Covid-19 and Mental Health: The Growing Need of Telecounseling in Indonesia

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Abstract. Covid-19 pandemic has not only threatened public physical health but also mental health. The mental health effects of this pandemic can include anxiety of contamination and death as well as feelings of isolation. Counseling has been proved as an effective method of supporting the physical and psychosocial needs of the individual affected. Technological advancement makes it possible for psychologists and clients to carry out counseling sessions without the needs of physical presence in one place by utilizing various modes of telecommunication. This form of counseling is known as telecounseling. As a relatively new form of counseling in Indonesia, numerous aspects need to be considered in implementing telecounseling. This article aims to explore the considerations taken in conducting telecounseling sessions in Indonesia. Their opportunities and challenges which might not be present in an offline face-to-face counseling will also be discussed. Psychologists need to develop both practical and technical competencies to be able to provide adequate telecounseling services. Suggestions for development are also given to other relevant parties such as psychological service institutions, professional associations, and education providers.

Keywords: counseling; telecounseling; telepsychology

Introduction

Since being declared as a global pandemic situation, millions of positive cases of Covid-19 have been reported (World Health Organization, 2020). The Covid-19 virus can be transmitted through droplets either direct or indirect. Latest studies showed that this virus is also airborne, which means that the virus can adhere to small particles in free air and enter the lungs when someone inhales through their nose or mouth (Shereen, Khan, Kazmi, Bashir, & Siddique, 2020; Prather, Wang, & Schooley, 2020). Given the fact that this virus can spread quickly, the World Health Organization (WHO) has issued health protocols for public to follow. Those protocols include keeping at least 1.5 meter physical distance between people, wearing masks, washing hands regularly with soap, and promoting the Large-Scale Social Restriction (Pembatasan Sosial Berskala Besar/PSBB) policy which requires people to go to school and work from home (Prather et al., 2020).
The changes of habits and routines that have had to occur due to this pandemic indeed have an impact on all aspects of human life, from the economy, education, lifestyle, to social interactions. It is not surprising that this situation also has a significant effect on mental health. Luca and Calabrò (2020) stated that the Covid-19 pandemic is not only a threat to people's physical health but also their psychological well-being. It causes an individual to feel negative emotions, especially anxiety and fear for their survival and safety. Survival here relates to the Covid-19 disease itself as well as to other difficult situations as a result of the pandemic such as losing jobs, getting ‘trapped’ in the house and playing different roles at the same time, dealing with difficult family members, etc. There are changes of lifestyle and habits which cause discomfort. This discomfort makes individuals more vulnerable to stressors which results in inability to use coping strategies to deal with difficulties amid this pandemic.

WHO (2020) reported that there is an increased prevalence of depression and anxiety symptoms due to Covid-19. It was reported from a recent study that 33% of adults in America experienced symptoms of depression and 45% experienced feelings of fear and excessive stress (Mark Orkin, 2020). Another study in the USA also showed that an obsession with infection prevention activities is also experienced by most people (Troyer, Kohn, & Hong, 2020). On the other hand, psychological symptoms such as feelings of anger and boredom due to prolonged quarantine policies also become new problems that have emerged due to this pandemic (Brooks et al., 2020). The same situation also occurs in Indonesia. A study conducted by the Unit Konsultasi Psikologi (UKP) of the Faculty of Psychology, Gadjah Mada University found that 153 clients who accessed their online consultation services came with psychological problems caused by the Covid-19 pandemic. Most of the clients complained about anxiety and depressive symptoms due to fear and worry originating from the widely circulating news about the virulence of this virus. Besides, many also underwent consultations because they felt stressed because of losing their jobs, boredom, and family problems that arose as a result of more frequent interactions between family members due to the PSBB policy enforced (Saptandari, Praptomojati, & Handoyo, 2020).

The rising number of mental health problems will certainly increase the need for mental health services. In this case, both promotive and preventive mental health services are crucial to be provided. Preventive psychological services are usually carried out to reduce risk factors before psychological disorders emerge (WHO, 2002). Meanwhile, promotive services aimed to raise people's awareness of the importance of taking care of their mental health (WHO, 2002) especially in the midst of uncertainty caused by this pandemic. In addition, there are two other types of mental health services that are certainly no less important to still be provided at the time of this pandemic. The first is curative services which are done through giving medication for individuals with certain psychological disorders. The availability of the medication should be guaranteed amid the pandemic. While the second is rehabilitative services in the form
of psychological therapy and counseling to help individuals deal with emotional and social problems that may occur more frequently due to this Covid-19 situation (WHO, 2020).

One of the mental health services that are quite widely accessed by the community is counseling service. Counseling is a process that occurs between client and counselor in which clients are facilitated to make decisions and plan their process of behaving, feeling, and thinking to optimize their well-being (Kabir, 2017). Conventionally, counseling is carried out in face-to-face appointments between psychologists or counselors and clients. However, this pandemic situation poses a new challenge, which is the restriction of conducting face-to-face counseling. The lockdown policies that restrict direct interactions between individuals and the Large-Scale Social Restriction (PSBB) automatically disable clients from coming to see a psychologist. However, at the hospital or Puskesmas (local public health center), counseling services are still provided yet with strict health protocols. Meanwhile, psychologists who practice in a private or work for a private bureaus face difficulties in conducting health screening before setting appointments in counseling rooms. Therefore, many face-to-face counseling services have been shifted to online-based services as an attempt to limit the transmission of Covid-19 (Pillay & Barnes, 2020).

This restriction on face-to-face counseling increases public’s need for online-based counseling. This online-based service allows individuals to get counseling services without having to come to a face-to-face offline counseling with a counselor or psychologist. Technological advances have made this service more feasible. There are several terms to describe this online-based psychological service, for example, telecounseling, online counseling, e-counseling, distance counseling, and virtual counseling. According to Richards and Vigan’o (2012), online-based counseling is the implementation of cyber therapeutic interventions where communication between counselor and client is carried out from different places through electronic communication technologies such as telephones, computers, e-mails, and the internet. This article will use the term telecounseling to refer to psychological counseling services that are carried out when the psychologist and client are not in the same place by utilizing various types of telecommunications modes in their implementation.

Several countries in the world have strived to provide telecounseling services at this time of the pandemic. In China, the government has provided free services since the outbreak was declared a global pandemic in early 2020. The services they provide include online counseling, training, and psychoeducation. The Chinese government has established a special hotline for behavioral cognitive therapy services for individuals with depression, anxiety, and insomnia disorders through the WeChat application. Online mental health services during this pandemic are prioritized for individuals who are at higher risk for exposure to Covid-19, such as doctors who treat Covid-19 positive patients, relatives of patients who are tested positive for Covid-19, police and security officers (Luca & Calabrò, 2020; Liu et al., 2020). Following China, the Paris
government also provides a dedicated hotline service combined with regular video calls with psychologists and psychiatrists for clients with problems related to Covid-19 (Luca & Calabrò, 2020). In Italy, the psychiatric department in each hospital provides consultation services for Covid-19 patients which are carried out online using Whatsapp or FaceTime (Luca & Calabrò, 2020). Meanwhile, the Australian government provides mental health services by telephone so that people living in rural areas with limited internet access can still access these services (Luca & Calabrò, 2020). Finally, in Bangladesh, a government program called “Caring for the mind on mobile phones” is provided free of charge for their citizens who need psychological support amid the Covid-19 pandemic (Iqbal, Jahan, Yesmin, Selim, & Siddique, 2020).

No different from the countries above, the Indonesian government has provided free psychological services for people experiencing psychological problems related to the Covid-19 outbreak. Through the hotline 119 extension 8, people can consult mental health problems that they are experiencing. Also, psychology services for Mental Health or the SEJIWA program have been launched by the Himpunan Psikologi Indonesia (the Indonesian Psychologist Association or Himpsi). This program involves 522 psychologists in 34 provinces throughout Indonesia to provide free online counseling and psychotherapy. In addition to SEJIWA’s online services, Himpsi also provides a free hotline service in every province for anyone who wants to consult by phone with a psychologist in the area where they live (Himpunan Psikologi Indonesia, 2020). Not only national organizations such as Himpsi, but also psychology bureaus managed by several educational institutions have also contributed to providing services for individuals affected by Covid-19 such as the Unit Konsultasi Psikologi (UKP) which is a mental health service unit under the Faculty of Psychology, Gadjah Mada University. UKP provided a free consultation service via Instagram message and email. This service is provided free of charge to anyone who experiences problems related to Covid-19 through consultation via chats with UKP psychologists.

Within these recent years, some private psychology institutions in Indonesia have started providing various online services. One of the pioneers is Pijarpikologi which in 2015 offered free counseling through email. That same year, another organization called Riliv provided an online-based counseling service conducted by licensed psychologists. Since then, the use of online counseling services has become more popular in Indonesia. The number of Riliv users had reached 150 thousand people from 2015 to 2019, and interestingly, 89% of their clients reported having never been to a psychologist before (Setyorini & Zhafira, 2019). Meanwhile, at the same time, 17 thousand people accessed the online consultations provided by Pijarpikologi (Christiyaningsih, 2019). The increase in the number of clients accessing Halodoc services on their mental health application also appears notable. During this Covid-19 pandemic, only within two weeks of being launched, the Halodoc mental health channel encountered an increase in the number of users up to 400% (Annur, 2020).
Following the rise of online-based psychology services in Indonesia, especially as a response to this pandemic situation, telecounseling is still a relatively new form of counseling, both for associations, institutions, psychologists, and clients. In 2013, long before the Covid-19 pandemic, the American Psychological Association (APA) published a telepsychology guide containing nine principal points regarding the application of telecounseling (American Psychological Association, 2013). In 2011, the Australian Psychological Society (APS) published ethical guidelines in the provision of psychological services and products via the internet and communication technology. Besides, the New Zealand Psychologists Board (NZPB) published a guide entitled “The Practice of Telepsychology” (NZBP, 2012) to ensure that telepsychology services are conducted in a standardized manner and taking into account the aspects of benefits, risks, and ethics.

In 2020, in line with the increasing number of positive cases of Covid-19, Himpsi will issue official guidelines regarding the practice of telecounseling in Indonesia. This guide contains rules for all professionals in the field of psychology concerning six main principles in providing psychological services in Indonesia during this pandemic. These principles contain detailed procedures regarding the delivery of psychological services to the general public and specific guidelines for dealing with ODP and PDP clients as well as the Covid-19 protocol that must be carried out if clients and psychologists conduct offline face-to-face sessions (Himpsi, 2020).

However, implementing telecounseling guidelines is not as simple. The rapid transition from conventional face-to-face counseling services to online-based services in a response to this pandemic situation indeed adds complexity. Many things must be considered so that telecounseling services can be provided with quality standards and service ethics.

This article aims to provide an overview of the advantages of telecounseling and recommendations for its management and implementation to minimize potential limitations that may arise in the telecounseling process.

Discussion

Telecounseling has several advantages, especially in aspects that face-to-face counseling does not have. However, there are also a number of potential limitations that create hurdles in the implementation of telecounseling. In the following section, the advantages and relevant practical aspects of telecounseling are presented.

Advantages

Telecounseling provides flexibility for clients to access services that they previously may not have been able to reach (Sussman, 2004). Earlier, counseling was generally performed face-to-face attended by the psychologist and the client. Due to the limited number of licensed psychologists in Indonesia, not all regions have an adequate number of practicing psychologists. Also, not all clients have access to these services, especially those who live in rural areas with limited access to health services. Of course, the presence of telecounseling makes it easier for those who previously could not get mental health services to be able to access it through their
own devices from wherever they live. Individuals who have been afraid to attend face-to-face counseling because of social anxiety or stigmatization are also accommodated by this telecounseling (Lange, Van de Ven & Schrieken, 2003). Besides, through telecounseling, clients can choose the communication platforms according to their needs such as telephone, e-mail, messaging applications, or video calls which have their respective advantages. Written media such as email or messaging applications provide opportunities for psychologists to attach photos, journal articles, and other supporting videos. Meanwhile, telephone communication media and video conferencing can facilitate real-time consultations just like in face-to-face sessions. In telecounseling via telephone, the psychologist and client can only hear each other’s voices, meanwhile video conferencing allows the two to see each other’s faces, expressions, and body language. The advantage obtained from using this media is that all counseling documents can be stored digitally to be rewatched or reviewed with the client’s permission so that the psychologist can evaluate their performance and provide more optimum service.

In addition to the advantages mentioned, there are several other advantages of telecounseling, namely: (1) privacy, in this case privacy can be more preserved because clients do not have to meet other clients in the waiting room like how it is done in face-to-face counseling; (2) efficiency, telecounseling will increase the efficiency of the sessions because clients or psychologists do not need to travel to where the session take place, reduce the possibility of having difficulty on getting to transportation facilities and facing traffic jams that probably will make clients feel anxious if they already have a schedule set up with a psychologist; (3) flexibility, it is relatively easy for psychologists to schedule counseling sessions, especially if there are emergency clients that must be handled right at that time; and (4) accessibility, telecounseling makes the counseling process easier and widely accessible to anyone even when they live in an area where there are no mental health services or for clients with disabilities who may have had limitations in terms of mobility.

Management and Implementation of Telecounseling

Research conducted by Mallen, Vogel, Rochlen, and Day (2005) shows that telecounseling services will continue to develop as it is seen as a convenience in accessing psychological counseling services. Based on the results of this study, it appears that in the future the use of telecounseling will increase. Thus, the aspects of managing and implementing telecounseling need to be discussed more thoroughly so that psychology associations, psychological practice institutions, and psychologists are more prepared to provide telecounseling services.

Psychologist Competence

Psychologist competence is a major aspect that needs to be considered in the practice of telecounseling. Based on the current regulations in Indonesia, a person can become a psychologist if they have graduated with the Professional Psychology degree, which is no longer available and has been superseded with the Professional
Psychology Masters program. They also need to have certified licenses namely *Surat Sebutan Psikolog (SSP)* and *Surat Izin Praktik Psikologi (SIPP)* to be legally conducting psychological interventions. In accomplishing the professional Psychology Masters program to become a psychologist, students are required to undergo professional work practices. Through a series of learning processes, supervision, and examinations, graduate psychologists are expected to have the skills to conduct psychological examinations, counseling, and psychotherapy. However, the material for telecounseling has not been specifically included in the syllabus of the professional psychology training program.

According to NZPB (2012), psychologists can only provide telepsychology, included telecounseling services in the fields of their competence and may not provide online services in fields that they have never proceeded within their face-to-face counseling practice. This means that psychologists need to be aware of their competence before conducting telecounseling. Yet, skills are indeed needed to transform the face-to-face counseling process which has been their area of expertise to the telecounseling settings. For instance, if a psychologist uses a behavioral approach, it is essential to plan how the client can still actively participate in changing themselves. One way to do it is by sending an assignment via e-mail with a security code.

Psychologists’ competence in terms of communication skills and understanding between cultures is also important to take into account in telepsychology (McCord, Bernhard, Walsh, Rosner, & Console, 2020; NZPB, 2012). Telepsychology enables psychologists to meet clients from a wide variety of backgrounds. Thus, psychologists need to have multicultural counseling skills. Fuertes and Ponterotto (2003) defined multicultural counseling competence as the psychologist's ability to integrate various aspects of diversity that may affect the client, the psychologist, and the therapeutic process into the intervention process. This is also related to the risky nature of technology that causes miscommunication and misunderstanding (NZPPB, 2012). The limitations of psychologists in expressing or delivering non-verbal information may lead to inaccurate information. Besides, it may be that the psychologist is not familiar with the physical environment around the client's surroundings, the social interactions that occur there, as well as the habits, ethics, norms, and values of clients who come from different cultures. So, psychologists need to be aware of this to be more careful in making conclusions and implementing interventions. Observation and interview skills are essential to be mastered by psychologists who wish to carry out telecounseling.

All of the foregoing shows the importance of self-awareness and self-evaluation of psychologists regarding their field of service and competence. This awareness and self-evaluation include the competencies they have, the types of cases examined, and the approach used in the counseling process. Psychologists need to understand the risks that may occur in telecounseling if they handle clients who are not up to their competence. So, psychologists need to understand the referral procedure if they get a client who is not in their capability to handle.
In addition to competencies related to basic counseling skills, according to the APA (2013) and APS (2011) guidelines, psychologists need to ensure their technology competence. It is related to the technology used and the potential impact of all technology involved, including clients, supervisors, and other professional personnel. Psychologists need to understand the advantages and potential risks of the technology used. Not only that, psychologists need to understand the client's condition to be able to determine the most appropriate telecounseling medium. This client's condition is related to the various characteristics inherent in the client, such as cognitive abilities, language skills, health status, psychological conditions, cultural background, to socio-economic status (APA, 2013).

Based on the explanation above, it can be concluded that a psychologist needs to ensure that the telecounseling services provided are under their practical and technical competencies to ensure its adequacy. This competence is obtained from education, training, learning outcomes, consultation, supervision, and experience.

**Client Characteristics**

Telecounseling, by its very nature, is not a counseling service that caters to all individuals. There are several characteristics in a client that need to be considered before the person can receive telecounseling services. The American Counseling Association (2005) recommends screening the client's condition and capabilities as part of the intake process. This screening procedure usually assesses the client's age, condition, and background. The client's history, including mental health conditions, is an important aspect that must be explored first. Clients who have a history of mental disorders are less likely to be suitable for telecounseling. Clients who have ideas or attempts to injure themselves and others, and to end their life are not advised to choose telecounseling. With a psychological crisis they experience, they are at higher risk of experiencing problems as a result of poorly controlled counseling settings (for example at home where they have the opportunity to take tools to self-harm) (McCord et al., 2020). In these conditions, of course, psychologists should not simply refuse clients. Psychologists need to provide suitable alternatives for clients to help them deal with problems, for instance by referring clients to the closest psychologist or psychiatrist who can provide face-to-face counseling.

Client skills in terms of communication technology are also aspects that need to be considered before receiving telecounseling services (APA, 2013; Haberstroh, 2009; McCord et al., 2020). Psychologists need to check whether the client has sensory problems or knowledge limitations that prevent them from accessing technology. Not only that, psychologists should also confirm the condition of the client's communication network service. The aforementioned considerations are important in determining the most suitable mode of telecounseling. For example, if the client has adequate communication technology skills, but they are in an area where the internet network is unstable, then e-mail is more suitable than video conferencing.

Related to the matters mentioned above, openness about the client's self-identity is important. To ensure that
psychologists are talking or messaging real clients, it is necessary to verify identity. In telecounseling settings, this is necessary to increase trust (Haberstroh, Duffey, Evans, Gee, & Trepal, 2007). At the beginning of the session, the psychologist can ask the client to show his ID Card or driver’s license. Meanwhile, in a follow-up meeting, the psychologist can ask the client to summarize the previous telecounseling session, or even create a "secret code" that is agreed upon with the client (Haberstroh, 2009).

Ethical, Legal, and Confidentiality Issues

Psychologists, in conducting telecounseling, need to understand the applicable code of ethics. In addition to the general professional code of ethics, psychologists need to pay attention to the code of ethics of online psychological services which naturally have different characteristics from face-to-face psychological services. However, given that telecounseling is a relatively new form of service in Indonesia, there are still no guidelines that specifically regulate this. In this condition, psychologists in Indonesia can refer to the regulations enforced in other countries that have been conducting and developing telecounseling long before Indonesia.

In addition to the code of ethics in implementing the counseling, psychologists need to pay attention to ethics in conducting assessments, especially psychological tests. The legality of the test is still a big issue for the psychology profession in Indonesia. There are still many psychologists in Indonesia who use test kits with unclear legality and do not even have the appropriate psychometric properties. In a telecounseling setting, psychologists should not simply convert tests that are usually conducted on paper and pencil into electronic or online forms. Psychologists must obtain permission from the test publisher if they wish to administer the test online (NZPB, 2012).

Telecounseling services need to put into consideration the legal aspects in their implementation. Telecounseling allows the psychologist to reach clients wherever they are. However, psychologists still need to pay attention to aspects of geographic and jurisdictional boundaries where they are entitled to practice (McCord et al., 2020). Typically, each psychological professional association has rules about who has the right to practice on the territory of its country. For example, the NZPB requires psychologists from abroad to be registered with the NZPB before they can serve clients geographically residing in New Zealand (NZPB, 2012). Thus, verification of identity becomes important to ensure the location of clients. The client needs to be in a country where the psychologist is licensed to practice.

As in face-to-face counseling, telecounseling services need to protect the confidentiality of the client’s personal information. In telecounseling, the risk of data leakage is even greater. Naturally, communication technology is not completely able to be protected from hacking. Psychologists may even experience the risk of losing their device containing client data. Thus, psychologists need to be aware of this vulnerability and be able to minimize the risks. The weakness of this technology also needs to be communicated openly to clients so that clients have the same understanding as psychologists and reach
an agreement to protect their personal information.

Informed Consent
Before receiving telecounseling services, clients need to obtain transparent and detailed information about the services they will get. Information needs to be presented as simple as possible for the client to easily understand it. Format, including the shape and size of the letters as well as spacing, should be chosen based on their level of readability. Procedures for filling out informed consent that ensure that the client reads all the information can also be developed, for example by asking the client to mark the parts they have read. Not only that, technological advances enable administrators to prepare internet-based informed consent by combining written text, audio, and video, even in various languages if needed, and with links to other sources (Gamble, Boyle, & Morris, 2015). This is very important because according to Neilsen and Loranger (2006), only 10% of the text in the Terms and Conditions of a product or service is read by the client. This written information must at least include the form of services, benefits, risks that may occur, as well as alternative services that can be accessed by clients other than Telecounseling (McCord et al., 2020; NZPB, 2012).

Recommendation
Taking into account the various advantages and potential risks that may occur in the implementation of telecounseling, the following are some recommendations suggested by the author for psychologists, psychology institutions or bureaus, professional associations, and psychology educators.

For Psychologists
Formally, most psychologists in Indonesia do not have supervised learning experience and practice to carry out telecounseling. Apart from the fact that Telecounseling has not yet become one of the compulsory learning materials in the Professional Psychology Masters program, training and certification in the field of telecounseling have also not been widely held. For this reason, psychologists in Indonesia need to improve their competence by participating in various trainings on telepsychology. At the same time, psychologists need to keep themselves updated on the latest trend in psychology by studying latest research results related to telepsychology so that clients will receive appropriate, safe, and effective telecounseling services based on the latest literature. Psychologists also need to ensure that there is a process of adequate supervision and feedback from psychologists who have better telepsychology competencies.

For Psychology Institutions or Bureaus
There are several things that psychology institutions need to prepare before undertaking the practice of telecounseling. First of all, psychology institutions need to ensure that the psychologists who work under them have adequate competence to carry out telecounseling, both practical and technical competences. Second, psychology institutions need to prepare standard operating procedures (SOPs). These procedures are very important to ensure that Telecounseling services are carried out properly. The procedures devised should cover the entire Telecounseling process, from initial contact with the client to
termination. Screening, informed consent, and filling procedures that are easy to use but safe also need to be prepared in detail. Psychology institutions need to ensure the security of client personal data as well as security when conducting telecounseling. For example, a psychology institution needs to have a protocol for storing client data, including personal identities, records of telecounseling, and other records in a secure manner such as using a passcode. Not only related to data storage, but psychology institutions also need to have secure data deletion protocols. Besides, even though telecounseling may be carried out by psychologists from any place, institutions need to make strict rules for not allowing psychologists to access client data, open e-mails, or conduct telecounseling through public internet connections.

This standard procedure must include assessment or risk mitigation in the implementation of telecounseling (McCord et al., 2020). Institutions need to have information about psychology bureaus, health centers, hospitals, or other mental health professionals such as psychiatrists and mental health nurses in various regions. If necessary, the agency can collaborate with these local resources. In addition, psychology institutions need to have a response plan in case of emergency problems (emergency planning). In an emergency, for example, when a client wishes to end their life, the client needs to be referred as soon as possible to a mental health professional who can be accessed directly by the client. This emergency plan is also related to the personal data form. Clients need to be asked to include their emergency contact in case there is an emergency. Lastly, psychology institutions need to openly convey the limitations of telecounseling services so that clients understand what cannot be done in telecounseling and if there is an emergency, the client is willing to be referred.

For Professional Associations
In the long term, psychology professional associations need to formulate competency standards for psychologists related to telecounseling. To be able to be being proclaimed as competent in conducting Telecounseling, Himpsi, and other psychology associations under it, such as IPK, APSI, APIO, etc are also required to organize telecounseling training accompanied by an adequate supervisory system.

For Higher Education Providers
Asosiasi Penyelenggara Pendidikan Tinggi Psikologi Indonesia (AP2TPI) as well as the faculties and study programs of Psychology in Indonesia need to include material on telecounseling theory and practice in their curriculum, especially in the curriculum of the Professional Psychology Masters program.

Conclusion
Along with technological advancement, telecounseling is a form of counseling that will continue to develop and be frequently used. Telecounseling has many advantages that face-to-face counseling does not have. In the broad context of Indonesia, with the number of psychologists which are still few and not evenly distributed throughout the country, the presence of telecounseling services can be an alternative to improve people's mental health.

For all the advantages it has, telecounseling is not a counseling service that is free
from potential risks and weaknesses in its implementation. Although there are similarities with the face-to-face counseling process, telecounseling has unique aspects that need more attention. Also, various problems including skills in the use of communication technology, data security, and ethics are still issues that need to be considered and resolved.

Psychologist competence is a fundamental basis in implementing telecounseling. Therefore, psychologists, psychology institutes, professional associations, collectively with higher psychology education providers need to work together to improve the competence of Indonesian psychologists in telecounseling. National standardized guidelines governing the implementation of telecounseling should also be developed. This national standardized guide is needed not only for the emergency of the Covid-19 pandemic, but also to be generally implemented in any situation. Thus, telecounseling services in Indonesia can be employed appropriately, effectively, safely, and ethically.

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