**Counselors’ Perceptions of the Effectiveness of Email Counseling for Various Types of People Seeking Assistance**

**Abstract**

Online helplines offer accessible psychological assistance to a wide range of people dealing with intrapersonal or interpersonal difficulties. This includes various platforms, including counseling via email. The characteristics of this distinctive platform include asynchrony, anonymity, and written communication that lacks nonverbal cues. These traits offer certain advantages and opportunities to applicants, but present challenges to counselors trying to get to know their clients.

This article presents an interpretive-critical approach to findings from interviews with counselors who provide assistance via an email helpline, and analysis of their responses to applicants. This reveals counselors’ expectations regarding the effectiveness of this counseling for various types of applicants. The counselors differentiated between clients who are privileged to have the awareness and ability to express themselves in this format, as opposed to “complicated” clients, for whom this format raises doubts and fears for counselors. In their view, applicants who are aware, intelligent, and write in a clear and focused manner help counselors give more precise responses. Moreover, the counselors view them as making an effort, and therefore expect their requests for help to yield successful results. In contrast, “complicated” applicants arouse uncertainty, doubts, and reservations among the counselors, causing them to fear making mistakes.

**Introduction**

The process through which a therapist evaluates the characteristics of a person seeking treatment, and consciously or unconsciously predicts the expected effectiveness of the treatment, involves interpretation and thus is subject to criticism. A question such as who is “worthy of help” is based on assumptions about a desirable situation in which the client is “well known” because this allows them to streamline (and shorten) the treatment by quickly identify applicants’ characteristics and needs.

In various healthcare and therapeutic disciplines, there are differing concerns regarding how knowledge about clients/patients is obtained and how it is used and translated into action. According to a critical approach, knowledge about clients provides the basis for caregivers’ role and establishes their authority. A critical approach strives to understand the professional assumptions and artifacts in the knowledge-acquiring process, to uncover the discipline’s hermeneutic foundations, and to question how knowledge about clients structures the treatment. This is a circular process, in that clear knowledge emerges as a result of the caregivers’ identity and worldview, while also affecting their development. This information is not only used in diagnosing clients; clarification of the problem develops in accordance with the initial information about the client. Moreover, this knowledge affects how therapists act while providing assistance and care to clients.

Treatment effectiveness is primarily determined by the extent to which it achieves its goals. Generally, clients expect their symptoms to be alleviated; but this not all. A current trend in therapeutic fields is the expectation that a beneficial therapist-client relationship will be established, as a goal in itself. In this context, research has looked at how personality traits of both therapists and clients influence the quality of this relationship. One innovative research area focuses on analyzing characteristics of the language used in client-therapist communication. It is postulated that language, which includes not only what people say but also (and especially) how they say it, consciously and, to a large extent unconsciously, affects these relationships. A higher language style, appropriate to the therapeutic context, is associated with higher levels of observer-rated therapist empathy.

There is significant literature from an interpretive-critical approach on methods for getting to know clients in therapeutic fields. However, although therapy provided by phone, video call, online chat, or email (variously referred as e-counseling, e-therapy, cyber-therapy, cyber-counseling, telepsychology, or online therapy) has become increasingly common in recent years, there has not yet, to the best of our knowledge, been research on it from an interpretative-critical approach.

The ethical aspects of online therapy are subject to criticism. Although online therapy is accessible to everyone and allows anonymity, it has been argued that it interferes with assessing clients’ condition, needs, ability to communicate with the therapist, and the appropriateness of online interventions for them; all of which are critically important. Given the significant concerns regarding unclear or erroneous information from online clients, it is essential to understand the characteristics of this type of therapy and the assumptions underlying online communication.

Getting knowledge about clients is a major challenge, especially in email helplines providing emotional first aid services to anonymous applicants. Counselors must identify the applicants’ characteristics and needs through written email messages sent to the helpline’s inbox. Clues about the person seeking help are limited. The language the applicants use provides a unique means for gaining knowledge about them, so the counselor can make a diagnosis and provide practical and empathic assistance.

The current study examined how responders to email helplines get knowledge about the client, and revealed their perceptions regarding the expected effectiveness of counseling for various types of applicants. People serving as online counselors, in particular for helplines, are often volunteers. Therefore, their epistemological assumptions underlying their process for getting knowledge about the applicants are particularly interesting from a social-constructivist perspective. The interpretive-critical approach to studying communication in the fields of healthcare and therapy aims to examine its effectiveness, not from a privileged perspective, but in order to present concerns, such as how it is presented in the media or how language affects decision-making.

The literature review below provides background on the challenges in getting knowledge about clients via email and evaluating the effectiveness of counseling provided this way. The current study and its findings are presented and discussed from an interpretive-critical position, with a focus on the issue of getting knowledge about the clients.

**Online Counseling**

Counseling via telephone was first reported in the 1950s. Since the 1990s, online counseling has been available via the Internet using email, video calls, online chat, and forums. Applicants have the freedom to choose the platform that best meets their individual needs. Online counseling has distinctive goals and characteristics, and therefore special indicators are required to evaluate its quality. Online counseling takes place in a virtual environment where direct visual and auditory information is often absent, nullifying the impact of physical appearance, body language, voice, and intonation. The online counseling space is characterized by isolation, in that both client and therapist are alone, communicating from within their own personal space, using their phone or computer. In this interpersonal communication, meant to be therapeutic, many traits of the other person in the conversation must be imagined.

In a broader sense, online technology has created an arena in which personal identity is structured and revealed. The Internet serves as a social laboratory where individuals create and deconstruct themselves on various networks and information portals, using whatever information they wish, and thus multiple selves can exist in the digital realm. The online space allows for anonymity, which can remove inhibitions and offer greater possibility for expressing personal content. However, because people have limited ability to get an impression of and evaluate their conversational partners in the online space, it may be more difficult for therapists to empathize with and show sensitivity to their clients.

Online counseling is characterized by availability, immediacy, and accessibility. Time, distance, and mobility barriers are broken. It facilitates counseling for people whose mobility is limited for physical reasons (such as disability) or emotional reasons (such as social anxiety). Online counseling can provide a professional response to people from a wide range of social and cultural backgrounds, including anonymous treatment for those who avoid face-to-face treatment due to fear of negative stigma attributed to seeking counseling and treatment, such as in orthodox religious societies.

Within the online counseling arena, mental healthcare helplines have been developed that are operated by volunteers who provide free counseling for anyone who contacts them. Numerous studies testify to their effectiveness and success. Although the volunteers are not expected to make an official diagnosis, and do not have the authority to do so, they must understand the client well enough to provide support and to refer them, if necessary, to professionals in the community for diagnosis and further treatment. Studies conducted among volunteers with these helplines indicate they have a sense of mission, but face overload and burnout, which may be attributed to technological challenges, lack of relevant skills, the number and urgency of referrals, and unclear boundaries.

**Counseling by Email**

Among the various online counseling methods, this study focuses on counseling via email exchanges based solely on written text. This format allows anonymity, which can enhance the feeling of security, reduce inhibitions, increase self-disclosure, and promote openness, all of which have therapeutic value. The sense of control, safety, and emotional security can facilitate the decision to seek counseling without fear of criticism, judgment, and labeling.

One core advantage of email counseling is that the exchanges are asynchronous. This communication method is flexible in that the counselor and patient do not need to be available at the same time. Both can access the messages conveniently, and as many times as needed. The delay in response allows time for reflective processing and precise self-expression. Control over the content and pace may foster a sense of security.

However, it is difficult to convey empathy and warmth through email. Special skills are needed to bridge the distance gap and lack of nonverbal cues. Among the methods of online counseling, email presents the greatest challenge of equivocality, and there is a significant potential for misunderstandings.

**Successful and Effective Psychological Assistance**

In psychological assistance, participants’ emotional lives are involved. There is an expectation that it will change attitudes and/or reduce symptoms for the person seeking help. Its success and efficiency can be assessed from three perspectives: the counselor, the client/patient, or an external observer. It can be evaluated by outputs such as changes in the client, or by processes, such as the creation of meaningful relationships. Indicators of success may be derived according to the therapeutic approach used. For example, according to the psychodynamic approach, results will be assessed according to the relationship. In counseling from a positive psychology approach, success will be assessed by the extent to which clients become aware of their strengths.

Indicators for clients’ evaluation of email counseling include their reports on relief of their symptoms, feeling that their problems were adequately heard, and overall satisfaction. For therapists evaluating online counseling, Roth et al. suggested questions for them to consider: To what extent does online therapy allow you to maintain your professional standards? To what extent does it enable you to provide adequate support to your patients? Are you satisfied with this platform?

Many variables contribute to the success of psychological assistance. These include client traits such as ability to trust, emotional regulation, sensitivity to rejection, determination and perseverance, overcoming resistance to change, willingness to establish a deep relationship with the counselor, and gratitude. Counselor traits affecting success of treatment include the ability express solidarity, harmony, unconditional acceptance and empathy towards the client, to be free from defenses and prejudices, and having the appropriate skills for the therapeutic process.

According to Stommel and Houwen, in email-based counseling, the counselor must be attentive to the content of the case and the client’s feelings and desires, which are expressed explicitly or implicitly in the messages. This must be done from the first email message in which the client describes the problem or question and their concerns, symptoms, and feelings. From this first correspondence, the counselor must evaluate the message content to identify the question being asked and the client’s desires and concerns, in order to make a diagnosis and design the treatment.

The current study asked consultants working via email: (1) how they perceive successful counseling; (2) how they evaluate the likelihood that the counseling process will be successful, based on the email request; and (3) what characterizes their response to email requests in light of what they “know” about the client.

**Research Methods**

**Research Context**

*Akshiva* (“I’m Listening”) was established eight years ago as a helpline that accepts requests for advice and assistance by email on a wide variety of topics, such as security, career, relationships, mental health, emotional distress, relationships, education, and spirituality. Applicants are guaranteed full confidentiality and they do not need to provide any identification. Messages sent to the site are answered with a one-time response by email. The terms of the service provided are detailed in the email form to submit a question. It is stated that the responses are not a substitute for professional advice, if necessary. Applicants are asked if they are willing to have their request for help and the response to it published in the website archive for the public benefit (with any identifying details omitted).

The site is specifically addressed to the *Haredi* (ultra-Orthodox Jewish) population, whose members often avoid seeking psychological treatment due to the social stigma attributed to it. *Akshiva* was established to provide a response to people who wish to anonymously ask questions and receive consultation on personal struggles and hardships, including those that are defined as taboo in their society. The people providing responses to the inquiries sent to this the site are volunteers from the Haredi community who have an educational or therapeutic background. They have also undergone special training about helplines, topics frequently addressed by applicants, and relevant ethical and legal procedures.

**Study Population**

Six volunteer “responders” who give advice through *Akshiva* agreed to participate in this study by replying to a request from the researchers. Traits about them are given in Table 1.

**Table 1: Traits of Study Participants**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Gender** | **Age** | **Sector** | **Education/****Training** | **Years** **with** *Akshiva* | **Areas addressed** | **Main group of applicants helped** |
| Male | 45 | Haredi | Doctor of psychology and educational counselor  | 7 | Education, relationships | Adolescents and young adults, male and female  |
| Female | 45 | Haredi (by choice, later in life) | Master’s degree in educational counseling, parent counselor, and personal trainer | 1 | Parental guidance | Parents of young children and adolescents |
| Female | 39 | Haredi | Diploma in counseling for healthy sexuality  | 8 | Relationships, emotional health, spirituality  | Men and women aged 20-60 |
| Female | 37 | Haredi | Bachelor’s degree in sociology, studies for a master’s degree in communication | 4 | Relationships and occupational guidance | Women aged 30-60 |
| Female | 45 | Haredi | Master’s degree in educational guidance | 8 | Sexuality and consultation in emergency situations | Mainly women and adolescent girls |
| Female | 34 | Haredi | Master’s degree in educational guidance | 8 | Emotional/mental conditions such as depression and anxiety, guidance in education and relationships | Women aged 20-60 |

**Research Tool and Procedure**

The study consisted of a two-stage process. In the first stage, semi-structured interviews, lasting about 90 minutes, were held with each of the six participants. Interviews were conducted and recorded via Zoom software. The interviews dealt with responders’ perceptions of the essence of a successful email consultation and how to evaluate it. They were asked questions such as: What do you see as the desired result of counseling by email? What are the indicators of success and failure in counseling by email? Can you give examples of some success stories of counseling by email? What are the traits of an “ideal client”? The interviews also explored the issue of predicting counseling effectiveness: whether and how the responders evaluate the potential for success based on what is written in the email request for assistance. At the end of the interviews, participants filled out a short demographic questionnaire.

A content analysis of the interview transcripts was conducted to assess perceptions of effective counseling, and to extract the categories they use to predict the expected effectiveness or ineffectiveness of the counseling process for a given case.

In the second stage, the researchers randomly selected 150 inquiries from the *Akshiva* website archive. In a blinded approval process involving three of the responders who participated in the first stage and agreed to be part of the second stage, these inquiries were classified according to the categories found in the first phase of the study. Of these, 87% were clearly classified into categories with full consensus (100%) among the three responders. Among the inquiries for which full agreement was found, 50 inquiries were randomly selected and the researchers conducted a content analysis of these responses. The goal was to answer the third research question: What characterizes responders’ answers to email counseling inquiries, based on their knowledge about the client?

**Results**

The interviews yielded an image of the “ideal client” and categories for getting knowledge about clients. These categories include characteristics of the applicant and their writing. As shown in Figure 1 and the examples given below, the counselors predicted the effectiveness of responding to the case based on knowledge about the applicants, which enabled them to tailor their answers to the individual.

Figure 1: Categories regarding counselors’ perceived effectiveness of and responses to email inquiries



**Assessment of Applicant Characteristics**

Analysis of the interviews revealed four categories pertaining to knowledge about the applicants’ personal traits, and how to structure the counseling process. One category is what is perceived as a potentially effective case with an “ideal client” who has emotional intelligence and self-awareness. The other three categories are cases that are perceived as likely to be ineffective, with clients who have traits of clinical mental illness, complicated emotional situations, or those who do not provide a detailed or authentic description of their case.

*Emotional Intelligence and Self-awareness*

The counselors expect success with emotionally intelligent and self-aware applicants, who they are perceive as being more receptive to advice. “There is a receptive person here who will understand what I mean. I feel that I can give a more in-depth answer, and this ultimately affects the quality of the counseling.” According to the interviewees, when applicants express more self-awareness, they can give a more precise answer, improving the success of the counseling:

“Applicants who are self-aware have the ability to reflect. They can say: it seems that I am like this or that, because I did this or that, and therefore it will be like this or that for me. There are applicants who are not so aware. They write, I have a problem, and what should we do about it? He is not aware of himself or his feelings or what motivates him. To this, of course, I give a much more basic answer. It is possible to achieve a higher level with people who have a deeper level of awareness.”

“I think that the more the applicant is aware and knows himself, that’s what we are there for. When the person comes from a clearer position, the more tailored the response.”

The perception is that the likelihood of success depends on applicants having a high level of self-awareness and emotional intelligence. In other words, applicants receive a response reflecting their ability to express themselves clearly. Analysis of archived inquiries that were classified as belonging to this category indicate that responders expressed a more positive assessment of inquiries that evoked an impression of high self-awareness and intelligence:

**Applicant**: [...] I don’t know if that’s what’s bothering me, but I feel like it is. Because I don’t want to give up on a good man but I also don’t want to give up my heart...

**Response**: Dear applicant, you seem very wise. You should feel comfortable following your heart. I invite you to sit with yourself and [...]

**Applicant**: I often feel really empty, bored, weak, but over the years I have learned to make do with myself. I like the calmness that I have inside, and I recognize my strengths and I do have a lot of inner energy and simple joy. What bothers me is that I don’t have a strong and real connection with anyone in the world [...]

**Responder**: You describe yourself as a person who is boring person to yourself and others, but your question itself is incredibly interesting. You have a rich writing style, an interesting way of thinking, and self-awareness. All these are not characteristics of a boring person at all [...]

*Mental Health*

The interviewees explained that inquiries from applicants with a clinical mental disorder are not appropriate for *Akshiva*, and are directed to professional help. The responders expressed difficulty and fear in dealing with these applicants.

“I think OCD (obsessive compulsive disorder) is very difficult [to deal with], because something there isn’t relaxed, and it goes into circles. Sometimes the response only adds fuel to the fire, because what you told him in the third line doesn’t correlate with what is written in the fourth line... so OCD is a bit difficult. Even if you recognize it, it might be someone on the verge of some kind of mental breakdown. But all the rest...”

This interviewee expressed concerns about dealing with such applicants via email. Her words at the end (“But all the rest…”) indicate that she feels uncomfortable about excluding them from the pool of those receiving her help.

Responders said that even when they consult with other help centers, these types of inquiries are risky:

“A young woman with borderline personality disorder, that was very dangerous indeed. To this day she turns up, and every time I recognize her by her [writing] style. I hope I recognize her. I don’t know if there are times that I don’t recognize her... but it’s really a problem, because what such people need is a connection, so they turn to the help centers. It’s not just us. We asked ARAN [another Israeli organization offering an online psychological first aid helpline] - they also said that this is the problem, people who are on the border. It’s a real problem. So that’s why I learned how important it is to set a limit and develop very serious warning light indicators, and not to cross the limit. Never become a friend to the applicants. Be in the position of saying: I’m here to give you help, but no... I’m not a friend. I did not come to fill this place of connection.”

This shows the responder’s professional perception as in a position that is not intended for making personal contact, and who is concerned about setting boundaries in the online counseling space.

Analysis of archive requests in this category showed that the responders’ answers in these cases focus on referring the applicants for further treatment:

**Applicant**: I have been depressed and anxious for quite a long time due to the death of my mother and my son’s move abroad [...]

**Responder**: Since you said in your question that you are “coping with everything all together,” I highly recommend that you seek emotional therapy that will help you process and heal the pain. I will write a number of addresses that you can contact: public mental healthcare clinics, [names of treatment centers] and other organizations that can help with referrals to qualified therapists [such as...].

**Applicant**: [..]I feel like I have nothing in my life. I don’t care what happens around me. I feel like I have no strength for anything. I’ve been through a difficult life and I can’t break away from the past [...]

**Response**: According to what you wrote, it sounds like you are depressed, and not just “sad” in the sense in which this word is used on a daily basis, but rather, depression of the type described in the *DSM*, which is the definitive book for mental and emotional disorders. Depression causes real suffering, the mind cannot rest, you face difficult thoughts. But there are ways to treat depression! [...] How can you access them? There are medications that you can get through your healthcare fund or through a private psychiatrist. CBT (cognitive behavioral therapy) through the healthcare fund or through a database of therapists [...]

*Emotional Complexity*

Another type that emerged from the interviews included inquiries from people who feel emotionally overwhelmed. The counselors consider them difficult for *Akshiva* to respond to. The responders described them as complicated, negative, or as not taking responsibility.

“People who are very embittered, very pessimistic people. They find it hard to believe they will get anything. They are stuck, discouraged. I take out what is unnecessary, and actually have to give an answer. If that’s the case, then it’s messy and I’m trying to make some order for them and say: ‘I understand. Maybe you wanted to ask this or that. I don’t know.’ It may be that many of them really need treatment, but I’m not there to give therapy. I am there to answer a specific question and try to solve the dilemma and give them some directions on how to move forward. ‘Now you feel stuck, and have some kind of problem.’ The idea of this platform is actually to provide a one-time solution, not to respond multiple times.”

This quote expresses an epistemological assumption that therapy and the solution of a particular dilemma can, and perhaps even need to be, separated.

The responders find it difficult to “deconstruct” what applicants they have identified as emotionally complex are actually asking for:

“[...] very stuck, both personally and in terms of work. I really tried to answer the question, at least four times I started, and I wasn’t able to unravel such a complicated story at all. Her parents live on donations, she was in psychological treatments for 14 years, she worked in an afterschool kindergarten program during most of her adolescence. She studied therapy and advertising and she is also an artist and also a pastry chef, and don’t ask me what else. She wants air and she wants space and she wants to be a moderator for a sexuality group for single women, and she’s afraid of that for several reasons, never mind right now. In short, two-and-a-half very, very complex pages.”

These inquiries were described as long and disorganized, using extreme language:

“A young woman, with a very complicated self-image, all kinds of emotional difficulties, terribly dramatic. She described herself and her life in extremely superlative words. She doesn’t know where to turn and no one understands her. You get a terribly long text with about ten different issues, sometimes revolving around the same axis, but... then it’s challenging to answer it. You say: ‘Wait, I’m not....’ Actually, this platform is better for someone who wants something very specific, and not for someone who is has complicated personal problems, because for that, there are other ways to get help.”

An analysis of such inquiries from the archive revealed that the counselors often feel helpless when responding to them:

**Applicant**: I would like to consult on some issues, I hope it is not long [...] When I moved to a boarding school, I realized on my own that I have severe social anxiety [...] I often feel depressed and lonely and suffocated by life [...] I have sensory sensitivity [... ] I met with a psychologist [...] then the Coronavirus broke out and my work increased, which put me under stress [...] they always say that a person should have some kind of dream but I never had one [...] the pain became chronic [.. .] I would love to get some kind of answer, I don’t even know what I want to ask... sorry for the length.”

**Response**: I read your question again and again. Over and over, I pondered it, trying to figure out what answer would comfort you, help you. Would you like me to simply share your pain? Would you like me to reflect back to you the reality you described in your inquiry? Would you like me to encourage you to seek further treatment? Or tell you to simply relax? Would you like me to show empathy and sympathize with your pain and loneliness? Would you like anything else, anything at all? How can I help and in what way can I make it easier? I am trying to figure out the best way to address your situation and give you the answer that you deserve. I will do my best and hope that you will be able to get even a little comfort from the answer. Before doing anything, stop for a moment and ask yourself [...]”

Analysis of this exchange shows the responder’s sense of helplessness, reflecting that of the applicant. At the end, the responder suggested practical steps towards an apparent solution, perhaps in order to end the correspondence without feeling he offered nothing.

**Applicant**: [...] I stand here and ask: until when? I have been wrestling with this question for two years. Shouldn’t it be better to end this internal conflict in some way? It goes against my inclination, it goes with my inclination, and I don’t know until when. It’s exhausting, it’s frustrating, it’s confusing, and what else?

**Response**: My initial feeling was that I have no words to answer you. Can there be a clear, unequivocal answer for what to do or not to do?! Obviously, I cannot give you an answer to the significant and weighty question of the possibility of divorce. I would not be able to do this even if I knew all the details, and especially when I only have this one letter, which cannot cover all the difficulty and complexity and various aspects. But after all, and despite all that, I will try to write you a few thoughts that occurred to me after reading your letter. I hope and pray that they will help you in some way. But it seems to me that what is most difficult is understanding that a therapist cannot save you or assume responsibility in your place. Someone must take responsibility, and it should always be the person himself, not a therapist or counselor, even if a person needs help from others to get out of the situation.

The responder saying that he is praying to be able to give the “right” answer indicates his deep-seated fear of making a mistake when answering inquiries in this category.

*Inauthentic Inquiries*

The interviewees described a type of inquiry that raised doubts about their authenticity.

“Many times, I can see the applicant’s motive through the question. The person might be writing for no reason, some guy who just feels like writing something and wants to hear a few words from the system, or some bored people just checking out *Akshiva*. You have to be careful. There are all kinds of crooks or bored people sitting on the other side, and you have to take that into account.”

In these cases, the responders said they consulted with the website administrators in order to make a decision. If there is reason to suspect that something is not a “real” case, there are uncertainties about their responsibilities:

“An inquiry came in that caused a real debate as to whether it was real or not. It was worded like some bored person looking for attention and trying to find an interesting story to write. In the end, we decided that too much was at stake to miss the opportunity ... at most, someone would get a laugh and make fun of us. Actually, it turned out to be a naïve girl in a relationship with a man [...]”

Not all the inquiries in this category were saved in the archive. The responders explained that usually they do not reply to inquiries suspected of not being genuine. We asked for examples and explanations.

**Applicant**: I hate God in my heart, I want to kill him, he is just shit.

The responder explained that they did not reply to this because it did not seem that the writer was asking anything that could be given an answer.

**Applicant**: I saw that you answered a question here about two years ago and recommended that people get vaccinated. Now, everyone knows that the Coronavirus was just a flu that was exaggerated, and the vaccines are killing a lot of precious people. What are you saying today?! Of course, you won’t answer this and will avoid it...

The responder explained that they did not respond to this because “It is obvious that the person only wanted to argue, and was not willing to hear any explanations or arguments. There was no purpose in responding. Just as there is a *mitzvah* (commandment) to say something that will be heard, it is also a mitzvah not to say something that won’t be heard.”

The responders who participated in the study said that, based on their “diagnosis” of the applicant’s motives, these are cases in which it is wrong to react, and an answer may even be harmful.

**Assessment of the Writing Style**

The interviews indicate that the responders expect the counseling will be more efficient when the email request is formulated in an articulate, detailed, and focused manner.

*Articulate Formulation*

“I think it’s basic: to receive counseling in writing, you need to be able to express yourself in writing.”

“I really think that stronger a person’s verbal abilities, the better he can express himself in the question and its wording, the more he can be helped.”

Analysis of the inquiries in the archive showed that articulately-worded inquiries received more positive responses:

**Applicant**: I am married to a woman who is amazing in every way, but there is a problem. My wife is […] So far there is no problem, it makes perfect sense. But [...] and there are two problems here: [1.... 2... ] It is quite possible that I am wrong, but the bottom line is that I have a two-part question: [1... 2....]

**Response**: First, I want to thank you for your interesting and honest inquiry. Your writing is clear and a pleasure to read, and conveys your perspective quite well. In addition, it indicates mental and emotional openness, something that will make it easier for you to accept and process the things I will suggest to you [...]

**Applicant**: What is the meaning of life? I find no interest in it. I have a really good life. I’m smart, kind, people like to be around me, I have good parents, I got the work I wanted, I graduated with honors. It seems like I’ve achieved my goals. I have no complaints about life. This is exactly what I want to understand. It doesn’t come from a difficult place in life itself [...]

**Response**: You asked an important question: the meaning of life!!! From your question, its clear wording, the clarity of the question you presented, it can be argued that [...]

In contrast, here is an example of an inarticulately-worded question with multiple spelling errors in the original Hebrew (not reproduced here):

**Applicant**: At our college, first-year students are not allowed to get married, only in the second and third year. So, I am seriously debating whether to leave and go on dates and study in the meantime, or to stay and start dating only in two years when I finish my studies and build myself up, because I have a kind of weak and delicate character. [...] And I forgot to mention that I intend to keep studying. Thank you.

**Response**: I did not understand the reasons that are making you reconsider [...] I would be glad to understand better in order to try to help you.

The responders said they think that for counseling in writing to be successful, the applicants must be able to express themselves clearly and accurately and have good verbal skills; then they can be helped. Unclear phrasing full of spelling errors led the confused counselor to give a short response: “I didn’t understand you.”

*Detailed*

An inquiry that is not described in sufficient detail is viewed as unlikely to be answered successfully. Moreover, some counselors felt antipathy towards applicants who expect them to solve their problems, but don’t put in enough effort on their part:

“It very much depends on the person who wrote the question, that he gave enough details. If a person turning to us gives more details, I can know more. I expect less success with a person who wrote a very short and scanty question.”

“Sometimes you feel something was thrown at you. There was someone who wrote [...] and it was so short and with no details. What do you want us to tell you? In such cases I feel that it is just tossed off: come on, take it, solve my problems.”

Analysis of inquiries from this category in the archive found that the counselors had the difficulty in giving them complete answer:

**Applicant**: I am now in a “crisis” period. I feel that all I do in high school is warm a chair. I’m not learning anything. Can you tell me how to get out of such a situation?

**Response**: Your question is so short, it is difficult to for me to learn enough to try to help by suggesting specific lines of thinking for you.

**Applicant**: [...] I don’t want to, because it’s hard and takes a lot of effort. I feel like I’m cursed in this world, and there’s nothing I can do. This obligation is bad for me. Why do I deserve it?

**Response**: I have to point out that I am missing details such as your age, marital status, social background, education, and more. I will try to draw lines as broad as possible, and I will pray that God will put the right words in my mouth (and my keyboard).

Here, too, the responder was afraid of making a mistake due to lack of knowledge about the applicant, and prayed to give the “right” answer, while informing the applicant about doubts regarding the effectiveness of the counseling.

*Focused and Orderly Logical Process*

A focused inquiry presented following a logical and orderly process was seen as effective:

“But a person who is clear about who he is, what he is, what he wants, and articulates clearly and presents something clear, not some mish-mash. Yes, I think that the more focused it is, the more tailored the answer will be, that is... more successful. So, there is a chance.”

“You can see if there is an orderly direction, or if a person is just shooting off something that crossed his mind. A person who writes his entire life story without filters, covers his entire life on the page, to me this is not an effective inquiry and I do not expect it to succeed.”

Again, an epistemological assumption can be seen linking the ability to clearly articulate oneself with a “respectful” attitude towards the responders (by not just jotting off whatever crossed their mind). Following this, an efficient and successful counseling (in terms of a well-tailored and successful response) are predicted.

Analysis of responses in the archive found that when inquiries are presented in a logical and orderly manner, counselors’ answers are targeted and can contribute to understanding the problem:

**Applicant**: I was happy. Until I got pregnant and the suffering started. It is important for me to say that I really wanted the pregnancy. Before I got married, I loved children. When I think about it now, it see that was because the burden was not on me at all. I would go to my aunt’s house and clean, look after the children. Then suddenly I’m in this place where all the burden is on me. I’m at home with the girl... I’m her mother... It’s hard for me when I’m the one who has to clean. I ask myself, where is the joy? Why is life so difficult? My life is busy and there is no time, and I ask myself what will happen? I’m afraid of the future. I don’t want another child right now. I have excessive anxiety about pregnancy... I want to reach a state where I can use prevention and feel emotionally calm [...] All day long, I miss the time when I was first married, instead of living in the present.

**Response**: In your letter, you mention two time periods/situations that you miss [...]. Where is the joy? I think it is very natural that there are times when it is difficult for you [...] regarding your marital relationship [...] What can be done about the burden? [...] your analysis is beautiful, about the difficulty [...] and what about the next pregnancy? You make it clear that your question is not whether to prevent it, but how to feel whole with this decision [...] there is discord between two parts inside you [...]

The reply to such an orderly and logical request in structured and organized, using strategies from the world of therapy such as framing and re-framing.

*Focused Question*

Responders view applicants who focus on a specific question as having made an effort, and they expect the counseling to be successful:

“It’s very important to me that it is there is a question at the end. Many times, people write about their problems, write about difficult story, and that’s all—deal with it!”

“Applicants who help us and give us some direction about what they need from us, an inquiry that is explained and has a defined question at the end. This is, for me, is a successful inquiry.”

Analysis of archived inquiries in this category found that when the applicants focused on a clear question, they received a positive response:

**Applicant**: My question is which direction to turn when being tested? Should I do what an authority tells me to do (who is also only human)? Or do what I feel inside and go with my personal truth? Is it a sin to follow my truth? And if so, why?

**Response**: Thank you for your question. In a few lines, you skillfully brought up a subject that preoccupies and troubles many people. Also, I read between the lines that your question stems from a sense of caring and a sincere desire to follow your truth, and I give you a lot of credit for that [...]

A clear and focused inquiry not only helps the responders to give precise answers, but also gives the perception having made an effort. These are expected to yield a more successful counseling process. This is in contrast to “complicated” applicants with ambiguous inquiries, which make the responders feel insecure, fearful, and even pray that they won’t make a mistake.

**Discussion**

The range of options for online counseling give applicants the freedom to choose the assistance medium that best meets their needs. “E-mental health is not just about technology, but represents a cultural change in mental healthcare by empowering patients to exercise greater choice and control.” However, the current research found that even when an applicant choses email counseling, responders assess some inquiries via email counseling as not suitable.

Analysis of the interviews uncovered characteristics of inquiries that responders perceive as enabling them to provide an optimal response and leverage their resources. These findings verify and enrich the claim made by Stommel and Houwen (2015) that the success of email therapy can be evaluated according to clients’ description of their concerns, symptoms, and feelings, which can used to direct the therapy and make referrals.

However, the methods for gaining knowledge about online clients can also lead to uncertainties and fears about making a mistake in understanding them. Additionally, there is discourse regarding the ethical challenges of online counseling being anonymous and relatively easy to breach. It is possible that this discourse reinforces ideas about the “ideal client” and leads to responders telling applicants who do not meet these standards “I can’t understand you.” This conflicts with the primary potential advantage of online helplines, which everyone is “entitled” to access.

From the interviews, the following categories emerged for evaluating inquiries and responders’ expectations for their effectiveness.

According to the responders, they are better able to help and provide in-depth answers to questions when applicants are perceived as being self-aware and emotionally intelligent, understanding the circumstances of their own life, aware of the causes and consequences of the difficulties they face, and can express their emotional needs. Requests of this type were seen as providing a solid basis for assistance. Responders expect that such applicants will be able to apply their answer in an optimal way. Email is seen as a suitable platform for them.

In contrast, the responders said that it is difficult to offer help through email to applicants identified as suffering from clinical mental health disorders. They said that applicants characterized by, for example, obsessive compulsive disorder, severe anxiety, or depression, need an in-depth assessment by a professional qualified in the clinical field of mental healthcare, and long-term treatment, not a one-time response. Therefore the email medium is not appropriate for them. In these cases, the responders directed applicants to qualified entities so they could receive professional help.

Responders said they find it difficult to give answers to applicants they perceive as being emotionally complex, pessimistic, or not taking responsibility, those who express high-intensity emotions such as overwhelming emotional pain or extreme anger, are unusually complaining, or exhibit childish behavior. The counselors said that the framework of email consultation, especially if it is intended for one-time correspondence, does not allow them to provide the necessary response to such applicants.

Another category pertained to complicated and confusing inquiries that raised counselors’ doubts as to whether they were genuine and actually needed attention and a professional response. The counselors suspected that some of these came from people who were bored or even harassing them. They were described as requiring energy and professional sensitivity. In such cases, the responders said they often felt conflicted regarding their responsibility, whether the applicant indeed needed help, and how to respond so that the applicant received the correct (and ethical) response it deserves. The responders would consult with others, and did not respond to inquiries suspected of not being genuine.

The study revealed the perception of the “ideal client” who is self-aware and has the capability for clear expression, who invests time in writing a focused inquiry with a clear question (as opposed to pouring out everything that goes through their mind). This helps the responders to be precise in their answers. They expect an efficient process. On the other hand, a “complicated” applicant whose application arouses ambiguity and even doubt, makes responders feel apprehensive, insecure, less motivated to answer, and fearful of making a mistake. As researchers, our interpretive-critical approach makes it possible to characterize the consultants’ positions in a matrix illustrating their approaches to answering inquiries based on their assessment of the client:

|  |  |  |
| --- | --- | --- |
|  | **Wants to respond** | **Doesn’t want to respond** |
| **Able to respond** | High level of emotional intelligence and self-awareness | Emotional complexity |
| **Unable to respond** | Mental health disorders  | Inauthentic |

When the responders identified clients with emotional intelligence and high self-awareness, they expressed a strong desire to respond and capable of doing so. For applicants identified as suffering from mental health disorders, the responders expressed a desire to help, but noted that this platform of one-time consultation by email is not appropriate. Their replies generally gave preliminary assistance and focused on referring the person to an expert. In inquiries that arouse doubt about their authenticity, when it was felt that the inquiry did not come from a genuine desire to receive help, the responders have neither the motivation nor the ability to respond via a one-time email consultation platform. From our critical-interpretive perspective, it seems that the reservations that responders expressed regarding emotionally complex applicants stem from their desire to provide a solution to the problem, while it might be possible to give a response that “only” expresses empathy for the applicant.

In an article titled “Don’t just listen: Tell me what to do!” Hawke (2017) described the challenge of online helplines, where there is pressure and an expectation to solve problems. However, the purpose of counseling is often to point out the complexity of the problem and give it legitimacy, and not to “solve” it. Tyrer pointed out that online counselors are often too preoccupied with trying to solve problems, and neglect the relationship component and its importance in the effectiveness of treatment. Garcia offered a tool for evaluating one-time online counseling sessions, based on the degree of responsiveness to interpersonal and intrapersonal goals both on the informational level and on the emotional level. It seems to us that emotional support and empathy allow applicants to feel understood and hopeful. In contrast, when the counselors respond by saying, “I don’t understand you,” this represents an assumption of there being a “correct” versus “incorrect” understanding of the applicant.

In addition, we found references in the literature to disturbed or complicated clients of online counseling, similar to the members of the groups that the responders in this research said they felt reluctant to answer. Recent studies have addressed attempts to map frequent callers and even develop software for automatic identification and mapping of these populations. It seems that some treat them as legitimate, while others label them as “chronic callers,” implying social assumptions about them. They were described as taxing the helplines’ time and resources, an placing an emotional burden on responders, leading to burnout. Some studies have found that responders view such applicants as manipulative and frustrating, and feel they do not have the skills to deal with them.

Research has indicated that it is indeed possible to provide an appropriate emotional response through helplines to emotionally complex applicants, but responders must be equipped with a psychotherapy-oriented approach and not try to offer a “solution.” We propose that this approach should include more than just psychotherapeutic skills, and must also raise their awareness and challenge the assumptions that arose in the current study, such as privileging applicants who are easy understand. Further, the responders’ motivation and sense of ability to offer an answer was impacted by the fact that they linked applicants’ emotional complexity and ability to express themselves in writing with their perception of the effort applicants devoted to formulating their inquiry.

In brief, it is possible that a process for getting to know applicants could assist responders in providing answers to a wide variety of requests. It was found in the literature that variables pertaining to applicants, particularly personality traits, contribute to the effectiveness of the treatment. However, the current research found that the characteristics of writing, including wording and focus, are also important. Since email inquiries are solely written, it would be possible to provide instructions on the website to applicants for formulating a detailed and question-focused inquiry. This could increase the chances of effectiveness from an early stage, by providing information to applicants and reassurance to responders that their replies will be better adapted to the applicants’ needs, abilities, and challenges (at the very least, as a self-fulfilling prophecy).

At the stage when counselors are first reading the inquiry, we recommend that they accept a certain level of uncertainty as legitimate, along with an awareness of their own position vis-à-vis the inquiry. For this, responders could use the matrix proposed in this article to help them identify their level of desire and perceived ability to respond to each applicant. This may reduce responders’ confusion and emotional burden, while enabling them to give a conscious and ethnical response respond to the applicant.

It is suggested that examining the characteristics of the applicant and inquiry enables responders to assess the potential for effectiveness from diverse perspectives. They can also consider results other than “solving” the problem, such developing caring and empathetic relationships. It is worth noting that the assessment of the desired outputs depends both on the responders’ approach (such as behaviorist versus humanistic) and on the approach of the organization for which they volunteer, since the responders’ attitudes are anchored within a social context. Moreover, it may be appropriate to offer, at the public-systemic level, helplines that are diverse in terms of therapeutic approach. For example, one classification may be solution-oriented lines versus those offering psychotherapeutic assistance.

This study found that in written responses to clients, one tactic that was used in cases perceived as “effective” was expressing positive reinforcement, whereas doubt was often cast in the responses to cases perceived as “ineffective”. Previous studies have proposed assessing the success of the online counseling according to expressions of appreciation from those who receive assistance. We suggest that one possible indicator for predicting the success of online counseling is counselors’ expressions of appreciation to the applicants.

**Research Limitations and Suggestions for Further Research**

As an initial exploratory study, we conducted and analyzed interviews with six responders and analyzed 150 inquiries from the *Akshiva* website. A follow-up study is needed to examine our findings in a more comprehensive and in-depth manner. Such a study would be able to more broadly examine the categories found here and possibly identify additional categories. For example, there may be cases that span more than one category, such as an applicant who likes pulling pranks and has also been diagnosed with a mental disorder. Considering a larger number of responders and inquiries could yield greater accuracy in identifying categories among them. The current study focused on the *Akshiva* platform. The findings should be tested among other platforms with similar and with different characteristics. For example, Campagnola et al. examined factors that hinder and help responders with email helplines and found various organizational factors that influence the responders. It is interesting to note that they, too, identified issues related to responders’ motivation and confidence in responding to inquiries. Counseling through *Akshiva* is adapted to inquiries from the Haredi sector; it is possible that there will be differing perceptions among responders and applicants from other communities.

Since, as mentioned, getting information about clients is one of the major challenges in counseling overall, and especially in online counseling, there should be additional research on this issue in formats other than email helplines. It is possible that responders’ expectation that there will be an orderly, logical, and clear appeal (which some would term an “excellent” inquiry) is particularly typical for email helplines. This position is supported by the research findings of Stommel and Houwen, who compared counseling via email and online chat. They found that in email counseling, there is preference for detailed and clearly presented inquiries from the client, whereas in chat counseling, incomplete presentation of the problem is considered “legitimate.”

Some applicants prefer an asynchronous, anonymous correspondence, while others prefer a synchronous communication. Some prefer—or need—a lengthy process rather than a one-time correspondence. *Akshiva* is not designed for an ongoing therapy process, and inquiries to it are generally answered with a one-time response. The responders do not receive a reply from the applicant, and therefore have no way to assess the extent to which they gave an appropriate response. Follow-up studies could examine indicators such as applicants’ satisfaction, to get more complete answers to the research questions from the applicants’ point of view.

Our conclusion is that the field of online counseling is ripe for additional interpretive-critical studies, which will can reveal the assumptions anchored in social perceptions. This could enable better use of the online space, which is unique in its ability to make appropriate counseling and psychological assistance available to a wide range of applicants, based on their preferences, needs, and complex situations.

We will end by expressing our thanks and appreciation to the research participants, and to all the voluntary counselors on helplines offering psychological assistance.