HOW TO MANAGE BOUNDARIES ON THE INTERNET

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The Internet poses challenges for therapists managing boundaries in professional relationships. Therapists who provide webbased services face an evolving myriad of questions as codified ethical standards lag behind increasingly newer forms of technology. Therapists who do not provide services electronically meet prospective clients who typically obtain online information about therapists before the first face-to-face meeting is scheduled (Zur, 2008). Therapist disclosures in the privacy of a psychotherapy session can become unintended public statements that are only a mouse click away from the client yet far beyond the reach of the therapist's control. Because the Internet is within the public therapist's seemingly private domain. a disclosures can be essentially transformed into public disclosures (Zur, 2010).

Intentionality and Intimacy of Disclosures

Therapist disclosures can be classified by the dimensions of intentionality and intimacy (Doverspike, 2012). The dimension of intimacy refers to the degree to which a disclosure is personal rather than professional. Low intimacy disclosures include therapists' statements about their credentials or office locations, whereas high intimacy disclosures include therapists' statements about their leisure activities (on a personal website), political orientation (on a blog), or even dating preferences (e.g., social networks). The dimension of intentionality refers to the degree to which information is disclosed knowingly and purposefully rather than incidentally, inadvertently, or beyond the control of the therapist. Low intentionality disclosures include incidental information about the therapist (e.g., information contained in articles or books) or information that is beyond the control of the therapist (e.g., information posted by others), whereas *high intentionality* disclosures include therapists' statements posted on their practice websites, professional listservs, or personal blogs. Good risk management favors minimizing high intimacy (personal) disclosures, in contrast to low intimacy (professional) disclosures, regardless of the degree of intentionality involved.

Emails, Website Blogs, and Social Network

Even when using authentication procedures and encryption protocols, therapists who engage in emailing or texting with clients may find such information transferred anywhere clients choose to send it. Think of an email being as public as an old-fashioned postcard. With respect to Internet blogs posted by therapists, anyone (including clients) can usually read the blogs. Most readers are savvy enough to discern the identity behind the screen name when an alias is used. In the world of online networks (e.g., Facebook, LinkedIn), contemporary therapists live in glass houses, and the distinctions between one's private and public lives are more subtle and complex in the light of such technology. As Behnke (2008) observed, "Within the span of seconds, a point and click with a cell-phone camera can render public what would almost certainly have remained private just a short time ago" (p. 74). On social networks, clients can "friend request" their therapists-or search the sites of the therapist's "friends"-and thus gain access to personal information such as relationship status, religious views, or favorite songs (Zur, 2010).

Regardless of whether an invitation is accepted or ignored, the therapist's response itself can have significant implications--both inside and outside the traditional therapy hour. The increased use of online networks has been associated with an increase in the "small world" phenomenon in which people are more closely connected than ever before. The "six degrees of separation" between friends (Milgram, 1967) became 4.74 degrees in 2011. Facebook's data show that there are now only four friend connections between people around the world (Facebook cuts six degrees of separation to four, 2012). Good risk management requires caution when emailing and posting, because such information can become accessible in online locations other than where the therapist intended.

Professional Listservs

Professional listservs can compromise the privacy of therapists' disclosures. As Behnke (2007) cautions, "The vast majority of listservs offer no more confidentiality than one could assume if giving a talk at the local library" (p. 62). Although registration is required to join "invitation only" listservs, the user's name and email address are usually the only requirements. On many listservs, information is rarely checked for accuracy. Many list members never post at all, less than 10% post with any degree of regularity, and there is often no information regarding the remaining 90% on the list (Zur, 2008). Therapists often request "consultations" with seemingly minimal regard for the complexity and dynamics required in genuine professional consultations (Behnke, 2007). Listsery consultants often seem oblivious to the monitoring presence of online "lurkers" electronic communications (Zur. 2011). Technologically savvy clients, as well as those who deceptively join such lists, have access to information about their own treatment as well

as their therapists' treatment of other clients. Even when therapists disguise the details of a case, clients may recognize themselves or someone else they know is in treatment with the therapist (Zur, 2008). Good risk management requires discretion in posting on professional listservs because clients and others can be harmed by unauthorized disclosures revealing their protected health information.

Summary and Recommendations

If you are concerned about better boundary management on the Internet, consider these recommendations. First, assume that everything you post online will be read by your clients or their significant others. As Zur (2010, p. 1) cautions therapists, "Consider anything you post on Facebook (and online in general) to be written on your forehead." In other words, assume that clients have access to your personal emails, private blogs, social networks, and professional listservs. While posting on your personal computer or texting on smartphone, think of the Internet being like the front page of the New York Times. Be cautious about consulting with colleagues through listservs, because information posted listservs may be forwarded by unauthorized individuals to unintended destinations. If you request online consultations, obtain the client's prior authorization, use authentication procedures, and use an online platform with secure encryption (Younggren, 2012). If you provide online consultations, be aware that anyone (including clients) may intercept, carefully read, personalize, and draw conclusions about advice that you provide to other therapists (Zur, 2011). Do not post anything that could be considered critical of a client or another therapist. Never post anything that you would not be able to explain and ethically justify to a group of your most respected colleagues.

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