non-governmental organizations or public institutions, gives me some hope.

PC10 also has two reversed views on social justice, but he admitted that he started reaching more people. This opportunity helped him provide more free sessions to those needing psychological help. He used “the community singer” analogy for providing online counseling:

I am meeting with more people in this sense. Then, (I thought) “if I can offer it to more people, I should offer it to people who need it more.” For example, let us say you are in need. Because it is easier for me to offer this service to people who would not usually receive it, and it is easier for that person to reach it, the number of free sessions I provide has increased significantly. So, I do this process more. In that sense, I think it has a supporting point for society. I feel like in online counseling, you know [...]. Like singers sometimes give community concerts, I feel like it is sometimes necessary to do something like this because, after all, I can offer this service very conveniently. I can deliver online counseling more comfortably. Because of that, I create such a space (providing more people) for myself.

His reversed thought was like this:

For example, in online counseling, the client must have a computer. S/he must have a home environment, have a private room that belongs to him/her. To proceed online counseling process, maybe s/he should have a headphone or a camera. In that sense, we cannot reach everyone.

PC8 also emphasized that online counseling takes equality from the people with demanding vital technological needs:

On the other hand, it has a restrictive side. Not everyone has internet at home. After all, you do not have a good internet connection, a good working phone, or all those programs. For that reason, for many people, face-to-face counseling may make more sense because of the easy access.

This theme was illustrated as an increased chance to provide help as four psychological counselors clearly stated this opportunity. Three psychological counselors also said that chance but paid attention to its regulation and governmental parts. The other three psychological counselors (one considered both positive and negative) thought that online counseling requires technological and technical instruments that people cannot afford all the time. In this theme, psychological counselors who consider online counseling a supportive manner for society revealed their opinion regarding financial, cultural, and accessible sides.

4.2.4.5. Economically Affordable Costs

Psychological counselors were controversial on this theme as some clarified that the online counseling service fee is the same as face-to-face counseling. Seven psychological counselors mentioned that online counseling is more economical than face-to-face counseling. Six out of seven stated that they perform their online sessions with fewer costs because they pay less effort than face-to-face counseling sessions, and their prices decrease in online counseling (PC2, PC4, PC6, PC7, PC9, and PC10). Some (PC1, PC2, PC4, PC6, PC9, and PC10) also believe that online counseling economically helps psychological counselors, although some stated that it is slightly different for the professional. As a result, they prefer to lessen the budget for clients in online counseling sessions, as illustrated by PC4's extract about his experiences:

I work for something like (Y/100x28,6) Turkish Liras in online counseling. [...] but if I do this at the office, it costs something like (Y). I think that is a big difference. The commissions received by the offices are pretty high. Of course, it is impossible to say this issue only for offices that work with the commission. For instance, if you try to rent an office, you need severe financial costs to pay, and you have to reflect this to counseling somehow. I think there is a big difference, at least for me. So, the minor commission I know that the office

works with is 30 percent. Most of them work with 40 percent. It is a severe amount. It is almost half.

Two psychological counselors suggested that they prefer the same prices as the psychological counselors' effort is the same. Extract from PC8 revealing the same effort that was produced for providing counseling:

Clients also ask me if the fee is lower for online counseling. No, because the service I provide does not differ from the other. That is why I never differentiate the cost of face-to-face and online counseling. Both are the same.

Most psychological counselors prefer to make online counseling more economical than face-to-face counseling as the costs, time and efforts decrease compared to face-to-face counseling. Some psychological counselors suggested that the labor is the same in online counseling compared to face-to-face counseling.

4.2.4.6. Flexible Scheduling

Four psychological counselors suggested that their work schedule got easier with providing online counseling. They declared that their work schedule in a day was highly affected, especially when a client canceled face-to-face counseling sessions. In contrast, they are more satisfied with the scheduling because they can easily change the meeting time. The extract from PC7 illustrates how flexible scheduling chance help clients receive help at an appropriate time for themselves and the psychological counselor:

You can start the process faster in online counseling. Determining the appropriate day and time in face-to-face counseling can be more challenging. For example, I cannot see a client at 8 pm in face-to-face sessions because I do not have such an environment. The office where I see clients in face-to-face counseling closes at 6 pm, but I can do online counseling at 8 pm. That is why it gives the time opportunity as well. This opportunity can be perfect, especially for employees who want to receive help around 8-9 pm.

On the contrary, PC6 stated that it is not always helpful to have flexible scheduling. Some clients procrastinate sessions to another time since they know there is more chance of make-up in online counseling:

There may be more procrastination in arranging online counseling sessions. Because it is such a slippery floor, people think they exist wherever there is the Internet.

In conclusion, psychological counselors think it is good to have a flexible schedule as arranging sessions become more convenient for some. However, as PC6 suggested, it is possible to end up with clients who procrastinate frequently.

4.2.4.7. Continuity of the Sessions

Four psychological counselors stated that they experienced fewer dropouts during online counseling than in face-to-face practices. Two among them also suggested that flexibility with the space allowed them to continue their sessions with the client during holidays, traveling, or illness situations. As a psychological counselor who experienced fewer dropouts and continuity of the sessions on different occasions, PC8 discussed client feedback and mentioned that online counseling was more effective than face-to-face sessions because of fewer dropouts in online counseling. However, she also admitted that there is a slight difference between online and face-to-face counseling regarding the number of sessions.

I can talk about an 87 percent satisfaction level in face-to-face counseling. I think my clients benefit greatly, according to the feedback I receive. I lowered the rate a little more because I excluded the dropouts. When I look at online counseling, for example, I can say 90-91 percent. Let me tell you why because there are not many dropouts there. Of course, you have to look at things like the ratio. It is not the same. Sample sizes are not the same, as I have seen more clients in face-to-face sessions, but I can say 90-91 percent to 87 percent.

The continuity of the sessions is not only provided by the clients' avoidance of dropouts. Also, psychological counselors thought they were more comfortably maintaining online counseling sessions. Extract from the PC1 acknowledges how flexibility and spaceless of a psychological counselor could encourage sessions to be more sustainable:

When I go out of the city for rest or for a different thing to do, we have an ongoing counseling process with my clients. Going out of the city at such times makes me think, "I wish this does not happen now because we were making good progress with the client. This week could be a week for us to re-evaluate and transform."

On the other hand, PC10 stated that clients tend to see online counseling as a trying process:

You feel like you will begin to establish a relationship with the client, but s/he may not come the next time, or the client sees this as something like a try. Without establishing a relationship, the client comes to sessions only to ask questions and then leaves.

To sum up, this theme clarified the continuity opportunities of online counseling with fewer dropouts. Psychological counselors declared that their scheduling of a session and clients' maintenance gets easy. Professionals were delighted in terms of the sustainability of the sessions.

4.2.5. Struggles that Discourage Psychological Counselors to Provide Online Counseling

This theme illustrates the situations and experiences that bother psychological counselors during online counseling. It involves five subthemes: Hesitancy to use online counseling for severe and private topics, management of technical issues, inability to observe nonverbals, technological barriers to emotionally deep sessions, and lack of readiness and responsibility in online counseling.

4.2.5.1. Hesitancy to Use Online Counseling for Severe and Private Topics

Psychological counselors tend to choose online counseling for relatively more manageable topics in an online environment. (e.g., adaptation, academic, career, motivation, stress management). They also prefer online counseling for sexual orientation issues as they assume it would be easier for the person to talk about themselves. Additionally, psychological counselors thought that online counseling would be more beneficial for people who experience difficulties in managing their time for internet usage. They thought that they could practice with more exposure in that space. All psychological counselors mentioned that they prefer face-to-face counseling for severe or more complicated issues (e.g., trauma, loss, breakup, divorce, depression). Psychological counselors' format preferences between online and face-to-face counseling in terms of the topics are represented below in Table 4.5.

Table 4.5*Psychological Counselors' Format Preferences by Subject*

	<i>M</i>	<i>SD</i>
Crisis/disaster/trauma	4.9	0.32
Phobias	4.6	0.70
Sexual abuse	4.5	0.85
Loss/grief	4.5	0.85
Break up/divorce problems	4.5	0.71
Depression	4.4	0.84
Family issues	4.2	0.80
Addiction	4.2	0.80
Body image	4.1	1.00
Romantic relationships	3.9	0.87
Bullying	3.8	1.03
Anger management	3.7	1.34
Anxiety	3.7	1.25
Health issues	3.6	1.07
Relationship issues with friends	3.5	1.08
Issues with sexuality	3.4	1.43
Cyber-bullying	3.4	1.43
Attention problems	3.3	1.42
Sexual orientation	3.3	0.95
Stress management	3.1	1.29
Career issues	3.0	1.41
Adaptation issues	3.0	1.05
Economic issues	2.9	1.38
Motivation	2.9	1.00
Work issues	2.8	1.32
Internet usage	2.7	1.57
Academic issues	2.7	1.06

Note. 1=I definitely prefer online counseling. 2=I probably prefer online counseling. 3=I prefer either online or face-to-face counseling. 4=I probably prefer face-to-face counseling. 5=I definitely prefer face-to-face counseling.

Interestingly, the psychological counselors in this study have positive experiences with practicing trauma, depression, and other types of severe issues. However, they admitted that face-to-face counseling would improve satisfaction, effectiveness, and management of the situations. For instance, an extract from PC9 illustrates that he worked with the loss and grief during online counseling, but he still prefers face-to-face counseling for it:

I was going to choose the 5 for loss at first. The reason I chose 3 is that I thought that a client who came to me with another problem came up with a loss and grief issue after a long time in the session. So, I thought it could be continued online, and I went to 3 because I observed that this issue could be worked on in online counseling. However, if there were a person who applied to me directly with loss and grief, I would answer as 5.

PC7 also stated that she worked with depression during the pandemic but still prefers to work it in face-to-face counseling:

If we talk about workability, depression can be worked in online counseling. We worked many times during the pandemic [...] When I look at this profile in general, I think I prefer the face surface for the items here, which are a little more severe and more relevant to the client's private life.

Similar to the clients' results, psychological counselors also choose more personal, critical, and severe issues for face-to-face counseling as they have more opportunities to intervene and manage different situations. They tend to choose online counseling when the client's problem is not a deep, serious issue.

4.2.5.2. Management of Technical Issues

This theme illustrates technical issues resulting in the effectiveness of the therapeutic process. All psychological counselors mentioned the difficulties of technical problems, as can be expected with the involvement of internet connection and the technological quality of the instruments. Participants who used Zoom stated they did not experience any difficulties with the program, whereas those who used Skype encountered some issues. Psychological counselors do not think that they can control these issues entirely. Even if the technical instruments are well-prepared, the chance of these handicaps also depends on technological qualities. The main technical problem that psychological counselors declared was internet connection instead of program issues, although an extract from PC3 illustrates both:

If the internet connection is not very good, it does not matter what program you use [...] However, for example, I can say that I have more problems with Skype. I do not know if it is because of the internet connection or something else. If the internet connection is good, the best apps are FaceTime and Zoom, according to my observations. These two works very well.

Some psychological counselors (PC1, PC2, PC7) also stated that the necessary quality of clients is not always met the standards. Clients cannot afford the quality instrument to receive online sessions. Because of this reason, they may receive ineffective help. PC1 stated that technological requirements for both services:

The psychological counselor must have a good internet connection. You need to have good technical equipment, and after a year, when you use your computer for only one year for online consultancy, you start to have some problems with a single computer. Because it has something to do with the battery, this is my current problem. I guess that is why it comes to my mind. So usually, I can make 2-3 calls a day with my computer, but now it shuts down as soon as I unplug the battery. So, I must change the battery. When I think about it, it is an added cost for me. Our clients also have a certain level of internet and technical devices they can use, but not all of them may have them.

In conclusion, technical issues may not always be manageable, and having a certain amount of technological quality also might be costly for individuals.

4.2.5.3. Inability to Observe Nonverbals

All psychological counselors revealed that they had at least one of the observational difficulties during online counseling sessions. All participants mentioned obstacles regarding the observation and understanding of body language. In contrast, some psychological counselors specifically also suggested that maintaining eye contact is tiring (4) and getting gestures and mimics during online counseling is challenging (4). Extract from PC8 explains how body observation difficulties lead to a lack of understanding holistically:

Above and below the waist, even our chest [...]. We cannot see the below of the client's torso. So, I ask myself, "is the client hitting his/her foot? Is s/he putting his hands together? Is s/he plucking his hands? We are never able to see these though I think they are important messages.

PC5 also implied that she has a challenging experience with maintaining eye contact:

I think the eye is moving a lot. Because, you know, the message is on the screen all the time, even when I am talking to you, sometimes I look at the keyboards, I am looking at you momentarily, then I am looking at myself from the screen. Of course, people notice this issue. I think I get distracted when I listen [...]. Eye contact is a little more complicated in online counseling.

Psychological counselors also emphasized that technical qualities hugely affect the understanding of mimics and gestures of both parties, as mentioned in the extract from PC9:

The fact that mimics might not be observable clearly due to the client's internet connection. I think it somewhat reduces the effectiveness of the counseling the client received.

In conclusion, getting nonverbals for psychological counselors is complicated in online counseling, with a lack of physicality. Psychological counselors thought that observing body language was an obstacle for them. This issue led to the complex implementation of skills and interventions that prevent psychological counselors from showing their capabilities in online counseling.

4.2.5.4. Technological Barriers to Emotionally Deep Sessions

This theme illustrates that psychological counselors had difficulties understanding clients' emotions in online counseling compared to face-to-face practices. Seven psychological counselors stated that emotional experience during online counseling became difficult as there is a device like a computer between the psychological counselor and the client. In that sense, participants' experience was challenging to understand clients' feelings. Although psychological counselors mentioned that they do not have difficulties reflecting on clients' feelings in online counseling, they declared that the technological environment and technical devices sometimes make emotional situations harder for psychological counselors. For example, PC3 illustrated that "the basic difference for him between online and face-to-face sessions was the emotions." Because of this reason, he thought that the conversations in online counseling were more directive, like information giving rather than an insightful experience:

When I think about it, it seems that behavioral approaches are a little better online. We cannot perform much in online counseling when there are more emotional experiences, especially in a situation like childhood trauma [...]. In short, a fundamental difference between online and face-to-face counseling is emotions.

Similarly, PC2 also experienced that sometimes when he encountered technical issues, he was unable to receive facial expressions of the clients to understand body signs of emotions:

Sometimes the problems with this technology that I have experienced can distract me. You know, just like in face-to-face counseling with the client, I sometimes have difficulties focusing due to technical difficulties and problems. I cannot see the facial features exactly and do not know what s/he is going through or what s/he's feeling right now.

Unlike the other accounts, PC6 stated that she also struggled with understanding clients' feelings. However, she thinks that the online environment allows clients to see their emotions when you reflect on their feelings because clients have a chance to see both psychological counselors and them on the screen while making online conversation:

Especially reflection of feelings. That is why, for example, I want the light to be always on. I may say something like this: "You are very angry with your mother, but you are laughing simultaneously." to show this difference. So, the light must be on. S/he is already watching himself; s/he looks at himself, s/he looks at me, but s/he also sees his/her reflection. That is why online counseling is particularly good at reflecting feelings.

To conclude, psychological counselors had difficulty understanding emotions with the barriers of technology and technical difficulties of necessary instruments for conducting online counseling. Technology (e.g., internet, computer, program) was the essential mediator between two parties to facilitate communication. However, PC6 managed the situation more positively, although she also stated that understanding emotions in online counseling is not always straightforward compared to face-to-face because of its limitation. Consequently, psychological counseling in the online space is indirectly and highly affected by the qualities of these mediator instruments.

4.2.5.5. Lack of Readiness and Responsibility for Online Counseling

This theme illustrates the similar features of the clients' lack of readiness in the clients' result part. As an additional dimension, psychological counselors also have problems with readiness, and they stated that clients tend to manipulate the responsibility towards sessions. Again, in an uncontrolled environment, several psychological

counselors said that clients lack responsibility towards managing instruments (e.g., light, camera angle, headphones, internet, computer usage rather than connecting with mobile phones). Psychological counselors also mentioned that clients lacked responsibility and readiness for appropriately arranging their environment (e.g., being alone, ensuring privacy, putting away the distractors). As a result, the process's effectiveness was negatively influenced. Seven psychological counselors indicated this component. For instance, PC2 disclosed that his observation during the online counseling sessions showed him that his client's responsibility and preparation for the sessions are less compared to his face-to-face practices:

This thing (going from one place to another) can also be an advantage in face-to-face counseling because it shows the client to take responsibility. It is like, "I will prepare, go somewhere and do it with a sense of responsibility."

As stated by PC3, it becomes harder to control responsible behavior in online sessions as there are different spaces (Psychological counselors', clients', and online environment) and factors of that spaces and technological instruments that mediate conversation:

There is something different in face-to-face counseling. Because it is an atmosphere you create, the client, family, or couple is involved in a new physical environment. When the client arrives, there is a physical reality. Therefore, there is a positive or negative but concrete reflection of your intervention in certain things. These might be observing the family well or the individual well, or your smallest act as a psychological counselor [...] However, when we are in online counseling, there are too many factors in the online environment that you cannot control. [...] The client has complete control of certain things. For example, s/he can deal with something else in front of you. S/he can get up, take something, and come again, or eat and drink something.

Three of seven stated that psychological counselors' readiness could also be achieved more effectively in face-to-face sessions than online counseling. It becomes more important to be prepared in online counseling sessions as some preliminary cognitive and behavioral processes are missed in online counseling. PC7 stated that an instant connection to sessions without showing initial preparations is a negative issue, and some parts of the session warm-ups were missed:

When our clients come to the meetings, we welcome our clients at the door. We say welcome and then ask them to sit down. Of course, there is no such thing in the online counseling process. You start suddenly, you meet, and you talk. So, this warm-up in face-to-face counseling can be happening a bit better.

More readiness for face-to-face sessions is not only an issue for the clients. PC4 also stated preparation process makes him feel good:

I think that there is also a preliminary preparation process by leaving the house, going to an office, and doing counseling there. It is different from saying, “my time has come; let us sit in front of the computer.” Mentally preparing for that environment also helps me feel better.

To summarize, this theme illustrated that readiness and preliminary preparation in online counseling decrease for both clients and psychological counselors. It becomes a challenging issue for psychological counselors to control the session responsibility of the clients. The preparation process also makes some psychological counselors feel better emotionally.

4.2.6. Psychological Counselors’ Aspirations and Suggestions for Improving Online Counseling

This superordinate theme covers the thoughts of psychological counselors for improving online counseling. It contains five subordinate themes: Format preferences for interaction, suggestions for developing online platforms, training for ethics, techniques, and process, standardized rules, regulations, and laws, and adapting online counseling to counseling curriculum.

4.2.6.1. Format Preferences for Interaction

Eight psychological counselors suggested they prefer a face-to-face counseling format as a first choice. Five participants chose the hybrid format as a second choice for different reasons: Continuity, flexibility, advantages of face-to-face sessions, and considering clients’ needs and conditions are positive arguments for the hybrid model by psychological counselors. This result also supports that online counseling lacks some opportunities in face-to-face counseling (e.g., building trust quickly, seeing nonverbal behaviors, responsibility, physical interaction, and artificial

communication). Psychological counselors reported that they preferred to be in face-to-face interaction as much as possible in the current study. However, they did not think that online counseling was a useless prospect. Indeed, two psychological counselors stated that their current work and future conditions would fit more with online counseling. This data is described in Table 4.6. below.

Table 4.6

Psychological Counselors' Preferences on the Formats of Counseling

	Order of Preferences			Reasons for Preferring Counseling Formats		
	1	2	3	1	2	3
PC1	f2f	H	OC	Live interaction	Continuity	Easiness
PC2	OC	f2f	H	Convenience	Less convenient	Inappropriate to conduct
PC3	f2f	H	OC	Live interaction	Having advantages of f2f	Virtuality
PC4	f2f	H	OC	Appropriate for everyone	Answering some clients' needs	Answering some clients' needs
PC5	f2f	H	OC	Nonverbals/ trust/ responsibility	Flexibility	Distance
PC6	f2f	OC	H	Avoiding procrastination/ nonverbals	Comfort	Having disadvantages of both
PC7	f2f	H	OC	Live interaction	Continuity	Access
PC8	f2f	OC	H	Live interaction	Comfort	Inconsistency
PC9	f2f	OC	H	Live interaction	Distractors	Inconsistency
PC10	OC	f2f	H	Flexibility	Lack of opportunities	Inconsistency

Note. OC=Online counseling. f2f=face-to-face counseling. H=hybrid format, which includes online and face-to-face counseling.

Extract from PC1 illustrates how the live interaction, nonverbal behaviors, readiness, and responsibility of clients are crucial for psychological counselors to put face-to-face counseling into the first choice:

When clients start to react emotionally, we want to offer clients a tissue or giving water. In that room, even this small act you do is perhaps an ordinary thing. However, when you do it in response to your client's reaction, it is a very human-centered and indirectly healthy behavior in relationships that show that you are thinking about him/her. It is the behavior of the psychological counselor. The most significant advantage of face-to-face counseling is allowing us to observe body language entirely. Another reason is the motivation of the client. Because to come to the room, to be able to interview you, s/he will need to set aside a certain amount of time for this. This process will require some preparation. S/he will need to plan and come up with a process where s/he will mentally prepare himself for what s/he will share in the room and how much s/he will share.

Some psychological counselors consider that a hybrid format is inconsistent for psychological counseling sessions regarding communication. Extract from PC8 shows this dilemma:

The hybrid comes last for me in preferences. I mean, because I want consistency, either face-to-face or online counseling. It is okay, but face-to-face communication and online communication are very different from each other.

In summary, psychological counselors' choice towards future applications mainly depended on having a live interaction as much as possible because they thought some part of the traditional communication was missed in online counseling. Although they thought online has very convenient features, few chose it as their first option for their working conditions and flexibility. Lastly, some psychological counselors explained that online and face-to-face counseling is not the same in building communication. Because of this reason, they would prefer to start with one format and continue with it. These results mainly show that psychological counselors need live interaction as much as possible to get satisfaction from the counseling process.

4.2.6.2. Suggestions for Developing Online Platforms

Seven psychological counselors suggested that one online-specific platform rather than different programs the professionals use would be beneficial for avoiding ethical issues faced during online counseling. They suggested that confidentiality, security, and boundary issues can be solved within this platform. For example, PC4 drew his attention to the security:

We use very general platforms for security issues. Maybe more certain programs and applications which provide security should be developed by the state. Should the identities of people entering here be known? For example, this is a severe problem. I can introduce myself as a professional on the internet even though I do not have qualifications. So, I think it would be very healthy to create a score table and develop a security mechanism regarding who can enter and who cannot get into that system by TUBİTAK or mental health institutions.

PC10 suggested that a third person (secreter) help to arrange the meeting, and it is more structured to have a session with clients without concerns about the boundaries of the relationship. That is why he thinks that a program developed for online counseling that enables to overcome boundary violations could be very beneficial for professionals:

It is better to have an app or a website. Because, as I said, a third person (secretary) comes into play when you are in face-to-face counseling. The person arranges the appointment and receives payment [...]. There may not be such a process in online counseling. You know, this causes the relationship to start differently. I thought if there was such an application or something, or as I said, a website, and if we could make the appointment there, we could make the payment from there [...]. It would be better.

Some psychological counselors also think that developing appropriate platforms could be achieved through technological improvement and interdisciplinary approaches rather than a specific application:

There might be technologies that I can observe in a 360-degree area of the client to provide a much better service in a much more comfortable way.

To conclude, psychological counselors generally thought that a specific ethically controlled platform or program could be beneficial in providing ethical online counseling services. Also, they believe development is related to technological improvement and collaboration with the other disciplines' professionals (e.g., engineers). It appeared that their concerns about the misuse and misconduct by people who are not mental health providers could be avoided with this improvement.

4.2.6.3. Training for Ethics, Techniques, and Process

Six participants suggested that the education and training should be mandatory and arranged by mental health institutions and associations because online counseling was performed with no training during the pandemic. They stated that there is a need for education on several topics in online counseling. The psychological counselors suggested that some topics might be covered in training, such as ethical issues, technology use, difficulties in online counseling, and how to adapt face-to-face skills to online counseling. For instance, PC1 realized that psychological counselors are incapable of in some circumstances with online-specific issues, and to avoid harm or misconduct; there needs to be an education for it:

I realized that we learned many things about face-to-face but not online counseling. The online part seems like there are many things we know about technology in our lives, but it is not for the technology used in psychological counseling. For instance, a course in online counseling about online processes or ethics in online counseling..., Difficult situations in online counseling..., We have always seen them in face-to-face counseling. However, we had no training about the online counseling process and how to overcome the issues. I think we are behind the times in that sense. We need advancement as a profession.

PC4 also suggested that there is a need for education on the adaptation of face-to-face techniques to the online sessions:

We are already working well on some things, such as reflection of feelings, the reflection of content, respect, concreteness, empathy, and basic skills [...]. However, I think something should be done about adapting the techniques to online counseling, especially how to adjust them. This problem has also appeared in distance education. Distance education should not be an online version of face-to-face education. So, online counseling is something different from face-to-face counseling.

Some psychological counselors suggested that these educations also can include supervision groups for psychological counselors to share their own unique experiences:

It is about the difficulties and disadvantages that we have experienced. For example, I wish there was a more profound education on this subject [...] I

wish that this education could be like supervision where we could come together and talk about online counseling experiences by being together.

In summary, psychological counselors believe that online and face-to-face competencies differ in some practices about ethical conduct, adapting some skills, technology usage, and experiences encountered in online sessions. As a result, structured, deep training is necessary for psychological counselors who implement online counseling sessions.

4.2.6.4. Standardized Rules, Regulations, and Laws

Psychological counselors suggested that standardized rules, regulations, and laws can protect the psychological counselors and clients and specify the online counseling area. PC7 illustrated that she needs a clear guideline for the unethical conduct of clients:

How should the process be handled when ethical violations are caused by the client, not by me? The legal information part is incomplete for me. There are no sanctions on this kind of subject in Türkiye. This issue might be cleared. There needs to be a more structured online counseling process.

PC3 was more focused on the law issues that will clear the borders of serving online counseling:

I think it is essential that lawmakers need to be the people who know well online counseling and its limitations. They should be the ones who can protect both clients and psychological counselors. Also, there may be refereeing institutions to apply for ethical problems. These solutions could be fundamental.

In summary, psychological counselors disclosed that they need clear rules, regulations, and laws regarding online counseling to support mental health professionals, institutions, and associations. They also emphasized the critical role of governmental acts for these procedures for online services and face-to-face counseling.

4.2.6.5. Adapting Online Counseling to Counseling Curriculum

Three psychological counselors suggested that online counseling needs to be integrated into counseling education for the field's development. They implied that it

could be very beneficial for undergraduate or graduate courses to include this area in university education so that these services can get to a more advanced level and be learned by the students effectively. Extract from PC7 illustrates this need:

A lesson should be opened. In other words, the ethical issues of it, how to do this business with the rules need to be taught much better. I think there should be courses; they should be in the undergraduate. There may be elective courses for undergraduates, but these must be at the graduate level. This topic is a necessity nowadays.

Integrating online counseling into the counseling education curriculum seemed important for some psychological counselors. Some of them also stated that the technological integration of this field is behind the age, and it needs to be developed with current technological changes.

4.3. Summary of the Results

The recurrent themes of the study show that clients and psychological counselors have similar and divergent views, experiences, and suggestions for online counseling. As themes emerged, the results showed that ethical considerations are crucial for psychological counselors. However, they are also concerns for clients. Thus, clients realized that privacy, confidentiality, and boundary issues are problematic in online counseling. Results show that the unique feature of online counseling that differs from face-to-face counseling is the environment. The virtual environment of online counseling, things in that environment, and conditions are as key as the clients and psychological counselors themselves. They play an essential role in holding efficient sessions in online counseling. Although they can be managed to some extent, being in a different environment lacks the control of individuals over some ethical issues. Thus, the environment and existence of all other variables in that space can be considered actively participating in the counseling process. (e.g., people, internet connection, headphones, the room's shape.)

Since there are multi-dimensional spaces (virtual space, psychological counselors' office/home, clients' environment), the possibility of involvement of the other things is enormous. Therefore, these discourage participants and lead to ethical, professional, or client-based concerns. It is also apparent that the flexibility and convenience of

online counseling are helpful for participants, but the virtual presence, establishing the therapeutic relationship, and its elements in online counseling is a different process than what participants experienced in face-to-face counseling.

Psychological counselors and clients also knew the need to develop online counseling services. This requirement was because they struggled with unprofessional and unethical conduct, having hard times with environmental obstacles (e.g., ensuring privacy and confidentiality), and inconsistency with using platforms. Results also indicated that some psychological counselors have difficulties adapting techniques to online counseling. For some, the sudden transition during the pandemic process and conditions forced them to adjust their techniques and skills. They are mainly utilized by some basic counseling skills and word-based techniques (e.g., metaphors, reflection of feelings). Psychological counselors perform this practice because physical and behavioral conditions are lacking, according to psychological counselors' experiences. However, few psychological counselors could manage to use behavioral and material-needed implementations. For the future of helping services, most clients necessarily choose to receive help in the hybrid format because it is the best fit for their living conditions. However, psychological counselors choose face-to-face counseling practice and its unique experiences more. Participants also discussed the need for improvement in online counseling from different perspectives. To sum up, online counseling is more "liquid" and "complex" than "solid" and "clear" when we compare it with traditional face-to-face counseling settings.

CHAPTER 5

DISCUSSION AND CONCLUSION

This chapter discusses the study findings, the implications for future practices, and suggestions for further research by utilizing relevant literature.

5.1. Discussion of the Findings

This study aimed to examine positive and negative experiences, the challenges faced during the online counseling process, the feasibility of it, expectations, and ideas to develop effective online counseling services. The researcher benefits from actor-network theory to reach this aim.

The recurrent themes in the study were introduced in several ways. There were five superordinate themes for the clients: ethical considerations that clients are concerned about, experiences with the online therapeutic process, conveniences that encourage clients to receive online counseling, struggles that discourage clients to receive online counseling, clients' aspirations, and suggestions for improving online counseling. Moreover, there were five parallel superordinate themes and one different superordinate theme for psychological counselors part of the study: Lack of control over ethical issues, experiences with the online therapeutic process, pushing the limits of creativity, and the conveniences that encourage psychological counselors to provide online counseling, struggles that discourage psychological counselors to provide online counseling, and psychological counselors' aspirations and suggestions for improving online counseling. Thus, pushing the limits of creativity as a theme was distinctive compared to clients' results.

The study's results will be discussed under seven main headings that compare the themes in both participant groups. These will be: Actor-network theory and online

Counseling, lack of control and concerns over the ethical issues, experiences with the online therapeutic process, conveniences to encourage experiencing online counseling, struggles to discourage experiencing online, aspirations and suggestions to improve online counseling, and pushing the limits of creativity.

5.1.1. Actor-Network Theory and Online Counseling

As previously mentioned, online counseling generally lacks a specific theoretical framework (Childress, 2000; Cipoletta & Mocellin, 2018; Piri, 2011; Richards & Vigano, 2013). However, few studies used different theoretical frameworks like the Unified Theory of Acceptance and Use of Technology originated from the Technology Acceptance Model (Venkatesh et al., 2016)., which aims to examine individuals' acceptance of technology use (see Békés et al., 2020; Lazuras & Dokou, 2016). The Theory of Planned Behavior, which is a theory of psychology for explaining individuals' beliefs, attitudes, and behavior (Ajzen, 1991), was utilized by the researchers (see Erdem et al., 2018). Most past research on online counseling has covered the topic without utilizing a theoretical framework. Indeed, only two studies used Actor-Network Theory to explain online counseling services (e.g., Heinsch et al., 2021; MacMullin et al., 2020).

The researcher framed online counseling as a network that includes several human and non-human actors in this study. In online counseling, these actors may have more roles in the network of online counseling. For example, the technical and technological quality (e.g., the internet, the computer, the camera) could be examples of non-humans in online counseling networks. Also, the home conditions (both for the client and the psychological counselor) could be examples of human actors in the online counseling environment.

The researcher embraced actor-network theory as a theoretical framework for explaining some of the study results associated with the theory's perspective. Our results are compatible with the actor-network theory in several ways. Several recurrent themes were related to the actor-network theory in the present study. These were: the themes related to ethics, including environmental privacy, confidentiality, security, and boundary issues; technological dimensions (effects of external factors in the therapeutic process, management of technical issues, nonverbals). Also, some themes

related to suggestions that point out the role and responsibility of the other people outside the online counseling sessions were associated with the Actor-network theory.

Firstly, the results about ethical issues were found to be compatible with the Actor-network theory. In terms of clients' privacy problems originating from the environment and ensuring confidentiality, the clients had difficulties with being alone which led to the absence of private space during online counseling sessions. In face-to-face individual counseling, the actors participating in the counseling are physically in the counseling room, which may give psychological counselors and clients a more controllable environment and conditions under closed doors. The responsibility of the psychological counselor and the client could be more manageable by themselves in face-to-face counseling than in online counseling.

In our study, human actors and pets are involved in the online counseling experiences of the participants. Also, some clients had negative experiences finding a private space without being heard by others. This result may indicate that the responsibility of arranging an appropriate space by eliminating people and others around the home environment gains importance in online counseling. Not providing this process could affect experiencing efficient counseling sessions regarding clients' intention to open their issues. MacMullin et al. (2020) found similar results indicating the psychological counselor's responsibility for managing human actors (e.g., families, roommates) that influence the online counseling sessions and lead to problems. Our study shows that this responsibility was valid for psychological counselors in the current study. In addition, the clients also know they are responsible for arranging online sessions in terms of privacy and confidentiality. Thus, current research shows that both parties have dyadic responsibilities to conduct sessions in online counseling. In face-to-face counseling, clients' responsibility towards the sessions might not be that much because, in online counseling, there are also environmental dimensions.

Moreover, from the actor-network theory perspective, our results were parallel and contradictory regarding security and boundary issues in online counseling. For instance, MacMullin et al. (2020) again highlighted the psychological counselor's responsibility for ensuring security and the lack of security knowledge. It is possible to mention about same results for the current study. The result also showed that psychological counselors lack knowledge about security issues in online

environments. It was like Latour's (1996) "*black box*" because they did not grasp the inside knowledge and operation of the programs they utilized (e.g., internet and security process). For example, they think that programs like Zoom and Skype are not trustable because they do not know whether the records are obtained or not. The clients also indicated that they feel insecure in their minds in online counseling, which raises their anxiety levels because the personal data is in the technological environment. Thus, in terms of security, two separate groups had similar ideas. In addition, the involvement of technological instruments and easy accessibility suggested the increased responsibility of the psychological counselors and clients (MacMullin et al., 2020). Our results show that when there is no mediator like a secretary to arrange the counseling between clients and psychological counselors, this may violate boundaries.

Secondly, some technological dimensions played a key role during online counseling sessions. Specifically, external factors affected the therapeutic process, particularly the therapeutic presence experience of the participants in the current study. When our results were considered from the actor-network theory perspective, the quality of the relationships and the therapeutic presence in online counseling compared to face-to-face counseling is not only related to the ability of practitioners or clients' openness and capabilities in forming relationships.

The *mediators*, which Latour (2007) defines as the things that can change, alter, distort and translate the meaning or the aspects within the network, also stimulate the effectiveness of the therapeutic process. So, the internet, camera, and computer quality may need to perform well to capture the nonverbals and for people to demonstrate their communication skills. These might be part of the therapeutic relationship and presence processes. Thus, it might be speculated that both human and non-human agencies contribute to forming effective therapeutic processes in online counseling. The trust in online counseling may not be only related to the trusting relationship between the client and the psychological counselor. Trust may have more dimensions in online counseling, like psychotherapists' trust in technology (MacMullin et al., 2020). Thus, it might deduce that the trust relationship in online counseling is also related to the trust that is felt toward information systems.

Lastly, our results might be compatible with the actor-network theory regarding the aspirations and suggestions of the participants. In the current research, the participants gave suggestions that underline the role of the actors outside the sessions (e.g., associations, programs/software developers). This evidence-based result was unique in terms of emphasizing the outside actors' role in the online counseling process for the future of online counseling. The online counseling network could be perceived as an interdisciplinary phenomenon. Other actors like program developers and companies that provide these services to society are involved in the network process of online counseling. Various entities (e.g., governments and lawyers) might be responsible for contributing to technologically well-trusted and established online counseling practices.

In summary, recurrent themes show that online counseling does not consist of only psychological counselors and clients. Others enter the counseling stage, especially non-human agencies like the internet, computers, headphones, psychological counselors' rooms, clients' rooms, and other people at home. These actors somehow contribute to the process of the online counseling network.

5.1.2. Lack of Control and Concerns over the Ethical Issues

The second superordinate theme comprehends the clients' and psychological counselors' concerns about ethical considerations in online counseling. In this study, the results revealed that ethical issues were not controllable only by the psychological counselors or the clients. However, both parties could apply immense effort. Clients' privacy and confidentiality are not always easy to manage during the session held at home if there are others (e.g., family, friends). While clients had concerns over maintaining confidentiality and privacy, psychological counselors were unsure about their abilities to manage these ethical concerns. Like the present study, this issue is widely discussed in the literature; privacy and confidentiality are one of the main concerns regarding online counseling (Richards & Vigano, 2010; Stoll et al., 2020).

Privacy and confidentiality concerns were generally discussed in keeping the data securely and its relevance to technology in the literature (Borcsa et al., 2021; Cipoletta & Mocellin, 2018; Ipsen et al., 2012; Knott et al., 2020). However, our results contradictorily show that the main privacy concern is associated with the environment

rather than technological insecurity, although participants also stated some security concerns. Past research also admitted this specific issue, as clients are afraid of being caught by others while conducting online sessions in the home environment and technological security concerns (Young, 2005). Few studies also highlighted that providing online counseling from a home environment could result in confidentiality and privacy problems resulting from psychological counselors (Haberstroh et al., 2008). However, none of the psychological counselors in the present study experienced this issue. This issue might be because the psychological counselors were well-organized and cautious when they provided online counseling sessions compared to clients. So, they administered the professionalism to their practices.

On the other hand, clients were hesitant to share their issues during the online sessions as they felt insecure about the risks of being heard by others in their home environment. As a result, they sometimes could not find a suitable place to receive help as they tried parks and street facilities. This result may prompt that the effort on professionalism of the psychological counselors was not enough for conducting efficient online counseling sessions. It might be deduced that the clients have more responsibility for the session environment in online counseling in contrast to face-to-face counseling. During the interviews, psychological counselors said they verbally introduced and ensured a counseling session's rules and ethical needs. However, because the environment spatially is "different" space from each other, the conditions are not always manageable because psychological counselors are in a place other than the clients' zone.

Our results also have similar features to research held during pandemic situations, pointing out that security concerns could be somehow overlooked because of the need to receive help (Dores et al., 2020). Comparing pre- and post-pandemic issues in online counseling shows that the security concern became less prominent compared to pre-pandemic years among people (Dores et al., 2020). This issue might be because the circumstances shaped people's conditions to receive online counseling even when encountering many barriers and uncertainties.

A previous study also found that psychological counselors did not trust the programs they utilized but continued using them (Maheu, 2000). This situation may reveal that it is important to know behind knowledge and learn about technological devices and programs and their operational process to increase technical competence in online counseling and build trust. Also, one client (C8) stated that personal data storage law is another problem as Zoom and other programs collect data, and their base is abroad. So, legally this led to a complicated situation when the data was stolen.

For psychological counselors, assessment, screening procedures, and concerns about possible crises are crucial in online counseling in the current study. Psychological counselors introduced that they need to be more careful to choose with whom they can work through computers and the internet. If they do not detect some risks in clients' acts and thoughts, they think this issue will lead to critical consequences. Assessing risks and being precautions are also reported in the current literature as professionals were careful to avoid leading to severe consequences (Harrison & Wright, 2020; Khan et al., 2022; Knaevelsrud & Maercker, 2006; Knott et al., 2020).

As PC3 stated in the current study, technological development also plays a vital role in conducting well-designed online counseling sessions. The quality of the internet, computers and other devices may need to be improved for well-organized sessions. Recent technology enables us to see only a limited part of the individuals, and we may not understand body signs of a possible risk. The current study reveals that this ethical issue depends not only on the psychological counselors' abilities to detect such signals. How the technology enables people to catch these signs by using their skills also needs to be administered.

Past research also mentioned that therapists had concerns and difficulties managing boundaries when contact happened with technological communication tools (Békés et al., 2021; Haberstroh et al., 2008; Negretti & Wieling, 2001). So, managing boundaries in online counseling becomes something that needs to be more balanced for the sake of both parties. Our study did not indicate boundary issues resulting basically from psychological counselors but from possible client attempts. However, contradictorily in the current study, clients were also hesitant to surpass boundaries and confused

when they had direct contact phone numbers of therapists and could not always manage the disclosed information and space by the psychological counselor compared to past research on the topic (Negretti & Wieling, 2001).

Psychological counselors in this study have concerns about severe and critical issues to intervene in online counseling. Thus, their online counseling sessions were conducted via meticulous screening and assessment procedures. They carefully studied particular topics and tried to avoid accepting severe issues. This result is similar to the past literature that indicates that psychological counselors' preferences for online counseling depend on less severe topics (Chester & Glass, 2006; Connolly et al., 2019; Farrer et al., 2022; Tanrikulu, 2009). Well-established screening procedures are the core aspect of online counseling because all types of clients might not be suitable for this modality (Knaevelsrud & Maercker, 2006).

A more recent study by Cipoletta & Mocellin (2018) also shows that practitioners are reserved about helping individuals with crisis-related issues because they do not know what procedures to follow. Similarly, in our study, one of the psychological counselors experienced a crisis regarding a client requesting from psychological counselor to talk with someone. If s/he does not speak with his/her friend, the client says s/he will commit suicide. Therefore, the psychological counselor asked for help from his supervisor to follow procedures. He also admitted that this procedure would be more transparent and secure for him if this event occurred in face-to-face counseling. This result also might be similar to Cipoletta and Mocellin's (2018) research, as the current study's crisis procedures to follow online were unclear.

Mallen et al. (2011) suggested that practitioners cannot detect multiple symptoms in their study. Our study shows that psychological counselors do not experience such an incapability problem. However, if they get any clue from clients regarding risky behaviors, they pretend not to choose these clients at the beginning of the sessions for online counseling settings. It is also important to note that researchers in this study chose participants from the psychological counselor educational background population. The counseling profession does not necessarily deal with severe issues. In our study, few psychological counselors were dealing with more complex issues. Thus,

the reason that some of them do not experience a problem with identifying symptoms might be related to the cases they received. So, this concludes that online counseling practitioners in this study initially paid attention to assessment procedures so that they do not encounter any problems for themselves and their clients. This careful approach is also admitted in the literature as psychological counselors prefer to choose the topic they will study with the clients after the face-to-face sessions (Tanrıku, 2009).

5.1.3. Experiences with Online Therapeutic Process

This superordinate theme explains how the therapeutic process in online counseling is compared to face-to-face counseling. This part asked participants about several topics, including the therapeutic relationship dimensions such as a bond, closeness, intimacy, and the therapeutic presence ability of the psychological counselors in the sessions. As presence is a therapist's ability to perform, it is also related to the psychological counselor's skills and techniques (Geller, 2013)

The current study has discovered that the therapeutic relationship dimensions, such as a bond, closeness, and intimacy, and the therapeutic presence dimensions, such as feeling safe, have been experienced more effectively among clients who have started face-to-face sessions. When they settled in the counseling during face-to-face sessions, switching to online sessions positively affected building trust among those participants because they already have the advantage of being physically there with psychological counselors and getting used to them.

These results indicate that trust gained in face-to-face sessions would be beneficial, and a hybrid format could be more positive than online counseling. In literature, a comparison between online, face-to-face, and the hybrid format shows that youth clients have increased quality of life scores and a sense of satisfaction with the hybrid format after the intervention received as they took advantage of both online and face-to-face counseling in this format (Chan, 2020). The current study distinctively shows that this result is valid for adult clients. The hybrid format could be preferable for clients in terms of their choice of psychological helping settings because it provides continuity.

Psychological counselors also indicated a similar feature during the study; building trust took more time in online sessions as a virtual environment creates barriers to effective communication and trust relationships. Similarly, Nagarajan & Yuvaraj (2021) also discovered that relationship building in online counseling requires more time than in face-to-face settings. However, different from this study, the current study shows that the clients also agreed on the difficulty of building trust in the online environment. Thus, this result emphasizes that the trusting relationship in online counseling is perceived as something that needs more effort from clients and psychological counselors. A hybrid format, which starts with face-to-face sessions and continues online, may contribute to establishing this trust relationship more qualifiedly than online counseling.

In our study, psychological counselors expressed that they lack the presence experience on some occasions, like lack of physical and behavioral dimensions and effects of technological opportunities in online counseling. Clients also revealed that they lacked physical presence with their psychological counselors. However, most prominently, the therapeutic presence experience was affected by not the psychological counselors' inability to provide presence towards themselves and external distractors in the environment like other party involvements. Therefore, they claimed that the therapist's presence abilities were prominent against these external factors.

It is important to note that Geller (2013) emphasizes that therapists' presence is something that has a relationship with the therapeutic relationship. The client's perception of the presence is essential for positive outcomes in the sessions and the therapeutic process (Geller, 2013). The literature also discovered how other external factors play an essential role in the relationship. Trabucco et al. (2021) revealed that when clients live with other people at home, the relationship between the psychological counselor and the client is negatively affected because clients tend to be withdrawn or distant in their relationship with their psychological counselors. However, the current study reveals that clients and psychological counselors perceived that therapeutic presence was somehow influenced by the external things in the online

environment or the physical environment that is not controlled totally by both therapists and clients.

Different from other clients, some clients suggested that “the helper is the key” regardless of the distractors. However, some psychological counselors in our study experienced difficulties with skills like listening and using silence. These participants were misunderstood in the online environment or affected by technical quality issues. Similar results occurred in the literature; therapists’ experienced attentional difficulties while doing online counseling sessions and concentration problems because of the possible distractors (Trabucco et al., 2021).

So, our result shows that the nature of online counseling, in which current technology partially enables professionals to observe their clients’ physical and environmental conditions, may shape clients’ and psychological counselors’ relationship-building and presence experiences. This outcome was uncommon in explaining the relationship between external things and the therapeutic presence abilities of the psychological counselors in online counseling.

Much related to boundaries of the relationship, one of our results shows that psychological counselors more meticulously conduct initial structuring in online counseling than in face-to-face sessions to avoid possible boundary violations and exceeding session rules. This issue will affect the balance of the relationship because of distance. Several studies paid attention to these issues. The easiness and accessibility of communication resulted in exceeding the rules of the sessions in e-mail and text counseling modalities (Vincent et al., 2017). Also, a commentary paper by Lustgarten and Elhai (2018) discussed structuring rules of the online sessions regarding preparing informed consent and technological use for a balanced relationship. Nevertheless, the current study shows that this issue is valid for also videoconferencing by administering evidence-based approaches.

5.1.4. Conveniences that Encourage to Experience Online Counseling

Conveniences that are perceived and experienced by the participants were interestingly both similar and diverse. This variety in results may show one of the aspects of online counseling: some disadvantages can be advantages and vice versa.

Although almost all participants had a favorable view of time-saving, flexible scheduling related to time was dissimilar in terms of client and psychological counselor perspectives. Clients were happy because they could manage their time to receive help at different times (Barutçu Yıldırım et al., 2021; Young, 2005). In contrast, psychological counselors reported this advantage less frequently in the current study.

The flexibility of online counseling is an advantage for many studies in the literature on reducing mental health professionals' workloads (Dowling & Rickwood, 2014; Sosialita, 2019). Although all psychological counselors focused on time-saving in terms of transportation and easy access, the scheduling opportunity was less frequently pointed out by psychological counselors compared to clients in the current study. This result might be related to difficulties with the workload (e.g., nighttime sessions) resulting from flexibility (Connolly et al., 2019; Schlenger et al., 2022). Unlike the literature, our result shows that the perception of the clients on online sessions may cause such problems (clients' attempt to procrastinate sessions because of easy scheduling).

Moreover, as previously mentioned, the National Board for Certified Counselors (2016) formed their way of describing online counseling as "Distance Counseling." ACA (2014) chose the same term in its code of ethics. The reason might be that "distance" prompts "*exceeding spatial limitations*" as a prominent advantage in online counseling settings. Along these lines, the accessibility of online counseling is considered one of the crucial conveniences in the current study. This advantage was addressed in many other researchers' studies (Barutçu Yıldırım et al., 2021; Chester & Glass, 2006; Fang et al., 2018; Lau et al., 2013; Richards, 2009).

Additionally, clients and psychological counselors in the present study stated that online counseling could be considered more affordable in terms of costs (Chester & Glass, 2006; Centore & Milacci, 2008). However, clients who utilize low prices during online counseling ($n=3$) are less than the psychological counselors who apply it to their online counseling practices ($n=6$). This result might be debatable because more than half of the participants perceive online counseling as an economically more reasonable practice. However, almost half experienced lower prices in the current study though the sizes are not differing dramatically. The literature administered by the researchers (Chester & Glass, 2006; Centore & Milacci, 2008) indicates that online counseling is mainly economic for clients, but our study discloses that it might be more affordable for psychological counselors in terms of avoiding extra costs.

One of the other differentiated results between psychological counselors and clients was *safety and comfortableness in their own places*. Psychological counselors in our study reported that they consider online counseling conducted from home much safer and more comfortable for their clients. Although most of the psychological counselors in this study stated that clients had problems with safety regarding confidentiality and privacy issues, they noted that a home environment is considered a safe and comfortable place to talk, similar to the literature (Joyce, 2012).

Some clients also reported this opportunity in terms of weather conditions in winter (Tirel et al., 2020), familiarity, and warm aspects of their rooms. This result may reveal that when a client could manage to be alone at home, s/he can avoid possible environmental confidentiality and privacy concerns. Then, they may talk openly about their issues in their perceived safe place, which could result in an effective therapeutic process. These results may also be related to the avoiding stigma issues that clients felt in more comfort and safety while talking without being seen by others, especially for the disadvantaged people in society (Joyce, 2012; Murphy & Mitchell, 1998; Nelson et al., 2022 Sussman, 2004).

One of the current study's contradictory results is "*continuity*" regarding challenging periods and fewer dropouts. Several participants reported that some specific issues (e.g., depression, loss) could be beneficial to practice within online counseling for

specific times. The reason for this was issues like depression which involves symptoms of loss of interest, and fatigue that led to avoiding clients from doing anything. Therefore, some participants in our study declared that the chance of less effort in online counseling could be supportive regarding issues related to symptoms of loss of interest. This result might be the opposite of what has been known previously in the literature that indicates that severe issues, including depression, could be preferable for the best conduct through face-to-face counseling (Chester & Glass, 2006; Connolly et al., 2019; Farrer et al., 2022; Tanrikulu, 2009). In parallel with the clients' hybrid format choice, practitioners may initially utilize online counseling sessions for specific issues like depression. By starting with online sessions, clients and psychological counselors may overcome dropouts caused by the sessions in which clients struggled to participate. Therefore, they could achieve a durable therapeutic process.

However, some psychological counselors stated that they still prefer to see their clients in face-to-face counseling in a case like depression because they disclosed that this process could be more beneficial and healthier for the clients to overcome their comfort zones. So, clients in our study stated more about the opportunity of this issue. In contrast, psychological counselors emphasize the opportunity of fewer dropouts they observe in their online counseling sessions. Nevertheless, they did not give any reasons for that consequence to explain it precisely. This result in fewer dropouts is the opposite of what was found in the past. Clients do fewer dropouts in face-to-face counseling than online counseling (Buyruk Genç et al., 2019; Zeren et al., 2020). So, clients showed more continuity in face-to-face sessions compared to online sessions in these studies, which differs from the present study.

5.1.5. Struggles that Discourage to Experience Online Counseling

One of the most noticeable results in the current study from both participant groups was the *preferences for online counseling for less severe and private issues* relevant to the existing literature (Chester & Glass, 2006; Connolly et al., 2019; Farrer et al., 2022; Tanrikulu, 2009). Contradictorily from these studies, the difference between the clients and the psychological counselors was that clients tend to choose severe issues in face-to-face counseling for reasons that indicate problems with privacy and confidentiality. This result differed from the existing research in school counseling

settings; students prefer to talk about private topics online (e.g., sexuality) compared to face-to-face counseling (Glasheen et al., 2016). The reason for this contradictory result in the current study might be the issue of clients' environmental privacy that clients could be able to talk about their issues in general while others in the home environment.

In comparison, psychological counselors declared that challenging cases worked well in the current study; however, severe issues still were preferable for face-to-face counseling by practitioners (Chester & Glass, 2006; Connolly et al., 2019; Farrer et al., 2022; Tanrikulu, 2009). Interestingly, one out of ten clients only received online counseling and mainly described her experience with online counseling as a helpful process. The topic she applied for receiving online counseling was divorce and break-up issues, which all participants in the current study generally rated as severe issues. Thus, this result may indicate that psychological counselors might either have prejudice towards some severe issues to apply in online counseling, be unsatisfied about working with these issues in online counseling or feel insecure and incompetent to conduct sessions on these topics.

Another parallel struggle that was discussed among participants was *technical difficulties*. Many other researchers addressed this issue in terms of technical abilities and issues conducting online counseling, and frustration with the connection (Cipoletta & Mocellin, 2018; Haberstroh et al., 2008; Knott et al., 2020). The current research has found more about this issue in detail: The technical difficulties in online counseling cost unwanted emotional arousals among clients (e.g., annoyance, nervousness, anger). This drawback also puts barriers to the insightful process from the view of psychological counselors.

Psychological counselors suffered from understanding the emotional conditions of clients while technical issues occurred, whereas clients experienced anxious times with technical problems and felt interrupted. Thus, both parties were frustrated with what happened at these moments. Though online counseling may help some individuals talk about emotionally deep taboo topics (Callahan & Inkle, 2012), experiencing interruptions while discussing these issues was annoying (Reese et al., 2015). The

current study particularly reveals that technical issues have specific emotional and cognitive consequences for individuals joining online counseling. These are feeling annoyed, angry, nervous, and cognitive difficulties in realizing these feelings when individuals experience them.

Another major issue among participants, especially practitioners, was the *inability to observe nonverbals* which is eye-catching attribution in the past literature as well (Alleman, 2002; Callahan & Inckle, 2012; Mallen & Vogel, 2005; Zeren, 2017; Tanrikulu., 2009; Trabucco et al., 2021). Observing difficulties with nonverbals was a perceived barrier to understanding emotions, making empathy, and creating communicational challenges in this study. Although traditionally, we may expect psychological counselors to read the nonverbals, the present study also shows that few clients pay attention to the nonverbal acts of psychological counselors during the sessions. Thus, clients might also miss practitioners' intimate behaviors and professional actions in online counseling.

The current study's other controversial but unique theme was the contrasting thoughts of psychological counselors and clients regarding *social justice*. Psychological counselors mainly think that they were able to distribute their help more equally to society, although there are some barriers like technological requirements and needs like governmental acts. Clients notably stated that online counseling contributes to inequality among receivers because of technical demands. Though justice is one of the ethical core values of psychological practice (ACA, 2014; APA, 2017), little literature administered this point of view in the online counseling context. Some mentioned accessibility, affordability (Knott et al., 2020), and avoiding stigmatization issues (Joyce, 2012).

The current study shows that discretely online counseling may open a door and create a chance for different types of clients (e.g., migrants, LGBT members, people with disabilities, and sexually transmitted disorders). Also, it may facilitate psychological counselors to increase the quantity of helping services. However, technological accessibilities are the most significant obstacle in this run.

When using these services, it should be noted that it is essential to avoid misuse and manipulative actions by using multiple institutions, including software developers, governments, associations, and practitioners. Like the current study, many researchers stated that charlatans could harm individuals and the profession (Kanani & Regehr, 2003; Rummell & Joyce, 2010; Stoll et al., 2020). As we do not know what is going on in a session room behind closed doors in face-to-face counseling, we may now be faced with an even more blurred and unknown service with the possibilities of the online environment. We can summarize this situation in one statement: while there were "clouds" in the psychological counseling profession, now a "nebula" is forming around the profession with online counseling. It may be necessary to take action in a multidisciplinary way to make this air fresh and sunny.

Lastly, one of the current study's uncommon findings is that the participants' online counseling experiences lacked the opportunity to feel readiness and responsibility. According to participants in our study, this situation occurred because of easy communication access and lack of formality. Videoconferencing could be perceived as a conversation without boundaries of relationship (e.g., simple friendship talks) by people. In their study, MacMullin et al. (2020) found similar features among mental health providers. They stated that the helpers have much responsibility in online counseling.

In contradiction to this result, the current research shows that clients, not psychological counselors, mainly lack responsibility for online counseling sessions. Psychological counselors acted as a professional and fulfilled the responsibility of the sessions. Also, different from the responsibility issues, both groups stated that clients lacked readiness about the issues they would discuss for the sessions in online counseling in contrast with the experiences they had in face-to-face counseling. Therefore, getting ready for the sessions and making a physical step may make the helping process more meaningful and facilitate the whole process.

5.1.6. Aspirations and Suggestions to Improve Online Counseling

One of the current study's comparative results indicates that psychological counselors prefer to stand with opportunities for face-to-face interaction and clients. However, the

difference is that clients do not find time and money to continue the helping process. Because of this reason, they somehow consider online counseling as a compulsory process to continue sessions. Therefore, the opportunity for flexibility primarily discussed in the literature (Amos et al., 2020; Chester & Glass; 2006; Fang et al., 2018; Heinsch et al., 2021) seemed to force clients somewhat to choose the hybrid format.

Both online and face-to-face help opportunities are apparent in the first order for these participants in a busy life. They would prefer face-to-face sessions in which close, warm, and a high sense of trust are more comfortably established, but the hybrid format appeared more like a reality regarding living conditions. As a result, it can be deduced that the future of counseling psychology practice may be more embodied with the hybrid format since it could be a more continuous, flexible, and economic practice.

The current study also found that psychological counselors and clients need a single transparent, standardized, trustable, and secure platform and procedures to conduct online counseling for ethical and safe conduct, which researchers also state as a suggestion (Cipoletta & Mocellin, 2018; Feijt et al., 2020). Psychological counselors also declared that they need training mainly about ethical conduct, use of techniques, general process, and broad updating of the counseling curriculum with online counseling information. Similar results appeared in the literature that psychological counselors demand training regarding using counseling (Amos et al., 2020; Menon & Rubin, 2011). It was also suggested in the current study that traditional approaches are limited in terms of applying them to online counseling (Nagarajan & Yuvaraj, 2021).

Different from these results, in the current study, the client also suggested that they need to be more prepared in terms of technical instruments and enabling environment for conducting efficient online sessions. It can be deduced that some clients are well-aware of how their technological and home conditions reduce the efficiency of the sessions. Thus, they knew the cruciality of arranging these circumstances.

5.1.7. Pushing the Limits of Creativity

Online counseling forcibly enabled psychological counselors to extend their views, and some established new practices, techniques, and skills during online counseling.

One of the things they did in online sessions was to increase the techniques and skills they used in face-to-face counseling. In this sense, they are more utilized from verbal, directive skills and techniques since they are physically unable to manage some behavioral practices. Although the behavioral approaches were limited, this triggered their verbal techniques, such as using metaphors and questions more frequently. Similar results appeared in the literature; professionals utilized more self-disclosures and immediacy skills to compensate for the disadvantages of nonverbals in online counseling (Mallen et al., 2011). Although previous research stated that humor could be a barrier, misunderstandings are more likely (Reese et al., 2015); our results show that humor is utilized very well to break the cold environment around online conversation. Besides that, psychological counselors increased their observation on the screen in which they see clients' facial expressions in the present study. This practice was a dissimilar finding from the existing literature that shows how psychological counselors used their creativity to increase the efficiency of their practices in online counseling.

Moreover, some psychological counselors adapted their way of practice which requires material needs such as the empty chair, genograms, play doughs, and drawings. Also, this finding was uncommon in examining psychological counselors' adaptation of traditional techniques to the online environment.

Finally, clients' disclosures might be controversial issues in traditional counseling (Farber, 2003). However, our contradictory results show that psychological counselors get more into clients' daily lives and could observe their inner home experiences with others or particular events. In the current study, some psychological counselors turned these issues into an advantage rather than complaining about the situation. They would refer to this as an opportunity to observe and understand clients' lives. This rare result was also found in the literature; Feijt et al. (2020) found that the additional information in the clients' environment sometimes facilitated the process of online counseling from the practitioners' point of view. This finding may indicate that clients' disclosure could be perceived as an opportunity in recent times by psychological counselors. The current ethical codes, skills, and curriculum may be reorganized for prospective psychological counselors who will practice online counseling.

5.2. Implication for Practice

This study showed that online counseling is a dynamic helping setting. Its practice can depend on several domains. These include the development of technology and the responsibility of counselors and clients, associations, and lawmakers. Therefore, although positive aspects encouraged clients and psychological counselors, these aspects may interfere. Some can turn into negatives that discourage clients or psychological counselors.

Firstly, although opportunities for accessibility, time, costs, comfort, and flexibility are apparent (Centore & Millaci, 2008), technological demands affect the equal chance of receiving help. However, online counseling can be supportive for some individuals like migrants, LGBT individuals, and others in society that have barriers because of geographical limitations, language, discrimination, and social stigmatization issues. In the current study, the hybrid format was the first choice among clients. Continuity of the practices could be achieved through this kind of format. Therefore, people from different backgrounds may also continuously utilize online counseling well if governments, lawmakers, and associations support technological access. There could be accessing facilities, such as centers with computers and internet access, where the practice of online counseling was safely conducted in a controlled environment. This practice could be similar to what Cisco Company developed: the Medibus. The Medibus is a bus with different facilities on it. It travels around Germany and brings together people and online helpers. This bus has technological opportunities, including wireless, computer, and secure instruments (Cisco, 2020). Therefore, this kind of idea might be developed for carrying these services to technologically disadvantaged places in the countries.

This study can also serve practitioners to know creative practices and adapt them by understanding clients' inner world who received online counseling. Psychological counselors may extend their professionals' views by considering how to have a therapeutic presence with physical obstacles in online counseling. Comparative results between face-to-face and online counseling (Stoll et al., 2020) and client and psychological counselor perspectives may help both parties understand each other's

circumstances in the online counseling process and raise their awareness to achieve ethical and efficient conduct.

The current study also may prompt that the traditional counseling profession can be very suitable for online counseling compared to psychiatric occasions. Traditionally, the counseling profession does not treat people like ill people. Psychological counselors deal with life issues and understand people with unity and empathy, and there is a collaborative relationship between psychological counselors and clients. So, treating disorders is not their prominent prospect. They do not prescribe any pills. Therefore, psychological counselor education might be easily adapted and revised for online counseling compared to the psychiatry profession. Practitioners and associations can consider this opportunity in further developments for finding a balance between technology and the counseling profession.

Apart from these, it was found in the literature that in the school counseling setting, students tend to open up their issues (e.g., sexuality) during online counseling (Glasheen et al., 2016). The current study might facilitate the practices of school counselors. Accessing individuals easier than face-to-face and finding an appropriate time may play a vital role here. Sometimes, the number of school counselors in Türkiye might be insufficient compared to the number of students in the school setting. In addition, the administrative work of the school counselor may also cause fewer psychological counseling practices because of the workload. For this reason, the time and scheduling opportunity of online counseling can enable school counselors to offer students individual and group counseling practices more flexibly.

Moreover, university facilities that offer psychological support, including student development and counseling centers, may improve how they help university students by employing online counseling modalities. Emerging adulthood (18-25) might be a stage where individuals generally experience anxiety with love and work issues (Arnett, 2007). In those stages, students may also have difficulties with university education (Arnett et al., 2014). Their issues with transition to new living conditions, partners, work, and training can result in challenges that differ from late adulthood (Arnett et al., 2014). As a result, it might be essential to distribute psychological

counseling services at these ages to improve students' living conditions and adaptations to university lives. For example, university orientations might be rearranged, or there could be psychological support for senior students for their issues regarding transition to work life and separation from university education. Thus, in line with the study results, the hybrid format could be a beneficial and continuous helping process at these stages for university students.

Lastly, with electronic communication development in the past, the telephone has primarily been used to provide psychological counseling to clients (Skinner & Zack, 2004). In the current study, screening and assessment procedures were the practices that were applied cautiously, and participants were hesitant to prefer online counseling for severe issues. However, telephone counseling has a long-standing history, especially in the USA, for critical cases such as intervening in crises, suicide prevention, elders, individuals with particular needs, drug issues, and community problems (Lester, 1974). The use of such practices can be developed and expanded in Türkiye.

5.3. Recommendations for Future Research

The current study has found that the hybrid format could be fruitful for practicing psychological counseling. The participants were satisfied with the sessions that began with face-to-face interaction and continued with online counseling. Clients reasonably preferred to receive psychological counseling via the hybrid format. Although much research separately investigates the effectiveness of face-to-face and online counseling. The researchers could examine the effectiveness of the hybrid format by using different methodologies.

It is known that qualitative research on online counseling is numerically more in the Turkish literature than experimental or other quantitative studies (Bastemur & Bastemur, 2015). For this reason, empirical studies can be included in both sample groups (client and psychological counselor) by adopting evidence-based and quantitative research for the future. However, qualitative studies should also not be missed. When we consider the increased usage of interpretative phenomenological

analysis in psychology (Smith et al., 2009), there could be more qualitative research on the topic. That is, detailed and in-depth qualitative studies can be conducted with a small number of participants rather than a relatively large participant group with recurring themes.

Considering that in this study, data were collected from individuals who experienced online counseling via video conferencing, positive and negative experiences different from the current literature were obtained in individuals who experienced online counseling. This consequence shows that different positive and negative results can emerge when the experience of online counseling increases. Online counseling can be more clearly understood if future studies are collected from individuals who have long-time experience in online counseling, not just those who have views about it.

Moreover, studies on specific groups of people or services might be conducted regarding online counseling. Responsibility of university centers, school settings, and students' perspectives as clients and school counselors' practices can be administered by researchers in the future. The efficiency of the hybrid format could be worked among these participant groups. The researchers could study the use of other types of online counseling, like telephone counseling, for severe issues. In the current study, these topics were not preferable in online counseling. However, future studies may manage to investigate interventions like crisis issues in terms of instant or continuous psychological help.

REFERENCES

- Agathokleous, G., & Taiwo, A. O. (2022). How online counselling is utilised, evaluated, and received. In J. Prescott (Ed.), *Digital Innovations for Mental Health Support* (pp. 251-277). IGI Global. <https://doi.org/10.4018/978-1-7998-7991-6.ch01>
- Ajzen, I. (1991). The theory of planned behavior. *Organizational Behavior and Human Decision Processes*, 50(2), 179-211. [https://doi.org/10.1016/0749-5978\(91\)90020-T](https://doi.org/10.1016/0749-5978(91)90020-T)
- Alleman, J. R. (2002). Online counseling: The internet and mental health treatment. *Psychotherapy: Theory, Research, Practice, Training*, 39(2), 199-209. <https://doi.org/10.1037/0033-3204.39.2.199>
- Amanvermez, Y. (2015). The comparison of online counseling researches in Turkey and USA. *Procedia Social and Behavioral Sciences*, 186, 966-969. <https://doi.org/10.1016/j.sbspro.2015.04.159>
- American Counseling Association. (2014). *2014 ACA code of ethics*. <https://www.counseling.org/docs/default-source/default-document-library/2014-code-of-ethics-finaladdress.pdf>
- American Psychological Association. (2017). *Ethical principles of psychologists and code of conduct* (2002, amended effective June 1, 2010, and January 1, 2017). <https://www.apa.org/ethics/code/>
- American Psychological Association. (2020). *APA guidelines for psychological assessment and evaluation*. <https://www.apa.org/about/policy/guidelines-psychological-assessment-evaluation.pdf>
- American Psychological Association. (n.d.). *APA dictionary of psychology*. Retrieved August 19, 2022, from <https://dictionary.apa.org/>
- Amos, P. M., Bedu-Addo, P. K. A., & Antwi, T. (2020). Experiences of online counseling among undergraduates in some Ghanaian universities. *SAGE Open*, 10(3), 1-11. <https://doi.org/10.1177/2158244020941844>

- Amos, P. M., Adade, J. R. D., & Duodu, A. A. (2022). Online counseling: Perceptions of counselors, counselor educators and trainees. *Journal of Asia Pacific Counseling*, 12(1), 38-59. <http://doi.org/10.18401/2022.12.1.3>
- Anthony, K. (2015). Training therapists to work effectively online and offline within digital culture. *British Journal of Guidance & Counselling*, 43(1), 36-42. <https://doi.org/10.1080/03069885.2014.924617>
- Arnett, J. J. (2007). Emerging adulthood: What is it, and what is it good for? *Child Development Perspectives*, 1(2), 68-73. <https://doi.org/10.1111/j.1750-8606.2007.00016.x>
- Arnett, J. J., Žukauskienė, R., & Sugimura, K. (2014). The new life stage of emerging adulthood at ages 18–29 years: Implications for mental health. *The Lancet Psychiatry*, 1(7), 569-576. [https://doi.org/10.1016/S2215-0366\(14\)00080-7](https://doi.org/10.1016/S2215-0366(14)00080-7)
- Asri, A. S., Zainudin, Z. N., Othman, W. N. W., Yusop, Y. M., Ahmad, N. A., & Hassan, S. A. (2022). A comparison of counselling self-efficacy across social factors among e-counsellors in Malaysia. *Journal of Positive School Psychology*, 6(4), 3475-3489.
- Association for Counselling and Therapy Online (2022). *ACTO competences for counseling with young people online therapists*. <https://www.acto.org.uk/about/acto-competences-for-cyp-online-therapists/>
- Bacıoğlu, S. D., & Kocabıyık, O. O. (2019). Counseling trainees' views towards usage of online counseling in psychological services. *European Journal of Education Studies*, 5(12), 46-60. <https://doi.org/10.5281/zenodo.2597546>
- Baker, K. D., & Ray, M. (2011). Online counseling: The good, the bad, and the possibilities. *Counselling Psychology Quarterly*, 24(4), 341-346. <https://doi.org/10.1080/09515070.2011.632875>
- Bambling, M., King, R., Reid, W., & Wegner, K. (2008). Online counselling: The experience of counsellors providing synchronous single-session counselling to young people. *Counselling and Psychotherapy Research*, 8(2), 110-116. <https://doi.org/10.1080/14733140802055011>

- Barak, A., & Grohol, J. M. (2011). Current and future trends in internet-supported mental health interventions. *Journal of Technology in Human Services*, 29(3), 155-196. <https://doi.org/10.1080/15228835.2011.616939>
- Barutçu Yıldırım, F., Onaylı, S., & Taşkesen, N. (2021, September 6-10). *University students' views, preferences and suggestions with respect to online counseling*. The European Conference on Educational Research (ECER), Geneve, Switzerland. <https://eera-ecer.de/ecer-programmes/conference/26/contribution/50956/>
- Bastemur, S., & Bastemur, E. (2015). Technology based counseling: perspectives of Turkish counselors. *Procedia-Social and Behavioral Sciences*, 176, 431-438. <https://doi.org/10.1016/j.sbspro.2015.01.493>
- Beidoğlu, M., Dinçyürek, S., & Akıntuğ, Y. (2015). The opinions of school counselors on the use of information and communication technologies in school counseling practices: North Cyprus schools. *Computers in Human Behavior*, 52(C), 466-471. <https://doi.org/10.1016/j.chb.2015.06.022>
- Békés, V., & Aafjes-van Doorn, K. (2020). Psychotherapists' attitudes toward online therapy during the COVID-19 pandemic. *Journal of Psychotherapy Integration*, 30(2), 238–247. <https://doi.org/10.1037/int0000214>
- Békés, V., Aafjes-van Doorn, K., Luo, X., Prout, T. A., & Hoffman, L. (2021). Psychotherapists' challenges with online therapy during COVID-19: Concerns about connectedness predict therapists' negative view of online therapy and its perceived efficacy over time. *Frontiers in Psychology*, 12, Article e705699. <https://doi.org/10.3389/fpsyg.2021.705699>
- Békés, V., Aafjes-van Doorn, K., & Bóthe, B. (2022). Assessing patients' attitudes towards telepsychotherapy: The development of the Unified Theory of Acceptance and use of technology-patient version. *Clinical Psychology & Psychotherapy*, advance online publication.1-10. <https://doi.org/10.1002/cpp.2760>
- Binik, Y. M., Cantor, J., Ochs, E., Meana, M. (1997). From the couch to the keyboard: Psychotherapy in cyberspace. In S. Kiesler (Eds.), *Culture of the internet* (pp.71-102). Lawrence Erlbaum Associates.
- Blumer, M. L., Hertlein, K. M., & Vanden Bosch, M. L. (2015). Towards the development of educational core competencies for couple and family therapy

- technology practices. *Contemporary Family Therapy*, 37(2), 113-121.
<https://doi.org/10.1007/s10591-015-9330-1>
- Boldrini, T., Schiano Lomoriello, A., Del Corno, F., Lingiardi, V., & Salcuni, S. (2020). Psychotherapy during COVID-19: How the clinical practice of Italian psychotherapists changed during the pandemic. *Frontiers in Psychology*, 11, Article 591170. <https://doi.org/10.3389/fpsyg.2020.591170>
- Borcsa, M., Pomini, V., & Saint-Mont, U. (2021). Digital systemic practices in Europe: A survey before the Covid-19 pandemic. *Journal of Family Therapy*, 43(1), 4-26. <https://doi.org/10.1111/1467-6427.12308>
- Bordin, E. S. (1979). The generalizability of the psychoanalytic concept of the working alliance. *Psychotherapy: Theory, Research & Practice*, 16(3), 252-260. <https://doi.org/10.1037/h0085885>
- Bolton, C. A., Thompson, H., Spring, J. A., & Frick, M. H. (2021). Innovative play-based strategies for teletherapy. *Journal of Creativity in Mental Health*, advance online publication. <https://doi.org/10.1080/15401383.2021.2011814>
- Bouchard, S., Robillard, G., Marchand, A., Renaud, P., & Riva, G. (2007, October). Presence and the bond between patients and their psychotherapists in the cognitive-behavior therapy of panic disorder with agoraphobia delivered in videoconference. *Proceedings of the 10th Annual International Workshop on Presence, Barcelona*, 89-95.
- Briggle, A. (2008). Real friends: How the Internet can foster friendship. *Ethics and Information Technology*, 10(1), 71-79. <https://doi.org/10.1007/s10676-008-9160-z>
- Buyruk Genç, A., Amanvermez, Y., Zeren, Ş. G., & Erus, S. M. (2019). Early separations: Dropout from online and face-to-face counseling. *Pegem Journal of Education and Instruction*, 9(4), 1001-1030.
<https://doi.org/10.14527/pegegog.2019.032>
- Callahan, A., & Inckle, K. (2012). Cybertherapy or psychobabble? A mixed methods study of online emotional support. *British Journal of Guidance & Counselling*, 40(3), 261-278. <https://doi.org/10.1080/03069885.2012.681768>
- Callon, M. (1986). The sociology of an actor-network: The case of the electric vehicle. In *Mapping the Dynamics of Science and Technology* (pp. 19-34). Palgrave Macmillan.

- Callon, M. (1999). Actor-Network Theory-The market test. *The Sociological Review*, 47(1), 181–195. <https://doi.org/10.1111/j.1467-954X.1999.tb03488.x>
- Callon, M. (2001) Actor-Network Theory. In *International Encyclopedia of the Social & Behavioral Sciences*, 62-66. Elsevier.
- Carbone, G.A., Zarfati, A., Nicoli, M.S., Paulis, A., Tourjansky, G., Valenti, G., Valenti, E.M., Massullo, C., Farina, B. & Imperatori, C. (2022). Online psychological counselling during lockdown reduces anxiety symptoms and negative affect: Insights from Italian framework. *Clinical Psychology & Psychotherapy*, 29(1), 367-372. <https://doi.org/10.1002/cpp.2608>
- Center for Credentialing & Education. (n.d.). *BC-TMH Board Certified-Tele Mental Health Provider*. <https://www.cceglobal.org/credentialing/bctmh>
- Centore, A. J., & Milacci, F. (2008). A study of mental health counselors' use of and perspectives on distance counseling. *Journal of Mental Health Counseling*, 30(3), 267-282. <https://doi.org/10.17744/mehc.30.3.q871r684n863u75r>
- Chan, G. H. (2020). A comparative analysis of online, offline, and integrated counseling among hidden youth in Hong Kong. *Children and Youth Services Review*, 114, Article 105042. <https://doi.org/10.1016/j.childyouth.2020.105042>
- Chardon, L., Bagraith, K. S., & King, R. J. (2011). Counseling activity in single session online counseling with adolescents: An adherence study. *Psychotherapy Research*, 21(5), 583-592. <https://doi.org/10.1080/10503307.2011.592550>
- Chester, A., & Glass, C. A. (2006). Online counselling: A descriptive analysis of therapy services on the internet. *British Journal of Guidance & Counselling*, 34(2), 145-160. <https://doi.org/10.1080/03069880600583170>
- Childress, C. A. (2000). Ethical issues in providing online psychotherapeutic interventions. *Journal of Medical Internet Research*. 2(1), Article e5. <https://doi.org/10.2196/jmir.2.1.e5>
- Cipolletta, S., & Mocellin, D. (2018). Online counseling: An exploratory survey of Italian psychologists' attitudes towards new ways of interaction. *Psychotherapy Research*, 28(6), 909-924. <https://doi.org/10.1080/10503307.2016.1259533>

- Cipolletta, S., Frassoni, E., & Faccio, E. (2018). Construing a therapeutic relationship online: An analysis of videoconference sessions. *Clinical Psychologist*, 22(2), 220-229. <https://doi.org/10.1111/cp.12117>
- Cisco. (2020, November 5). *Deutsche bahn's db medibus solution is bringing the doctor to the appointment*. https://upshotstories.com/stories/deutsche-bahn-s-db-medibus-solution-is-bringing-the-doctor-to-the-appointment#xd_co_f=NWJmODk1ZDYtMTJlZC00MTcyLWE1ZGYtNjUwZjgxMWFhZDM0~
- Collins, D. (2003). Pretesting survey instruments: An overview of cognitive methods. *Quality of Life Research*, 12(3), 229-238. <https://doi.org/10.1023/A:1023254226592>
- Connolly, S. L, Miller, C. J, Lindsay, J. A., Mark, S. B. (2019) A systematic review of providers' attitudes toward telemental health via videoconferencing. *Clinical Psychology: Science and Practice*; 27, Article e12311. <https://doi.org/10.1111/cpsp.12311>
- Cook, J. E., & Doyle, C. (2002). Working alliance in online therapy as compared to face-to-face therapy: Preliminary results. *CyberPsychology & Behavior*, 5(2), 95-105. <https://doi.org/10.1089/109493102753770480>
- Creswell, J. W., (2007). *Qualitative inquiry and research design: Choosing among five approaches*. Sage Publications
- David, N., Schlenker, P., Prudlo, U., & Larbig, W. (2011). Online counseling via e-mail for breast cancer patients on the German internet: Preliminary results of a psychoeducational intervention. *Psycho-Social Medicine*, 8, Article doc05. <https://doi.org/10.3205/psm000074>
- Dickinson, A., Knussen, C., & Flowers, P. (2007). Stigma and the delegitimation experience: An interpretative phenomenological analysis of people living with chronic fatigue syndrome. *Psychology & Health*, 22(7), 851-867. <https://doi.org/10.1080/14768320600976224>
- Dickinson, A., Knussen, C., & Flowers, P. (2008). 'That was my old life; it's almost like a pastlife now': Identity crisis, loss and adjustment amongst people living with chronic fatigue syndrome. *Psychology & Health*, 23(4), 459-476. <https://doi.org/10.1080/08870440701757393>

- Dilkes-Frayne, E., Savic, M., Carter, A., Kokanović, R., & Lubman, D. I. (2019). Going online: The affordances of online counseling for families affected by alcohol and other drug issues. *Qualitative Health Research*, 29(14), 2010-2022. <https://doi.org/10.1177/1049732319838231>
- Dores, A. R., Geraldo, A., Carvalho, I. P., & Barbosa, F. (2020). The use of new digital information and communication technologies in psychological counseling during the COVID-19 pandemic. *International Journal of Environmental Research and Public Health*, 17(20), Article 7663. <https://doi.org/10.3390/ijerph17207663>
- Dowling, M. J., & Rickwood, D. J. (2014). Experiences of counsellors providing online chat counselling to young people. *Journal of Psychologists and Counsellors in Schools*, 24(2), 183-196. <https://doi.org/10.1017/jgc.2013.28>
- Drum, K. B., & Littleton, H. L. (2014). Therapeutic boundaries in telepsychology: Unique issues and best practice recommendations. *Professional Psychology: Research and Practice*, 45(5), 309-315. <https://doi.org/10.1037/a0036127>
- Elleven, R. K., & Allen, J. (2004). Applying technology to online counseling: Suggestions for the beginning e-therapist. *Journal of Instructional Psychology*, 31(3), 223-226.
- Erdem, A., Bardakci, S., & Erdem, Ş. (2018). Receiving online psychological counseling and its causes: A structural equation model. *Current Psychology*, 37(3), 591-601. <https://doi.org/10.1007/s12144-016-9542-z>
- Erlandson, D. A., Harris, E. L., Skipper, B. L., & Allen, S. D. (1993). *Doing naturalistic inquiry: A guide to methods*. Sage.
- Fang, L., Tarshis, S., McInroy, L., & Mishna, F. (2018). Undergraduate student experiences with text-based online counselling. *The British Journal of Social Work*, 48(6), 1774-1790. <https://doi.org/10.1093/bjsw/bcx111>
- Farber, B. A. (2003). Patient self-disclosure: A review of the research. *Journal of Clinical Psychology*, 59(5), 589-600. <https://doi.org/10.1002/jclp.10161>
- Farrer, L. M., Clough, B., Bekker, M. J., Callear, A. L., Werner-Seidler, A., Newby, J. M., Knott, V., Gooding, P., Reynolds, J., Brennan, L., & Batterham, P. J. (2022). Telehealth use by mental health professionals during COVID-19.

Australian & New Zealand Journal of Psychiatry, Online First, 1-11.
<https://doi.org/10.1177/00048674221089229>

Feijt, M., de Kort, Y., Bongers, I., Bierbooms, J., Westerink, J., & IJsselstein, W. (2020). Mental health care goes online: Practitioners' experiences of providing mental health care during the COVID-19 pandemic. *Cyberpsychology, Behavior, and Social Networking*, 23(12), 860-864.
<http://doi.org/10.1089/cyber.2020.0370>

Finn, J., & Barak, A. (2010). A descriptive study of e-counsellor attitudes, ethics, and practice. *Counselling and Psychotherapy Research*, 10(4), 268-277.
<https://doi.org/10.1080/14733140903380847>

Fraenkel, J. R., Wallen, N. E., & Hyun, H. H. (2012). *How to design and evaluate research in education* (8th ed.). McGraw-Hill.

French, D.P., Maissi, E., & Marteau, T.M. (2005). The purpose of attributing cause: Beliefs about the causes of myocardial infarction. *Social Science & Medicine*, 60(7), 1411-1421. <https://doi.org/10.1016/j.socscimed.2004.08.008>

Gladding, S. T. (2017). *The counseling dictionary* (4th ed.). John Wiley & Sons.

Geller, S. M. (2013). Therapeutic presence as a foundation for relational depth. In R. Knox, D. Murphy, S. Wiggins, & M. Cooper (Eds.), *Relational depth: New perspectives and developments* (pp. 175-184). Palgrave Macmillan/Springer Nature. https://doi.org/10.1007/978-1-137-29831-7_14

Geller, S. (2021). Cultivating online therapeutic presence: strengthening therapeutic relationships in teletherapy sessions. *Counselling Psychology Quarterly*, 34(3/4), 687-703. <https://doi.org/10.1080/09515070.2020.1787348>

Glasheen, K., Campbell, M. A., & Shochet, I. (2013). Opportunities and challenges: school guidance counsellors' perceptions of counselling students online. *Australian Journal of Guidance and Counselling*, 23(2), 222-235.
<https://doi.org/10.1017/jgc.2013.15>

Glasheen, K. J., Shochet, I., & Campbell, M. A. (2016). Online counselling in secondary schools: Would students seek help by this medium? *British Journal of Guidance & Counselling*, 44(1), 108-122.
<https://doi.org/10.1080/03069885.2015.1017805>

Glueckauf, R. L., Maheu, M. M., Drude, K. P., Wells, B. A., Wang, Y., Gustafson, D. J., & Nelson, E. L. (2018). Survey of psychologists' telebehavioral health practices: Technology use, ethical issues, and training needs. *Professional Psychology: Research and Practice*, 49(3), 205-219.
<https://doi.org/10.1037/pro0000188>

Greenberg, L. S., & Geller, S. (2001). Rogers' therapeutic conditions: Evolution, theory and practice In Wyatt G. (Eds). *Congruence and therapeutic presence*, 1, 148-166. PCCS Books.

Grad, R. I. (2022). Therapeutic alliance and childhood interpersonal trauma: The role of attachment, cultural humility, and therapeutic presence. *Journal of Counseling & Development*, 100(3), 296-307.
<https://doi.org/10.1002/jcad.12423>

Gonzalez, N., (2022). *Mental health – A transforming sector demands tailored solutions*. <https://www.americantelemed.org/resources/mental-health-a-transforming-sector-demands-tailored-solutions/>.

Haberstroh, S., Parr, G., Bradley, L., Morgan-Fleming, B., & Gee, R. (2008). Facilitating online counseling: Perspectives from counselors in training. *Journal of Counseling & Development*, 86(4), 460-470.
<https://doi.org/10.1002/j.1556-6678.2008.tb00534.x>

Han, J., & Smith, B. (1997). CU-SeeMe VR immersive desktop teleconferencing. In *Proceedings of the Fourth Association for Computing Machinery International Conference on Multimedia* (pp. 199-207). New York, NY, USA. <https://doi.org/10.1145/244130.244199>

Hanley, T. (2021). Researching online counselling and psychotherapy: The past, the present and the future. *Counselling and Psychotherapy Research*, 21(3), 493-497. <https://doi.org/10.1002/capr.12385>

Harith, S., Backhaus, I., Mohbin, N., Ngo, H. T., & Khoo, S. (2022). Effectiveness of digital mental health interventions for university students: An umbrella review. *PeerJ Life & Environment*, 10, Article e13111.
<https://doi.org/10.7717/peerj.13111>

Harrison, L., & Wright, J. (2020). The experiences of person-centered counsellors working with suicidal clients online through the medium of text. *British Journal of Guidance & Counselling*, 48(4), 576-591.
<https://doi.org/10.1080/03069885.2020.1742873>

Heidegger, M. (2010). *Being and time*. Suny Press.

Heinlen, K. T., Welfel, E. R., Richmond, E. N., & Rak, C. F. (2003). The scope of web counseling: A survey of services and compliance with NBCC standards for the ethical practice of web counseling. *Journal of Counseling & Development*, 81(2), 61-69. <https://doi.org/10.1002/j.1556-6678.2003.tb00226.x>

Heinsch, M., Geddes, J., Sampson, D., Brosnan, C., Hunt, S., Wells, H., & Kay-Lambkin, F. (2021). Disclosure of suicidal thoughts during an e-mental health intervention: Relational ethics meets actor-network theory. *Ethics & Behavior*, 31(3), 151-170. doi.org/10.1080/10508422.2019.1691003

Helvacıgöl, E. (2019). *Opinions of psychological counselors for online counseling: A qualitative study* (Publication No: 585723) [Master's Thesis, Akdeniz University]. Council of Higher Education Thesis Center. https://tez.yok.gov.tr/UlusalTezMerkezi/tezDetay.jsp?id=d_7LgEfOGNoHbjTLoE7ByA&no=qfAMnYlW_qu5_Z5GEUjG4A

Hurford, D. K. (2021). Creative approaches in solution-focused teletherapy: A COVID-19 renaissance man. *Journal of Systemic Therapies*, 40(1), 21-35. <https://doi.org/10.1521/jsyt.2021.40.1.21>

Ilieva, V. & Erguner-Tekinalp, B. (2010). Utilizing technology in multicultural school counseling: A learning community approach to social justice and advocacy. In D. Gibson & B. Dodge (Eds.), *Proceedings of Society for Information Technology & Teacher Education International Conference* (pp. 1260-1265). San Diego, CA, USA. <https://www.learntechlib.org/primary/p/33530/>

International Telecommunication Union (2022). *Global connectivity report*. <https://www.itu.int/itu-d/reports/statistics/global-connectivity-report-2022/>

Ipsen, C., Rigles, B., Arnold, N., & Seekins, T. (2012). The use of telecommunication to deliver services to rural and urban vocational rehabilitation clients. *Rehabilitation Counseling Bulletin*, 55(3), 144-155. <https://doi.org/10.1177/0034355211432892>

Java, S., Mohammed, H., & Bhardwaj, A. B. (2021). Psychological analysis of online counselling platforms offering mental health support. In Bashir A.K., Fortino G., Khanna A. & Gupta D. (Eds.), *2021 12th International*

Conference on Computing Communication and Networking Technologies
(pp. 1-7). IEEE. [https://doi.org/ 10.1109/ICCCNT51525.2021.9579871](https://doi.org/10.1109/ICCCNT51525.2021.9579871)

Jencius, M. (2014). Social media and online counseling, In B. H. Herlihy and J. Corey (Eds.). *Ethics and legal issues in counseling* (pp.245-258). Alexandria, VA: American Counseling Association

Johnson, J. (1988). Mixing humans and nonhumans together: The sociology of a door closer. *Social Problems* 35(3): 298-310. <https://doi.org/10.2307/800624>

Joyce, N. R. (2012). *An empirical examination of the influences of personality, gender role conflict, and self-stigma on attitudes and intentions to seek online counseling in college students* [Doctoral dissertation, University of Akron]. OhioLINK Electronic Theses and Dissertations Center. http://rave.ohiolink.edu/etdc/view?acc_num=akron1341800688

Kanani, K., & Regehr, C. (2003). Clinical, ethical, and legal issues in e-therapy. *Families in Society*, 84(2), 155-162. <https://doi.org/10.1606/1044-3894.98>

Khan, S., Shapka, J. D., & Domene, J. F. (2022). Counsellors' experiences of online therapy. *British Journal of Guidance & Counselling*, advanced online publication, 50(1) 43-65. <https://doi.org/10.1080/03069885.2021.1885009>

King-White, D., Kurt, L., & Seck, M. (2019). A qualitative study of online school counselors' ethical practices in K-12 schools. *Journal of Ethical Practice*, 10(11), 40-58. <https://doi.org/10.22229/aqs1012019>

Kit, P. L., Teo, C. T., Tan, M., & Park, Y. (2019). Singapore children's online counselling experiences on a live chat portal. *British Journal of Guidance & Counselling*, 47(3), 304-316. <https://doi.org/10.1080/03069885.2018.1485871>

Knaevelsrud, C., & Maercker, A. (2006). Does the quality of the working alliance predict treatment outcome in online psychotherapy for traumatized patients? *Journal of Medical Internet Research*, 8(4), Article e555. <https://doi.org/10.2196/jmir.8.4.e31>

Knott, V., Habota, T., & Mallan, K. (2020). Attitudes of Australian psychologists towards the delivery of therapy via video conferencing technology. *Australian Psychologist*, 55(6), 606-617. <https://doi.org/10.1111/ap.12464>

- Korkmaz, B., & Şen, G. (2018). Psikoterapistlerin çevrimiçi yürütülen psikoterapilere yönelik algılarına ilişkin bir tematik analiz çalışması [A thematic analysis study on psychotherapists' perceptions of online psychotherapies]. *Klinik Psikoloji Dergisi*, 2(3), 140-152. <http://doi.org/10.31828/kpd2602443829092018m000004>
- Langdridge, Darren (2007). *Phenomenological psychology: Theory, research and method*. Pearson Education
- Larkin, M., Watts, S., & Clifton, E. (2006). Giving voice and making sense in interpretative phenomenological analysis. *Qualitative Research in Psychology*, 3(2), 102-120. <https://doi.org/10.1191/1478088706qp062oa>
- Latour, B. (1996). On actor-network theory: A few clarifications. *Soziale Welt*, 47(4), 369-381. <https://www.jstor.org/stable/40878163>
- Latour, B. (2007). *Reassembling the social: An introduction to actor-network-theory*. Oxford.
- Lau, P. L., Aga Mohd Jaladin, R., Abdullah H. S. (2013). Understanding the two sides of online counseling and their ethical and legal ramifications. *Procedia Social Behavioral Science*, 103, 1243-1251. <http://doi.org/10.1016/j.sbspro.2013.10.453>
- Lazuras, L. and Dokou, A. (2016) Mental health professionals' acceptance of online counseling. *Technology in Society*, 44, 10-14. <https://doi.org/10.1016/j.techsoc.2015.11.002>
- Leibert, T., Archer, J., Jr., Munson, J., & York, G. (2006). An exploratory study of client perceptions of internet counseling and the therapeutic alliance. *Journal of Mental Health Counseling*, 28(1), 69-83. <https://doi.org/10.17744/mehc.28.1.f0h37djr89nv6vb>
- Lester, D. (1974). The unique qualities of telephone therapy. *Psychotherapy: Theory, Research & Practice*, 11(3), 219-221. <https://doi.org/10.1037/h0086343>
- Linehan, M. M., & Wilks, C. R. (2015). The course and evolution of dialectical behavior therapy. *American Journal of Psychotherapy*, 69(2), 97-110. <http://doi.org/10.1176/appi.psychotherapy.2015.69.2.97>

- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Sage Publications.
- Lustgarten, S. D., & Elhai, J. D. (2018). Technology use in mental health practice and research: Legal and ethical risks. *Clinical Psychology: Science and Practice*, 25(2), Article e12234. <https://doi.org/10.1111/cpsp.12234>
- MacMullin, K., Jerry, P., & Cook, K. (2020). Psychotherapist experiences with telepsychotherapy: Pre COVID-19 lessons for a post COVID-19 world. *Journal of Psychotherapy Integration*, 30(2), 248-264. <https://doi.org/10.1037/int0000213>
- Maheu, M. M., & Gordon, B. L. (2000). Counseling and therapy on the internet. *Professional Psychology: Research and Practice*, 31(5), 484-489. <https://doi.org/10.1037/0735-7028.31.5.484>
- Maheu, M. M., Pulier, M. L., McMenamin, J. P., & Posen, L. (2012). Future of telepsychology, telehealth, and various technologies in psychological research and practice. *Professional Psychology: Research and Practice*, 43(6), 613-621. <https://doi.org/10.1037/a0029458>
- Mallen, M. J., & Vogel, D. L. (2005). Introduction to the major contribution: Counseling psychology and online counseling. *The Counseling Psychologist*, 33(6), 761-775. <https://doi.org/10.1177/0011000005278623>
- Mallen M. J., Vogel D. L., Rochlen A. B. (2005) The practical aspects of online counseling: ethics, training, technology, and competency. *The Counseling Psychologist*, 33(6), 776-818. <http://doi.org/10.1177/0011000005278625>
- Mallen, M. J., Jenkins, I. M., Vogel, D. L., & Day, S. X. (2011). Online counselling: An initial examination of the process in a synchronous chat environment. *Counselling and Psychotherapy Research*, 11(3), 220-227. <https://doi.org/10.1080/14733145.2010.486865>
- McCollum, E. E., & Gehart, D. R. (2010). Using mindfulness meditation to teach beginning therapists therapeutic presence: A qualitative study. *Journal of Marital and family Therapy*, 36(3), 347-360. <http://doi.org/10.1111/j.1752-0606.2010.00214.x>
- Menon, G. M., & Rubin, M. (2011). A survey of online practitioners: Implications for education and practice. *Journal of Technology in Human Services*, 29(2), 133-141. <https://doi.org/10.1080/15228835.2011.595262>

- Mitchell, D. L., & Murphy, L. M. (1998, November 1-4). *Confronting the challenges of therapy online: A pilot project*. International Conference on Information Technology in Community Health, Victoria, Canada.
- Moessner, M., & Bauer, S. (2012). Online counselling for eating disorders: Reaching an underserved population? *Journal of Mental Health, 21*(4), 336-345.
<https://doi.org/10.3109/09638237.2011.643512>
- Moors, F. & Zech, E. (2017). The effects of psychotherapist's and clients' interpersonal behaviors during a first simulated session: a lab study investigating client satisfaction. *Frontiers in Psychology, 8*, Article 1868.
<http://doi.org/10.3389/fpsyg.2017.01868>.
- Moustakas, C. (1994). *Phenomenological research methods*. Sage Publications
- Murray, C.D., & Rhodes, K. (2005). 'Nobody likes damaged goods': The experience of adult visible acne. *British Journal of Health Psychology, 10*(2), 183-202.
<http://doi.org/10.1348/135910705X26128>
- Murray, G., Leitan, N. D., Berk, M., Thomas, N., Michalak, E., Berk, L., Johnson, S. L., Jones, S., Perich, T., Allen, N. B., & Kyrios, M. (2015). Online mindfulness-based intervention for late-stage bipolar disorder: Pilot evidence for feasibility and effectiveness. *Journal of Affective Disorders, 178*, 46–51.
<https://doi.org/10.1016/j.jad.2015.02.024>
- Nagarajan, M., & Yuvaraj S. (2021). Mental health counsellors' perceptions on use of technology in counselling. *Current Psychology, 40*(4), 1760-1766.
<https://doi.org/10.1007/s12144-018-0104-4>
- National Board of Certified Counselors. (2016). *Policy regarding the provision of distance professional services*. <http://www.nbcc.org>
- National Institute of Mental Health. (2020). *Mental health services: Any mental illness*. <https://www.nimh.nih.gov/health/statistics/mental-illness>
- Negretti, M. A., & Wieling, E. (2001). The use of communication technology in private practice: Ethical implications and boundary dilemmas in therapy. *Contemporary Family Therapy, 23*(3), 275-293.
<https://doi.org/10.1023/A:1011178915547>

- Nelson, K. M., Perry, N. S., Stout, C. D., Dunsiger, S. I., & Carey, M. P. (2022). The young men and media study: A pilot randomized controlled trial of a community-informed, online HIV prevention intervention for 14–17-year-old sexual minority males. *AIDS and Behavior*, 26(2), 569-583. <http://doi.org/10.1007/s10461-021-03412-8>
- Nie, N. H., & Erbring, L. (2002). Internet and society: A preliminary report. *IT & Society*, 1(1), 275-283.
- Norcross, J. C., & Wampold, B. E. (2011). Evidence-based therapy relationships: Research conclusions and clinical practices. *Psychotherapy*, 48(1), 98-102. <https://doi.org/10.1037/a0022161>
- Novella, J. K., Ng, K. M., & Samuolis, J. (2022). A comparison of online and in-person counseling outcomes using solution-focused brief therapy for college students with anxiety. *Journal of American College Health*, 70(4), 1161-1168. <http://doi.org/10.1080/07448481.2020.1786101>
- Nymberg, V. M., Bolmsjö, B. B., Wolff, M., Calling, S., Gerward, S., & Sandberg, M. (2019). ‘Having to learn this so late in our lives...’ Swedish elderly patients’ beliefs, experiences, attitudes and expectations of e-health in primary health care. *Scandinavian Journal of Primary Health Care*, 37(1), 41-52. <http://doi.org/10.1080/02813432.2019.1570612>
- Özyiğit, M. K., & Atik, Z. E. (2021). COVID-19 sürecinde psikolojik danışma ve süpervizyon: # evdekal deneyimi [Counseling and Supervision During COVID-19: Experience of #stayhome]. *Başkent University Journal of Education*, 8(1), 253-274. <https://buje.baskent.edu.tr/index.php/buje/article/view/385>
- Patton, M. Q. (2002). *Qualitative research & evaluation methods*. Sage.
- Pauley, P. M., & Emmers-Sommer, T. M. (2007). The impact of internet technologies on primary and secondary romantic relationship development. *Communication Studies*, 58(4), 411-427. <https://doi.org/10.1080/10510970701648616>
- Pietkiewicz, I., & Smith, J. A. (2014). A practical guide to using interpretative phenomenological analysis in qualitative research psychology. *Psychological Journal*, 20(1), 7-14. <http://doi.org/10.14691/CPJ.20.1.7>

Piri S., (2011). İnternet tabanlı psikolojik hizmetler ve bu alana özgü etik ilkeler: Bir gözden geçirme. [Online Therapy and Ethical Codes: A Review]. *Hacettepe Üniversitesi Edebiyat Fakültesi Dergisi*, 28(2), 213-231. <https://dergipark.org.tr/tr/pub/huefd/issue/41213/509014>

Pordelan, N., & Hosseinian, S. (2021). Online career counseling success: the role of hardiness and psychological capital. *International Journal for Educational and Vocational Guidance*, 21(3), 531-549. <http://doi.org/10.1007/s10775-020-09452-1>

Quigley, J. L., Schmuldt, L., Todd, S., & Bender, S. (2022). Do something different as an intervention for perceived stress reduction in graduate counseling students. *Journal of Technology in Human Services*, 40(1), 1-24. <https://doi.org/10.1080/15228835.2021.1904324>

Rathenau, S., Sousa, D., Vaz, A., & Geller, S. (2022). The effect of attitudes toward online therapy and the difficulties perceived in online therapeutic presence. *Journal of Psychotherapy Integration*, 32(1), 19–33. <https://doi.org/10.1037/int0000266>

Rajani, M. K., & Chandio, M. S. (2004, December). Use of Internet and its effects on our Society. In *National Conference on Emerging Technologies*. (pp. 157-161).

Rees, C. S., & Stone, S. (2005). Therapeutic alliance in face-to-face versus videoconference psychotherapy. *Professional Psychology: Research and Practice*, 36(6), 649-653. <https://doi.org/10.1037/0735-7028.36.6.649>

Reese, R. J., Slone, N. C., Soares, N., & Sprang, R. (2015). Using telepsychology to provide a group parenting program: A preliminary evaluation of effectiveness. *Psychological Services*, 12(3), 274-282. <https://doi.org/10.1037/ser0000018>

Reljic, R., Harper, A., & Crethar, H. (2013). Using technology creatively to empower diverse populations in counseling. *American Counseling Association, Vistas Online*, 1-14. https://www.counseling.org/docs/default-source/vistas/using-technology-creatively-to-empower-diverse-populations-in-counseling.pdf?sfvrsn=57116101_12

Reynolds, F., & Lim, K.H. (2007). Contribution of visual artmaking to the subjective wellbeing of women living with cancer: A qualitative study. *Arts in Psychotherapy*, 34(1), 1-10. <https://doi.org/10.1016/j.aip.2006.09.005>

- Richards, D. (2009). Features and benefits of online counselling: Trinity college online mental health community. *British Journal of Guidance & Counselling*, 37(3), 231-242. <https://doi.org/10.1080/03069880902956975>
- Richards, D., & Viganó, N. (2013). Online counseling: A narrative and critical review of the literature. *Journal of Clinical Psychology*, 69(9), 994-1011. <http://doi.org/10.1002/jclp.21974>.
- Rochlen, A. B., Zack, J. S., & Speyer, C. (2004). Online therapy: Review of relevant definitions, debates, and current empirical support. *Journal of Clinical Psychology*, 60(3), 269-283. <https://doi.org/10.1002/jclp.21974>
- Rotger, J. M., & Cabré, V. (2022). Therapeutic alliance in online and face-to-face psychological treatment: Comparative study. *Journal of Medical Internet Research Mental Health*, 9(5), Article e36775. <https://doi.org/10.2196/36775>
- Rummell, C. M., & Joyce, N. R. (2010). “So wat do u want to wrk on 2day?”: The ethical implications of online counseling. *Ethics & Behavior*, 20(6), 482-496. <https://doi.org/10.1080/10508422.2010.521450>
- Schlenger W, Jöllenbeck M, Stamer T, Grosse A, Ochsmann E. (2022). Digitizing social counseling-insights for workplace health management. *International Journal of Environmental Research and Public Health*, 19(2), Article 917. <https://doi.org/10.3390/ijerph19020917>
- Şeker, Ş. E. (2014). Aktör ağ teorisi [Actor network theory]. *Yönetim Bilişim Sistemleri Ansiklopedisi*, 1(1), 14-15.
- Silvennoinen, P. (2020). Professional master’s degree students’ perceptions on the changes digitalization imposes on counselling in the social and health care sector. *International Journal of Environmental Research and Public Health*, 17(17), Article 6243. <http://doi.org/10.3390/ijerph17176243>
- Silver, Z., Cogger, M., Barr, S., & Drill, R. (2021). Psychotherapy at a public hospital in the time of COVID-19: Telehealth and implications for practice. *Counselling Psychology Quarterly*, 34(3/4), 499-507. <https://doi.org/10.1080/09515070.2020.1777390>
- Skinner, A., & Zack, J. S. (2004). Counseling and the internet. *American Behavioral Scientist*, 48(4), 434-446.

<https://doi.org/10.1177/0002764204270280>

Simpson, S., & Reid, C. L. (2014). Therapeutic alliance in videoconferencing psychotherapy: A review. *The Australian Journal of Rural Health*, 22(6), 280-299. <http://doi.org/10.1111/ajr.12149>

Simpson, S., Richardson, L., Pietrabissa, G., Castelnuovo, G., & Reid, C. (2021). Video therapy and therapeutic alliance in the age of covid-19. *Clinical Psychology & Psychotherapy*, 28(2), 409-421. <https://doi.org/10.1002/cpp.2521>

Smith, J. A., Flower, P., & Larkin, M. (2009). *Interpretative phenomenological analysis: Theory, method, and research*. Sage

Smith, J. A. (2011). Evaluating the contribution of interpretative phenomenological analysis. *Health Psychology Review*, 5(1), 9-27. <https://doi.org/10.1080/17437199.2010.510659>

Smith, J., & Gillon, E. (2021). Therapists' experiences of providing online counselling: A qualitative study. *Counselling and Psychotherapy Research*, 21(3), 545-554. <https://doi.org/10.1002/capr.12408>

Sosialita, T. D. (2019). Online counseling to improve mental health among midwives. *Proyeksi: Jurnal Psikologi*, 14(2), 185-194. <http://doi.org/10.30659/jp.14.2.185-194>

Stange Bernhardt, I., Nissen-Lie, H. A., & Råbu, M. (2021). The embodied listener: A dyadic case study of how therapist and patient reflect on the significance of therapist's personal presence for the therapeutic change process. *Psychotherapy Research*, 31(5), 682-694. <https://doi.org/10.1080/10503307.2020.1808728>

Steele, T. M., Jacokes, D. E., & Stone, C. B. (2014). An examination of the role of online technology in school counseling. *Professional School Counseling*, 18(1), 125-135. <https://doi.org/10.1177/2156759X0001800118>

Stoll, J., Müller, J. A., & Trachsel, M. (2020). Ethical issues in online psychotherapy: A narrative review. *Frontiers in Psychiatry*, 10, Article 993. <https://doi.org/10.3389/fpsy.2019.00993>

- Suler, J. R. (2000). Psychotherapy in cyberspace: A 5-dimensional model of online and computer-mediated psychotherapy. *CyberPsychology and Behavior*, 3(2), 151-159. <https://doi.org/10.1089/109493100315996>
- Suranata, K., Ifdil, I., Gading, I. K., & Permana, A. A. J. (2021). Self-help online psychoeducation to overcome anxiety during COVID-19 outbreak. *The International Journal of Counseling and Education*, 6(1), 11-18. <https://doi.org/10.23916/0020210634010>
- Sussman, R. J. (2004). Counseling over the internet: Benefits and challenges in the use of technologies. <https://eric.ed.gov/?id=ED478216>
- Tanrikulu, İ. (2009). Counselors-in-training students' attitudes towards online counseling. *Procedia-Social and Behavioral Sciences*, 1(1), 785-788. <https://doi.org/10.1016/j.sbspro.2009.01.140>
- Teladoc Health (2020). *2020 Telehealth benchmark survey results*. Teladoc health. <https://teladochealth.com/resources/white-paper/2020-telehealth-benchmark-survey-results/>
- Tele Behavioral Health Institute (n.d.). *About TBHI, global reach of TBHI learners & clients by country*. Telebehavioral Health Institute. <https://telehealth.org/about/>
- Tirel, M., Rozgonjuk, D., Purre, M., & Elhai, J. D. (2020). When do people seek internet counseling? Exploring the temporal patterns of initial submissions to online counseling services. *Journal of Technology in Human Services*, 38(2), 184-202. <https://doi.org/10.1080/15228835.2018.1561348>
- Trabucco, A., Aguglia, A., Amerio, A., Corsini, G., Cervetti, A., Escelsior, A., Costanza, A., Serafini, G., & Amore, M. (2021). COVID-19 pandemic impact on the therapeutic setting in mental health services. *Acta Biomedica: Atenei Parmensis*, 92(6), Article e2021448 <https://doi.org/10.23750/abm.v92iS6.12227>
- Trepal, H., Haberstroh, S., Duffey, T., & Evans, M. (2007). Considerations and strategies for teaching online counseling skills: Establishing relationships in cyberspace. *Counselor Education and Supervision*, 46(4), 266-279. <https://doi.org/10.1002/j.1556-6978.2007.tb00031.x>

- Tribe, R. H., Alcock, K., Scior, K., & Huddy, V. (2021). A mixed methods exploration of “creativity in mind”, an online creativity-based intervention for low mood and anxiety. *Journal of Mental Health*, 30(6), 734-742. <https://doi.org/10.1080/09638237.2021.1922641>
- Tufford, L., & Newman, P. (2012). Bracketing in qualitative research. *Qualitative Social Work*, 11(1), 80-96. <https://doi.org/10.1177/1473325010368316>
- Turkish Psychologists Association (2020). *Online psychological intervention and applications for telepsychology guide*. Turkish Psychologists Association Press. <http://www.psikolog.org.tr/tr/files/folder//telepsikoloji-kilavuzu-x150.pdf>
- Turkish Psychological Counseling and Guidance Association. (2021). *Turkish psychological counseling ethical codes*. In İkiz, F. E., Baş A. U., Arslan Ü. (Eds.). (1st Ed.). Turkish Psychological Counseling and Guidance Association Press.
- Turkish Statistical Institute. (2022). *Survey on information and communication technology (ICT) usage survey in households and by individuals, 2011-2022*. [https://data.tuik.gov.tr/Bulten/Index?p=Survey-on-Information-and-Communication-Technology-\(ICT\)-Usage-in-Households-and-by-Individuals-2022-45587](https://data.tuik.gov.tr/Bulten/Index?p=Survey-on-Information-and-Communication-Technology-(ICT)-Usage-in-Households-and-by-Individuals-2022-45587)
- Turkish Statistical Institute. (2022). *New proportion of individuals, used internet in the last 3 months, in using internet for the activities for private purposes by sex, 2022*. <https://data.tuik.gov.tr/Kategori/GetKategori?p=Science,-Technology-and-Information-Society-102>
- Turner, A., Barlow, J., & Ilbery, B. (2002). Play hurt, live hurt: Living with and managing osteoarthritis from the perspective of ex-professional footballers. *Journal of Health Psychology*, 7(3), 285-301. <http://doi.org/10.1177/1359105302007003222>
- Van der Wagen, W., & Pieters, W. (2020). The hybrid victim: Re-conceptualizing high-tech cyber victimization through actor-network theory. *European Journal of Criminology*, 17(4), 480-497. <https://doi.org/10.1177/1477370818812016>
- van Manen, M. (2016). *Phenomenology of practice: Meaning-giving methods in phenomenological research and writing*. Routledge.

- Venkatesh, V., Thong, J. Y., & Xu, X. (2016). Unified theory of acceptance and use of technology: A synthesis and the road ahead. *Journal of the Association for Information Systems*, 17(5), 328-376. <http://doi.org/10.17705/1jais.00428>
- Velykodna, M. (2021). Psychoanalysis during the COVID-19 pandemic: Several reflections on countertransference. *Psychodynamic Practice*, 27(1), 10-28. <https://doi.org/10.1080/14753634.2020.1863251>
- VERBI Software. (2021). MAXQDA 2022 online manual. maxqda.com/help-max20/welcome
- Vincent, C., Barnett, M., Killpack, L., Sehgal, A., & Swinden, P. (2017). Advancing telecommunication technology and its impact on psychotherapy in private practice. *British Journal of Psychotherapy*, 33(1), 63-76. <https://doi.org/10.1111/bjp.12267>
- Vongtangswad, S., Tuicomepee, A., & Sirikantraporn, S. (2017). Client perspectives on single session chat-based individual online counseling among undergraduates. *Journal of Health Research*, 31(4), 271-279. <https://doi.org/10.14456/jhr.2017.34>
- Weizenbaum, J. (1966). ELIZA: A computer program for the study of natural language communication between man and machine. *Communications of the ACM*, 9(1), 36-45. <https://doi.org/10.1145/365153.365168>
- Witt, K. J., Oliver, M. & McNichols, C. (2016) Counseling via avatar: Professional practice in virtual worlds. *International Journal for the Advancement of Counselling* 38(3), 218–236. <https://doi.org/10.1007/s10447-016-9269-4>
- Wind, T. R., Rijkeboer, M., Andersson, G., & Riper, H. (2020). The COVID-19 pandemic: The “black swan” for mental health care and a turning point for e-health. *Internet Interventions: The Application of Information Technology in Mental and Behavioral Health*, 20, Article 100317. <http://doi.org/10.1016/j.invent.2020.100317>
- Woo, H., Dondanville, A., Jang, H., Na, G., & Jang, Y. (2020). A content analysis of the counseling literature on technology integration: American Counseling Association (ACA) counseling journals between 2000 and 2018. *International Journal for the Advancement of Counselling*, 42(3), 319-333. <https://doi.org/10.1007/s10447-020-09406-w>

Wood, M. J., Wilson, H. M., & Parry, S. L. (2021). Exploring the development and maintenance of therapeutic relationships through e-health support: A narrative analysis of therapist experiences. *Medicine Access Point of Care*, 5, 1-10. <https://doi.org/10.1177/23992026211018087>

World Health Organization (2020). *Pulse survey on continuity of essential health services during the COVID-19 pandemic*. Interim report. https://www.who.int/publications/i/item/WHO-2019-nCoV-EHS_continuity-survey-2020.1

Yardley, L. (2000). Dilemmas in qualitative health research. *Psychology and Health*, 15(2), 215-228. <http://doi.org/10.1080/08870440008400302>.

Yıldırım, A., & Şimşek, H. (2018). *Sosyal Bilimlerde Nitel Araştırma Yöntemleri [Qualitative Research Methods in Social Sciences]*. (11th Ed.). Ankara: Seçkin Yayıncılık.

Yılmaz, F. (2019). *Cybercounseling from the perspective of cybercounselors: Opportunities and challenges*. (Publication No: 585723) [Master's Thesis, Bosphorus University]. Council of Higher Education Thesis Center. <https://tez.yok.gov.tr/UlusalTezMerkezi/tezDetay.jsp?id=mHE3AnypHksUtAxkDYzQSQ&no=tIYmobtS5v7G5MJq1ucIPw>

Young, K. S. (2005). An empirical examination of client attitudes towards online counseling. *CyberPsychology & Behavior*, 8(2), 172-177. <http://doi.org/10.1089/cpb.2005.8.172>

Young, R. A., Domene, J. F., Valach, L., & Socholotiuk, K. (2021). Exploring human action in counseling psychology: The action-project research method. *Journal of Counseling Psychology*, 68(3), 331-343. <https://doi.org/10.1037/cou0000533>

Zack, J.S. (2008). How sturdy is that digital couch? Legal considerations for mental health professionals who deliver clinical services via the internet. *Journal of Technology in Human Services*, 26(2/4), 333-359. <https://doi.org/10.1080/15228830802097083>

Zentner, K., Gaine, G., Ethridge, P., Surood, S., & Abba-Aji, A. (2022). Clinicians' attitudes toward telepsychology in addiction and mental health services, and prediction of post pandemic telepsychology uptake: Cross-sectional study. *JMIR Formative Research*, 6(5), Article e35535. <https://doi.org/10.2196/35535>

- Zeren, Ş. G. (2015). Face-to-face and online counseling: Client problems and satisfaction. *Education & Science*, 40(182), 127-142. <http://doi.org/10.15390/eb.2015.4696>
- Zeren, Ş. G. (2017). Therapeutic alliance in face-to-face and online counseling: Opinions of counselor candidates. *Journal of Human Sciences*, 14(3), 2278-2307. <https://www.j-humansciences.com/ojs/index.php/IJHS/article/view/4203>
- Zeren, Ş. G., Erus, S. M., Amanvermez, Y., Genc, A. B., Yilmaz, M. B., & Duy, B. (2020). The effectiveness of online counseling for university students in Turkey: A non-randomized controlled trial. *European Journal of Educational Research*, 9(2), 825-834. <http://doi.org/10.12973/eu-jer.9.2.825>
- Zeren, Ş. G.; Erus, S. M., Amanvermez, Y., Genc., A. B., & Duy, B. (2022). Client's experiences of online counseling: Satisfaction and therapeutic alliance. *Çukurova University Faculty of Education Journal*, 51(1), 634-658. <http://doi.org/10.14812/cufej.8>

APPENDICES

A. APPROVAL OF THE METU HUMAN SUBJECTS ETHICS COMMITTEE

UYGULAMALI ETİK ARAŞTIRMA MERKEZİ
APPLIED ETHICS RESEARCH CENTER



ORTA DOĞU TEKNİK ÜNİVERSİTESİ
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Sayı: 28620816 /

20 Mayıs 2021

Konu : Değerlendirme Sonucu

Gönderen: ODTÜ İnsan Araştırmaları Etik Kurulu (İAEK)

İlgi : İnsan Araştırmaları Etik Kurulu Başvurusu

Sayın Dr. Öğr Üyesi: [Redacted]

Danışmanlığını yürüttüğünüz [Redacted]'ın "Psikolojik Danışmanların ve Danışanların Çevrim İçi Psikolojik Danışmanlığa İlişkin Görüşleri, Deneyimleri ve Önerileri" başlıklı araştırmanız İnsan Araştırmaları Etik Kurulu tarafından uygun görülmüş ve 189-ODTU-2021 protokol numarası ile onaylanmıştır.

Saygılarımızla bilgilerinize sunarız.

[Redacted Signature]

Dr. Öğretim Üyesi Şerife SEVİNÇ
İAEK Başkan Vekili

B. INFORM CONSENT FORM

Bu çalışma, ODTÜ Psikolojik Danışmanlık ve Rehberlik bölümü yüksek lisans öğrencisi [REDACTED] tarafından Dr. Öğr. Üye [REDACTED] danışmanlığında yürütülmektedir. Bu form sizi araştırma koşulları ve detayları hakkında bilgilendirmek için hazırlanmıştır.

Çalışmanın Amacı Nedir?

Bu çalışmanın amacı, görüntülü konuşma araçları kullanarak çevrimiçi psikolojik danışma hizmeti veren psikolojik danışmanların ve bu hizmeti alan danışanların çevrimiçi psikolojik danışma ile ilgili görüşlerinizi, deneyimlerini incelemek çevrimiçi psikolojik danışmanın etkinliğinin artırılması için önerilerini almaktır.

Bize Nasıl Yardımcı Olabilirsiniz?

Çalışmaya katılmayı kabul etmeniz durumunda sizin programınıza uyan bir zaman dilimi için zoom programı üzerinden görüntülü bir görüşme daveti gönderilecektir. Görüşmenin yaklaşık olarak 40 dk. süreceği öngörülmektedir. Bu görüşmede size çevrimiçi psikolojik danışma ile ilgili görüş, deneyim ve önerileriniz ile ilgili sorular sorulacaktır. Sizden beklenen sorulara detaylı bir şekilde içtenlikle yanıt vermenizdir.

Katılımınızla ilgili bilmeniz gerekenler:

Çalışmaya katılımınız tamamen gönüllülük esasına dayalıdır. Görüşme süresince verilerin analiz edilebilmesi için görüşmenin ses kaydı tutulacaktır. Verdiğiniz bilgiler tamamen gizli tutulup, sadece çalışmayı sürdüren araştırmacılar tarafından görülecektir. Hiçbir şekilde verdiğiniz bilgiler sizin kişisel verilerinizle eşleştirilmeyecektir. Alınan ses kayıtları Katılımcı 1, Katılımcı 2 şeklindeki kod adları ile kaydedilecektir. Katılımcılardan elde edilecek bilgiler bilimsel yayınlarda kullanılacaktır. Katılım sırasında sorulardan ya da herhangi başka bir nedenden ötürü kendinizi rahatsız hissederseniz cevaplamayı bırakabilirsiniz. Böyle bir durumda çalışmayı uygulayan kişiye, çalışmayı bırakmak istediğinizi söylemeniz yeterli olacaktır.

Araştırmayla ilgili daha fazla bilgi almak isterseniz:

Çalışmayla ilgili soru ve görüşlerinizi [REDACTED]@metu.edu.tr adresine iletebilirsiniz. Çalışmamıza katkınız için şimdiden teşekkür ederiz.

Yukarıdaki bilgileri okudum; çalışmaya katılımın gönüllülük esasına dayandığı, tüm kişisel bilgilerimin gizli tutulacağı, verdiğim cevapların bilimsel yayınlarda kullanılacağı konusunda bilgilendirildim.

Ad Soyad

Tarih

İmza

___/___/___



C. ANNOUNCEMENT TEXT

Değerli katılımcı,

Sizi, ODTÜ Psikolojik Danışma ve Rehberlik programı yüksek lisans öğrencisi [REDACTED] tarafından, Dr. Öğr. Üyesi [REDACTED] danışmanlığında yürütülen “Psikolojik Danışmanların ve Danışanların Çevrim İçi Psikolojik Danışmanlığa İlişkin Görüşleri, Deneyimleri ve Önerileri” isimli tez çalışmasına katkı vermeye davet ediyoruz. Bu tez çalışmasında, psikolojik danışmanların ve danışanların süreçle ilgili görüşlerinin, deneyimlerinin ve çevrim içi psikolojik danışma hizmetlerinin geliştirilmesine ilişkin önerilerinin araştırılması amaçlanmaktadır. Çalışmaya dahil edilecek katılımcıların video konferans araçlarını kullanarak en az 8 çevrim içi psikolojik danışma hizmeti vermiş veya almış olması gerekmektedir.

Bu amaca ulaşmak için araştırmacılar tarafından danışman ve danışanlara özel iki ayrı yarı yapılandırılmış görüşme formu hazırlanmıştır. Bu görüşme, Zoom vb. gibi video konferans programları aracılığıyla gerçekleştirilecek olup, araştırma deşifresinin yapılabilmesi için ses kaydı alınması gerekmektedir. Tutulan kaydın deşifre işlemi yapılırken kişisel bilgileriniz ve isminiz kesinlikle saklı tutulacaktır. Bu görüşmede sizden istenen, size yöneltilen soruları deneyim ve görüşleriniz doğrultusunda cevaplamanızdır. Görüşmenin 55-60 dk süreceği öngörülmektedir. Çalışmaya katkı vermeyi kabul etmeniz durumunda, uygun zaman aralıklarını belirtmenizi rica ediyoruz. Sonrasında size uygun gün ve saat için ayarlanmış görüşme linki tarafınıza iletilecektir.

Çalışmaya yapacağınız katkı için şimdiden teşekkür ederiz.

Not: Araştırma hakkında daha fazla bilgi edinmek için Metin Pulat (e-posta: [REDACTED]@metu.edu.tr / tel: +[REDACTED]) veya Dr. Öğretim Üyesi [REDACTED] (e-posta: [REDACTED]@metu.edu.tr) ile iletişime geçebilirsiniz.

**D. ONLINE INDIVIDUAL PSYCHOLOGICAL COUNSELING
INTERVIEW FORM FOR CLIENTS**

ÇEVİRİM İÇİ BİREYLE PSİKOLOJİK DANIŞMA: DANIŞAN FORMU

BÖLÜM 1: KİŞİSEL BİLGİLER

1. Cinsiyet:
2. Doğum Yılı:
3. En son tamamladığınız eğitim seviyesi:
4. Öğrenci iseniz eğitim seviyesi/bölümünüz/sınıfınız:
5. Mezun iseniz mesleğiniz/işiniz:

**BÖLÜM 2: ÇEVİRİM İÇİ PSİKOLOJİK DANIŞMANLIĞA İLİŞKİN
GÖRÜŞLER, DENEYİMLER VE ÖNERİLER**

6. **a.** Ne kadar süredir yüz yüze psikolojik danışma hizmeti alıyorsunuz?
b. Ne kadar süredir çevrim içi psikolojik danışma hizmeti alıyorsunuz?
7. Çevrim içi psikolojik danışma oturumlarında hangi programı kullanıyorsunuz?
8. Bundan sonraki danışma süreciniz için: __Yüz yüze, __Çevrim içi __Hibrit (karma) formatlarını kendi kullanım tercihinize göre sıralayıp, sıralamanızın nedenlerini belirtir misiniz
9. **a.** Şimdiye kadar yaklaşık olarak kaç tane yüz yüze bireysel psikolojik danışma oturumu yaptınız?
b. Şimdiye kadar yaklaşık olarak kaç tane çevrim içi bireysel psikolojik danışma oturumu yaptınız?
10. **a.** Yüz yüze psikolojik danışma hizmeti almak istediğiniz uzmana nasıl ve nereden ulaştınız?
b. Çevrim içi psikolojik danışma hizmeti almak istediğiniz uzmana nasıl ve nereden ulaştınız?
11. **a.** Yüz yüze psikolojik danışma hizmeti alırken psikolojik danışmanın uzmanlığını kontrol etmek için neler yaptınız?
b. Çevrim içi psikolojik danışma hizmeti alırken psikolojik danışmanın uzmanlığını kontrol etmek için neler yaptınız?
12. **a.** Yüz yüze psikolojik danışma hizmeti aldığınız uzmanın alanı nedir? (Psikiyatrist, psikolog, psikolojik danışman vb.)
b. Çevrim içi psikolojik danışma hizmeti aldığınız uzmanın alanı nedir? (psikiyatrist, psikolog, psikolojik danışman vb.)
13. **a.** Almış olduğunuz yüz yüze psikolojik danışma hizmetinin genel olarak içeriğinden bahseder misiniz?
b. Almış olduğunuz yüz yüze psikolojik danışma hizmetinin genel olarak içeriğinden bahseder misiniz?
14. **a.** Yüz yüze aldığınız psikolojik danışma hizmetinin etkililiği hakkındaki düşüncelerinizi paylaşır mısınız?

b. Çevrim içi aldığınız psikolojik danışma hizmetinin etkililiği hakkındaki düşüncelerinizi paylaşır mısınız?

15. a. Yüz yüze psikolojik danışma sürecinde psikolojik danışmanınızla kurmuş olduğunuz ilişki nasıldı?

b. Çevrim içi psikolojik danışma sürecinde psikolojik danışmanınızla kurmuş olduğunuz ilişki nasıldı?

16. Yüz yüze psikolojik danışma ile çevrim içi psikolojik danışma arasında ne gibi farklılıklar olduğunu düşünüyorsunuz?

17. Aşağıda verilen konulara ilişkin hizmet alacak olsaydınız, hangi seçeneği seçeceğinizi lütfen belirtiniz.

1 = Kesinlikle çevrim içi psikolojik danışmanlığı tercih ederim.

2 = Büyük olasılıkla çevrim içi psikolojik danışmanlığı tercih ederim.

3 = Çevrim içi psikolojik danışmanlığı da yüz yüze psikolojik danışmanlığı da tercih edebilirim.

4 = Büyük olasılıkla yüz yüze psikolojik danışmanlığı tercih ederim.

5 = Kesinlikle yüz yüze psikolojik danışmanlığı tercih ederim.

	1	2	3	4	5
Uyum konuları/problemleri (Okul, iş, yeni bir sosyal çevre, yeni bir yaşam düzeni)	☐	☐	☐	☐	☐
Akademik konular/problemler	☐	☐	☐	☐	☐
Kariyer ile ilgili konular/planlamalar	☐	☐	☐	☐	☐
Arkadaşlık ilişkilerine dair konular/problemler	☐	☐	☐	☐	☐
Aile ile ilgili problemler	☐	☐	☐	☐	☐
Romantik ilişki (flört/evlilik) sorunları	☐	☐	☐	☐	☐
Ayrılık/boşanma sorunları	☐	☐	☐	☐	☐
Kayıp/yas	☐	☐	☐	☐	☐
Kriz/afet/travma	☐	☐	☐	☐	☐
Sağlık konuları/problemleri	☐	☐	☐	☐	☐
Cinsellik ile ilgili konular/problemler	☐	☐	☐	☐	☐
Cinsel istismar	☐	☐	☐	☐	☐
Cinsel yönelim	☐	☐	☐	☐	☐
Sorunlu internet kullanımı	☐	☐	☐	☐	☐
Bağımlılık ile ilgili konular/problemler	☐	☐	☐	☐	☐
Beden algısı	☐	☐	☐	☐	☐
Motivasyon	☐	☐	☐	☐	☐
Odaklanma	☐	☐	☐	☐	☐
Stres yönetimi	☐	☐	☐	☐	☐
Öfke yönetimi	☐	☐	☐	☐	☐
Kaygı ile ilgili sorunlar (Sosyal kaygı, sınav kaygısı, genel kaygı vb.)	☐	☐	☐	☐	☐
Zorbalık	☐	☐	☐	☐	☐
Siber zorbalık	☐	☐	☐	☐	☐
İş ile ilgili problemler	☐	☐	☐	☐	☐
Depresyon	☐	☐	☐	☐	☐
Ekonomik konular/problemler	☐	☐	☐	☐	☐
Fobiler	☐	☐	☐	☐	☐

20. Bizim size vermiş olduğumuz bu liste dışında sizin, yüz yüze ya da çevrim içi psikolojik danışma hizmeti almak için daha uygun olabileceğini düşündüğünüz konular var mı? Varsa nelerdir?

21. Çevrim içi psikolojik danışma hizmetinin

a. Danışan açısından avantajları nelerdir?

b. Danışman açısından avantajları nelerdir?

[Gerçek ismini saklamak), Giderek daha erişilebilir hale gelmesi, Daha ucuz olması, Daha kolay olması, Görüşme saatlerinin esnek olabilmesi, Kimsenin beni danışmanın ofisinde göremeyecek olması, Fiziksel mesafe olarak çok uzaktaki uzmanlarla görüşebilme imkanı, Enerji ve zaman tasarrufu sağlaması, Görüşme sırasında daha rahat hissetmek, ana dilde yardım alabilme, danışma sürecine devam edilmesi, engelli bir birey için avantaj sağlayabilmesi, ulaşamayacak bireylere temas edebilme imkanı, daha çok danışana erişebilme imkanı, danışanın duyguyu yaşadktan daha kısa süre sonra iletişime geçebilme imkanı vb.]

22. Çevrim içi psikolojik danışma hizmetinin

a. Danışan açısından dezavantajları nelerdir?

b. Danışman açısından dezavantajları nelerdir?

[Yüz yüze iletişimin olmaması, Görüşme kaydının online ortamda kaydedilmesine ve saklanmasına ilişkin riskler, Teknolojik problemlerin süreci etkilemesi (zayıf internet bağlantısı vb.), Gizlilik (Görüşme yaparken birinin yanına gelmesi, Güven sağlayamama, evde başka birilerinin bulunmasından dolayı danışanın kendini açmada yaşayabileceği zorluk),çevrim içi ortamda çok uzun süre kalmanın getirdiği yorgunluk, yaşanan evdeki diğer üyelerin psikolojik desteği desteklememesi, odaklanma problemleri]

23. a. Çevrim içi psikolojik danışmada, teknoloji kullanımı konusunda kendinizi ne kadar yeterli görüyorsunuz?

b. Çevrim içi psikolojik danışmada kullandığınız programla ilgili yaşadığınız sıkıntılardan bahseder misiniz?

24. Çevrim içi psikolojik danışmada uyulması gereken kurallar ile ilgili bildiklerinizi paylaşıyor musunuz?

25. Çevrim içi psikolojik danışmada, yasal ve etik konular ile ilgili ne tür zorluklar yaşanabilir? Varsa bu konudaki deneyiminizi aktarabilir misiniz? (çevrim içi güvenliği sağlayabilme, gizliliği koruyabilme, acil durumlar, sınırları koruyabilme vb.)

26. Çevrim içi psikolojik danışma hizmetinin geliştirilmesi için neler önerirsiniz?

a. Formata ilişkin öneriler

b. Programa ilişkin öneriler

c. İçeriğe ilişkin öneriler

d. Kurallara ilişkin öneriler

e. Ücretlendirmeye ilişkin öneriler

- f. Duyurulmasına/yaygınlaştırılmasına ilişkin öneriler
- g. Güvenliğe/gizliliğe ilişkin öneriler
- h. Çevrim içi psikolojik danışma eğitime ilişkin öneriler
- i. Danışmanlara öneriler
- j. Danışanlara öneriler

27. Çevrim içi psikolojik danışmanlığın farklı formatları bulunmaktadır. Siz aşağıdaki seçenekleri kendi tercihinize en uygun olandan uygun olmayana doğru sıralayarak, sıralama tercihinizin nedenlerini belirtir misiniz?

- __Görüntülü arama
- __Sesli arama,
- __Canlı sohbet (Live chat)
- __Telefondan yazılı mesaj
- __E-posta
- __Ses kaydı mesajı

28. Bizim size sormadığımız sizin eklemek istediğiniz bir şey var mı?

**E. ONLINE INDIVIDUAL PSYCHOLOGICAL COUNSELING
INTERVIEW FORM FOR PSYCHOLOGICAL COUNSELORS**

ÇEVİRİM İÇİ BİREYLE PSİKOLOJİK DANIŞMA: DANIŞMAN FORMU

BÖLÜM 1: KİŞİSEL BİLGİLER

1. Cinsiyet:
2. Doğum yılı:
3. En son tamamladığınız eğitim seviyesi:
4. Öğrenime devam ettiğiniz okulun adı:
5. Meslekteki çalışma süreniz:

**BÖLÜM 2: ÇEVİRİM İÇİ PSİKOLOJİK DANIŞMANLIĞA İLİŞKİN
GÖRÜŞLER, DENEYİMLER VE ÖNERİLER**

6. a. Ne kadar süredir yüz yüze psikolojik danışma hizmeti veriyorsunuz?
b. Ne kadar süredir çevrim içi psikolojik danışma hizmeti veriyorsunuz?
7. Çevrim içi psikolojik danışma oturumlarında hangi programı kullanıyorsunuz?
8. Bundan sonraki danışma süreciniz için: __Yüz yüze, __Çevrim içi __Hibrit (karma) formatlarını kendi kullanım tercihinize göre sıralayıp, sıralamanızın nedenlerini belirtir misiniz?
9. Daha önce çevrim içi psikolojik danışma ile ilgili bir ders ya da eğitim aldınız mı? Aldıysanız içeriğinden bahseder misiniz?
10. a. Şimdiye kadar yaklaşık olarak kaç tane yüz yüze bireysel psikolojik danışma oturumu yaptınız?
b. Şimdiye kadar yaklaşık olarak kaç tane çevrim içi bireysel psikolojik danışma oturumu yaptınız?
11. a. Danışanlarınızla yüz yüze yaptığınız görüşmelerde genel olarak benimsediğiniz terapötik yaklaşımdan bahseder misiniz?
b. Danışanlarınızla çevrim içi yaptığınız görüşmelerde genel olarak benimsediğiniz terapötik yaklaşımdan bahseder misiniz?
12. a. Danışanlarınızla yüz yüze yaptığınız görüşmelerde sıklıkla hangi teknikleri kullanıyorsunuz?
b. Aynı teknikleri çevrim içi danışma sürecinde kullanırken olumlu veya olumsuz ne gibi farklılıklar olduğunu düşünüyorsunuz?
13. Yüz yüze verdiğiniz psikolojik danışma hizmetinin etkililiğini hakkındaki düşüncelerinizi paylaşır mısınız?
a. Şimdiye kadar yüz yüze hizmet verdiğiniz tüm danışanlarınızı düşündüğünüzde, yüzde kaç için bu sürecin etkili olduğunu söyleyebilirsiniz?
14. Çevrim içi verdiğiniz psikolojik danışma hizmetinin etkililiğini hakkındaki düşüncelerinizi paylaşır mısınız?

a. Şimdiye kadar çevrim içi hizmet verdiğiniz tüm danışanlarınızı düşündüğünüzde, yüzde kaçını için bu sürecin etkili olduğunu söyleyebilirsiniz?

15. a. Yüz yüze psikolojik danışma süreçlerinde danışanlarınızla kurmuş olduğunuz terapötik iş birliği nasıldı?

b. Çevrim içi psikolojik danışma süreçlerinde danışanlarınızla kurmuş olduğunuz terapötik iş birliği nasıldı?

16. a. Terapötik mevcudiyet (Therapeutic presence) danışmanın danışanıya birlikte farklı seviyelerde fiziksel, duygusal, bilişsel olarak tamamen anda olmasını demektir. Danışmanın terapötik mevcudiyeti, danışana dinlenildiğini, anlaşıldığını ve güvenli bir ortamda olduğunu hissettirir. Siz, yüz yüze psikolojik danışma oturumlarında terapötik mevcudiyet deneyiminize ilişkin neler söylemek istersiniz?

b. Çevrim içi psikolojik danışma oturumlarında terapötik mevcudiyet deneyiminize ilişkin neler söylemek istersiniz?

17. Yüz yüze psikolojik danışma ile çevrim içi psikolojik danışma arasında ne gibi farklılıklar olduğunu düşünüyorsunuz?

18. Aşağıda verilen konulara ilişkin hizmet verecek olsaydınız, hangi seçeneği seçeceğinizi lütfen belirtiniz.

1 = Kesinlikle çevrim içi psikolojik danışmanlığı tercih ederim.

2 = Büyük olasılıkla çevrim içi psikolojik danışmanlığı tercih ederim.

3 = Çevrim içi psikolojik danışmanlığı da yüz yüze psikolojik danışmanlığı da tercih edebilirim.

4 = Büyük olasılıkla yüz yüze psikolojik danışmanlığı tercih ederim.

5 = Kesinlikle yüz yüze psikolojik danışmanlığı tercih ederim.

	1	2	3	4	5
Uyum konuları/problemleri (Okul, iş, yeni bir sosyal çevre, yeni bir yaşam düzeni vb)	☐	☐	☐	☐	☐
Akademik konular/problemler	☐	☐	☐	☐	☐
Kariyer konular/planlamalar	☐	☐	☐	☐	☐
Arkadaşlık ilişkilerine dair konular/problemler	☐	☐	☐	☐	☐
Aile ile ilgili konular/problemler	☐	☐	☐	☐	☐
Romantik ilişki (flört/evlilik) konuları/problemleri	☐	☐	☐	☐	☐
Ayrılık/boşanma sorunları	☐	☐	☐	☐	☐
Kayıp/yas	☐	☐	☐	☐	☐
Kriz/afet/travma	☐	☐	☐	☐	☐
Sağlık konuları/problemleri	☐	☐	☐	☐	☐
Cinsellik ile ilgili konular/problemler	☐	☐	☐	☐	☐
Cinsel istismar	☐	☐	☐	☐	☐
Cinsel yönelim	☐	☐	☐	☐	☐
Sorunlu internet kullanımı	☐	☐	☐	☐	☐
Bağımlılık ile ilgili konular/problemler	☐	☐	☐	☐	☐
Beden algısı	☐	☐	☐	☐	☐
Motivasyon	☐	☐	☐	☐	☐
Odaklanma	☐	☐	☐	☐	☐

Stres Yönetimi	☐	☐	☐	☐	☐
Öfke Yönetimi	☐	☐	☐	☐	☐
Kaygı ile ilgili sorunlar (Sosyal kaygı, sınav kaygısı, genel kaygı vb.)	☐	☐	☐	☐	☐
Zorbalık	☐	☐	☐	☐	☐
Siber Zorbalık	☐	☐	☐	☐	☐
İş ile ilgili konular/problemler	☐	☐	☐	☐	☐
Depresyon	☐	☐	☐	☐	☐
Ekonomik konular/problemler	☐	☐	☐	☐	☐
Fobiler	☐	☐	☐	☐	☐

- 19.** Bizim size vermiş olduğumuz bu liste dışında sizin, yüz yüze ya da çevrim içi psikolojik danışma hizmeti vermek için daha uygun olabileceğini düşündüğünüz konular var mı? Varsa nelerdir?
- 20.** Çevrim içi psikolojik danışma hizmetinin
- a. Danışan açısından avantajları nelerdir?
 - b. Danışman açısından avantajları nelerdir?
[Gerçek ismini saklamak), Giderek daha erişilebilir hale gelmesi, Daha ucuz olması, Daha kolay olması, Görüşme saatlerinin esnek olabilmesi, Kimsenin beni danışmanın ofisinde göremeyecek olması, Fiziksel mesafe olarak çok uzaktaki uzmanlarla görüşebilme imkanı, Enerji ve zaman tasarrufu sağlaması, Görüşme sırasında daha rahat hissetmek, ana dilde yardım alabilme, danışma sürecine devam edilmesi, engelli bir birey için avantaj sağlayabilmesi, ulaşamayacak bireylere temas edebilme imkanı, daha çok danışana erişebilme imkanı, danışanın duyguyu yaşadıkdan daha kısa süre sonra iletişime geçebilme imkanı vb.]
- 21.** Çevrim içi psikolojik danışma hizmetinin
- a. Danışan açısından dezavantajları nelerdir?
 - b. Danışman açısından dezavantajları nelerdir?
[Yüz yüze iletişimin olmaması, Görüşme kaydının online ortamda kaydedilmesine ve saklanmasına ilişkin riskler, Teknolojik problemlerin süreci etkilemesi (zayıf internet bağlantısı vb.), Gizlilik (Görüşme yaparken birinin yanına gelmesi, Güven sağlayamama, evde başka birilerinin bulunmasından dolayı danışanın kendini açmada yaşayabileceği zorluk), çevrim içi ortamda çok uzun süre kalmanın getirdiği yorgunluk, yaşanan evdeki diğer üyelerin psikolojik desteği desteklememesi, odaklanma problemleri]
- 22.** Psikolojik danışman olarak kendinizi çevrim içi psikolojik danışma hizmeti vermek için ne kadar yeterli görüyorsunuz?
- a. Çevrim içi psikolojik danışmada, teknoloji kullanımı konusunda kendinizi ne kadar yetkin görüyorsunuz?
 - b. Çevrim içi psikolojik danışmada kullandığınız programla ilgili yaşadığınız sıkıntılardan bahseder misiniz?
- 23.** Çevrim içi psikolojik danışma oturumlarınızın güvenliğini sağlamak için neler yaptınız?

24. Çevrim içi psikolojik danışma yaparken özellikle hangi etik kurallara dikkat ediyorsunuz?
- Çevrim içi psikolojik danışmada etikle ilgili hangi konularda ek bilgi almak istersiniz?
 - Çevrim içi psikolojik danışmada, yasal ve etik konular ile ilgili ne tür zorluklar yaşanabilir? Varsa bu konudaki deneyiminizi aktarabilir misiniz?
25. Çevrim içi psikolojik danışmada kullandığınız psikolojik danışma becerilerinin etkililiği hakkında neler düşünüyorsunuz? Sizce yüz yüze psikolojik danışmaya kıyasla uygulaması daha zor ve/veya kolay beceriler var mı?
- Çevrim içi psikolojik danışmada, psikolojik danışma becerilerini uygulayabilme açısından kendinizi ne kadar yeterli görüyorsunuz?
 - Psikolojik danışmanlık becerilerinin uygulanması açısından çevrim içi ve yüz yüze danışma arasında gördüğünüz farklılıklar nelerdir?
 - Göz kontağı, beden dili, ses tonu, jest ve mimikler gibi sözel olmayan iletişim becerilerinin çevrim içi psikolojik danışmada kullanımı hakkında ne düşünüyorsunuz?
26. Çevrim içi psikolojik danışma deneyiminizin yaratıcılığınızı nasıl etkilediğini düşünüyorsunuz?
27. Çevrim içi psikolojik danışma hizmetinin geliştirilmesi için neler önerirsiniz?
- Formata ilişkin öneriler
 - Programa ilişkin öneriler
 - İçeriğe ilişkin öneriler
 - Kurallara ilişkin öneriler
 - Ücretlendirmeye ilişkin öneriler
 - Duyurulmasına/yaygınlaştırılmasına ilişkin öneriler
 - Güvenliğe/Gizliliğe ilişkin öneriler
 - Çevrim içi psikolojik danışma eğitimine ilişkin öneriler
 - Danışmanlara öneriler
 - Danışanlara öneriler
28. Bizim size sormadığımız sizin eklemek istediğiniz bir şey var mı?

F. TURKISH SUMMARY /TÜRKÇE ÖZET

ÇEVİRİM İÇİ PSİKOLOJİK DANIŞMANLIK: DANIŞANLAR VE PSİKOLOJİK DANIŞMANLAR NE DENEYİMLİYOR VE DÜŞÜNÜYOR?

1. GİRİŞ

İnsanlık için, tekerleğin icadından yapay zekaya kadar birçok değişime tanık olduğumuz farklı devrimler olmuştur. Bu icatlarla birlikte insanların yaşam alışkanlıklarının değiştiği söylenebilir. İnternetin sadece bilgi teknolojilerinde değil, iş dünyasında da değişime yol açtığı şüphe götürmez bir gerçektir (Baker ve Ray, 2011). Son yıllara baktığımızda internet, bilgi dağıtımında en etkili ürün olmasının yanı sıra (Barak ve Grohol, 2011), şu anda geldiği nokta ile ruh sağlığı hizmetlerinin sunulma biçimini de etkilemiştir (Baker ve Ray, 2011). Teknolojik devrim, ruh sağlığı hizmetlerinde esneklik, uygun ücret ve erişilebilirlik gibi fırsatlar sunmaktadır (Heinsch vd., 2021). Bu nedenle, çevrim içi psikolojik danışmada teknoloji ve internet kalitesi, gerekli koşullar olarak karşımıza çıkabilmektedir.

Yeni bir hizmet olan çevrim içi psikolojik danışmaya olan ilgi, ruh sağlığı uzmanları arasında görüş ayrılıklarına yol açmıştır; bazı uzmanlar olası faydalarını benimserken, bazıları çevrim içinin getirmiş olduğu sınırlamalardan dolayı kendilerini geri çekmiştir (Agathokleous ve Taiwo, 2022). Aslında internet bulunmadan önce de uzaktan danışma hizmetlerinden yararlanılmıştır. Telefon yeni teknolojilerden önce de uzaktan danışma hizmeti sağlamak için geçmişte de kullanılmıştır (Mallen ve Vogel, 2005). Şu anda canlı sohbet, video konferans, mesajlaşma gibi senkron yöntemlerin yanı sıra e-posta gibi asenkron yöntemler kullanılmaktadır (Lau vd., 2013). Hatta internet ortamında tasarlanan ve insanı temsil eden figür veya canlıların kullanıldığı avatar psikolojik danışmanlığı (Witt vd., 2016) gibi yeni yöntemler de bulunmaktadır.

Bu çeşitli biçimdeki çevrim içi danışma hizmetleri, Suler'in (2000) çalışmasında kavramsallaştırılmıştır. Bu çalışmada, Suler (2000) çevrim içi psikolojik danışmanın

metin/duyusal, gerçek/hayali, otomatik/kişiler arası ve görünmez/mevcut olmak üzere beş boyuttan oluşmasının yanı sıra, bu boyutlardan birinin senkron ve asenkron olmak üzere iki kategoriden de oluşabileceğini belirtilmiştir. Senkronda iletişim, hizmet sağlayan ve hizmeti alan arasında aynı anda gerçekleşirken, asenkron iletişimde ise taraflar arasındaki etkileşimde araya belirli bir zaman girmektedir (Suler, 2000). Bu nedenle, mevcut formatlar düşünüldüğünde, “zaman” çevrim içi hizmet türlerini ayırmada kritik bir özelliktir.

Çevrim içi psikolojik danışmada geçmişten günümüze farklı terminolojiler kullanılmıştır. Örneğin, alanyazında e-terapi, siber terapi, e-posta terapisi, web danışmanlığı, siber danışmanlık, internet terapisi, internet danışmanlığı ve çevrim içi terapi gibi farklı terimler bulmak mümkündür (Alleman 2002; Beidoğlu vd., 2015; Lau vd., 2013). Bu çeşitlilik, çevrim içi psikolojik danışmanın tanımlanmasında da görülmüştür. Örneğin, Mallen ve Vogel (2005) çevrim içi psikolojik danışmayı tanımlarken; lisanslı profesyonellerin teknolojik iletişim araçlarını (ör. e-posta video konferans, anlık yazışma) kullanıldığı; psikoeğitim, psikoterapi, psikolojik danışma amaçlarının güdüldüğü herhangi bir psikolojik hizmet olarak tanımlamıştır.

Öte yandan, National Board for Certified Counselor (2016), çevrim içi psikolojik danışma terimi için önceden “internet psikolojik danışmanlığı” terimini kullanırken şu anda “uzaktan psikolojik danışma hizmetleri” terimini kullanmayı tercih etmiştir. Uzaktan psikolojik danışma hizmetini, danışmanlık, eğitim ve süpervizyon süreçleri için bilgisayar veya telefon gibi elektronik araçlardan faydalanma olarak tanımlamışlardır. Dolayısıyla, bütün bu farklı bakış açıları göz önüne alındığında; çevrim içi hizmetlerin etkililiği konusunda hangi türün (e-posta, video konferans, mesajlaşma, sohbet), hangi konularda ve niçin etkili olduğu ile ilgili alanyazın iç içe geçmiştir. Ayrıca, teknoloji durağan bir şey olmadığı ve sürekli geliştiği için, bu türlerin etkililiği kısa zaman içerisinde de değişiklik gösterebilmesi mümkündür. Bu nedenle, çevrim içi psikolojik hizmetlerin sabit bir yapıdan ziyade çok dinamik bir yapı olduğunu söylemek yanlış olmaz.

Çevrim içi psikolojik danışmada ilk tartışılmaya başlanan konular etik sorunlar, avantaj ve dezavantajları gibi konular olmuştur (örn., Mallen vd., 2005; Skinner ve

Zack, 2004). Özellikle etik konular çevrim içi psikolojik danışma hizmetinin sunulmasında en öne çıkan konu olmuştur. Örneğin, Heinlen vd. (2003) psikolojik danışmanların niteliklerinin, National Board for Certified Counselors tarafından belirlenen etik standartların %50'sini karşılayamadığını bu yüzden çevrim içi hizmeti veren web sitelerinin etik talepler açısından yetersiz olduğunu ortaya koymuştur. Ayrıca Maheu ve Gordon (2000), çalışmalarında örneklemin yarısından fazlasının hizmet sağlarken bilgilendirilmiş onam formları kullanmadığını açıklamış, çevrim içindeki kriz müdahalelerine ilişkin uzmanların nasıl bir aksiyon alacaklarına ilişkin kararsız olduğunu ortaya koymuştur.

Çevrim içi psikolojik danışmada etik konular hala devam eden bir tartışmadır. Gizlilik, mahremiyet, bilgi güvenliği, yetkinlik, iletişim sorunları ve krize müdahale, yakın tarihli bir alanyazın incelemesinde de en önemli sorunlar olarak bulunmuştur (Stoll vd., 2020). Bu endişelerin dışında, Stoll vd. (2020), çevrim içi psikolojik danışma alanında araştırma boşluğunun ana problemlerinden biri olduğunu ortaya koymuştur. Sonuç olarak, özellikle yüz yüze ve çevrim içi hizmetlerin kıyaslandığı, çevrim içinin uzun vadeli sonuçlarının ve etkililiğinin araştırıldığı sınırlı sayıda çalışma bulunmaktadır (Richards ve Vigano, 2013; Stoll vd., 2020). Yüz yüze ve çevrim içi hizmetlerin kıyaslandığı farklı konular, sorunlar, semptomlar ve teknolojilerle ve çevrim içinin etkililiğinin araştırıldığı çalışmalara alanyazında daha çok yer verilmesi gerektiği söylenebilir (Stoll et al., 2020).

Bunlar haricinde, çevrim içi psikolojik danışma alanyazını kuramsal temel açısından da eksiktir (Childress, 2000; Cipoletta ve Mocellin, 2018; Richards ve Vigano, 2013; Piri, 2011). Teknoloji kabul modeli (Venkatesh vd., 2016), Planlı davranış kuramı (Ajzen, 1991) ve Aktör-ağ kuramı (Latour, 1996) gibi teknolojiyle ilgili kuramsal bir çerçeve kullanarak çevrim içi psikolojik danışmayı inceleyen az sayıda çalışma bulunmaktadır (bkz. Erdem vd, 2018; Heinsch vd., 2021; Lazuras ve Dokou, 2016; MacMullin vd., 2020).

Aktör-ağ kuramı, ağ yapısı içindeki insan ve insan dışı aktörlerin bir ağ sistemi içinde aralarında gelişen ilişkiyi açıklamayı amaçlayan bir kuram ve metodolojidir (Latour, 1996). Teknik-teknolojik aktörlerin ağ içerisindeki (ör. internet, bilgisayarlar,

metinler) katılımlarını kapsar. Alanyazında Aktör-ağ kuramı ile çevrim içi psikolojik danışmayı açıklayan az sayıda çalışma bulunmuştur (ör. Heinsch vd., 2021; MacMullin vd., 2020). Bu çalışmada aktör ağ kuramının seçilmesinin nedeni, danışan ile psikolojik danışman arasındaki ilişkiyi etkileyen sanal ortamın sürece katkısını ve etkisini anlamlandırmada iyi bir kuramsal temel oluşturmasıdır. Aktör-ağ kuramına göre çevrim içi psikolojik danışmanlık sistemi tüm elemanlarıyla birlikte ağı oluştururken, danışan ve psikolojik danışman ağıdaki temel aktörleri oluşturmaktadır. Bu iki temel aktörün yanında teknolojik faktörler, çevresel etkenler, kültür, toplumsal ve mesleki kurallar gibi diğer aktörler de ağıda yerini almakta ve zaman zaman bu aktörler diğer aktörlerin arasındaki ilişkilere aracı oldukları için aracı (mediatör) olarak da tanımlanabilmektedirler.

1.1. Çalışmanın Amacı

Bu çalışmanın temel amacı, çevrim içi psikolojik danışmayı video konferans araçları kullanarak deneyimlemiş danışan ve psikolojik danışmanların görüşlerini, deneyimlerini ve önerilerini incelemektir. Çalışmanın spesifik amacı; çevrim içi psikolojik danışmayı deneyimleyen danışan ve psikolojik danışmanların karşılaştıkları zorluklara endişelerine, sürecin pozitif/negatif yanlarına, fizibilitesine ilişkin görüşlerini ve çevrim içinin etkililiğini arttırmaya yönelik önerilerini almaktır. Bu doğrultuda, araştırma deseni ve yöntemi dikkate alınarak aşağıdaki araştırma sorularına yanıt aranmıştır:

Çalışmanın danışanlar için beş temel araştırma sorusu bulunmaktadır:

1. Yüz yüze danışmanlığına kıyasla, danışanlar çevrim içi ile ilgili deneyimlerini nasıl anlamlandırıyor?
2. Danışanların çevrim içi psikolojik danışma deneyimlerinde yaşadıkları endişeler nelerdir?
3. Danışanlar çevrim içi psikolojik danışmanlığın olumlu ve olumsuz yanlarını nasıl algılıyor?
4. Danışanlar çevrim içi psikolojik danışmanlığın fizibilitesi hakkında ne düşünüyor?

5. Danışanların çevrim içi psikolojik danışma uygulamalarını geliştirmeye yönelik gelecek beklentileri ve önerileri, edindikleri deneyimleriyle nasıl şekillenmiştir?

Çalışma, psikolojik danışmanlar için beş benzer temel araştırma sorusuna sahiptir:

1. Psikolojik danışmanlar, yüz yüze danışmanlığa kıyasla çevrim içi ile ilgili deneyimlerini nasıl anlamlandırıyor?
2. Psikolojik danışanların çevrim içi psikolojik danışma deneyimlerinde yaşadıkları endişeler nelerdir?
3. Psikolojik danışmanlar, deneyimlerini ve görüşlerini göz önünde bulundurarak çevrim içinin olumlu ve olumsuz yanlarını nasıl algılamaktadır?
4. Psikolojik danışmanlar çevrim içi psikolojik danışmanlığın fizibilitesi hakkında ne düşünüyor?
5. Psikolojik danışmanların çevrim içi uygulamalarını geliştirmeye yönelik gelecek beklentileri ve önerileri, edindikleri deneyimleriyle nasıl şekillenmiştir?

1.2. Çalışmanın önemi

Çevrim içi psikolojik danışmadaki geçmiş araştırmalar, danışanların ve psikolojik danışmanların çevrim içi psikolojik danışma ile ilgili deneyimlerine ve görüşlerine odaklansa da bu çalışmalarda çoğunlukla ya yalnızca psikolojik danışman ya da yalnızca danışan görüşlerine yer verilmiştir. (ör. Bacıoğlu ve Kocabıyık 2019; Korkmaz ve Şen, 2018; Özyiğit ve Atik, 2021). Mevcut çalışmanın görüşme soruları, çevrim içi ve yüz yüze hizmeti karşılaştıran sorular sorarak hazırlanmıştır. Sadece bir katılımcı daha önce herhangi bir yüz yüze danışma deneyimi yaşamamıştır. Diğer 19 katılımcı hem yüz yüze hem de çevrim içi deneyimine sahiptir. Alanyazında, çevrim içi psikolojik danışmanın etkililiğinin yüz yüze ve çevrim içi deneyimlerle kıyaslanarak çalışılmasının faydalı olabileceğine dikkat çekilmiş ve bu konuda eksik araştırmalar olduğu dile getirilmiştir (Stoll et al., 2020). Ayrıca, danışan gruplarıyla çalışılan araştırma sayısının Türkiye alanyazınında azlığına dikkat çekilmiştir (Amanvermez, 2015). Bunun haricinde pek çok çalışma çevrim içi psikolojik danışma alanyazınının kuramsal çerçeveden yoksun olduğuna dikkat çekmiştir (Childress, 2000; Cipoletta ve Mocellin, 2018; Piri, 2011; Richards ve Vigano, 2013). Bu çalışma

hem danışan hem psikolojik danışmanların deneyimlerini çalışarak, sonuçları aktör-ağ kuramı ile ilişkilendirerek tartışmıştır. Çalışmada her iki gruba da yer verilmiş ve bir katılımcı haricinde tüm katılımcılar yüz yüze ve çevrim içi psikolojik danışmanlığı deneyimlemiştir.

2. YÖNTEM

2.1. Çalışmanın Deseni

Bu çalışmada, nitel araştırma desenlerinden biri olan fenomenolojik araştırma deseni benimsenmiştir. Nitel yöntemlerin amacı, fenomenin doğasını anlamak ve bu fenomeni yaşayan insanların gözünden yorumlamaktır (Langdridge, 2007). Fenomenoloji, nesnenin özüne ve saflığına ulaşmaya çalışır (Moustakas, 1994). Bunu yaparken; kişisel inançlar, doğa bilimlerinin önyargıları, gelenekler, günlük hayatın rutinleri veya günlük deneyimlerin sergilenmemiş bilgileri gibi olası engellerin etkisi olmadan, önyargıya yol açan her şeyden kurtulmaya ve varsayımlardan uzak durmaya çalışır (Moustakas, 1994). Fenomenolojik araştırma deseninde bireylerin deneyimleriyle ilgilenilir (Creswell, 2007). Bu süreç, alışılmışın dışında olan yönleri ve benzerlikler içerisindeki farklılıkları bulmayı amaçlayan merak ve sorularla başlar (van Manen, 2016).

2.2. Katılımcılar

Çalışma katılımcıları amaçlı örneklem yöntemi kullanılarak seçilmiştir. Ayrıca, görüşme süresince bazı uzman ve danışan katılımcılara ulaşmak için kartopu örnekleminden de yararlanılmıştır. Çalışma katılımcıları video konferans yöntemiyle sağlanan en az sekiz oturum çevrim içi psikolojik danışmanlık deneyimine sahip on danışan (yedi kadın, iki erkek ve bir non-binary) ve on psikolojik danışmandan (beş kadın, dört erkek ve bir kuir) oluşmaktadır.

Psikolojik danışman grubundan olan katılımcılar, özel danışmanlık büroları, üniversiteler, kamu kurumları ve okullar gibi farklı kurumlarda hizmet vermektedirler. Hizmet veren katılımcıların hepsi psikolojik danışmandır. Psikolojik danışmanların yaş ortalaması 33,9'dur. Çalışmadaki psikolojik danışman katılımcıları arasında en az çevrim içi psikolojik danışma hizmeti oturumu sayısı 40, en fazla 600 civarındadır.

Danışan katılımcılara gelindiğinde, buradaki katılımcılar lisans öğrencileri, yüksek lisans öğrencileri, e-ticaret girişimcileri, pazarlama çalışanları, araştırma görevlileri ve klinik psikologlar gibi farklı eğitim ve iş alanlarından olan bireylerdir. En az oturum alan katılımcı, 10 oturum çevrim içi psikolojik hizmeti alırken, en fazla oturum deneyimleyen katılımcının oturum sayısı 70'tir.

2.3. Veri Toplama Araçları

Bu çalışmada veriler yarı yapılandırılmış iki paralel görüşme formuyla toplanmıştır. Çalışmada kullanılan görüşme soruları, Çevrim içi Bireyle Psikolojik Danışmanlık Danışan Görüşme Formu (bkz. Ek D) ve Çevrim içi Bireyle Psikolojik Danışmanlık Psikolojik Danışman Görüşme Formu (bkz. Ek E) şeklinde oluşturulmuş, bunların ilk kısmında demografik bilgiler sorulurken, ikinci kısmında görüşme sorularına yer verilmiştir. Sorular; alanyazın, uzman görüşleri ve bilişsel görüşmeler aracılığıyla geliştirilip birkaç defa yenilenmiştir.

2.4. Veri Toplama Süreci

Verilerin toplama sürecine başlanmadan önce bilişsel mülakatlar ve uzman görüşleri alınmıştır. Yapılan düzeltmeler sonucunda, ODTÜ İnsan Araştırmaları Etik Kurulundan izin alınmıştır. Katılımcılara görüşmeden önce Google form aracılığıyla onam formu gönderilmiş, görüşme süresince ses kayıtlarının tutulmasına ilişkin onay alınmıştır. Veriler 2021 Ekim ve 2022 Ocak ayları arasında psikolojik danışman ve danışanlardan çevrim içi ortamda Zoom programı kullanılarak toplanmıştır.

2.5. Verilerin Analizi

Veriler ses kayıtları dinlenerek deşifre edilmiş, verilerin analizi için yorumlayıcı fenomenolojik analiz kullanılmıştır. Analiz sürecinde bir nitel analiz programı olan MAXQDA'dan (VERBI SOFTWARE, 2021) yararlanılmıştır. Smith vd., (2009) tarafından sunulan yorumlayıcı fenomenolojik analiz süreçleri takip edilerek, analiz süreci için 4 aylık bir süre ayrılmıştır. Bu sürede yapılan dile dayalı, betimsel ve kavramsal yorumlamalar ve bunlara bağlı olarak oluşturulan temalar olası ön yargılardan kaçınabilmek ve çalışmanın geçerlilik ve güvenilirliği adına daha önce nitel

araştırma süreci yürütmüş bir araştırmacıdan uzman görüşü olarak şekillendirilmiştir. Uzman görüşünde, beşi psikolojik danışman, beşi danışan grubundan oluşan, toplam 10 vakaya 2 haftalık bir süreçte, uzman ile yüz yüze görüşülerek inceleme yapılmıştır. Bu süreç sonucunda, diğer 10 vakadaki temalar ve bazı yorumlamalar da uzmanın görüşü doğrultusunda yeniden düzenlenmiştir.

2.6. Çalışmanın Sınırlılıkları

Bu çalışmada yorumlayıcı fenomenolojik analiz 'de önerilen görece az sayıda katılımcı sayısı (Smith vd., 2009) açısından birtakım eksikleri bulunduğunu söylemek yanlış olmaz. Smith vd., (2009) yorumlayıcı fenomenolojik analiz kullanırken özellikle yeni araştırmacılar için az sayıdan oluşan katılımcı gruplarını önermektedir. Çok sayıda oluşacak katılımcı gruplarının, daha ileri düzeydeki seviyelerde daha faydalı olabileceğini belirtmiştir (Smith vd., 2009). Ancak bu, yorumlayıcı fenomenolojik analizin, fazla sayıdaki katılımcı gruplarıyla gerçekleştirilemeyeceği anlamına gelmez. Görece sayısı fazla olan gruplarda tekrarlanan/yinelenen temalara bakılarak grup seviyesinde bir analiz yapılabilir (Smith vd., 2009). Fakat burada önemli nokta şudur ki, yine de yorumlayıcı fenomenolojik analizin idyografik doğasına uygun olarak farklı kişilerin aynı temalar üzerindeki ifadelerine de yer verilir (Smith vd., 2009). Bu yaklaşımla, toplu deneyimlerden ziyade bireylerin özgün deneyimleri yansıtılmaktadır. Araştırmacı bu çalışmada, tekrarlanan/yinelenen temalara yer vererek, birbiriyle ilişkili olan bu temaları keşfetmiş, oluşturulan üst tema gruplarına atamış ve ayrıca aynı temalara ilişkin farklı görüşlere yer vermeye çalışmıştır.

Ayrıca bu çalışmadaki araştırmacı nitel araştırma ve yorumlayıcı fenomenolojik analizi konusunda az deneyime sahip olduğu için dile dayalı ve betimsel yorumlamalara; kavramsal yorumlamalardan daha fazla yer vermiş olabilir. Smith vd. (2009) bunun görece acemi araştırmacılarda görülebileceğini belirtip yorumlayıcı fenomenolojik analizin doğasına uygun olarak kavramsal yorumlamalar yapabilme konusunda araştırmacıları teşvik etmiştir.

3. BULGULAR

Mevcut çalışmada danışanlar açısından beş üst düzey tema bulunmuştur. Bunlar, danışanların endişe duyduğu etik konular, çevrim içi terapötik süreçle ilgili deneyimler, danışanları çevrim içi psikolojik danışma almaya teşvik eden kolaylıklar, danışanları çevrim içi psikolojik danışma hizmeti almaktan caydıran zorluklar, danışanların çevrim içi psikolojik danışmayı geliştirmeye yönelik beklentileri ve önerileridir. Bu bulgulara ilişkin tablolar aşağıda gösterilmiştir.

Tablo 4.1

Danışanların Üst ve Alt Temaları

Üst temalar	Alt temalar	<i>f</i>
Danışanların endişe duyduğu etik konular	Danışanların ortamından kaynaklanan mahremiyet sorunları	7
	Gizlilik endişeleri	7
	Sınırlar hakkında kafa karışıklığı	4
	Terapötik mevcudiyet üzerinde dış faktörlerin rolü	10
Çevrim içi terapötik süreçle ilgili deneyimler	Çevrim içi terapötik ilişkinin gelişimi	7

Tablo 4.1 (devam)*Danışanların Üst ve Alt Temaları*

Üst temalar	Alt temalar	
Danışanları çevrim içi psikolojik danışma almaya teşvik eden kolaylıklar	Esnek planlama	10
	Zaman tasarrufu	8
	Mekansal sınırlamaları aşmak	6
	Ekonomik olarak uygun maliyetler	5
	Kendi yerinde güvenlik ve rahatlık	5
	Zor dönemlerde oturumların devamlılığı	3
Danışanları çevrim içi psikolojik danışma almaktan caydıran zorluklar	Teknik sorunların yönetimi	8
	Çevrim içi psikolojik danışmada hazırbulunuşluk eksikliği	5
	Teknolojiye erişimde/teknolojiyi kullanmada eşitsizlik	5
	Sözel olmayanları gözlemleyememe	4
	Özel konular hakkında konuşmakta tereddütlü olmak	4
	Manipülasyon ve kötüye kullanım riskleri	4
	Format olarak etkileşim ve esneklik tercihi	7
	Teknik ekipmanların ve ortamın ayarlanması	6
Danışanların çevrim içi psikolojik danışmayı geliştirmeye yönelik beklentileri ve önerileri	Çevrim içi platformları geliştirmek için öneriler	4
	Güvensizliği çözme ihtiyacı	4
	Net prosedürler ve standartlar	4
	Çevrim içi psikolojik danışmanların eylemlerinin kontrol edilmesi	4
	Danışanları teknik zorluklar hakkında bilgilendirmek	3

Ayrıca, çalışmanın psikolojik danışman bölümü için bulunan temalara göre; etik konular üzerinde kontrol eksikliği, çevrim içi terapötik süreçle ilgili deneyimler, yaratıcılığın sınırlarını zorlamak, psikolojik danışmanları çevrim içi psikolojik danışma vermeye teşvik eden kolaylıklar, psikolojik danışmanları çevrim içi psikolojik danışma vermekten caydıran zorluklar, psikolojik danışmanların çevrim içi psikolojik danışmayı geliştirmeye yönelik beklentileri ve önerileri temaları ortaya çıkmıştır. Bu bulgulara ilişkin temalar aşağıdaki tabloda gösterilmiştir.

Tablo 4.4*Psikolojik Danışmanların Üst ve Alt Temaları*

Üst temalar	Alt temalar	f
Etik konular üzerinde kontrol eksikliği	Danışanların ortamından kaynaklanan mahremiyet sorunları	8
	Gizlilik endişeleri	7
	Güvenlik konusunda bilgi ve uygulama eksikliği	6
	Çevrim içi psikolojik danışmanlık uygulamalarında dikkatli tarama ve değerlendirme prosedürleri	4
	Krize müdahaleyle ilgili endişeler	4
	Sınırların ihlal edilmesi	3
	Terapötik mevcudiyet üzerinde dış faktörlerin rolü	7
Çevrim içi terapötik süreçle ilgili deneyimler	Çevrim içi psikolojik danışma sırasında temel psikolojik danışmanlık becerilerinin uygulanabilirliği	6
	Çevrim içi psikolojik danışmada kuralların belirlenmesi için iyi yapılandırılmış ilk oturumlar	5
	Çevrim içi psikolojik danışmada terapötik ilişkiyi kurmak için daha fazla zamana ihtiyaç duyulması	5
	Sözel beceriler ve teknikler geliştirmek	7
Yaratıcılığın sınırlarını zorlamak	Danışanların algılanabilir/gözlemlenebilir kısımlarına daha fazla odaklanmak	3
	Fiziksel/davranışsal uygulamaların çevrim içi psikolojik danışmaya uyarlanması	3
	İstemsiz açığa vurmaları pozitifçe çevirmek	3
	Zaman tasarrufu	10
Psikolojik danışmanları çevrim içi psikolojik danışma vermeye teşvik eden kolaylıklar	Kendi yerinde güvenlik ve rahatlık	9
	Mekansal sınırlamaları aşmak	8
	İnsanların hayatlarına dokunma şansının artması	7
	Ekonomik olarak uygun maliyetler	7
	Esnek planlama	4
	Oturumların devamlılığı	4
	Ciddi ve özel konular için çevrim içi psikolojik danışmayı kullanmakta tereddütlü olmak	10
Psikolojik danışmanları çevrim içi psikolojik danışma vermekten caydıran zorluklar	Teknik sorunların yönetimi	10
	Sözel olmayanları gözlemleyememe	8
	Duygusal olarak derin oturumlar deneyimlemenin önündeki teknolojik engeller	7
	Çevrim içi psikolojik danışmada hazırbulunuşluk ve sorumluluk eksikliği	7
	Format olarak etkileşim tercihi	8
Psikolojik danışmanların çevrim içi psikolojik danışmayı geliştirmeye yönelik beklentileri ve önerileri	Çevrim içi platformları geliştirmek için öneriler	7
	Etik, teknikler ve süreç ile ilgili eğitim	6
	Standartlaştırılmış kurallar, düzenlemeler ve yasalar	4
	Çevrim içi psikolojik danışmanlığın psikolojik danışma müfredatına uyarlanması	3

4. TARTIŞMA

Bu çalışmada Aktör-ağ kuramı ile ilgili birkaç tekrar eden tema bulunmuştur. Bunlar: çevresel mahremiyet, gizlilik, güvenlik ve sınır konularını içeren etikle ilgili temalar; teknolojik boyutlar (terapötik süreçte dış faktörlerin etkileri, teknik konuların yönetimi, sözsüz iletişim), ve ayrıca çevrim içi psikolojik danışma oturumları dışında kalan diğer kişilerin rol ve sorumluluklarına işaret eden önerilere ilişkin bazı temalardır. Çevrim içi psikolojik danışmada etik ve aktör-ağ kuramı arasındaki ilişki açısından bakıldığında çevresel olarak mahremiyeti sağlayabilmek/sağlayamamak danışanlar için önemli bir sorumluluk haline gelmiş olabilir. Benzer bir tartışma aynı kuramdan faydalanılarak MacMullin ve ark. (2020) tarafından ortaya atılmış, ancak bunun psikolojik danışmanın sorumluluğu olduğu vurgulanmıştır. Mevcut çalışmada, çevrim içi psikolojik danışma hizmetlerinde danışanların da dikkat etmeleri gereken, yüz yüze hizmetten daha fazla ve mekansal sorumlulukları olduğunu göstermiştir.

Ayrıca, mevcut çalışmada psikolojik danışmanlar, aktör-ağ kuramında Latour (1996) tarafından “kara kutu” olarak adlandırılan, bazı iç içe geçmiş ağlardaki bazı aktörlerin görünmesinin zorluğunun vurgulandığı bu kavramı da açık olarak yaşamışlardır. Psikolojik danışmanın çevrim içi psikolojik danışmada sorumluluk bilinci (MacMullin ve ark., 2020) önemli bir rol oynamasına rağmen, uzmanlar kullandıkları video konferans uygulamalarının güvenlik ile ilgili bilgilerinden yoksundurlar. Ek olarak, bu çalışma danışan ve psikolojik danışman arasındaki profesyonel ilişkide taraflarına birbirlerine çok rahat bir biçimde ulaşabilmelerinden (MacMullin ve ark., 2020) ve direkt ilişki kurabilmelerinden dolayı ilişki rollerinin zarar görebileceğini ortaya koymuştur. Burada, çevrim içi psikolojik danışma ağında mediatör (Latour, 1996) yani bir aracı aktörün (yüz yüze hizmetlerdeki sekreter gibi) eksikliğinin ilişki dengelerini sarstığından bahsedilebilir.

Bunların haricinde, teknolojik ve teknik konuların çevrim içi psikolojik danışma hizmetinde önemli birer aktör olduğunu söylemek yanlış olmaz. Mevcut çalışmada bu unsurların terapötik mevcudiyet ve terapötik ilişkinin gelişimine etkisi olduğu bulunmuş olsa da, kurulan güven ilişkisinin ve psikolojik danışmanın eforunun daha ön planda olabileceği sonucuna varılmıştır. Ancak, aktör-ağ kuramı açısından bakıldığında çevrim içi psikolojik danışmada bu güven ilişkisinin yalnızca psikolojik

danışman ve danışan arasında oluşmadığı, ayrıca bilgi sistemlerinin (MacMullin ve ark., 2020) ve oturum dışında kalan programcılarının ve bu programları yaygınlaştırabilecek devlet ve kurumların bu ağ içerisinde rolü olduğundan söz edilebilir.

Sonuçlar ayrıca, çevrim içi psikolojik danışmanlığın, yüz yüze psikolojik danışmanlıktan etik açıdan en belirgin olan farkının/sorununun, danışanın hizmeti almış olduğu ortamdaki kaynaklı olduğunu göstermiştir. Bu husus, alanyazındaki az sayıdaki araştırmada da ele alınmıştır (Young, 2005). Bununla birlikte, mevcut çalışmada çelişkili bir şekilde, danışanlar ayrıca psikolojik danışmanların doğrudan irtibat telefon numaralarına sahip olduklarında sınırların aşılma konusunda kafaları karışıklığı yaşamışlardır ve konuyla ilgili geçmiş araştırmalara kıyasla (Negretti & Wieling, 2001) bu ilişki sınırı aşmamak için gayret göstermişlerdir (Negretti & Wieling, 2001).

Alanyazında, çevrim içi, yüz yüze ve hibrit format arasında bir karşılaştırma, genç danışanların hem çevrim içi hem de yüz yüze iletişimden yararlandıkları için alınan hizmetten sonra yaşam kalitesinin arttığını ve hibrit formattan diğer formatlara nazaran daha fazla memnuniyet duyduklarını göstermektedir (Chan, 2020). Mevcut çalışma, bu sonucun yetişkin danışanlar için de geçerli olduğunu göstermektedir. Hibrit formatın, danışanların oturumlara devamlılık sağlayabilmeleri açısından tercih edilebilir olduğu bulunmuştur.

Mevcut çalışmanın farklı sonuçlarından biri, zorlu dönemler ve oturumları yarıda bırakmayla ilgili olabilecek “devamlılık” temasıdır. Birkaç katılımcı, bazı belirli konuların (örneğin, depresyon, kayıp) belirli zamanlarda çevrim içi psikolojik danışmanlıkla yapılmasının faydalı olabileceğini bildirmiştir. Bunun nedeni, isteksizlik, hareket etmeme isteği gibi belirtilere neden olan depresyon gibi sorunlardır. Bu sonuç, yüz yüze psikolojik danışmanlığın depresyon da dahil olmak üzere ciddi sorunlar için tercih edilebileceğini gösteren çalışmaların tam tersini gösteriyor olabilir. (Chester ve Glass, 2006; Connolly ve ark., 2019; Farrer ve ark., 2022; Tanrıku, 2009). Bu sonuca göre, danışanların hibrit format seçimini birinci

olarak seçmesine paralel olarak, uygulayıcılar başlangıçta depresyon gibi belirli sorunlar için çevrim içi psikolojik danışma oturumlarını kullanabilirler.

Ancak bazı psikolojik danışmanlar depresyon gibi bir durumda danışanlarını yüz yüze görüşmeyi tercih ettiklerini çünkü bu sürecin danışanların konfor alanlarını aşmaları için daha faydalı ve sağlıklı olabileceğini ifade etmiştir. Psikolojik danışmanlar, devamlılık temasına ilişkin çevrim içi psikolojik danışmada danışanların oturumları daha az yarıda bıraktığını ve yüz yüzeyle kıyasla daha fazla devamlılık olduğunu vurgulamıştır. Bazı katılımcıların çevrim içi gördüğü oturum sayısı yüz yüzeyle göre daha az olsa da bu sonuç alanyazında bulunan bulguların tam tersidir. Danışanlar, yüz yüze psikolojik danışmanlıkta çevrim içi psikolojik danışmanlığa göre oturumları daha az yarıda bırakmaktadırlar (Buyruk Genç vd., 2019; Zeren vd., 2020).

Ek olarak, MacMullin ve ark. (2020) tarafında bahsedilen psikolojik danışmanların sorumluluk eksiklikleri sonucunun aksine, mevcut araştırma, psikolojik danışmanların değil, çoğunlukla danışanların çevrim içi psikolojik danışma oturumlarında sorumluluk eksikliği yaşadıklarını göstermektedir. Ayrıca, sorumluluk konularından farklı olarak her iki grup da danışanların yüz yüze psikolojik danışmada yaşadıkları deneyimlerin aksine çevrimiçi psikolojik danışmada oturumlarda tartışacakları konulara hazırlıklı olmadıklarını belirtmiştir. Bu nedenle oturumlara fiziksel olarak hazırlanmanın ve fiziksel bir adım atmanın yardım sürecini daha anlamlı hale getirebildiği sonucuna ulaşılabilir.

Katılımcılar, beklentileri ve istekleri doğrultusunda, yoğun bir yaşam içinde oldukları için hem çevrim içi hem de yüz yüze yardımın avantajlarının bir arada olduğu hibrit formatı ilk sırada konumlandırmıştır. Yakın, samimi ve yüksek güven duygusunun daha rahat oluşturulduğu yüz yüze seansları tercih etmek istemektedirler, ancak hibrit formatın mevcut yaşam koşullarıyla daha uygun ve sürdürülebilir olduğu sonucuna varılmıştır. Sonuç olarak, daha sürekli, esnek ve ekonomik bir uygulama olabileceğinden, psikolojik danışma hizmetinin gelecekte salt çevrim içinden ziyade hibrit formatla daha etkili bir şekilde yürütülebileceği sonucu ortaya çıkabilir.

4.1. Uygulamaya Yönelik Çıkarımlar

Bu çalışmada, erişilebilirlik, zaman, maliyetler, konfor ve esneklik fırsatları açık olmasına rağmen (Centore ve Millaci, 2008), teknolojik talepler yardım alma şansını etkilemektedir. Bununla birlikte, çevrim içi psikolojik danışmanlık; göçmenler, LGBT bireyler ve toplumda; coğrafi sınırlamalar, dil, ayrımcılık ve sosyal damgalama sorunları nedeniyle engelleri olan bazı bireyler için destekleyici olabilir.

Bunların dışında okul psikolojik danışmanlığı ortamında öğrencilerin çevrim içi psikolojik danışma sırasında sorunlarını (ör. cinsellik) açma eğiliminde oldukları alanyazında bulunmuştur (Glasheen vd., 2016). Bu nedenle, çevrim içi psikolojik danışmanın zaman ve planlanabilme kolaylığı, okul psikolojik danışmanlarının öğrencilere bireysel ve grupla psikolojik danışma uygulamalarını daha esnek bir şekilde sunmalarını sağlayabilir.

Ayrıca, öğrenci geliştirme ve psikolojik danışma merkezleri de dahil olmak üzere psikolojik destek sunan üniversite merkezleri, çevrim içi psikolojik danışmanlık yöntemlerini kullanabilir. Beliren yetişkinlik (18-25), bireylerin genellikle aşk ve iş konularında kaygı yaşadıkları bir dönem olabilir (Arnett, 2007). Bu aşamalarda öğrenciler üniversite eğitiminde zorluk yaşayabilir (Arnett vd., 2014). Yeni yaşam koşullarına; partner edinmeye, iş ve eğitime yönelik geçişle ilgili, geç yetişkinlik döneminden farklı zorluklar yaşayabilir (Arnett vd., 2014). Bu nedenle, uzmanlar; öğrencilerin bu tür konulara uyum sağlamaları için çevrim içi ya da hibrit psikolojik danışma hizmetlerinin esnekliğiyle daha fazla öğrenciye yardım sunabilir.

Son olarak, geçmişte elektronik iletişimin gelişmesiyle birlikte, ilk olarak telefon danışanlara psikolojik danışmanlık sağlamak için kullanılmıştır (Skinner ve Zack, 2004). Bu çalışmada tarama ve değerlendirme prosedürleri dikkatli bir şekilde uygulanan uygulamalar olup, katılımcılar ciddi sorunlar için çevrim içi psikolojik danışmanlığı tercih etmekte tereddüt etmişlerdir. Ancak, krizlere müdahale, intiharı önleme, yaşlılara, özel ihtiyaçları olan bireylere yardım, uyuşturucu sorunları ve toplum sorunları gibi kritik durumlar için telefonla yapılan desteklerin özellikle ABD'de uzun bir geçmişi vardır (Lester, 1974). Bu tür uygulamaların kullanımı Türkiye'de de geliştirilebilir ve yaygınlaştırılabilir.

4.2. Gelecek Çalışmalar İçin Öneriler

Mevcut çalışma, hibrit formatın psikolojik danışmanlık uygulaması için verimli olabileceğini bulmuştur. Katılımcılar yüz yüze etkileşim ile başlayan ve çevrim içi psikolojik danışma ile devam eden oturumlardan memnun kalabileceklerini belirtmiştir. Danışanlar, hibrit format aracılığıyla psikolojik danışma almayı daha makul bulmuşlardır. Her ne kadar birçok araştırma yüz yüze ve çevrim içi danışmanlığın etkililiğini ayrı ayrı araştırıyor olsa da araştırmacılar, farklı metodolojiler kullanarak hibrit formatın etkililiğini incelenebilir.

Türkçe alanyazında çevrim içi psikolojik danışma ile ilgili nitel araştırmaların deneysel veya diğer nicel araştırmalara göre sayısal olarak daha fazla olduğu bilinmektedir (Bastemur ve Bastemur, 2015). Bu nedenle deneysel çalışmalar, kanıta dayalı ve nicel araştırmaları benimseyerek her iki örneklem grubu içeren (danışan ve psikolojik danışman) araştırmalar artırılabilir. Ancak nitel araştırmaları da gözden kaçırmamak gerekir. Psikolojide yorumlayıcı fenomenolojik analizin artan kullanımı göz önünde bulundurduğumuzda (Smith vd., 2009), konuyla ilgili nitel araştırmalar da yapılabilir. Örneğin, yinelenen temalara sahip nispeten büyük bir katılımcı grubu yerine az sayıda katılımcı ile ayrıntılı ve derinlemesine nitel araştırmalar yapılabilir.

Ayrıca çevrim içi psikolojik danışma konusunda belirli kişi veya hizmet grupları üzerinde çalışmalar yapılabilir. Üniversite merkezlerinin, okul psikolojik danışmanlarının uygulamaları ve sorumluluğu konularına gelecekteki araştırmalar ışık tutabilir. Bu katılımcı grupları arasında hibrit formatın etkililiği üzerinde çalışılabilir. Araştırmacılar, ciddi sorunlar için telefonla psikolojik danışma ve diğer çevrim içi danışma türlerinin kullanımını inceleyebilir. Mevcut çalışmada ciddi konular çevrim içi psikolojik danışmada tercih edilmemektedir. Bununla birlikte, gelecekteki çalışmalar kriz sorunları gibi müdahaleleri diğer çevrim içi psikolojik danışma türleri açısından inceleyebilir.

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