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# A look into telepsychology in the Philippines: an exploratory-cross-sectional research

Jason Clark Perez<sup>1\*</sup>

## **Abstract**

The debate surrounding telepsychology and its integration into professional practice remains a critical issue. This study explores telepsychology in the Philippines, focusing on its acceptance, appropriateness, and feasibility during the COVID-19 pandemic. Employing an exploratory cross-sectional research design, data were collected through an online survey using purposive sampling. Results indicate that Filipinos generally perceive telepsychology as acceptable, suitable, and feasible under pandemic conditions. This aligns with studies emphasizing telepsychology's potential to enhance accessibility and address geographic barriers. The findings contribute to the growing body of evidence supporting telepsychology as a viable mental health intervention.

**Keywords** Telepsychology, Theoretical Framework of Acceptability, Pandemic, COVID-19, Future of Telepsychology

## **Background**

The development of telepsychology has accelerated in response to the COVID-19 pandemic, emphasizing the need for alternative mental health service delivery methods. Historically, telepsychology emerged as an extension of communication innovations such as telephone counseling and email-based interventions [11]; [14]. Research highlights its potential to enhance accessibility, address logistical challenges, and reduce barriers to mental health care [5]; [15]. However, its effectiveness compared to traditional in-person therapy remains debated [13].

While several studies affirm the efficacy of telepsychology [3]; [18], challenges persist. These include difficulties in building therapeutic rapport due to the absence of non-verbal cues, privacy concerns, and the need for specialized training among professionals [4]; [19]. Moreover, younger populations face additional barriers such as stigma and uncertainty about seeking virtual mental health services [10]. In the Philippines, telepsychology's adoption must account for cultural preferences for faceto-face interactions and the geographic dispersion of mental health resources, which underscores its potential to fill critical service gaps [7].

### Methods

#### Research design

An exploratory cross-sectional research design was employed to examine the relationships between demographic factors and perceptions of telepsychology. This approach enabled the analysis of naturally occurring data groups, consistent with Johnson [12].

## Setting, participants and sampling technique

The study targeted Filipino residents, including psychology students, graduates, and the general population who could benefit from telepsychology. Participants were recruited through social media and professional networks, employing purposive sampling to ensure relevance to the research objectives. This demographic diversity provided insights into the acceptability, appropriateness, and feasibility of telepsychology during the pandemic.

<sup>&</sup>lt;sup>1</sup> Mapúa University, Makati, Metro Manila, Philippines



<sup>\*</sup>Correspondence: Jason Clark Perez clarkentou@gmail.com

Perez BMC Health Services Research (2025) 25:375 Page 2 of 4

## Data gathering tools

Data were gathered using three validated scales: the Acceptability of Intervention Measure (AIM), Intervention Appropriateness Measure (IAM), and Feasibility of Intervention Measure (FIM) [17]. These tools, with high reliability (Cronbach's alpha: AIM=0.85, IAM=0.91, FIM=0.89), were designed to evaluate perceptions of telepsychology's practicality and relevance in the Philippine context.

## Data gathering procedures

The survey, hosted on Google Forms, included informed consent, terminology explanations, and researcher contact information. After data collection, responses were encoded in Microsoft Excel, with outliers removed to improve data accuracy. Statistical analyses, including descriptive statistics and main effects ANOVA, were conducted using Statistica to explore demographic influences on telepsychology perceptions.

#### Data analysis

The data was first analyzed with descriptive statistics in a table form to display multiple demographics provided by the participants. The participants were described according to their gender (male or female), age (young adult or adult) and occupation (general population or psychology affiliate). The researcher also provides a table depicting the means for each variable, as well as the mean per question on each of the instruments used and tally the scores to prove a total mean for each instrument. This will indicate a general view for the answers of the participants on whether they accept telepsychology, deem telepsychology appropriate, and view telepsychology as a feasible intervention. Main effects ANOVA is also utilized by the researcher to assess if the demographics influence the dependent variable.

## **Ethical considerations**

The researcher emphasizes adherence to ethical considerations throughout the study, focusing on informed consent, beneficence, and anonymity to ensure participant well-being and ethical research practices. The ethical principle informed consent ensures that participants willingly agree to participate based on a clear understanding of the study's purpose [2]. The researcher will explain the study in simple terms, answer any questions, and ensure participants know they can withdraw at any time. The ethical principle beneficence emphasizes the importance of conducting research that is beneficial and causes no harm [8]. The researcher must clearly communicate the study's goals and intentions to participants, who are integral to the research process [1]. Lastly, respecting anonymity means participants' responses are not linked to their identities, which is crucial for protecting their rights [9]. The researcher is responsible for informing participants about their rights and maintaining anonymity through codes, numbers, or pseudonyms.

The main ethical standards include:

- 1. Anonymity: Participants' identities are protected.
- 2. Dignity and Well-Being: The well-being of participants is prioritized.
- 3. Informed Consent Process: Participants must sign a consent form before data collection, ensuring they understand the research.
- 4. Confidentiality: All data and personal results are kept confidential, with no real names used in transcripts.

#### Results

Table 1 describes the demographics of the participants gathered; this includes the gender, age and occupation of the participants (see Table 1).

Acceptability of intervention measure (Table 2)

Intervention appropriateness measure (Table 3)

### Feasibility of intervention measure (Tables 4 and 5)

Based on the results of the main effects ANOVA (see Table 5), there are no significant demographic variable that influences Telepsychology. The results show that Filipinos and their demographics play no role in their views.

#### Discussion

This study contributes to the growing evidence base supporting telepsychology as a viable intervention in the Philippine context. Findings indicate a positive

**Table 1** Descriptive statistics of the demographics gathered from the participants

	N	%
Gender		
Male	107	47.6%
Female	118	52.4%
Total	225	100%
Age		
17–23	155	69%
24–60	70	31%
Total	225	100%
Occupation		
Student	61	27.1%
Working	63	28%
Psychology Student	94	41.8%
Psychology Graduate	7	3.1%
Total	210	100%

Perez BMC Health Services Research (2025) 25:375 Page 3 of 4

**Table 2** Mean for the answers of the participants for each question on the instrument AIM

Question	Mean	Interpretation		
1	3.99	Neither Agree nor Disagree		
2	4.04	Agree		
3	3.89	Neither Agree nor Disagree		
4	4.21	Agree		
Total	4.03	Agree		

**Table 3** Mean for the answers of the participants for each question on the instrument IAM

Question	Mean	Interpretation	
1	4.51	Agree	
2	4.50	Agree	
3	4.49	Agree	
4	4.48	Agree	
Total	4.50	Agree	

**Table 4** Mean for the answers of the participants for each question on the instrument FIM

Question	Mean	Interpretation		
1	4.31	Agree		
2	4.35	Agree		
3	4.34	Agree		
4	3.96	Neither Agree nor Disagree		
Total	4.50	Agree		

**Table 5** Main effects ANOVA results of the demographics towards the dependent variable

Effect	SS	Degr. Of Freedom	MS	F	Р
Intercept	462,498.4	1	462,498.4	10,636.42	0.000000
Gender	32.3	1	32.3	0.74	0.389466
Age	4.1	1	4.1	0.09	0.758396
Occupation	71.0	1	71.0	1.63	0.202731
Error	9609.6	221	43.5		

perception of telepsychology's acceptability, appropriateness, and feasibility, consistent with previous research [4]. These results emphasize telepsychology's potential to address geographic and logistical barriers to mental health care delivery [7], [15].

However, the study's findings diverge from those of Lazuras & Dokou [13], who reported gender-based

differences, with women perceiving telepsychology more favorably. Gatti et al. [10] similarly noted generational disparities, with younger individuals displaying greater openness to virtual interventions due to their familiarity with technology. These discrepancies highlight the influence of sociocultural factors on telepsychology's reception.

While this study found no significant demographic effects, the COVID-19 pandemic underscored the urgency of adopting telepsychology to sustain mental health services during crises. Brooks et al. [6] emphasized the psychological toll of quarantine measures, including increased stress and emotional disturbances, further validating telepsychology's relevance. The findings also support Wind et al. [18], who advocated for e-health solutions as transformative tools for mental health care.

Despite its promise, telepsychology faces limitations, including challenges in establishing therapeutic rapport due to the absence of non-verbal communication cues [19]. Addressing these barriers requires targeted training and resource allocation to build competency and confidence among mental health professionals [4].

Future research should adopt longitudinal designs to evaluate the sustainability of telepsychology's acceptability and effectiveness over time. A qualitative approach focusing on psychology professionals could provide deeper insights into implementation challenges and opportunities for innovation.

As digital technology continues to evolve, telepsychology presents an opportunity to expand access to mental health services, particularly in geographically dispersed regions like the Philippines. The findings affirm its potential as a practical and sustainable intervention, provided that ethical considerations and cultural sensitivities are addressed.

## **Supplementary Information**

The online version contains supplementary material available at https://doi.org/10.1186/s12913-024-12091-9.

Supplementary Material 1.

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Not applicable.

## Author's contributions

J.C.P wrote the entire manuscript.

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#### Data availability

The data of this research can be acquired through request with the researcher and all of the materials utilized by the researcher.

Perez BMC Health Services Research (2025) 25:375 Page 4 of 4

#### **Declarations**

#### Ethics approval and consent to participate

Although this research did not undergo a formal ethics review, the researcher diligently adhered to and implemented a comprehensive set of ethical considerations outlined within the study. As mentioned by the Philippine Health Research Ethics Board on page 48 of their National Ethical Guidelines For Research Involving Human Participants, provided that protocols do not involve more than minimal risks or harms, the following is considered by the REC for exemption from review protocols for institutional quality assurance purposes, evaluation of public service programs, public health surveillance, educational evaluation activities, and consumer acceptability tests, which fits the criteria of the research that utilized a "consumer acceptability test". Furthermore, the Philippine Health Research Ethics Board deems that research that only includes interactions involving survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording), if the following criteria are met: There will be no disclosure of the human participants' responses outside the research that could reasonably place the participants at risk of criminal or civil liability or be damaging to `their financial standing, employability, or reputation; and The investigator records the information obtained in such a manner that the identity of the human participant cannot readily be ascertained, directly or through identifiers linked to the participant [16]. All of the points highlighted by the Philippine Health Research Ethics Board were diligently followed by the researcher. All of the participants in this study were given an informed consent form and the participants gave their informed consent to participate in the study.

#### Consent for publication

Not Applicable.

#### Competing interests

The authors declare no competing interests.

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