

THERAPY 2.0

COUNSELLING AND THERAPEUTIC INTERACTIONS WITH DIGITAL NATIVES

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The integration of Information and Communication Technologies (ICT) in counselling and therapy is yet an incomplete process. The only activities pursued up to now in this area have been related in most of the cases to applications of personal computers for emails and internet tools. Counsellors and therapists still rely almost exclusively on traditional formats and interaction with their clients (“the couch”).

While this approach may still lead to satisfactory results with adults, especially older persons, there is a growing danger that the younger generation, the “digital natives”, may not be reached to the full extent. They have a fundamentally different communication behaviour that makes the various Web 2.0 communication tools (Facebook, Twitter, Whatsapp, Skype, etc.) to a daily extension, or complement, of their oral communication. Therefore, any counselling and therapy for the younger population that seeks to be successful should eventually include ICT based activities between the expert and the client/patient.



RAISING AWARENESS FOR ICT POTENTIAL IN COUNSELLING AND THERAPY

The **THERAPY 2.0** project (2016–2018) will raise awareness for the potential of ICT based approaches in therapeutic and counselling processes. It will produce concrete and tangible results that can be incorporated immediately into counselling and therapeutic practice, and support practitioners to make sure that the lack of full visual or verbal communication that occurs over video or email does not negatively affect how the clients/patients and the counsellors/therapists receive the message of the therapy.

THERAPY 2.0 will provide a practical guide to the different ways how technology can be used in therapeutic work. It will give best practice examples that go beyond e-mail and internet chat, video-link and stand-alone software packages, and will include mobile applications for smartphones. In addition, it will discuss vital ethical, theoretical and practical considerations for practitioners that include safety issues.



TOOLS FOR REACHING YOUNG REFUGEES

Such approach is also needed with refugees where with **THERAPY 2.0** tools, counsellors will be able to reach also completely new target groups, i.e. young and / or unaccompanied refugee minors. Most of them, specifically young women, have made traumatic experiences and many of them suffer from post-traumatic stress disorder in various degrees. Their most important communication tools are smartphones. Given the fact that their language levels of the host country language are often still poor, conventional “speech counselling” needs a complementary approach that uses the media where these young people are at home.



THERAPY2.0 AS A CONTRIBUTION TO THE FUTURE OF COUNSELLING AND THERAPY

WOLFGANG EISENREICH Science Initiative Lower Austria

“Youth work can only be efficient if the counsellor is able to understand and speak the language of the young person. If this is not the case, the transfer process is bound to fail.”

PANTELIS BALAOURAS/CONSTANTINOS TSIBANIS

Gunet Akadimaiko Diadiktyo

“Many counsellors and therapists are asking us, as IT experts, how to use effectively online services for communicating with their young clients. Therapy 2.0 provides answers and awareness on this issue.”

EVELYN SCHLENK/RENATE HAHNER

Innovation in Learning Institute at University Erlangen-Nuremberg

“If you want to reach new target groups you have to learn the language they communicate with. Therapy2.0 supports counsellors and therapists in learning the communication language of digital natives.”

REGINA A. SILVA/ARTEMISA ROCHA/PAULO CARVALHO

School of Health-Polytechnic Institute of Porto

“eHealth and telemedicine offer promising solutions, contributing new ways to deliver services that can be used at a distance. Therapy 2.0 will be part of the solution providing new products in counselling and therapy.”

EXPECTED OUTCOME

The most important outputs of the project are:

- • • **THERAPY 2.0** Guidelines that will enable social, pedagogic and psychologic counsellors, advisers and therapists to transfer their face-to-face skills to the online environment, and to deliver counselling or therapy services via technology. They will explain the integration of mobile devices in the counselling and therapeutic process, considering how their technological features support client activities like behaviour assessment and informal mobile learning. Another important aspect will be how to approach the sociocultural levels of “digital natives” and how to support them in the implementation of the results of the therapy / counselling process.



- **THERAPY 2.0** Toolbox as a complement to the Guidelines that will offer a modular range of awareness raising, training and demonstration materials for therapists and counsellors.
- **THE THERAPY 2.0** e-platform will support the delivery of all materials of the project and will support online interactive tools such as forums, blogs, social networking applications and chat rooms, while it will also be combined with the project's website. The online platform will be used both as a means of disseminating the project and as a virtual learning environment.
- **THERAPY 2.0 MOBILE APPLICATIONS** for counselling and therapy processes that provide greater validity since data are collected in the client's / patient's natural environment. The apps will support the delivery of a set of counselling and therapy actions that will be regarded suitable for transfer to mobile devices. They will be used as a virtual information and learning environment as well as a means of disseminating the project.

MULTIDISCIPLINARY PROJECT TEAM

The partnership comprises a multi-disciplinary team of mental health and social counselling organisations, education and pedagogic expert partners as well as ICT and multimedia specialists:

- **MEDIA K GMBH** Bad Mergentheim/Germany (coordinator)
www.media-k.eu
- **FRIEDRICH-ALEXANDER-UNIVERSITÄT ERLANGEN NÜRNBERG**
Innovation in Learning Institute, Germany
www.ili.fau.de
- **INTEGRA Institute for Development of Human Potentials**
Institut za razvoj clovekovih potentialov, Velenje/Slovenia
www.eu-integra.eu
- **SVEUCILISTE U RIJECI, MEDICINSKI FAKULTET** Rijeka/Croatia
www.medri.uniri.hr



- **ICELAND ACADEMY OF THE ARTS** Reykjavik/Iceland
www.lhi.is
- **SCIENCE INITIATIVE LOWER AUSTRIA** Würnitz/Austria
www.wissenschaftsinitiative.at
- **INSTITUTO POLITECNICO DO PORTO** Porto/Portugal
www.ipp.pt
- **GUNET AKADIMAIKO DIADIKTYO** Athens/Greece
www.gunet.gr

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Twitter: [#ecounselling](https://twitter.com/ecounselling)



SONJA BERCKO EISENREICH Integra Institute

“As therapists and counsellors we are constantly faced in daily challenge how to improve our services and to “get closer” to our clients, especially to young people, who are raised with technology in their veins. For them sometimes the “old-fashioned” way of therapy with “red couch” is not enough as communication channels are changing, transforming, evolving into something new. Therefore counselling to client-oriented processes of the 21st century require a fresh, updated approach!”

TANJA FRANČIŠKOVIĆ/MARINA LETICA CREPULJA

Medical Faculty University Rijeka

“Therapy 2.0 is a contribution to the rise of eHealth-tools and services using ICTs that can improve prevention, diagnosis, treatment, monitoring and management.”



KARIN DRDA-KÜHN/HANS-JÜRGEN KÖTTNER media k GmbH

“Therapy2.0 offers a chance to raise awareness about eCounselling for young people. We have to use their communication channels to reach them, but this approach needs training for counsellors and therapists and responsible weighting.”

BJÖRG JÓNA BIRGISDÓTTIR Iceland Academy of the Arts

“Online counselling and therapy is growing rapidly and technologies in counselling have come to stay. Therapy 2.0 will raise awareness among counsellors, psychologists and other specialists and give overview of best practices models and methods that have been useful in the field of eCounselling. Hopefully it will also give individuals better opportunities to face life’s challenges and seek assistance through e-counselling in the future.”

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