ETHICS CORNER

My Client, My Follower: Multiple Relationships on the Internet

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ne of the more nuanced aspects of the APA Ethics Code (2010) is the section on multiple relationships, which invites us to think critically about the type of relationship we have with a person.

On the Internet, it can be tricky to distinguish what exactly is a multiple role or whether such a relationship has the power to exploit or harm another person or influence our judgment. There are subtle ways in which adding psychotherapy clients as contacts on social media sites can blur the lines of our professional role(s) with them. Here are two examples:

1) Adding clients as contacts or friends allows them to connect and network with the other people in our social network. This means if we have other patients, friends, or family members as part of our connections, our clients can forge connections with those people on our Walls or via direct email. They may have no ill intent, but if we do not enforce online boundaries, we may be surprised to discover the relationships that blossom when we accept such requests.

2) On a site such as LinkedIn, it is common for people to request introductions to people in your network so that they may seek a job at their company. It could threaten confidentiality and boundaries if one of your close friends asks for an introduction to your client so that she can seek employment at his company.

Not connecting to your clients on social media is a quick and easy way to avoid getting into potentially harmful multiple roles with them.

Another interesting digital dilemma is when clinicians have

someone in their social media network contact them for therapy. Some of these people may be loose connections such as a person we met many years ago and added to our network. The APA Ethics Code does not distinguish between online and offline multiple roles but it does require us to consider to impact of entering into such roles.

People with this dilemma may wish to have a chat with the interested client and think through together whether their social proximity could cause problems. It may be worth noting "If we agree to work together clinically, we will need to disconnect from one another on social media, to avoid blurring of boundaries."

Another way a clinician can manage this is to tell the prospective client, "If we work together, it will preclude a friendship or business relationship, and I want to explain why. So why don't you choose what feels best for you? I can refer you to someone else if you'd prefer to keep a social or business connection with me." This takes into account the General Principles of autonomy and self-determination encouraged in the Preamble of the Ethics Code, while also educating potential clients about the boundaries of the psychotherapy relationship.

An especially challenging point of online overlap is when we find that we share space with a client on a personal or professional listserv. Here, we have not added or accepted a request, but just happen to co-exist in community. We may not even know of this overlap for some time if one or either party doesn't frequently post. Participating on listservs with clients may or may not be feasible. You may wish to shift what you share, or come to an agreement with the clients in your practice about how you will both inhabit such online spaces. The literature on working in rural communities (Schank, Helbok, Haldeman, & Gallardo, 2010) offers some applicable approaches to managing such overlap whether the list you share is a professional listsery or a local list for cycling enthusiasts.

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