Ethical issues raised in using online tele-mental health (OTH): a review of studies

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A B S T R A C T

Given the current COVID-19 pandemic, utilizing technology in online platforms has been a primary method internationally for upholding the health care system during this world health crisis. Online tele-mental health (OTH) offers exciting new breaks for mental health practitioners. However, initiation of OTH has also come with a host of trials, particularly on ethical standards. The goal of this narrative review aims to highlight the raised ethical issues among studies applying the modality of OTH which is a timely resource for mental health professionals who have been forced to move into the practice of online consultations and sessions. Using the standard key points of the mental health practitioners' codes of ethics, applying both the American Psychological Association (APA) and the code of ethics provided by the Psychological Association of the Philippines (PAP) is used during the review. Results show that there are problems and uncertainties for mental health providers striving to fulfill the shift in technology. In this study, the five of the most critical ethical issues found in OTH encounters include issues of competency, issues in the interruptions of psychological services in using technology, issues in integrity, issues in privacy and confidentiality, and themes that are considered accessory issues in OTH. The recommendations provided adheres to lift ethical issues raised in the review.

R E S U M O

Dada a actual pandemia da COVID-19, a utilização da tecnologia em plataformas online tem sido um método primário a nível internacional para defender o sistema de saúde durante esta crise mundial de saúde. A tele-saúde mental (OTH) online oferece novas oportunidades interessantes para profissionais de saúde mental. No entanto, o início da OTH também trouxe uma série de ensaios, particularmente sobre padrões éticos. O objetivo desta revisão narrativa visa destacar as questões éticas levantadas entre os estudos que aplicam a modalidade de OTH, que é um recurso oportuno para profissionais de saúde mental que foram forçados a passar para a prática de consultas e sessões online. Utilizando os pontos-chave padrão dos códigos de ética dos profissionais de saúde mental, aplicando-se tanto a Associação Americana de Psicologia (APA) como o código de ética fornecido pela Associação Psicológica das Filipinas (PAP) durante a revisão. Os resultados mostram que existem problemas e incertezas para os prestadores de saúde mental que se esforçam para cumprir a mudança tecnológica. Neste estudo, as cinco questões éticas mais críticas encontradas em encontros de OTH incluem questões de competência, questões nas interrupções de serviços psicológicos no uso da tecnologia, questões de integridade, questões de privacidade e confidencialidade e temas que são considerados questões acessórias em Outros. As recomendações fornecidas atendem ao levantamento de questões éticas levantadas na revisão.

Introduction

Many mental health professionals have joined the ranks of internet therapists in recent years. The global health crisis of COVID-19 brought the widespread use and application of technology. In the practice of providing mental health services, making use of OTH has been applied**.** Many practitioners have turned to online practice because of the limitations of face-to-face sessions. In the field, psychologists also had been taking the opportunity and took advantage of online platforms and telecommunications to continue their services. Nonetheless, the continuation of services was not only the primary reason but also due to the call of duty. Mental health professionals are one of the most significant users of this platform because evidently, COVID-19 brought anxiety, uncertainty, and depression due to sudden changes in the setting, environment, movement restrictions and even the fact that many have to deal with the death of someone or several family members. On top of that, the trend and succeeding use of OTH used to compensate for the face-to-face session which gives rise to a review of the raised ethical issues provided in different studies on the use of OTH. Using OTH in the present healthcare crisis, there is a need to document the ethical issues and concerns which is significantly timely and relevant to the principle of the practice of psychology. There is a need to accommodate and continuously discuss guidelines due to the use of internet-base resources and the inclusion of the use of technology in the practice.

A large proportion of clinical workers could correctly characterize telehealth as a way to deliver healthcare services via electronic means (McClellan et al., 2020); the tendency in the application of OTH is to respond in the manner of psychotherapy, psychological counseling, a continuation of prior sessions, etc. Many therapists used to meet with their clients in person (e.g., at the therapist's office) before COVID-19. In contrast, nearly all practitioners utilize several telecommunications technologies to communicate during the COVID-19 pandemic (Sampaio et al., 2021). In light of the COVID-19 public health emergency, APA has contacted about the telehealth policies of many states and recognized the rising need for telehealth.

One of the implications of technology in this global health crisis is to avoid spreading and/or containing the virus. Transmission is being prevented by having social distancing or staying in lockdowns. Hence, conducting remote telepsychology sessions or OTH becomes a trend because of the following prevention of COVID-19 infections (Pierce et al., 2021). Psychologists use online platforms to simply contribute to preventing the spread and transmission of viruses (Iqballa & Dwiastuti, 2020). Similar to this, there is a push to incorporate the current paradigm within the digital realm as psychological care services move beyond medical facilities (Bamijoko-Okungbaye & Idemudia, 2020). However, the "how" the "do's and don'ts" remains a puzzle to be solved especially if practitioners are not trained to use an online platform yet there is a need to suddenly shift to using OTH in the delivery of mental health services.

Studies have shown significant effectiveness in treating clients using the OTH. For example, controlled research studies, for instance, have demonstrated the efficacy of this approach in treating bipolar disorder (González-Ortega et al., 2016). Additionally, the virtual counseling approach has been demonstrated to be successful in reducing psychopathological distress concerning depression, anxiety, obsessive-compulsiveness, and interactions with others (Ierardi et al., 2022). Telemental health services may aid in the reduction of comorbidities associated with disturbances (Bamijoko-Okungbaye & Idemudia, 2020) and are reported to have high treatment effectiveness using telepsychology (Sampaio et al. 2021). According to Gonzalez-Ortega et al. (2016), telemedicine has also been shown to have the promise to be a beneficial addition to standard medical care, assist individuals with managing their diseases, and aid healthcare practitioners in providing better care, specifically by giving comments to doctors. In spite of this, Markowitz et al. (2021) suggest that therapists should acknowledge existing crises and limitations in teletherapy to serve as a substitute for more direct and in the face to face contact with potential clients. This is also due to the need for evidence-based research to disseminate the transition in utilizing OTH.

A thorough investigation of the efficacy of internet-based counseling treatments is an important area of study, empirical evidence is needed (Ierardi et al., 2022). Also, Monaghesh and Hajizadeh (2020) pointed out that there is a big challenge in the use of telehealth in the future. Use of research may define the obstacles and enablers in OTH, not only for the health provider but also for the patient. Whilst in this review, the researcher responds to the need of discussing the OTH in terms of raised ethical dilemmas. Telepsychology influences professional practice, however, many psychologists have been raising ethical knowledge and the need to be competent in incorporating the use of OTH (Cooper et al. 2019). Hence, this narrative review will also help readers and practitioners to carefully consider the possible ethical dilemmas raised in the new trend of practice.

This review intends to pinpoint the ethical difficulties presented in empirical OTH investigations. Given the trend and widely used of OTH, the researchers aim to discuss what has been already raised among studies regarding the use of telecommunications platforms, videoconferencing and/or the so-called online and virtual sessions which are the alternative to the direct contact and face-to-face sessions. Issues will be tackled using the APA's Ethical Principles of Psychologists and Code of Conduct (2017). This review aims to also identify ethical issues based on PAP's Code of Ethics for Philippine Psychologists (2010).

Methodology

The researcher followed the protocol and guidelines of Green et al. (2006) using a narrative review. Narrative reviews had utilized to draw together several bits of content into a comprehensible style and lead broad-ranging narrative syntheses of current material (Green et al., 2006). Out of 45, there were a total of 10 studies carefully reviewed and found related to

the use of OTH. All of the reviewed journals came from respective peer-reviewed research published in a Scopus journal. The use of the Narrative Overview Rating Scale (NORS), which is attached in Appendix A, is utilized to guide the researchers in evaluating journals to be reviewed for objectivity. To be specific, the following methods are as follows:

Preparation:

The researchers refined the target topic by reading several materials using EBSCOHost, Biomed Central, Sage Open, Frontiers and PubMed. The journal has to be related to the trends and issues in the practice of professional psychology. Objectives were then clarified which leads the researcher to dwell on the topic of ethical issues raised in the practice of OTH. The objectives in the narrative review were then established and justified why the topic is needed to be reviewed based on journal readings and empirical studies. The objectives of the researchers focused on the practice of utilizing OTH in terms of ethical issues. Due to the increase in utilizing OTH in the pandemic, there are also found ethical dilemmas surfacing in the procedure of providing professional psychological care on the use of the digital platform.

Sources of Information and selection criteria employed:

The researchers use electronic bases and journals that are peer-reviewed to look for journals that are OTH oriented. The researcher used the Narrative Overview Rating Scale (NORS) to be objective in reviewing the journals. NORS has eight (8) categories to score. These are Initial Impression, Abstract, Introduction, Methods, Discussion, Conclusion, Reference, and Overall impressions. Each of the criteria has a subset of targets which are scoreable by one as absent, two as present but not complete and three as present and complete (see Appendix 1). Any journal with a score of 1 in any criteria was then discarded. There were a total of 45 journals and 10 of which were selected meeting the criteria of NORS and the researchers set criteria for inclusions. The following criteria are as follows:

- The journal should contain an empirical investigation of OTH's application to the provision of mental wellness services. The journal publication may help advance OTH's use of evidence-based practice.
- The authors of the articles were able to raise ethical dilemmas in the foregoing study cited in the results, discussion, and/or conclusion.
- The study is in the range of 2020 to the approximately March 2022 since the increase of use and the trends in OTH have been in the time of COVID-19 pandemic.
- The raised ethical dilemma is related and relevant to the code of ethics of APA (2017) and the PAP (2010).

In a nutshell, there are ten (10) journal articles included in this review that undergo thorough analysis. Following the recommendations of Green et al. (2006) deploying tables will be easy to make categorization of information and are arranged. The authors carefully

deployed a summary table with columns of the title of the journal in APA citation format, score on NORS, goals and objective of the study, how or what kind of platform of OTH was observed/used in the study, results, ethical issues raised in the foregoing study and recommendation for observing ethics in OTH. Table 1 is the periodical summary of the 10 journals.

Synthesis:

The researcher analyzes all the information retrieved in the thematic analysis. This was the part that takes mental energy on the part of the authors. The authors employed table to organize the journals in a manner that is standard for all the reviewed journals as mentioned above. The synthesis also includes pulling out statements and numbering them in superscript, providing memoing, notes, commenting and the practice of iterative analysis. In memoing and notes, the researchers were particular as to where the meaningful statement falls in the category of APA's Ethical Principles of Psychologists and Code of Conduct (2017) and the PAP's Code of Ethics for Philippine Psychologists (2010). Once all of the notes are reviewed, probed, and checked through, authors organize themes sequentially (Green et al. 2006).

Table 1.

A periodical summary of journals

Article reference no.	Authors and date	Title	Journal	Technology used	Participants
1	Sampaio et al. (2021)	Therapists make the switch to telepsychology to safely continue treating their patients during the COVID-19 pandemic	Frontiers in Virtual Reality in *Frontiers*	Types of telecommunication Modalities (e.g., videoconferencing, email, virtual reality, etc.). Use of Zoomfree, Zoompro, Doxy.me, Facetime, and personal phone	Therapist
2	Pierce et al. (2021)	The COVID-19 telepsychology revolution: A national study of pandemic-based changes in U.S. mental health care delivery.	The American Psychologist in *APA Psych Net*	Telepsychology- the use of real-time audio (e.g., telephone) and/or video conferencing Via video call(e.g, zoom, videoconferencing apps, skpe)technology to provide psychological services	Psychologist
3	Bunell et al. (2020)	Acceptability of telemedicine features to promote its uptake in practice: A survey of community telemental health providers	International Journal of Environmental Research and Public Health in *PubMed*	doxy.me	Community telemental health providers
4	Parisi et al. (2021)	Practitioner use of and attitudes towards videoconferencing for the delivery of evidence-based telemental health interventions: A mixed methods study	Internet Interventions in PubMed and *Elsevier*	Videoconferencing delivery (VCD) technology	Mental health practitioners a
5	McClellan et al. (2020)	Clinician telehealth attitudes in a rural	Rural Mental Health,	Clinical services through technology.	Rural clinical mental health staff members

		community mental health center setting			
6	Bamijoko-Okungbaye and Idemudia (2020)	Digital Mental Health in Ireland: Effectiveness and the Future of the Service.	*BRAIN.* Broad Research in Artificial Intelligence and Neuroscience	Apps, videoconferencing, virtual reality	Therapist and Adults patients (F-25 and M-25)
7	García et al. (2021)	Embodiment in online psychotherapy: A qualitative study.	Psychology and Psychotherapy Theory, *Research* and *Practice*	video call(e.g, zoom, conferencing apps, skype)	Patient and Therapist
8	Conzelmann et al. (2022)	Internet-based psychotherapy in children with obsessive-compulsive disorder (OCD): protocol of a randomized controlled trial.	ClinicalTrials	software Vidyo on tablet, computers with webcam, smartphones with the questionnaires and the physiology app	Children and Therapist
9	Perry et al. (2020)	Identifying and addressing mental health providers' perceived barriers to clinical video telehealth utilization	Journal of *Clinical Psychology*	Video technology in clinical practice VA Puget Sound Health Care System (VAPSHCS)	Mental health staff
10	San Juan et al. (2021)	Service user experiences and views regarding telemental health during the COVID-19 pandemic: A co-produced framework analysis	PloS one	Videoconferencing or freephone options within the Microsoft Teams application	Therapist and Patients (already experiencing mental health problems prior to the pandemic)

Trustworthiness

In terms trustworthiness in this narrative review the following standards were applied to observe rigor of the study's credibility, transferability, dependability and confirmability.

Credibility

In order to observe the truth and confidence in the findings. Triangulation, negative case analysis, persistent observation and researches reflexivity were applied. **Triangulation:** Triangulation was used to increase the degree of trust in the accuracy of the results. Triangulation used in the study includes use of other multiple references to support the need to conduct the study, the trends and other references supporting the results. **Negative case analysis**: Reporting negative cases which appears different or contradicts on the data and other themes were included resulting to different key points of themes with specific and different subthemes from APA and PAP. **Persistent observation**: An in-depth understanding of the journals was applied. The researchers allotted time, adequate attention and repeated readings in order to extend the interaction of the researcher with the journal readings. The researchers discussed each journal in order to openly share insights and avoid biases in interpretation. **Researchers reflexivity:** Credibility of findings also comes from how the researchers applied reflexivity in terms of memoing, journaling, sharing and writing every procedures which involves repeated trials and approach to make the procedure appropriate and organized. In order to avoid personal opinion from affecting the narrative

review data, researchers constantly reviewing codes, comparing codes, and checking codes several times. Focusing in APA and PAP codings, the researcher were able to avoid personal biases.

Transferability

To have an information on how the results of the findings are applicable to other contexts the researchers thick descriptions was applied. **Thick description**: The researcher provided a thick description of information on how the study was considered and how narrative review was conducted. The set of details concerning methodology, how and what are the journal included, reporting research process, synthetization, and final report were included in the paper. The researchers also have a detailed and thick description resulting to an audit trail of the thematic analysis, coding and how results were analyzed.

Dependability

The two researchers in this study analyze the same data separately and compare the results to check any inconsistency in the data and to improve the appropriateness of the themes. Also, the researcher have separated documents resulting to an audit trail. **Audit trail**: Similar to what have discussed in the transferability and thick descriptions, the researcher documented the audit trail (e.g. first cycle coding, second cycle coding, thematic analysis) if it case other researchers or readers would like to know how results were analyze and coded in iterative manner.

Confirmability

As early as in the beginning of the research, the researchers reflected and document the processing of themes. The practice of reflexivity is also in line with observing the confirmability in the study. In order to avoid biases, assessing personal background, awareness of the influence of the researcher especially in interpretation of results is practiced. Own perceptions and beliefs are avoided that can affect the results of the narrative review. Using the APA and PAP in the themes also intervened to helped the researcher to have definite themes incorporated without personal biases. Reflexive journals, personal comments are also provided while doing the data collection, interpretation, coding and thematic analysis. In order to respond for neutrality, accountability in terms of results was observed through the availability of audit trails.

Other trustworthiness criteria

The adequacy of interpretation and importance of bracketing which is almost similar to the concept of reflexivity were applied by the researchers. **Adequacy of interpretation:** Repeated readings of journals, summary and coding of researchers were given attention. The researcher balance between the researcher's interpretation and the provided information from the journals which are coded. In order to avoid the researchers' personal interpretation, they were guided by employing the standard criteria in APA and PAP ethical codes. The results were also presented with supported statement and citations among the included journals. A table

was also use to summarize the results allowing the article reference number to be reflected in each themes. ***Bracketing***: Similar with reflexivity, researchers monitor themselves when making assumptions and when biases are present. Reflexive notations and repeated discussions were applied.

Results

This paper presents the ethical issues of OTH raised among 10 studies summarized in Table 1. Table 2 shows a compilation of observed themes. There are five themes in the study namely: a) Issues in Competency; b) Issues in the Interruptions of psychological services in using technology; c) Issues in Integrity; d) Issues in Privacy and Confidentiality; and e) Accessory issues in OTH. As mentioned, before presenting the result, there is a presentation referring to the APA's Ethical Principles of Psychologists and Code of Conduct (APA for brevity) with its counterpart of the Code of Conduct and Code of Ethics for Philippine Psychologists in the Psychological Association of the Philippines (PAP for brevity).

Table 2.
Compilation of the observed themes for ethical issues raised in OTH

Themes	APA's Ethical Principles of Psychologists and Code of Conduct	Code of Conduct and Code of Ethics for Philippine Psychologists	Article reference no.

A. Issues in competency	2. Competency
	  2.01 Boundaries of Competence
	  2.03 Maintaining Competence
		Principle II. Competent Caring for the Well-Being of Persons and Peoples
		II. Competencies
		  A. Boundaries of Competence
		  C. Maintaining Competence
			1,2,3,4,5,9 and 10

	2.02 Providing Services in Emergencies 2.06 Personal Problems and Conflicts	B. Providing Services in Emergencies F. Personal Problems and Conflicts	1, 2, 6, 8, 10 1, 4

B. Issues In Interruptions of Psychological services brought by Technology	3. Human relations
	  3.12 Interruption of Psychological Services
		III. Human relations
		  L. Interruption of Psychological Services
			4, 7, 8

C. Issues in Integrity	Principle C: Integrity	Principle III. Integrity	2, 3, 5, 6

D. Issues in Privacy and Confidentiality	4. Privacy and Confidentiality
	  4.01 Maintaining Confidentiality
		IV. Confidentiality
		  A. Maintaining Confidentiality
		  B. Limitations of Confidentiality
			1, 3, 5, 6, 8, 10

E. Accessory issues in online telemental health	Principle A: Beneficence and Nonmaleficence
	
	3. Human Relations
	  3.04 Avoiding Harm
		
		III. Human relations
		  D. Avoiding Harm
			1,2,3

	Principle E: Respect for People's Rights and Dignity	Principle I. Respect for the Dignity of Persons and Peoples	6,9,10

	6. Record Keeping and Fees
	  6.04 Fees and Financial Arrangements
	  6.06 Accuracy in Reports to Payors and Funding
		VI. Records and Fees
		  D. Fees and financial arrangements
			4,3

	Principle B: Fidelity and Responsibility	Principle IV. Professional and Scientific Responsibilities to Society	1,3

	9. Assessment
	  9.11 Maintaining Test Security
		VII. Assessment
		  C. Assessment Tools
		  H. Test Security
			2

	10. Therapy
	  10.01 Informed Consent to Therapy
		VIII. Therapy
		  B. Informed Consent -
			4

A. Issues in Competency

In the issue of competency, there will be three parts of discussion which tackles the issues in boundary and maintaining competence, personal problem and conflicts, and intervening in personal problems and conflicts while using OTH.

a.1. APA -2. Competency

2.01 Boundaries of Competence

2.03 Maintaining Competence

PAP - II. Competencies

A. Boundaries of Competence

C. Maintaining Competence

Mental health practice should always be within the area of competence. In the APA and PAP, competence has many components but in terms of the use of OTH, studies have shown there is an issue in the boundaries and maintaining competence (Bunnell et al., 2020b; McClellan et al., 2020; Parisi et al., 2021; Perry et al., 2020; Pierce et al., 2021; Sampaiao et al., 2021; San Juan et al., 2021). Mental health practitioners face challenges in using OTH because users are seeking for necessary training, expertise, and research in the field to protect against professional misconduct and maintain professional competency in serving clients. There seems to be an emphasis on experiencing difficulty and suggestions of training. Sampaio et al. (2021) reiterate that there is a strong need to increase the training in telepsychology which may also include laws and regulations. Also, Bunnell et al. (2020), Parisi et al. (2021) and San Juan et al. (2021) commonly point out there are technical difficulties, perceived barriers to technology problems, and lack of training that can affect the provider's competence in using OTH.

When utilizing OTH, therapists may feel overburdened or irritated by technological difficulties. This: along with a lack of assistance to help with problems and therapists' lack of expertise with OTH, points to a pressing need for more telepsychology learning in the years to come. Similarly, Pierce et al. (2021) point out that due to the increasing use of OTH, there is a call for adequate training, supportive organization policies, procedures, and ongoing research to ensure the delivery of mental wellness care in OTH are met. There is a requirement for knowledge sharing and training programs to normalize and reduce barriers to the use of video conferencing delivery of mental health which also pertains to the suggestion of continuing education in incorporating the use of technology in the practice (Parisi et al., 2021).

a.2 APA -2. Competency

2.02 Providing Services in Emergencies (APA)

PAP - II. Competencies

B. Providing Services in Emergencies (PAP)

There may be a propensity to overlook the difficulties presented by technology in providing services during crises while talking about competency in OTH. The therapist's raised incapacity to manage online crises (e.g., self-destructive patients), as well as instruction in how to handle these types of situations (Sampaio et al., 2021). Hence, during teleconferences, some factors are beyond the control of the therapist. As a result, pressure from medical facilities puts pressure on mental health professionals, permitting them to concentrate on more critical cases. There also appears to be a way to incorporate it, but doing so will require investing in the current infrastructure and disrupting it. As a result, the increasing prevalence of online mental health services necessitates letting technology take its course in practice (Bamijoko-Okungbaye & Idemudia, 2020). However, despite the challenges in providing services, as opposed to in-person meetings, have become more and more necessary for psychotherapists to help their clients (Conzelmann et al., 2022).

a.3 APA -2. Competency

> *2.06 Personal Problems and Conflicts*

PAP - II. Competencies

> *F. Personal Problems and Conflicts*

Mental health practitioners must be competent in their chosen practice and are obligated in ethics to involve personal problems despite the mental pressures experienced. However, the effect of COVID-19 among psychologists call for two problems, the personal adverse impact of COVID-19 and the call for emerging mental health problems of those who are also adversely affected by COVID-19. For example, Sampaio et al. (2021) mentioned that therapists reported an increase in experiencing feelings of being burned out during COVID-19 pandemic. Also, practitioners in a study are feeling dazed or annoyed with technical complications. There is also insufficiency to resolve issues (Parisi et al., 2021) yet services have to be continuously provided.

B. Issues in Interruptions of Psychological Services in using Technology

The human relations criteria in APA and PAP provides 3.12 Interruption of psychological services (APA) and L. Interruption of psychological services (PAP) stating that

> *Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client's/patient's relocation or financial limitations (APA, 2017, p. 7 ; PAP, 2010, p. 204)*

Even though the technology is not mentioned as a potential factor in the interruptions of psychological services, the researchers found that due to an increase in the use of OTH, the use of technology may also contribute to disrupting the flow of services. Technical challenges with OTH might result from a built-in communication difficulty affecting clients and therapists, such as an absence of dynamic flow and openness in their conversations and

interactions during virtual meetings. Some of the participants mention the difficulties of maintaining silence (Garca et al., 2022). Also, among the challenges is the lack or limitation in visual cues. There is no access to the present action and emotion that are undeniably vital ingredients in providing the appropriate psychological assessments and services. Garcia et al. (2022 pg.203) pointed that

> *Therefore, it is usual to see; a therapist with a stationary focus, a fixed stare, and distracting visuals like hands flitting across the monitor without a discernible direction. Other common characteristics include the management of quiet down, gaze behavior; eye contact; and the temporal nature and dimension of conduct environments...*

Another debatable concern noted about OTH is how therapists deal with crisis barriers. Parisi et al. (2021) have suggested significant problems can be difficult in tracking/monitoring clients online. Additionally, technical planning of record transmission and completing homework when working alongside a distant facilitator are challenges that are cited as being connected to the requirement for assistance from other experts or healthcare institutions. Furthermore, Conzelmann et al. (2022) found specific interruptions that are not usually common face-to-face. These range from webcams where therapists, for example, an OCD patient, the therapist may be unable to see everything in the room, or If the patient focuses on the dreaded item throughout the exposure, it is not always possible to see. Using the technology obviously requires an effort and continuous support from patients and therapists concerning the use of OTH and with the technical issues (e.g., cellphones with no access to the internet, issues with data transfer, and difficulty starting live sessions) (Conzelmann et al., 2022).

C. *Issues in Integrity*

c.*1 APA - Principle C: Integrity*

> *PAP - Principle III Integrity*

Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology (APA, 2017 pg. 3)

In the version of the PAP integrity is defined as:

> *Integrity is vital to the advancement of scientific knowledge and to the maintenance of public confidence in the discipline of psychology (PAP, 2010 pg.198)*

Many authors claim that there must be sufficient research to support and check online telemental health effectiveness and concerns regarding telehealth's efficacy (McClellan et al., 2020) including if HIPAA compliance and the equivalence of telehealth-delivered services to personal care (Sampaio et al., 2021). Enhancing telemental health community providers' skills must be paid great attention. This is to effectively use telemedicine platforms, and due to the frequent use of telemedicine, a need for significant identification methods should be assisted to achieve goals (Bunnell et al., 2020) in the use of OTH.

In some ways, however, the facilitation of OTH is to check its integrity and the telemedicine system must incorporate current health IT technologies. Integration may include electronic health records (EHRs), to coordinate care across healthcare delivery systems (Bunnell et al., 2020). Additionally, Bunnell et al., (2020) state that continuous studies are required to assess how these policy choices affect psychologists' delivery of services to guarantee that the mental health requirements of the population as a whole are appropriately satisfied. Likewise, McClellan et al., (2020), researchers and educators must concentrate on boosting physician awareness of the value of telehealth. To uphold the integrity of online telemental health there should be an understanding of the link underlying features of telemedicine and intentions in the increase in the use of technology in the future.

D. Issues in Privacy and Confidentiality

Privacy and confidentiality are the well-established mental health practitioners' principles covered in great detail in the APA and PAP. Respectively, in APA it is under 4. Privacy and Confidentiality, 4.01 Maintaining Confidentiality and under PAP's IV. Confidentiality, A. Maintaining Confidentiality

The duty of mental health practitioners to maintain confidentiality in the sessions in OTH need to consider online communications and legality (Sampaio et al. 2021), security/privacy concerns (Bunnell et al., 2020); and confidentiality concerns (McClellan et al., 2020). There are several salient concerns about privacy and confidentiality to the clients or participants of online telemental health services. The majority of the respondents expressed worries about OTH's security/confidentiality or adherence to HIPPA (Sampaio et al., 2021). One of the journals mentioned that the participants highlighted the main challenges related to confidentiality and safety in internet-based as some expressed feelings of being unsafe with the remote consults either with an absence of protection and security even at residence (San Juan et al., 2021).

Although providers believe OTH increases patient access to care, patient security is also considered. There are reported perceived barriers to the security of patients along with technological challenges (Bunnell et al., 2020). The concept of data security and data transfer should be developed and implemented to be integrated in the practice (Conzelmann et al., 2022). Furthermore, all documents and data about the well-being of a person are the responsibility of mental health professionals, who are also responsible for their development, upkeep, storage, and disposal.

E. Accessory Issues in Online Telemental Health

In these themes, the following ethical concerns serve as an auxiliary to the above-mentioned issues. These are considered as an adjunct to the issues that are worth discussing because they are essential roles to be observed in OTH. These will be discussed as follows:

e.1 APA - Principle A: Beneficence and Nonmaleficence

  3. Human Relations

3.04 Avoiding Harm

PAP - III. Human Relations

D. Avoiding Harm

In the present practice of online telemental health services, mental health practitioners must uphold their responsibilities for service and ethical conduct. According to Sampaio et al. (2021), therapists have a moral responsibility to continue helping their patients, coworkers, trainees, and others without causing damage (for example, limiting personal therapy sessions amid a viral pandemic). But despite their concerns for patient safety, physicians still thought that telemental health enhanced access to treatment (Bunnell et al., 2020). Consequently, because of alleged safety worries, psychologists may also be hesitant to offer therapy using telepsychology (Pierce et al., 2021). The avoidance to harm were reported to be perceived as barriers to patient security and technological challenges (Bunnell et al., 2020).

e.2 APA- Principle E: Respect for People's Rights and Dignity

PAP - Principle I. Respect for the Dignity of Persons and People

The patients' freedom of choice is something that mental health professionals must properly address. Regarding OTH, some patients can decide to keep going to in-person visits if they are uncomfortable with technology or lack confidence in their abilities to use OTH. Hence, it is critical to provide patients the freedom to select the mode of treatment that best suits their requirements, if necessary (Perry et al., 2020). Some users have had this experience in the age of computerized health services because users might be susceptible if their beliefs are not incorporated into digital therapy (Bamijoko-Okungbaye & Idemudia, 2020). One of the studies that specifically examined respect for rights and dignity indicated that the reasons why individuals contracted for services; and their contact with care providers influenced how they communicated and formed therapeutic alliances (San Juan et al., 2021).

e.3 APA - 6. Record Keeping and Fees

6.04 Fees and Financial Arrangements

6.06 Accuracy in Reports to Payors and Funding

PAP - VI. Records and Fees

D. Fees and financial arrangements

Similar to face-to-face sessions, OTH may also bring issues in fees since the delivery of services is on an online platform. Although Standard 6.04 says that psychologists' charging methods are legal, there are salient issues raised in the current practice, particularly reimbursement issues. Also, the workflow improvements include the need for assistance to coordinate reimbursements in health insurance (Bunnell et al. 2020), billing and health insurance concerns, there was an absence of viability, probable administrative impediments and challenges with charging telehealth services (Parisi et al., 2021).

e.4 APA - B: Fidelity and Responsibility

PAP - Principle IV. Professional and Scientific Responsibilities to Society

One of the ethical principles outlined in the Ethics Code should be about their professional roles and obligations. Therapists should also take adequate measures to meet mental healthcare needs (Sampaio et al., 2021) and patient satisfaction (Bunnell et al., 2020). Given therapists' reservations about being unprepared to employ telepsychology, every therapist who took part in the present survey did so in the study of Siampao et al. (2021) mentioned that the used online platform for therapy is also a way to correspond in the treatment of those "stay-at-home" patients or so-called socially isolated.

e.5 APA - 9. Assessment

      9.11 Maintaining Test Security

PAP - VII. Assessment

      C. Assessment Tools

      H. Test Security

OTH needs to consider plans for addressing the variety of crises that may present in test security. Lower telepsychology uptake is associated with limited access to tests and test security. It was also proposed that subsequent initiatives and studies focus on clinical difficulties.Valid tailored assessments have required in computers that can be completed at home for testing, and evaluation was recommended infringing on administrative standards or test safety precautions (Pierce et al., 2021).

e.6. APA - 10. Therapy

      10.01 Informed Consent to Therapy

PAP - VIII. Therapy

      B: Informed Consent

      The absence of physical presence is one of the barriers related to videoconferencing technical, monetary, cooperative, and documentation-related (for example, authorization forms, regular outcome assessments, and homework forms) such as informed consent administration (Parisi et al., 2021) are difficult.

Discussions

      This narrative review was able to organize the ethical difficulties raised by the application of OTH in the delivery of mental health services. Several studies emphasize the need for training in OTH (Bunnell et al., 2020b; McClellan et al., 2020; Parisi et al., 2021; Perry et al., 2020; Pierce et al., 2021; Sampaiao et al., 2021; San Juan et al., 2021). In order to follow the standard of competence, acknowledging the boundary and how to maintain competence using OTH is a paramount concern. Hence, this shows that utilizing OTH is not simply shifting the services in an online platform but there should be adequate training and guidelines to be followed to observe ethical standards. Researchers in OTH are also encouraged to highlight protocols, guidelines and evidence-based practice of OTH in mental health care

and even among what cases are applicable. Thus, there are obstacles and ambiguities for mental health practitioners who are striving to perform their obligations during OTH.

The issues in competency were followed by issues in interruptions of psychological services due to the use of technology, integrity, privacy and confidentiality and the inclined accessory issues. The researchers found that in OTH use of technology can also interrupt in the delivery of services. Unlike in direct contact sessions, psychologists are not bound to use particular telecommunications, internet and mode of videoconferencing. In OTH, the stream of technology is highly considered before providing services. This is because the technology may produce interruptions in the services which should be highly avoided. Despite the growing popularity of technological advances, there are difficulties navigating support online, presence of administration issues (e.g. logging-in, disconnections etc.), boundaries of interruptions in technology, and being confused and frustrated when navigating the nuances of online communication (Hanley, & Wyatt, 2021). Next ethical issues found is in terms of issues in integrity. Psychologists has to be aware that the practice of OTH may also raise ethical concerns regarding how to ensure adequate services and goals are met. Encouraging research, guidelines, policy and programs that are vital to the advancement, accuracy and truthfulness in the science of OTH can bring confidence in the practice of psychology. The use of OTH also raises several issues in privacy and confidentiality. Since the privacy of the patient comes not in a conducive and safe room to conduct sessions, online access and internet may breach confidentiality also due to advanced technology. There are other considerations for preserving the safety of electronic information in order to safeguard privacy of clients (McVeigh & Heward-Belle, 2020). Lastly, accessory ethical issues in OTH recognize the issues in avoiding harm, a call for respecting the dignity of persons and people, record keeping and fees, responsibility in the services as well as some concerns in the assessment and informed consent. These accessories are also emerging data that can be focused to be given attention and addressed properly.

All these issues related to ethical concerns documented aim to be addressed as a support to the use of OTH. Despite the widespread use of videoconferencing psychotherapy, the field of its research is still beginning (Fernández-Álvarez & Fernández-Álvarez 2021). Hence rich resources and advocating for further research are hereby emphasized to help in the development of evidence-based OTH. The so-called eMental Health using the components of technological innovation such as tablets, laptops, and cellphones is evidently growing worldwide when it comes to the delivery of psychological service and is encouraged to be implemented with the help of novel studies and in clinical practice (Wozney et al., 2017). Future research where app developers are also encouraged to make an effort in attempting to improve mental health outcomes, especially among adolescents who can widely use technology (Lu et al., 2021)

Conclusion

In totality, mental health workers have gone virtual in responding while in the COVID19 pandemic. Integration of OTH has been more recognized as part of the mental health practice. However, the widespread use of OTH has come with challenges particularly in observing the ethical standards and principles that provide restrictions in the current practice of the mental health profession. While shifting in the use of technology, mental health practitioners also have to strengthen competency following the need and situations brought by the current health crisis.

There were found limitations in terms of training and research as well as in terms of guiding the practitioners. The standards depicted in both APA and PAP shows that maintaining and acknowledging the boundary of competence is in the form of research, training and policies. Moreover, OTH brings potential interruptions in providing psychological services. Practitioners have been intruded ranging from communication issues and technical challenges brought by OTH.

Difficulties also develop due lack of relevant interactions and the presence of some cases that are difficult to handle in online sessions. Some cases are more applicable to face-to-face interactions so that the therapist will see actual behavior and necessary observation toward the patients. Also, the use of OTH was found to be necessarily inclined with efficiency and guidelines to uphold the integrity of online platform services. In shifting the modality of services, the practitioner also aims to ensure OTH effectiveness. When it comes to privacy and confidentiality, the use of OTH may bring issues in securing data related to safety and security in incorporating technology in the practice.

Practitioners have also raised to avoid potential harm and that safety concerns of clients are considered. Additionally, in terms of assessment in OTH, no ethical standards are meant to allow practitioners to simply alter test administration. Moreover, not all potential clients are comfortable with using technology, hence options for OTH are still in the freedom of choice of the client based as a means of respecting the preference with the modality in availing psychological services. Likewise, delivery of services in an online platform shows issues in fees related to reimbursement and billing along with the concern in maintaining and availability of access to tests and computer adaptations. Also, the limitation to documentation in terms of informed consent was also a barrier.

This study also stipulated that both APA and PAP have almost the same content of standards that are applicable in the local setting and international. APA and PAP have general principles followed by ethical standards. The difference observed is APA uses numbers in enumerating standards while PAP uses roman numerals followed by letters in presenting the contents. Additionally, some ethical standards in APA and PAP falls short in terms of applicability of OTH in administration of assessment tools and test security. Perhaps due to

the massive impact of this health crisis, APA and PAP ethical standards are observed underprovided to give particular guidelines applicable to OTH.

Generally, mental health practitioners during public health emergencies such as in the time of COVID19— even with further challenges faced, mental health providers, are engaged to continue their services. The complexity and uncertainty brought by OTH call for multilevel supervisory reform. There are persistent recommendations from practitioners regarding the need for further research and training that likely corresponds to establishing the efficacy of OTH. The development and recognition to intergrate technology help the practitioner continue the mental health services. However, there are inevitable ethical dilemma upheld in the progression of the new modality, platform and indirect contact of psychological services.

Recommendations

Based on the findings of the narrative analysis and the primary concerns made in this study, it is imperative that evidence-based training and programs be immediately ratified to promote mental health providers' long-term competency in the use of OTH. Collaboration between specialists in computer information technology is essential to establish a welcoming and safe environment while delivering service in the mode of OTH, to reduce disruptions and increase utilization. Mental health specialists must possess the necessary competence to facilitate the adoption of OTH and the adjunct new modality, and it cannot be stressed enough how crucial this is.

To guarantee a clear evaluation design research and iteration for continuous evaluation and development updates, it must create global and local knowledge bases containing research information, technology tools, and relevant evidence-based recommendations. It is crucial in demonstrating the usefulness of OTH and enhancing our clients' services. Furthermore, it must seriously consider utilizing digital technology and providing mental health personnel with training support. Innovative methods of data protection, such as improved documentation and other pioneering approaches, should also be explored. By implementing these measures, we can ensure the safety, reliability, and effectiveness of services.

When it comes to developing ethical codes and policies for mental health workers, it must prioritize ease of access, avoiding harm, privacy and confidentiality, record-keeping and billing, and test security. Informed consent must be a non-negotiable requirement for online therapy, and it must provide professional instruction on evaluating internet-related concerns. It need to be proactive in designing studies to investigate future technology developments for online Tele-mental healthcare providers so that it can continue to innovate and provide sophisticated instruments for those in need. It must uphold these standards to ensure the safety and well-being of our patients.

Utilizing local research as a primary resource is imperative when building progression routes and implementing OTH in mental health services. It ensures that the approach have

specifically tailored to the community's needs and challenges. To guarantee accuracy and trustworthiness of the data collected, it's crucial to create guidelines for online examinations. Therefore, a thorough study should be conducted to address essential difficulties in test security, such as those related to correct administration and clinical evaluation in synchronous and asynchronous situations. Finally, streamlining paperwork, test administration, and informed consent processes for OTH services is essential in making them easily accessible and user-friendly.

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