Assessment of "Online Therapy" and "Telepsychiatry" Topics in the COVID-19 Pandemic Based on Google Trends Data

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INTRODUCTION

Cases of pneumonia of unknown etiology were first reported in December 2019 in Wuhan, China. The isolation of a new type of coronavirus Severe Acute Respiratory Syndrome (SARS) CoV-2 was announced by the Chinese Government in January 2020. Due to the rapidly spreading epidemic affecting the whole world, it was declared a pandemic by the World Health Organization.^[1,2] Considering its contagiousness, the quantity of patients infected, and the clinical spectrum it revealed, the ongoing COVID-19 outbreak has had more serious consequences than pandemics such as pandemic influenza and the SARS.^[2] With the declaration of the pandemic, several governments imposed restrictions on access to routine health services to prevent the spread of the virus and to combat the health burden caused by the virus. To reduce crowding and the risk of contamination in hospitals, guidelines have been established in our country with recommendations such as

ABSTRACT

Objective: With the announcement of the pandemic, in the era of countries with lockdown, city quarantines, postponed non-obligatory clinical appointments, and curfew, the importance of the shift of health-care services to virtual environment increased. In this study, it was aimed to interpret the search volumes of "telepsychiatry" and "online therapy" topics, one of the telemental health services, based on Google Trends, to evaluate the health seeking behavior in society and the demand for telemental health services.

Methods: Google Trends is a free to access tool that provides relative volume of the terms that people searched in Google engine. Relative Search Volumes on two topics, Telepsychiatry and Online Counseling, were obtained through Google Trends. Search titles are used as "topics" since they represent a group of terms in any language that Google trends covers.

Results: Relative search results were evaluated as before and after the pandemic, online therapy and telepsychiatry. Comparisons that not normally distributed were assessed through Mann–Whitney U test. The search volume for telepsychiatry and online therapy after the pandemic increased significantly compared to before the pandemic (p<0.05). When search volumes in both before and after the pandemic were compared, interest to online therapy was superior than telepsychiatry in both periods (p<0.05).

Conclusion: It could be said that, in time periods like pandemics and the cases that people cannot reach conventional mental health support, if the issues in legal, ethical, technical, therapeutic relationship, and professionalism could be overcome, the interest in telemental health would increase.

appointment-only patient admission and social distance.^[3] Organizations such as the American College of Surgeons and the Centers for Medicare and Medicaid Services have both expressed concerns about postponing routine healthcare and elective surgeries.^[4,5] To meet the health needs of the communities, the existing health services and policies were modified.^[6,7] There have been promising research and publications that show how telehealth services help public health and reduce transmission.^[7,8] It might be argued that shifting health services to the virtual world was a necessary shift in this period when many countries were implementing lockdowns, cities were under quarantine, non-essential clinical meetings were postponed and curfews were implemented.^[9]

Studies on the rising prevalence of mental health problems such as anxiety, depression, and panic disorder as a result of the mandatory social isolation and stringent quarantine rules during this time, in addition to the uncertainty regarding the prevalence and risks of the contagiousness of COVID-19, have been conducted.^[10,11] In addition, it may be claimed that the pandemic caused negative emotions in people and people who are afraid of being alone socially faced with a "mental health pandemic" given the significant changes in living situations.^[12] The implementation of measures to contain the pandemic, such as guarantine, social isolation, and social distancing, has affected the dynamics of social connections, including between those individuals who provide and receive mental health treatment during the pandemic.^[12-16] The emergence of this pandemic in the digital age has raised the use of "telemental health" services, which include terms such as "online therapy," "online counseling," and "online psychotherapy," where interaction with a qualified psychologist or psychotherapist is provided through remote access. The above-mentioned services include telemedicine applications, telepsychiatry applications, which is a sub-title of telemedicine, and telemental health applications.[13,14,16-20]

The term infodemiology combines the concept of information with epidemiology.^[21] Traditional epidemiological data gathering techniques, such as survey studies and cohort studies, require time to provide information that may be used to improve public health-related policy.[21] Infodemiology's goal is to use the electronic information's distribution and factors that influence it, particularly online or among a population, to inform public health and policy.^[21] Every online search for health-related information leaves a digital footprint on the Internet.^[21,22] There are studies showing that people's search patterns before seeking medical attention for health issues are indicative of their health-seeking practices.^[21-24] An important goal of infodemiology research is to evaluate information and communication models that relate to epidemiological data or are useful for promoting public health and policymaking in this area.^[21] In this approach, we believed that by looking at search data for the "telemental health" service globally and in our country, we might learn more about the demands and needs of the societies for these services. To the best of our knowledge, although telemental health services including telemedicine, online therapy, and online counseling are not legally regulated in Türkiye, certain private organizations, institutes, or single professionals working in the mental health sector are progressively providing telemental health services. This makes it reasonable to presume that individuals in our country and throughout the world are searching online for telemental health services.

This study aims to examine the change in the interest and demand for telemental health services during the pandemic, using the relative search volume (RSV) data obtained through Google TrendsTM using the search topics "telepsychiatry" and "online therapy."

MATERIALS AND METHODS

Google Trends is an open public tool that provides the RSV that people search for in the Google search engine.

Google Trends searches have "search term" and "topic" options. [24] "Search term" results for all keywords containing the selected term, while "topics" refers to a group of terms that share the same concept in any language. ^[21,24] It is scored from 0 to 100, and higher scores indicate more interest.^[24,25] A value of 0 indicates low search volumes that were not included in the results, not that the topic was not searched.^[24] Due to the global impact of the COVID-19 pandemic, "online therapy" and "telepsychiatry" topics, which search for equivalents in different languages, were used instead of "search terms." To minimize the impact of the development of technology on our study, it was thought that it would be more acceptable to base it only on the 4-year period. The date range January 01, 2018 - December 31, 2021 has been selected. To better understand the impact of the pandemic, the date range of January I, 2018 - December 31, 2021, when access to health institutions was limited, was selected and the subject of "telepsychiatry" was put into a second evaluation. The rationale for this was that the demand for telepsychiatry services would decrease over time, as the measures taken against the pandemic would decrease over time. The reason for not making a second call when receiving "online therapy" is that such services were offered outside the hospital and in restricted areas and this service could continue independently of the process. The weekly data from Google Trends were compared under separate headings for "Worldwide" and "Türkiye" before and after March 15, 2020, which might be chosen as the date that is the closest to March 11, 2020, when a pandemic was proclaimed. Weekly RSV values were compared as opposed to daily ones since they were retrieved weekly (daily data is only available if an 8-month timeframe is chosen). The data were obtained by querying the subject headings through Google Trends on June 20, 2022, June 24, 2022, and June 25, 2022.

Although Google Trends contains personal information, it is nevertheless accessible to the general public. Use of this data is permitted without restriction. As with other research using Google Trends, no personal information was used in the study, which was also carried out without ethics committee approval.^[25,26]

Statistical Evaluation

Statistics Package for the Social Sciences (SPSS V22.0) was used to conduct the study's statistical analysis (Armonk, New York, USA). According to topic headings and time periods, the RSV values' median, mean, and standard deviations were calculated. The Kolmogorov–Smirnov test was used to examine whether or not the RSV scores were regularly distributed. The Mann–Whitney U test was utilized to compare groups. The statistical significance level was determined as p<0.05.

Data Access and Reporting

On June 20, 2022, June 24, and June 25, 2022, the data on the search volumes by interest and region over time were downloaded in the form of.csv files from the accessible reporting page after choosing the search topics and period on Google Trends (https://trends.google.com/trends/).

RESULTS

Comparisons of the data obtained when the topics "online therapy" and "telepsychiatry" were searched comparatively and separately in Google Trends and the relative volume averages before and after the pandemic between January 1, 2018, and December 31, 2021, in the "Worldwide" category are given in the (Tables I and 2). Before the pandemic, the relative volume mean of the topic "telepsychiatry" was 28.62±7.91 globally, while it was 32.32±15.31 during the pandemic. No significant difference was observed between pre- and post-pandemic telepsychiatry RSV scores between January I, 2018, and December 31, 2021, worldwide (p=0.356) (Table 1). While the relative volume average of the "online therapy" topic was 35.01 ± 5.80 before the pandemic, it was 64.00 ± 10.24 during the pandemic. During the global pandemic, there was a statistically significant increase in online searches regarding online therapy (p<0.001) (Table 1). When compared before and after the pandemic in Türkiye, searches for "online treatment" subject were identified at a significant rate, similar to the rest of the world (p<0.001) (Table 3). When the RSV values for telepsychiatry were examined between January 01, 2018 and March 31, 2021, a significant difference was found (p<0.001) (Table 4). When the full 4-year period, pre-pandemic, and post-pandemic periods

Table I.	Comparison of Relative Search	Volume in "World" before and after the	pandemic between 01.01.2018 - 31.12.2021
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RSV TYPE	Pre-pandemic	Post-pandemic		
	Mean ± SD/median	Mean ± SD/median	Z	р
RSV (Telepsychiatry)	28.62±7.91/29.00	32.32±15.31/28.50	923	0.356
RSV (Online therapy)	35.01±5.80/35.50	64.00±10.24/62.00	-12.358	0.000*

RSV: Relative Search Volume, SD: Standart deviation. *p<0.0001. RSV comparison of online therapy and telepsychiatry before and after the pandemic was made with the Mann-Whitney U test.

Table 2.	Comparison of	groups in "World"	' according to the	period between	01.01.2018 - 31.12.2021
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Period	RSV (Telepsychiatry)	RSV (Online therapy)			
	Mean ± SD/median	Mean ± SD/median	Z	р	
Pre-pandemic	3.19±0.96/3.00	34.93±5.87/35.50	-13.137	0.000*	
During the pandemic	4.03±4.41/3.00	63.88±10.22/61.00	-11.910	0.000*	
The entire duration	3.57±3.07/3.00	48.01±16.56/42.00	-17.655	0.000*	

RSV: Relative search volume, SD: Standard deviation. *p<0.000.Online therapy and telepsychiatry. RSV comparison with the Mann-Whitney U test.

Table 3.	Comparison of online there	idy RS'	√ values in Turke	y before and after the j	pandemic between 0	1.01.2018 - 31.12.2021
				/		

RSV TYPE	Pre-pandemic (Turkey)	Post-pandemic (Turkey)			
	Mean ± SD/median	Mean ± SD/median	Z	р	
RSV (Online therapy)	8.07±6.51/5.00	32.76±18.09/31.50	-10.640	0.000*	

RSV: Relative search volume, SD: Standard deviation. * p < 0.0001. RSV comparison of online therapy before and after the pandemic was made with the Mann-Whitney U test.

Table 4.	Comparison of telepsychiatry RSV values worldwide between 01.01.2018 and 31.03.2021 before and after the pan-
	demic

RSV TYPE	Pre-pandemic (World)	Post-pandemic (World)			
	Mean ± SD/median	Mean ± SD/median	Z	р	
RSV (telepsychiatry)	31.44±9.16/33.00	41.51±17.73/ 37.00	-3.522	0.000*	

RSV: Relative search volume, SD: Standard deviation. * p<0.0001. Telepsychiatry RSV comparison with the Mann-Whitney U test.

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were studied independently from the telepsychiatry RSV, the RSV of "online therapy" as a topic was significantly higher than the search volume of "telepsychiatry" globally (p<0.001) (Table 2). The amount of telepsychiatry searches conducted in Türkiye throughout the pre- and post-pandemic phases within the time frame we chose could not be observed due to the lack of available data. When the online therapy search volume was compared across Türkiye, the RSV was 8.07 ± 6.51 before the pandemic and 32.76 ± 18.09 during the pandemic. Online therapy search volume was found to be significantly higher during the pandemic in Türkiye compared to before (p<0.001) (Tables 1 and 3).

The search volume for online therapy was significantly higher when compared to the search volume for telepsychiatry throughout the entire period, before and after the pandemic (p<0.001) (Tables 2-4).

DISCUSSION

After March 2020, the start of the pandemic, search volumes indicating interest in "online therapy" and "telepsychiatry" services globally increased. The rise in this activity might be brought on by an unprecedented decrease in access to medical resources and the health workers at risk. ^[3,27] The fact that social isolation and quarantine have been found to be the most effective ways to slow the spread of the COVID-19, as well as the guidance of some states concerning the use of telemedicine applications to remain at home during this process, as well as their attempts to reform or loosen the laws in this area, might be additional factors that have increased interest in the field of telemental health around the globe.[6,27] As another factor explaining the rising interest in telemental health fields offering to fulfill this demand, our study findings are supported by the analysis of the steps taken to prevent the pandemic and the issues that cause individuals to seek mental health services.^[10,11] Given this information, it is understandable why there has been a rising global demand for telehealth services as well as associated "telepsychiatry" and "online therapy" services.

In the area of telepsychiatry, Türkiye lacked sufficient data that allow meaningful comparison. Insufficient data can be interpreted as the interest in telepsychiatry practices in Türkiye is not sufficient. The fact that the level and suitable services are not provided to fulfill the demand of the society or that the society is unaware of these services may be one of the causes of the lack of searches in the field of telepsychiatry. Considering the indicators for the number of individuals using the Internet and households in the "Survey on Information and Communication Technology Usage in Households and by Individuals" (2020), it can be deduced that the society should have access to remote health services such as online therapy and telepsychiatry (for 2020, the households with the Internet access was 90.7%).[28] However, the pandemic has accelerated this process, rendering it inevitable that problems would arise.

These factors can be categorized into three main categories, according to a review: Organizational factors (financing requirement and deployment of appropriate software, training, and workflow integration), technological factors (data privacy and access, data security, internet access and quality, availability of information technology, and high-speed internet), and social factors (the practitioner's license requirement, insurance, and reimbursement policies, as well as who is eligible for them and under what circumstances).^[27] In addition to these obstacles, the belief that mental health-care professionals cannot empathize enough to provide therapeutic alliance through video conferencing; that they would not be able to recognize nonverbal cues; and that the possibility of not paying attention to details during the interview may negatively affect the patient-physician relationship may have limited the service provided in the field of telepsychiatry, preventing the demand and promotion of the field.^[29,30] Although there is little interest in the field of telepsychiatry, the increase in the search data on "online therapy" in Türkiye with the pandemic can be considered as another finding that shows that people are turning to online counseling services.

The findings of our study suggest that throughout the pandemic, both internationally and in our country, there has been a rise in people searching for "online therapy." When the post-pandemic period is regarded to be I year, there is a significant increase in the phrase "telepsychiatry," but when the process is considered to be 2 years, there is no discernible increase. This change in the findings can be explained by the ease of access to psychiatric services, which include pharmacotherapy services, and which can also be obtained from hospitals, during the normalization process. Another reason might be that as the normalization process continues, patients or medical professionals who provide telepsychiatry services prefer face-to-face meetings.

In general, telemental health services are generally practical, readily accessible, and affordable, which offer solutions in rural regions and other places where access to health services is challenging, as well as their ability to maintain social distance, and being able to be used in situations where crowds must be avoided.[30] Considering these advantages, it can be thought that the dissemination of such practices will contribute to public health.

The Google Trends data utilized in this study are dynamic, so even if the same dates are chosen with data acquired at a different time, the RSV may be different. As a result, the results may alter when using data collected at other periods. The following conditions might be regarded as the limitations of this study: Despite comparing search data from across the world and in our country, it was unable to determine how different legal systems and cultural norms in other countries affected people's behavior while seeking health; because Google Trends does not give search data based on population characteristics, it is impossible to evaluate subgroups; since the data are released once a week, comparisons are done using the most recent week rather than the precise date of March 11. Another limitation of the study is the possibility that search results may include terms other than telemental health services.

When the demand for online therapy and telepsychiatry applications is interpreted with Google Trends data, we can interpret this increasing demand, which emerged after the pandemic, as a sign that telepsychiatry applications can take their place in mental health services permanently and may be demanded if the legal, ethical, technical, therapeutic relationship, and professionalism-related problems that are incompatible with the traditional health system are resolved.

Consequently, it is plausible to think that creating future health policies in line with the digital world, as well as arranging the necessary infrastructure and educational services in light of data obtained through infodemiology approaches, would be more useful and faster.

Informed Consent

Retrospective study.

Peer-review

Externally peer-reviewed.

Authorship Contributions

Concept: M.B.G., A.K.; Design: M.B.G., A.K.; Supervision: M.B.G., A.K.; Fundings: M.B.G.; Data: M.B.G., A.K.; Analysis: M.B.G., A.K.; Literature search: M.B.G., A.K.; Writing: M.B.G., A.K.; Critical revision: M.B.G., A.K.

Conflict of Interest

None declared.

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Covid-19 Pandemisinde "Online Terapi" ve "Telepsikiyatri" Konularının Google Trends Verileri Üzerinden Değerlendirilmesi

Amaç: Pandemi ilanıyla birlikte çok sayıda ülkenin kapandığı, şehirlerin karantina altına alındığı, zorunlu olmayan klinik görüşmelerin ertelendiği, sokağa çıkma yasağı olan bu dönemde sağlık hizmetlerinin sanal ortama kaymasının önemi arttı. Bu çalışmada, tele ruh sağlığı hizmetlerinden olan "telepsikiyatri" ve "online terapi" konularının Google Trends üzerinden erişilen arama hacimlerinin yorumlanarak toplumun sağlık arama davranışı ve tele ruh sağlığı hizmetlerine yönelik talebin yorumlanmasını amaçlamaktadır.

Gereç ve Yöntem: Google Trends, insanların Google motorunda aradıkları göreli terim hacmini sağlayan, herkesin erişimine açık bir araçtır. Google Trends aracılığı ile telepsikiyatri (telepsychiatry) ve online terapi (online counselling) başlıkları olan iki konu üzerinde göreli arama hacimleri elde edildi. Arama başlıkları herhangi bir dilde bir grup terimi temsil etmesi sebebi ile konu olarak kullanıldı.

Bulgular: Göreli arama hacimleri pandemi öncesi ve sonrası, online terapi ve telepsikiyatri olamak üzere değerlendirildi. Normal dağılıma uymayan göreli arama hacim karşılaştırmaları Mann-Whitney U testi ile karşılaştırıldı. Pandemi sonrası telepsikiyatri ve online terapiye yönelik arama hacmi pandemi öncesine göre anlamlı düzeyde artmıştır (p<0.05). Hem pandemi öncesi hem pandemi sonrası arama hacimleri karşılaştırıldığında online terapiye yönelik ilginin her iki dönemde telepsikiyatriye göre daha yüksek olduğu görüldü (p<0.05).

Sonuç: Yasal, etik, teknik, teropatik ilişki ve profesyonellik ile ilgili sorunların aşılması halinde pandemi gibi halk sağlığı sorunlarda ve kişilerin geleneksel yöntemlerle ruh sağlığı desteği alamayacağı durumlarda tele ruh sağlığı hizmetlerine olan ilgisinin artabileceği söylenebilir.

Anahtar Sözcükler: Google trends; infodemiyoloji; online terapi; telepsikiyatri.