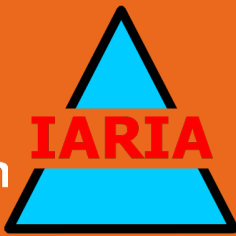




Norwegian Centre for  
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# Adolescents Experiences with Video Consultations in Specialized Mental Health Services in Norway

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# Presenter

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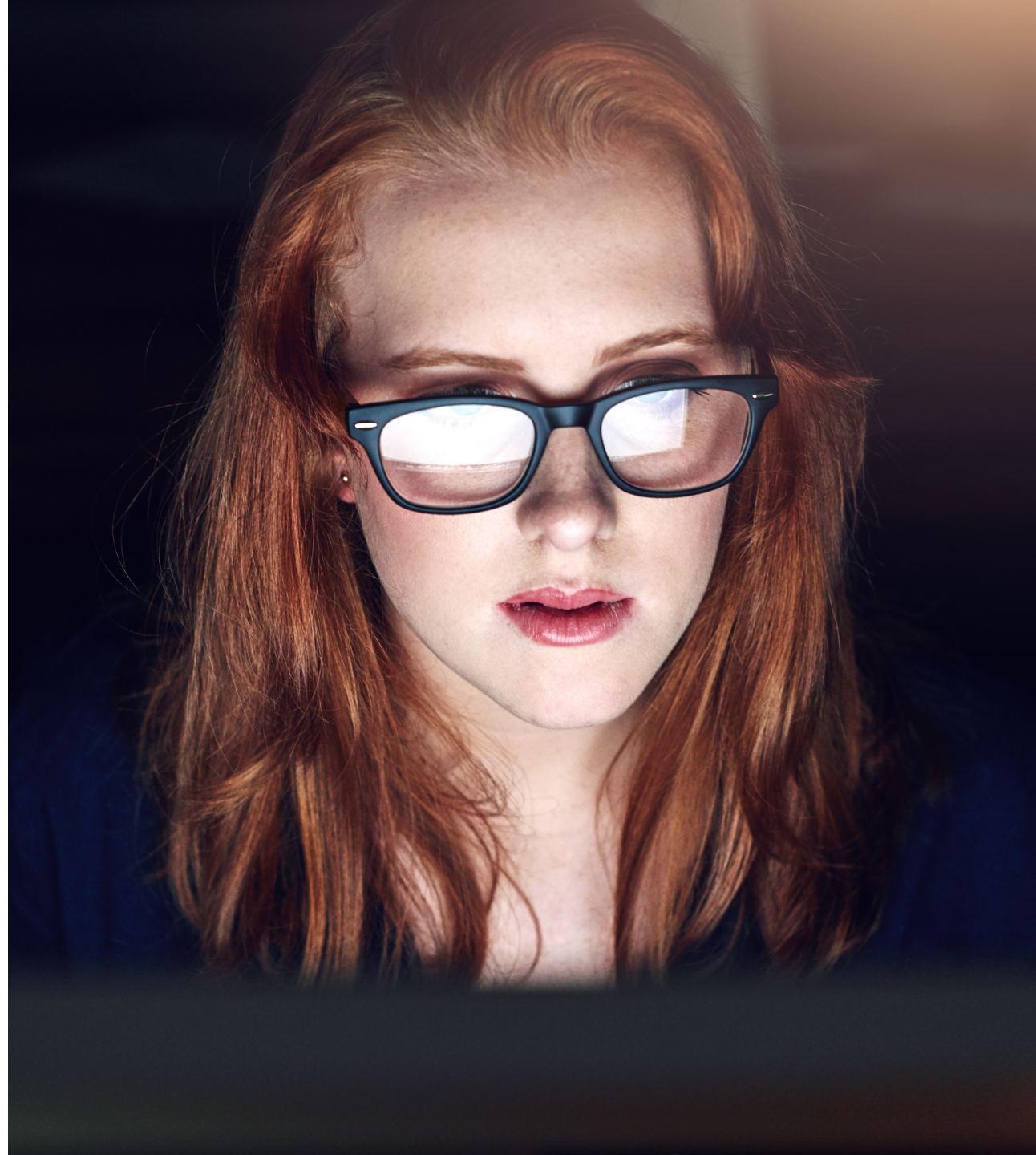
Working within the following projects:

- eMM - Electronic Medicines Management (Ph.D-project)
- Tackling social inequalities in health with the use of e-health and telemedicine solutions
- The patients medication list and summary care record in nursing homes and home based care
- Video Consultations in Mental Healthcare – young peoples' experiences





A part of the research project “  
Video Consultations in Mental  
Healthcare – young peoples’  
experiences”





# Introduction and background

- Video consultations (VC) for adolescents within mental health services
  - Can potentially reduce problems related to traveling, as Norway consists of long distances and at time extreme weather conditions
- Aim of this project was to provide knowledge about adolescents' experiences with the use of VC and how the experience compared to face-to-face meetings with their therapist
- Theoretical framework:
  - Goffman's theory of frontstage and backstage (Goffman, 1978)
  - Actor-Network Theory (Cresswell, 2019; Cresswell et al., 2010)





# Methodology

- 33 individual semi-structured interviews with adolescents between 16 and 23 years of age
  - Was conducted over telephone
  - Interview guide was made in co-creation with persons with user experiences
- Administration personnel at the local mental health facility identified adolescents that suited the inclusion criteria
  - VC between March 16th and August 5th 2021
  - Between 16 and 21 years old
- A psychologist contacted the adolescents. If they said yes to participate, then they were contacted by a researcher



# Results

- Inspired by an abductive approach
- Six themes
  - 1) Therapy on the screen
  - 2) «Not for real» - The screen as a filter
  - 3) The screen as a «looking glass»
  - 4) Emotions on the screen
  - 5) Therapy in a physical setting
  - 6) Tools for therapy
- The phenomena described within the themes are not discrete from another





# Results

1) Therapy on the screen	2) «Not for real» - The screen as a filter	3) The screen as a «looking glass»
<ul style="list-style-type: none"><li>• Difference between therapy and communication on screen versus in a physical setting</li><li>• Difficulty and inhibition to talk about inner thoughts</li><li>• Not able to fully observe body language</li><li>• Not able to obtain eye contact</li></ul>	<ul style="list-style-type: none"><li>• Adolescents perceived VC as «unreal» and «less personal»</li><li>• The screen removed something from the relation with the therapist</li><li>• Compared VC with watching a YouTube video</li></ul>	<ul style="list-style-type: none"><li>• Adolescents' experiences with seeing their own image on the screen</li><li>• Seeing themselves affected them during VC<ul style="list-style-type: none"><li>• Distracting</li><li>• Challenging</li><li>• Triggering</li></ul></li><li>• The effect of seeing your own image on the screen can be considered the «looking glass» effect</li></ul>



# Results

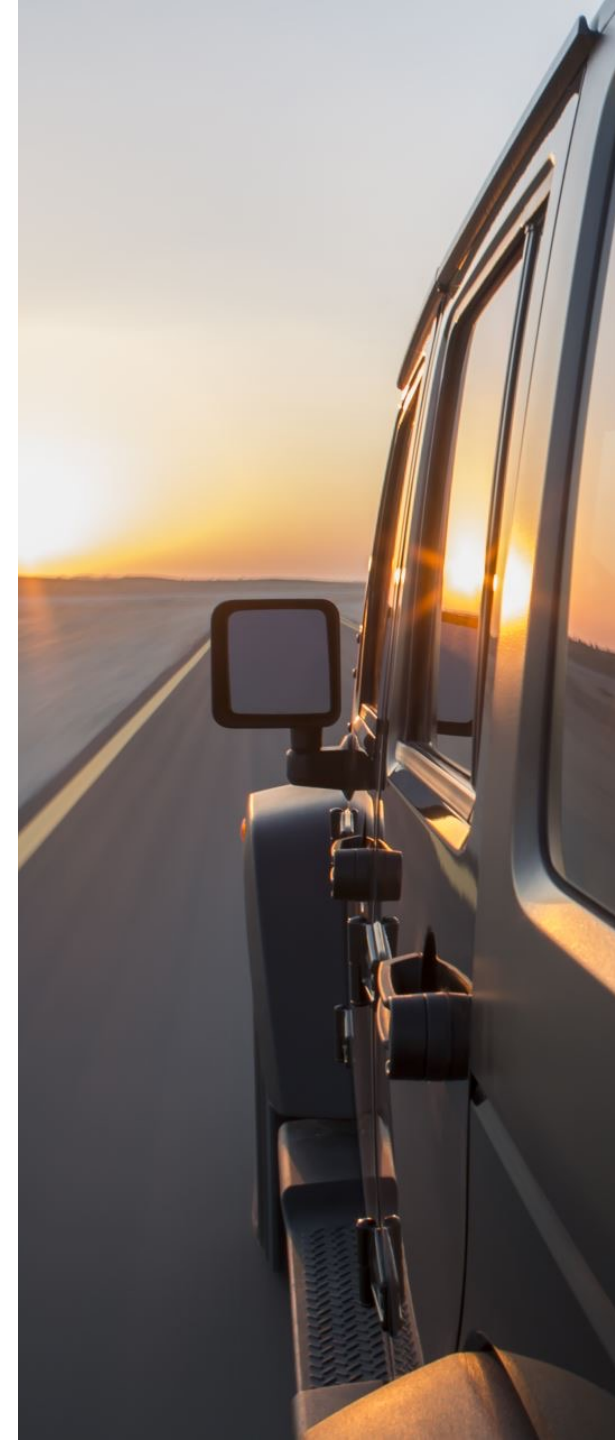
Emotions on the screen	Therapy in a physical setting	Tools for therapy
<ul style="list-style-type: none"><li>• Difficult to show emotions on the screen</li><li>• Did not receive necessary emotional support or closeness</li><li>• Did not talk about difficult topics because of this</li><li>• Some talked more about difficult topics in a less personal medium</li></ul>	<ul style="list-style-type: none"><li>• The meaning of place or lack thereof</li><li>• Informants had used VC at home and/or at school.</li><li>• Experiences differentiated based on surroundings at each location</li><li>• Example: Fear that people would overhear versus feeling safe that no one would listen in</li></ul>	<ul style="list-style-type: none"><li>• Tools being used in a physical setting, for example a whiteboard</li><li>• Was not optimal to use during VC or could not be used</li><li>• Some informants missed these physical tools</li></ul>





# Discussion

- VC can bring new opportunities such as
  - Reduced travel time
  - Reduced travel costs
  - Reduce hours absent from school
- Other challenges
  - Disturbances at home/school
  - Affects the naturalness of the relationship with the therapist
  - Difficult to see each others body language
- Consistent with previous research on VC for adolescents (Cunningham et al., 2013; Davidson et al., 2022; Haig-Ferguson et al., 2018)
- Adolescents have individual preferences
- A combination of VC and face to face was preferable
- VC can be a flexible tool, and can be used for short conversations or for information sharing





# Conclusions

- VC was a useful solution during a time of crisis
- A potential for VC to increase the availability and flexibility of mental health services
- Further qualitative and quantitative research is needed to build solid evidence-based digital services



# References

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# Thank you for your attention

Scan to read more about the  
project

