A Study of BetterHelp Text-Based Counseling

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Abstract

Text-based counseling has been suggested to be a viable approach to improving mental health and well-being. However, few studies have explored people's experiences with text-based counseling. Given the potential accessibility, affordability, and effectiveness of text-based counseling, an investigation clarifying the benefits of text-based counseling is warranted. Therefore, the present investigation reports findings from a survey that asked current users of BetterHelp – the largest e-counseling platform worldwide – to report their experiences with *both* text-based and face-to-face counseling. More specifically, it assessed whether BetterHelp text-based counseling differs from face-to-face counseling with regard to: 1.) Affordability, 2.) Convenience, 3.) Effectiveness, 4.) Fit, 5.) Accessibility, 6.) Progress, 7.) Quality, 8.) Meeting needs, and 9.) Therapeutic alliance. Results showed that people are more satisfied with BetterHelp text-based than face-to-face counseling. Key findings highlight that BetterHelp is more convenient, affordable, and accessible than face-to-face counseling. These results have important implications for counseling practice and suggest that high-quality text-based counseling is a viable alternative to face-to-face counseling.

Introduction

Psychotherapy (also often referred to as counseling) is commonly used to improve people's mental health and well-being (Seligman, Steen, Park, & Peterson, 2005). Some studies show that counseling is even more effective for improving mental health than other kinds of treatments such as medication (DeRubeis, Siegle, & Hollon, 2008). Although the benefits of counseling have been well established, the majority of this research has assessed the benefits of counseling delivered face-to-face (Arch et al., 2012; Seligman, Rashid, & Parks, 2006; Washburn et al., 2012).

While there is little doubt that face-to-face counseling has positive effects on mental health (Linehan, 1993), an increasing number of studies suggest that technology-based counseling may offer unique benefits for improving mental health – above and beyond face-to-face counseling (Layous & Lyubomirsky, 2012). For example, technology-based interventions have the potential to reach a larger audience than traditional interventions (Proudfoot et al., 2010), are beneficial for those who use them (Aguilera, 2012; Dennis & O'Toole, 2014; Parks, Della Porta, Pierce, Zilca, & Lyubomirsky, 2012), and may be especially beneficial for the people who need counseling most (Aguilera, 2015). Moreover, a number of significant barriers (e.g., convenience, affordability, and accessibility) may prevent face-to-face counseling from being as effective in the real-world as it appears to be in carefully-controlled studies (Mohr et al., 2010). Thus, it is essential to more clearly understand and define the precise benefits of technology-based counseling in real-world contexts.

One particularly promising type of technology currently being used to deliver counseling is text-based counseling (Aguilera, 2012). Text-based counseling has the potential to address a number of barriers that are present in face-to face counseling. Thus, many people are in favor of text-based counseling (Aguilera, 2015). Despite the potential benefits and interest in text-based counseling, there is currently very little research assessing these benefits (Shen et al., 2015). Assessing people's experiences with text-based counseling – and comparing these experiences to face-to-face counseling – is an important first step in determining whether there are benefits to text-based counseling above and beyond face-to-face counseling.

To begin investigating the unique benefits of text-based counseling, a survey was sent to a sample of current users of BetterHelp – the largest e-counseling platform worldwide. Counselors at BetterHelp are licensed, trained, experienced, and accredited psychologists (PhD / PsyD), marriage and family therapists (MFT), clinical social workers (LCSW), licensed mental health counselors (LMHC), or licensed professional counselors (LPC). All of them have a Masters Degree or a Doctorate Degree in their field. They have been qualified and certified by their state professional board after successfully completing the necessary education, exams, training, and practice. While their experience, expertise and background vary, they all possess at least 3 years and 2,000 hours of hands-on experience. Thus, BetterHelp represents high-quality text-based counseling – comparable to the quality of counseling which is often received face-to-face. Therefore, the present research enables us to begin clarifying the unique benefits of a high-quality, text-based counseling platform.

Method

Participants. Forty-eight participants (88% female) between the ages of 22 and 65 (M = 40.96, SD = 12.89) responded to an account notification from BetterHelp inviting them to complete a survey. Potential participants were invited to participate in the study if they had been using BetterHelp for 3 months or more to ensure they had time to fully experience and understand BetterHelp text-based counseling. Participants were asked to answer a series of questions with regard to their experiences with BetterHelp. Then, they were asked "Have you ever been in face-to-face counseling?" Thirty-eight of these participants (79%) had also been in face-to-face counseling. These participants were asked the same series of questions regarding their experiences with face-to-face counseling.

Measures. *Therapeutic alliance.* The quality of the therapeutic relationship was assessed using the Working Alliance Inventory (WAI) – short form (Munder, 2010). This survey was designed to measure the strength of the collaborative relationship between helper and helpee. Strong alliances indicate relationships that have mutual trust, confidence, agreement, and liking of one another. Questions were phrased to assess alliance with BetterHelp counselors. These questions were then repeated, this time phrased to assess alliance with face-to-face counselors. The WAI has been shown to have good reliability and validity ($\alpha_{BetterHelp}$ = .94; $\alpha_{face-to-face}$ = .97 in the present sample; Munder, 2010).

Satisfaction with counseling. To measure satisfaction with counseling, items were developed assessing a range of factors that tend to affect satisfaction with counseling (see Table 1 for questions).

Table 1

Questions assessing satisfaction with counseling.

Label	Question	Scale
Affordable	BetterHelp is affordable.	Agree/Disagree
Convenient	BetterHelp is convenient.	Agree/Disagree
Effective	BetterHelp is effective.	Agree/Disagree
Fit	BetterHelp is the right kind of help for me.	Agree/Disagree
Accessibility	BetterHelp is help right when I need it.	Agree/Disagree
Progress	BetterHelp has allows me to make progress on my own problem.	Agree/Disagree
Quality	How would you rate the overall quality of your BetterHelp experience?	1 (Fair) - 4 (Excellent)
Needs	What proportion of your treatment needs are being met through BetterHelp?	1 (Very few) - 4 (All or nearly all)
Return	How likely are your to return to BetterHelp again in the event that you need help with a new problem?	1 (Very unlikely) - 5 (Very likely)
Recommend	How likely is it that you would recommend BetterHelp to a friend or colleague?	0 (Not at all likely) - 10 (Extremely likely)

Note. Participants were asked these exact same questions about their experience with face-to-face counseling (i.e., "BetterHelp" was replaced with "face-to-face counseling".) 'Recommend' was only asked about BetterHelp experience.

Comparing **BetterHelp** ***to face-to-face counseling.*** To directly assess whether participants preferred BetterHelp when they compared BetterHelp to their experiences with face-to-face counseling, we once more rephrased our satisfaction questions so that participants compared their experiences (e.g., "How would you rate the overall quality of BetterHelp compared to face-to-face therapy?")

Results

Therapeutic alliance. To compare therapeutic alliance for BetterHelp to therapeutic alliance for face-to-face counseling, we used within-group t-tests. Ratings of therapeutic alliance were significantly greater for BetterHelp (M = 4.4, SD = 0.7) than face-to-face counseling (M = 3.2, SD = 1.2), t(31) = 5.35, p < .01 (CI = 0.73 - 1.62). This result provides support for the idea that BetterHelp text-based counseling creates a satisfying therapeutic alliance between counselor and client. These data further suggest that therapeutic alliance for text-based counseling is even stronger than face-to-face counseling.

Satisfaction. To assess satisfaction with BetterHelp and satisfaction with face-to-face counseling, we first used descriptive statistics to clarify the percentage of people who were satisfied with each dimension of counseling for both BetterHelp and face-to-face counseling (see Figure 1). Our sample size and the distribution of responses prevented us from being able to conduct McNemar's Chi-squared tests on these dichotomous variables. Descriptive results, however, suggest greater satisfaction with BetterHelp text-based counseling than face-to-face counseling. All analyses supported BetterHelp as being more satisfying than face-to-face therapy. In particular, BetterHelp was found to be quite a lot more convenient, affordable, and accessible than face-to-face therapy.

To continue assessing satisfaction with BetterHelp and satisfaction with face-to-face counseling, we used within-group t-tests for our continuous variables. Ratings of quality were significantly greater for BetterHelp (M = 3.7, SD = 0.5) than face-to-face counseling (M = 2.7, SD = 1.0), t(34) = 5.45, p < .01 (CI = 0.63 - 1.37). Ratings of how well treatment needs were met were significantly greater for BetterHelp (M = 3.3, SD = 0.7) than face-to-face counseling (M = 2.5, SD = 1.0), t(34) = 4.20, p < .01 (CI = 0.40 - 1.14). Ratings of how likely one would be to return were significantly greater for BetterHelp (M = 4.8, SD = 0.6) than face-to-face counseling (M = 2.9, SD = 1.2), t(34) = 7.48, p < .01 (CI = 1.37 – 2.40). These results provide further support that clients of BetterHelp are more satisfied with text-based counseling than face-to-face counseling (see Figure 2).

Finally, when asked how likely one would be to recommend BetterHelp to a friend or colleague on a scale from 0 (Not at all likely) to 10 (Extremely likely), people reported scores ranging from 5-10 (M = 9.2, SD = 1.3).
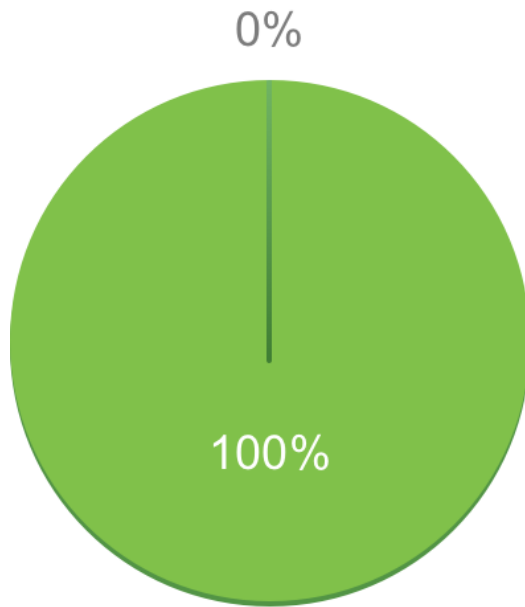
Comparing BetterHelp to face-to-face counseling. To directly assess whether people found BetterHelp to be better or worse than their experiences with face-to-face counseling, we used descriptive statistics. First, we assessed whether people would choose BetterHelp or face-to-face counseling in the future (see Figure 3).

Next, we assessed how people compare BetterHelp to face-to-face counseling on each of the dimensions of satisfaction. The strongest effects suggest BetterHelp is a lot more convenient and accessible than face-to-face therapy; however, all analyses supported BetterHelp as being more satisfying than face-to-face counseling (see Figure 4).

Figure 1.

BetterHelp is Convenient

0%

100%
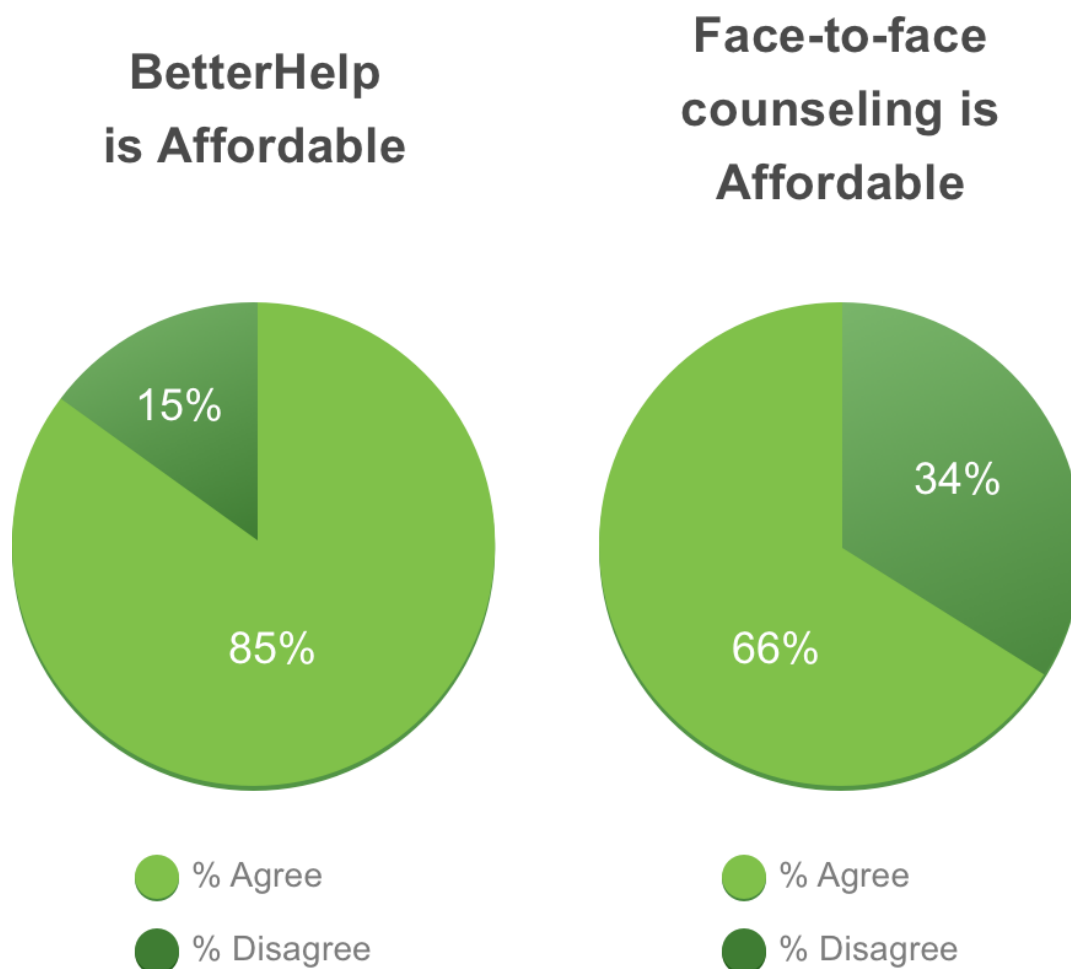
- % Agree
- % Disagree

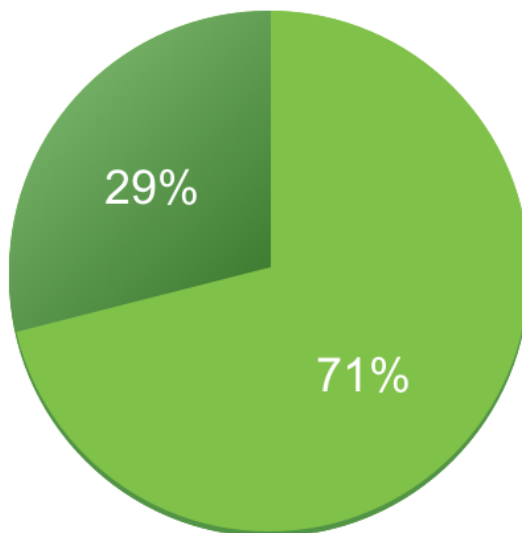## Face-to-face counseling is Convenient

20%

80%
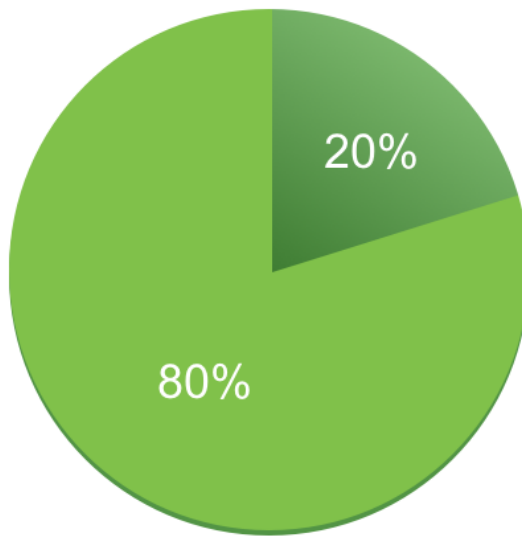
- % Agree
- % Disagree

BetterHelp is Effective

2%

98%
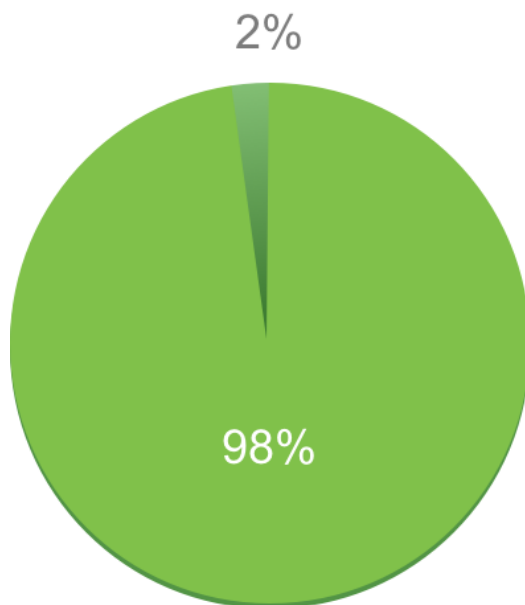
- 🟢 % Agree
- 🟢 % Disagree

Face-to-face counseling is Effective
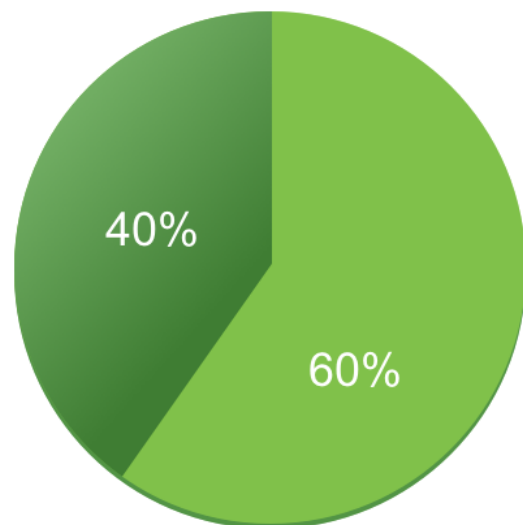
29%

71%

- 🟢 % Agree
- 🟢 % Disagree

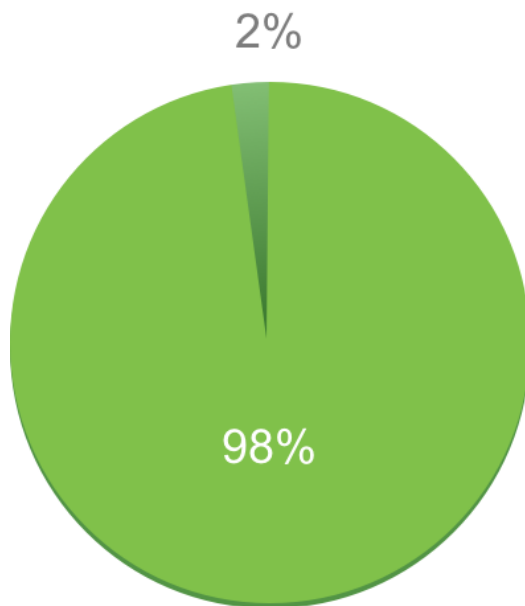## BetterHelp is the right kind of help for me

4%

96%
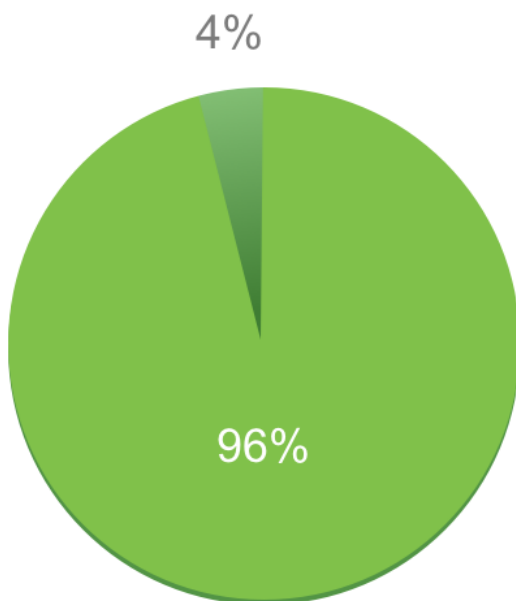
- % Agree
- % Disagree

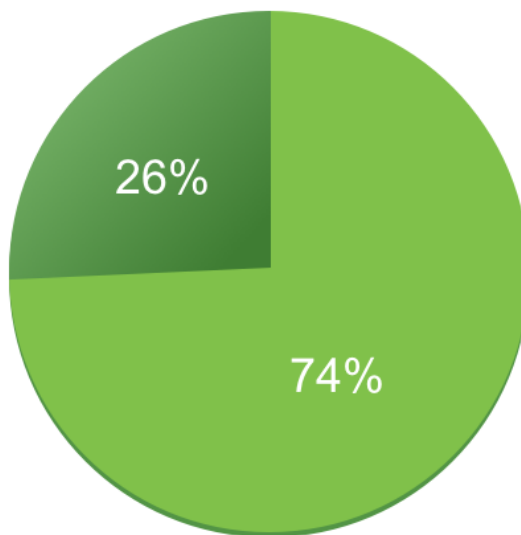## Face-to-face counseling is the right kind of help for me

40%

60%

- % Agree
- % Disagree

BetterHelp has allowed me to make progress on my problem
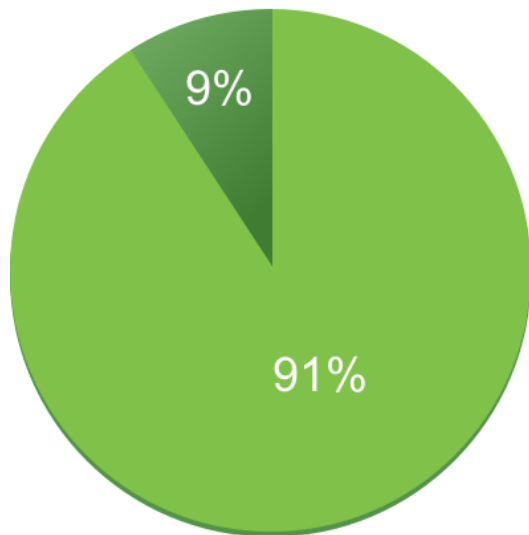
2%

98%

- % Agree
- % Disagree

Face-to-face counseling has allowed me to make progress on my problem

26%

74%

- % Agree
- % Disagree

BetterHelp is help right when I need it

9%

91%

- % Agree
- % Disagree

Face-to-face counseling is help right when I need it

37%

63%
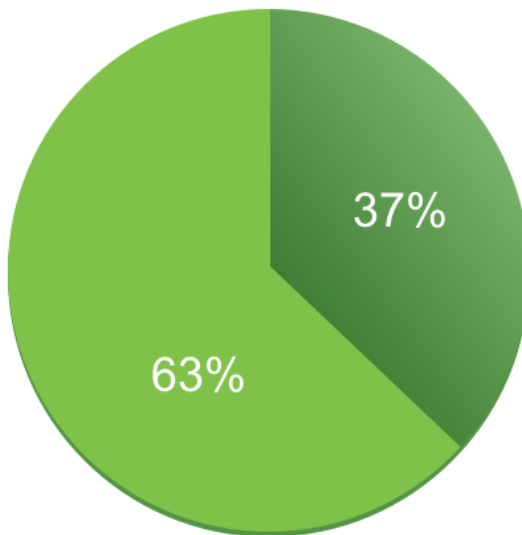
- % Agree
- % Disagree

Figure 2.

Theraputic Alliance (using the Working Alliance Inventory)
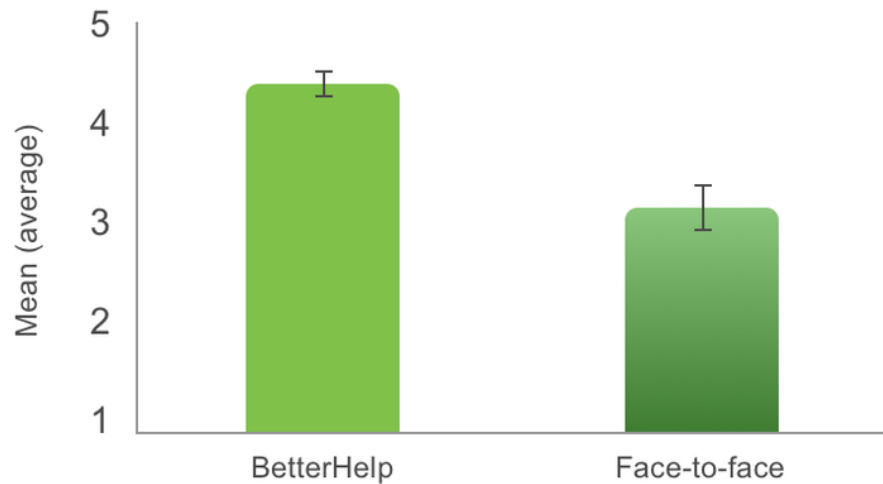
What proportion of your treatment needs are being met through (counseling)?

How would you rate the overall quality of your (counseling) experience?
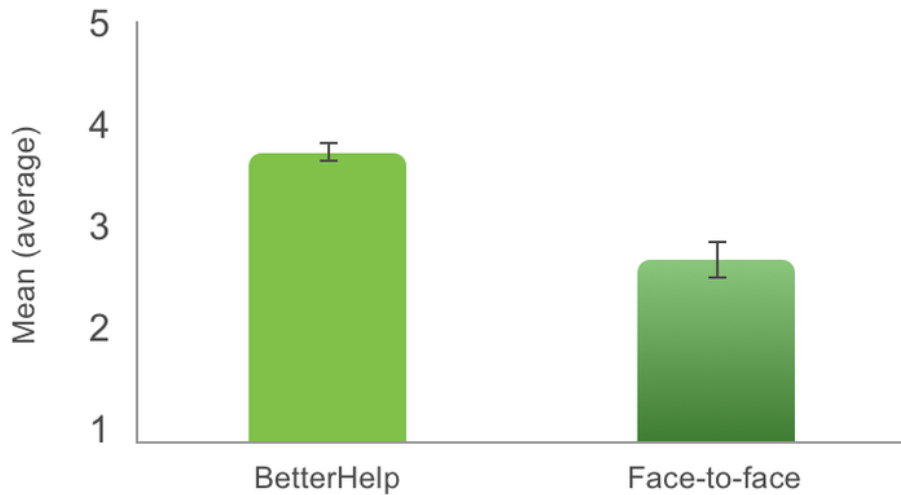
How likely are you to return to (counseling) again in the event that you need help with a new problem?
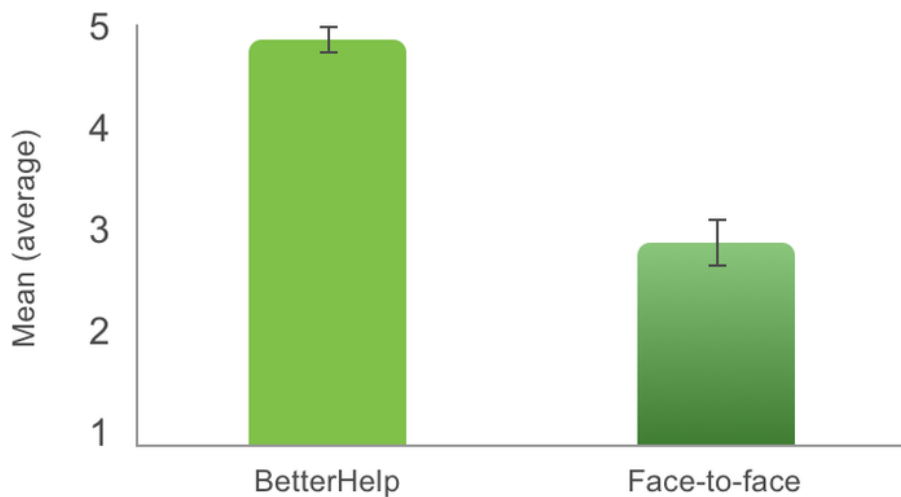
Figure 3.

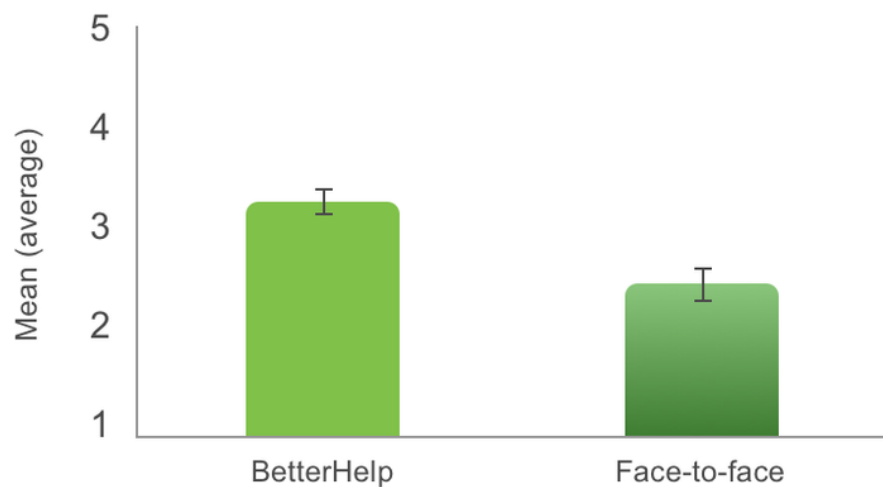# How likely are you to return to BetterHelp instead of face-to-face therapy in the event that you need help with a new problem?

- 🔴 Very unlikely that I would choose BetterHelp over Face-to-face therapy
- 🟠 Somewhat unlikely that I would choose BetterHelp over face-to-face therapy
- 🟡 Not sure that I would choose BetterHelp over face-to-face therapy
- 🟢 Somewhat likely that i would choose BetterHelp over face-to-face therapy
- 🟢 Very likely I would choose BetterHelp over face-to-face therapy

Percentage
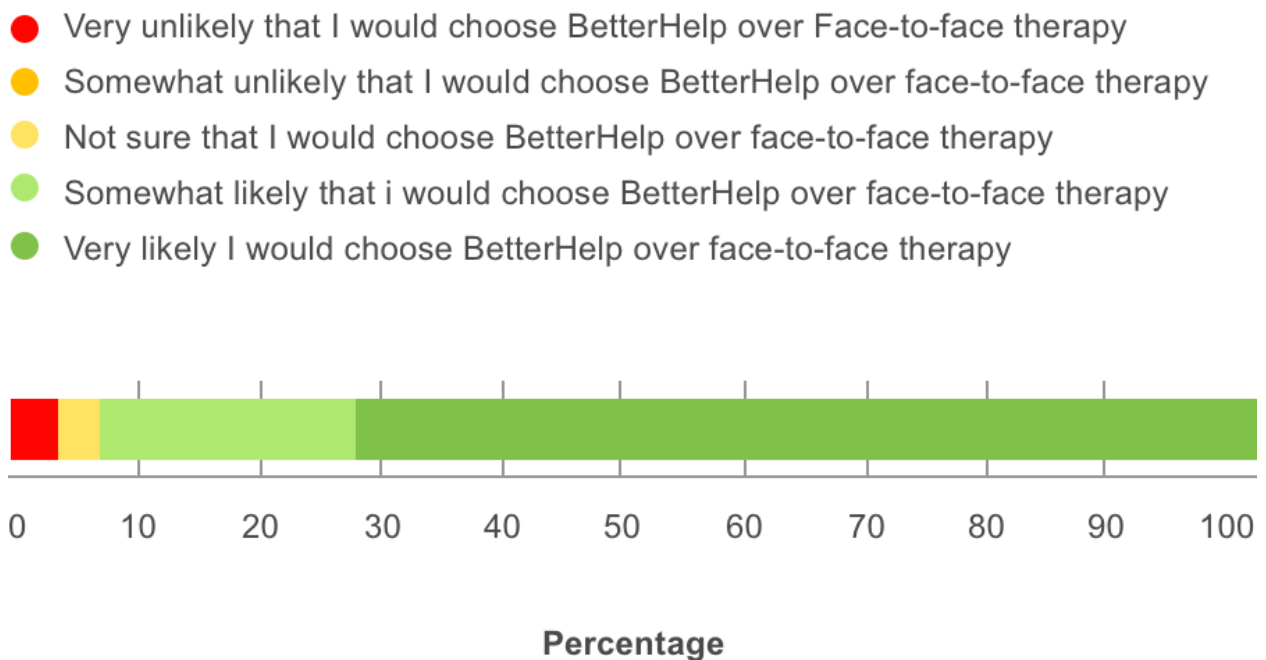
Figure 4.

How would you compare your experience on BetterHelp to face-to-face therapy?

Legend:
- BetterHelp was much worse
- BetterHelp was somewhat worse
- BetterHelp was about the same
- BetterHelp was somewhat better
- BetterHelp was much better

Categories (y-axis): Quality, Progress, Accessibility, Fit, Effective, Convenient, Affordable

X-axis: Percentage (0, 20, 40, 60, 80, 100)
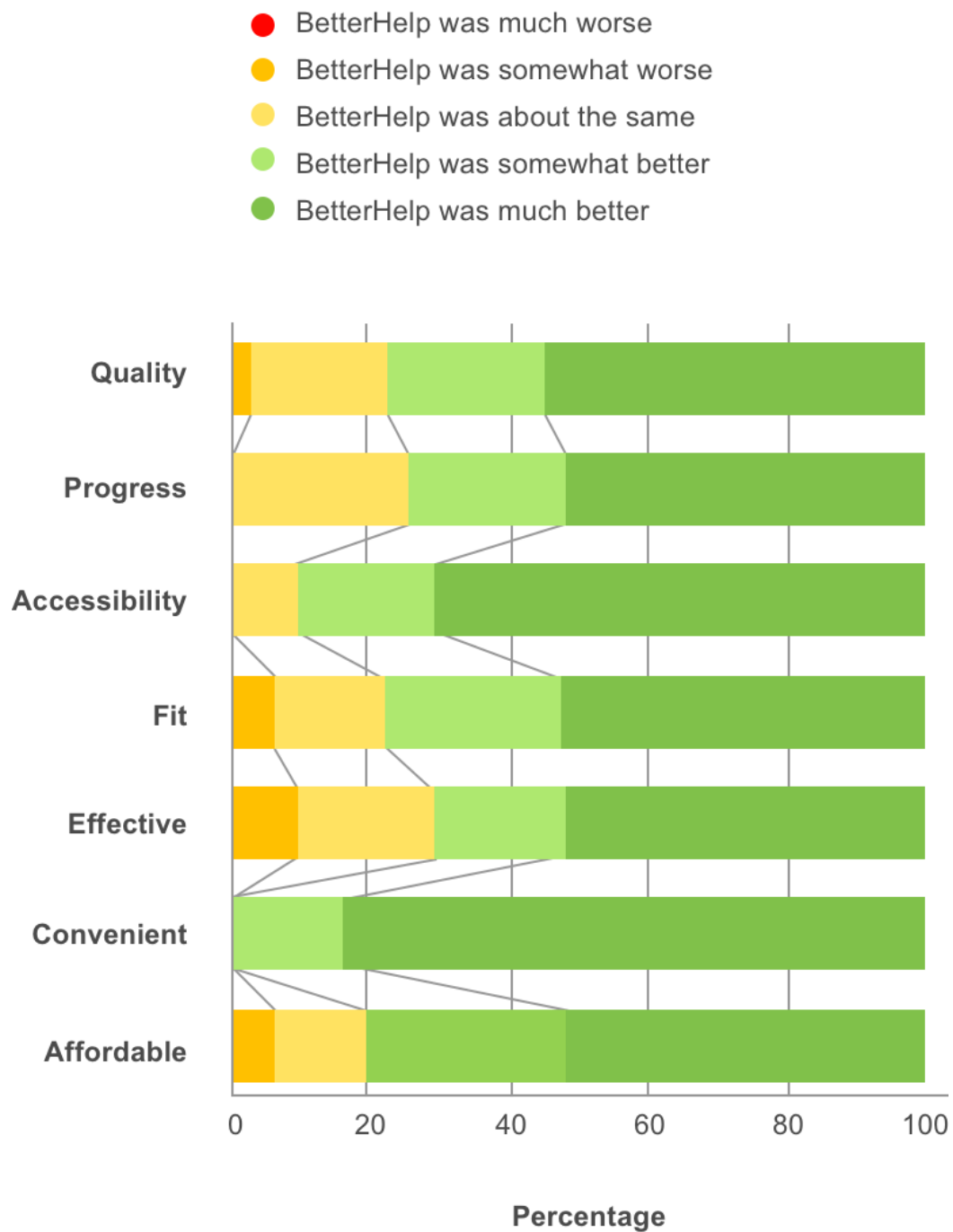
Discussion

Text-based counseling has been suggested to be a viable approach to improving mental health and well-being (Aguilera, 2012). Given the potential accessibility, affordability, and effectiveness of text-based counseling, an investigation clarifying the benefits of text-based counseling was warranted. Therefore, the present investigation assessed people's experiences to determine whether BetterHelp text-based counseling differs from face-to-face counseling with regard to: 1.) Affordability, 2.) Convenience, 3.) Effectiveness, 4.) Fit, 5.) Accessibility, 6.) Progress, 7.) Quality, 8.) Meeting needs, and 9.) Therapeutic alliance.

The results are strongly in favor of BetterHelp text-based counseling and suggest that people are highly satisfied with BetterHelp. As expected, text-based counseling appears to address a number of significant barriers (i.e.,

convenience, affordability, and accessibility) that sometimes prevent face-to-face counseling from being effective. Notably, the present data further suggest that therapeutic alliance for BetterHelp text-messaging counseling is even stronger than face-to-face counseling. Given some people's lay beliefs that therapeutic alliance should be formed in-person, this is an important insight. It may be that strong alliances are formed when using BetterHelp because BetterHelp counselors are able to more quickly respond to clients' needs, they have more frequent interaction with clients, and/or they are able to minimize stigma and prejudice (e.g., racial, gender, socio-economic) that may be more likely to emerge when counselors see clients face-to face. Regardless of the mechanism, these results have important implications for counseling practice and suggest that BetterHelp's high-quality text-based counseling is a viable alternative to face-to-face counseling.

Although the present investigation addressed multiple limitations of existing research, it is not without its own limitations. First, while our investigation took an important first step towards assessing the unique benefits of text-based counseling, it cannot speak to the direct effects of text-based counseling on mental health and well-being. Longitudinal and intervention designs are needed to draw causal conclusions about the role of text-based counseling on mental health and well-being. Second, we had a relatively small sample size. Although mean differences were significant, we should not consider these results indicative of all individuals in all circumstances. Third, this study, like most survey studies, may have been affected by sampling bias. Only participants who were already using BetterHelp for a period of three months were included in analyses. It was essential to focus on this group to ensure participants were familiar with the service; however, this approach may have led to a bias towards including people in the study who favored BetterHelp text-based counseling. Fourth, participants were asked to retrospectively recall their experiences with face-to-face therapy, which may have been harder to recall (i.e., longer ago) than their experiences with BetterHelp. Although retrospective reports have known draw-backs, they are widely used and accepted in the psychology literature, particularly for exploratory studies such as this one. Fifth, our results suggest there are many benefits of text-based counseling; however, there may be individuals for whom text-based counseling is not appropriate (e.g., those experiencing suicidal thoughts). Given the seriousness of severe mental health issues, it will be essential to clarify when text-based counseling is appropriate. Despite these limitations, this

study represents an important first step in understanding the precise benefits of text-based counseling.

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