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SUCCESS STORIES

Heather Hadjistavropoulos Partnerships For Health System Improvement

Sit down, relax, log on. Your therapist will see you now. For those living in rural and remote communities, getting help for mental health problems such as depression, panic, or anxiety can be difficult or impossible. But what if the help we need could come right to our homes?

Dr. Heather Hadjistavropoulos and her team at the University of Regina are working to make this happen through Internet-Cognitive Behaviour Therapy (I-CBT). Using a computer, patients access a therapy website where they use materials such as text or video online. Regular email contact with a live therapist provides encouragement, guidance and direction.

"Offering therapist assisted online therapy is actually the first of its kind in Canada," Hadjistavropoulos says. "We'll be collaborating with groups in Sweden and Australia, both of whom have similar websites and are quite advanced in this area."

She explains that I-CBT has proven itself under research conditions, and is regarded as an evidenced based approach to therapy. The next step is to find out what it will take to have I-CBT offered more widely in Saskatchewan.

To this end, Hadjistavropoulos is working with health professionals from Saskatchewan Health, the University of Saskatchewan and five health regions, including Cypress, Five Hills, Regina Qu'Appelle, Sun Country, and Sunrise. "Research so far shows people do want to use (I-CBT) and they can develop a relationship even over the Internet," Hadjistavropoulos says. "But this is in very controlled studies and specialized units. Will this hold true when you try to put this into broad use by many therapists?"

One of the unknowns is whether I-CBT will be effective with patients that have multiple or more complex mental health issues. Another challenge is to develop training for the therapists a very diverse group that includes everyone from psychologists, social workers, and psychiatrists, to nurses. The research team is developing training sessions on I-CBT, followed by test cases to see how they do.

"These training sessions assume broad background knowledge and build on the skills therapists already have," Hadjistavropoulos says. "Will this be enough to assist therapists in competently using I-CBT?"

The promise of I-CBT is manifold. For people in rural and remote areas, it provides access to professional therapists anywhere in the province. It also provides a channel for training local therapists who are familiar with the culture and environment of their home communities. Hadjistavropoulos and her team hopes their work with I-CBT will inform and enrich provincial policy on how mental health care is delivered in Saskatchewan, and serve as example for other health care providers across the country to emulate.