Chronic pain is one of the most common and debilitating conditions facing Veterans. Acceptance and Commitment Therapy (ACT) has established efficacy for treating chronic pain, but has not been rolled-out nationally within VA. To expand access to ACT for chronic pain and address difficulties with mobile intervention engagement, the current study sought to develop an online program guided by an embodied conversational agent (ECA). The primary aim of this study was to gather qualitative feedback from chronic pain providers on the Veteran ACT for Chronic Pain (VACT-CP) website for 1) intervention refinement and 2) assessment of potential benefits, barriers, and concerns. Participants were 10 chronic-pain care providers within VHA (psychologists, psychiatrists, nurses, & MDs) with interest in clinical technology care-integration. Feedback was gathered using a semi-structured “think-aloud” interview protocol while providers interacted with VACT-CP website content. Rapid Assessment Procedures (RAP) were used to code data. Major themes for improvement emerging from interviews included changes to the ECA (picking a gender-neutral voice, less uncanny visuals), use of videos to highlight key concepts, and the creation of recruitment materials for effective in-clinic referrals (e.g., brochures, videos “trailers” of the program). Providers also commented on the importance of social connections via ECA use, the potential for the website to allow “flipped” therapy, and concerns about liability and responsibility when incorporating autonomous clinical technologies into their work. Findings indicate that providers are optimistic about using mobile technologies for chronic-condition management, but have specific professional and institutional concerns that should be addressed early in development.

Keywords: chronic pain, embodied conversational agents, website interventions, technology development