

**WHEN CONSUMERS ASK AND ONLINE THERAPY
RESPONDS. THE UNOBRAVO BUSINESS CASE**

Nadia Olivero and Barbara Del Bosco

Università degli Studi di Milano-Bicocca

WHEN CONSUMERS ASK AND ONLINE THERAPY RESPONDS. THE UNOBRAVO BUSINESS CASE

Nadia Olivero and Barbara Del Bosco
Università degli Studi di Milano-Bicocca

ABSTRACT

The paper investigates the development of a new business model for the delivery of psychological therapeutic services through the web. It explores the business case of Unobravo, which is a successful pioneer in such digital transformation and it is in constant growth. This case is particularly interesting because it represents more domains of innovations at once. We thus explored a number of key themes that concur in a radical transformation of traditional business models in the field. The first central theme we analysed is the digitalization of psychological therapy, which includes the overcoming of traditional requirements for conducting psychotherapy: the importance of spatial therapeutic ‘setting’ and how it can be substituted within online remote communication in accordance with the vast literature on digital therapy. Secondly, we discussed the adaptation to patients demand for online communication and services in line with recent market trends following the Covid pandemic. Our investigation thus discusses the Unobravo business case in the light of an on-going massive transformation that sees the shift of traditional services to online platforms requiring investments in service and human-centred technology design. Another central theme we explored concerns the choices made by Unobravo for the management of psychotherapists as distant workers and the substantial services addressed to them in terms of both training and psychological well-being. Primary and secondary data collection served the aim of providing a full overview of Unobravo business model, explaining the impact of concurrent innovative solutions merged with on-going market and cultural transformations.

Keywords: innovation business model, digital transformation, on-line therapy, service innovation, human-centred technology design.

Introduction

In recent years, also following the lockdown isolation due to the pandemic emergency (Fernández-Álvarez, and Fernández-Álvarez, 2021), there has been the growth of psychological counselling and online therapy as an important alternative to traditional therapy anchored to rigid principles of therapeutic spatial setting. The provision of therapeutic and mental health services by remote tools is not at all new and has been largely discussed in previous literature (e.g. Peterson and Beck; 2003; Dunn; 2012). Since the spread of computer-mediated communication, the strategic role of asynchronous emails has been emphasised for the promotion of self-investigation, fostering personal awareness and self-disclosure thanks to visual anonymity and to the opportunity to reflect on one’s own previous verbalisation (Olivero and Lunt, 2004). However, the lack of nonverbal information has been also highlighted as a major barrier

to therapeutic alliance and effectiveness (Goutham & Maureen, 2011). It is therefore thanks to teleconferencing that therapy began to move massively from the therapeutic setting of face-to-face communication to online communication (Kraus et al., 2010; Barak et al. 2008). From early 2000s to current days, Internet-based psychotherapeutic intervention has been largely adopted for a variety of mental health problems. Meta-analysis results of studies assessing online therapy effectiveness for about 9.800 patients provided strong support for the adoption of online psychological intervention as a legitimate therapeutic activity (Barak et. al 2008).

As a result of what could be defined as a thorough scientific and cultural transformation of traditional therapeutic methods, digital platforms have seen an increase in organised and systematic mental health service providers worldwide. Market research estimates indicate that the global online therapy services market size was worth around USD 9.7 billion in 2023 and is expected to further grow to around USD 69.7 billion by 2032 with a growth rate annually above 24% between 2024 and 2032¹. Among various companies offering mental health digital services, the case of Unobravo, market leader in Italy and currently expanding abroad, stands out for its rapid outstanding growth. The paper examines the case of Unobravo to explore the key aspects of its successful business model with the aim to contribute to the literature on digital business innovation and provide insights on the wider spectrum of implications for both patients and service providers.

Unobravo

Unobravo was officially started in London in 2019 by a young Italian psychologist who, at just 26 years old, after having personally experienced difficulties in accessing psychological support and having offered herself as an online therapist, understood the potential for unfulfilled demand of psychotherapy services accessible to all, overcoming geographical and financial barriers. After a first start, during which the founder Danila De Stefano, with a group of 9 psychologists, only offered services to Italian expats in London, the company rapidly extended its offer to the Italian population. In 2022, just three years later, the number of psychologists working for Unobravo went from 9 to 1500. The company today has a team of 6 thousand psychologists, a professional team of over 250 people, and more than 200 thousand patients (aiming to reach 300 thousand by 2024). Unobravo is rapidly expanding in France and in 2023 inaugurated its Spanish division with the brand name Buencoco. The Unobravo growth potential on a global level also emerges from the recent invitation by the American Psychological Association (APA) to present its innovative services to the American public. Unobravo has been the only European organization to be invited to the TV of the APA's annual conference. The documentary film entitled “Unobravo: Setting new standards for quality mental health” was presented among the

¹<https://www.zionmarketresearch.com/report/online-therapy-services-market>

most successful innovative businesses; this visibility and endowment are likely to help it conquering the American market.

Methodology

For the analysis of Unobravo business model we collected both primary and secondary data. The secondary data included information from popular articles, interviews published online, information reported on the Unobravo website, and 5000 clients online reviews. Primary data, in this preliminary phase, have been collected through two qualitative interviews with a client and a psychotherapist. The use of different types of data and sources is aimed at allowing triangulation, enhancing the validity of the findings (Eisenhardt, 1989).

The business model of Unobravo. Preliminary results

The capability to identify entrepreneurial opportunities is related to the background and experience of the potential entrepreneur (Shane, 2000), including the experience as professional or final user of a product or service (Shah & Tripsas, 2007). In the case of Unobravo, the professional activity of the entrepreneur, who is a psychologist, and her experience as a user of the service of psychological support have allowed her to identify an unsatisfied demand, as well as to develop a business model that offers services aimed at overcoming potential barriers to the access to psychological support.

First, Unobravo is characterized by transparency about the cost of the service and its affordability. The cost of the therapy represents indeed an important obstacle to access to this service by several individuals. Offering this service at lower prices allows potentially to reach these individuals. Another possible barrier may be related to the availability of therapists in the area where potential patients live (for, example, an Italian-speaking therapist in a foreign country). The digitalization of the service offers the opportunity to identify a therapist and interact with him/her regardless of the geographic localization of the patient and the therapist. This enhances the panel of individuals who can access the service, reduces the time and logistic costs needed to meet the therapist, and also offers greater opportunities of choice to customers of Unobravo. The choice of therapist is another possible difficulty for customers/patients, since it implies searching costs and is characterised by high uncertainty. The business model of Unobravo includes the offer of a free service of matching, aimed at helping this choice. The patient is asked to fill in a questionnaire and, based on the answers provided and with the support of an algorithm, he/she is associated with a therapist (even if he/she can decide to choose a different one) and a first session for free is organized.

In designing and offering its service, Unobravo does not highlight the differences concerning the setting of the therapy and its possible implications for its effectiveness; instead, the emphasis is on factors that correspond to potential benefits for the

customers that they may easily perceive (easy and affordable access to the service and support in finding a solution that is proposed as “the most suitable” for the single customer).

At the same time, to scale up her original entrepreneurial initiative, the entrepreneur has rapidly increased the number of psychologists and psychotherapists involved in the project. An essential element of the business model is, in fact, to serve two groups of users. On the one hand, the offer and the marketing communication are aimed at therapy clients and, on the other, at therapists, today not only clinical psychologists but also psychiatrists. Unobravo's profit derives from a percentage of the fee of therapeutic sessions, including mainly individual sessions but more recently also group sessions on vertical themes. Unobravo's algorithm allows the match between specific problems of the potential client and the ideal therapist, based on therapeutic approach and experience. The offer is managed ensuring the quality of the clinical offer. The company invests significantly in recruiting as well as in training therapists. A further central theme to the business model is indeed the strategy aimed at therapists, providing continuous and free training courses as well as numerous services aimed at the mental well-being of therapists; thus revolutionizing the sector and providing real answers to important needs that would otherwise have remained unanswered. The Unobravo business model is transforming the psychological service sector by responding to the needs of both clients and therapists at the same time. A further offering that the company has developed is geared towards companies, thus also reaching the demand for wellbeing services for company staff and promoting their rapid and convenient adoption.

Further data analysis will illustrate in better detail the types and quality of different initiatives, considering their business impact, which, in this case, mostly overlaps with impact on people wellbeing. In March 2022 Unobravo became a Benefit Company, committing itself to work to promote ethical, fair and sustainable work. A related issue that will be analysed concerns the discrepancies and changes that this business model introduces compared to therapeutic protocols, suggestions of psychology scientific literature, and traditional market dynamics associated with consumer decision-making processes.

References

Barak A, Hen L, Boniel-Nissim M, Shapira N. A comprehensive review and a meta-analysis of the effectiveness of internet-based psychotherapeutic interventions. *Inf Technol J*. 2008 Jul 3;26(2-4):109–60. doi: 10.1080/15228830802094429.

Cowpertwait L, Clarke D. Effectiveness of web-based psychological interventions for depression: a meta-analysis. *Int J Ment Health Addiction*. 2013 Jan 18;11(2):247–68. doi: 10.1007/s11469-012-9416-z.

Dunn, K. (2012). A qualitative investigation into the online counselling relationship: To meet or not to meet, that is the question. *Counselling and Psychotherapy Research*, 12(4), 316–326. <https://doi.org/10.1080/14733145.2012.669772>

Ebert DD, van Daele T, Nordgreen T, Karekla M, Compare A, Zarbo C, Brugnera A, Øverland S, Trebbi G, Jensen KL, Kaehlke F, Baumeister H. Internet- and mobile-based psychological interventions: applications, efficacy, and potential for improving mental health. *Eur Psychol*. 2018 May;23(2):167–87. doi: 10.1027/1016-9040/a000318.

Eisenhardt, K. M. (1989). Building theories from case study research. *Academy of Management Review*, 14(4), 532-550.

Kraus, R. (2011). Online counseling: Does it work? Research findings to date. *Online counseling*, 55-63.

Fernández-Álvarez, J., & Fernández-Álvarez, H. (2021). Videoconferencing psychotherapy during the pandemic: Exceptional times with enduring effects? *Frontiers in Psychology*, 12, 589536. <https://doi.org/10.3389/fpsyg.2021.589536>

Goutham, M. M., & Maureen, R. (2011). A survey of online practitioners: Implications for education and practice. *Journal of Technology in Human Services*, 29(2), 133–141. <https://doi.org/10.1080/15228835.2011.595262>

Olivero, N., & Lunt, P. (2004). When the ethic is functional to the method: the case of e-mail qualitative interviews. In *Readings in virtual research ethics: issues and controversies* (pp. 101-113). IGI Global.

Richards D, Richardson T. Computer-based psychological treatments for depression: a systematic review and meta-analysis. *Clin Psychol Rev*. 2012 Jun;32(4):329–42. doi: 10.1016/j.cpr.2012.02.004.

Shah, S. K., & Tripsas, M. (2007). The accidental entrepreneur: The emergent and collective process of user entrepreneurship. *Strategic Entrepreneurship Journal*, 1(1-2), 123-140.

Shane, S. (2000). Prior knowledge and the discovery of entrepreneurial opportunities. *Organization Science*, 11(4), 448-469.