Practice Matters was created as an educational resource for social workers in Newfoundland and Labrador. It is intended that this resource will generate ethical dialogue and enhance critical thinking on issues that impact social work practice. Practice Matters is provided for general information.

Self-Disclosure - Did I Say too Much?

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In social work, the relationship that exists between practitioner and client has been viewed as the most integral element and distinguishing feature of the profession. Although fundamental, the social worker – client relationship poses a challenge in finding balance between a social workers personal and professional life. Conversations and connections with clients have long caused social workers to wonder how much personal information is appropriate to reveal to clients. Likewise, clients are curious about their social worker, leading to various levels of questioning. Common questions include: "Are you married?" "Do you have children?" "Where do you live?" "Do you drink alcohol?" "Has someone close to you passed away?"

Many social workers are reluctant to disclose personal information to clients because doing so can blur the boundaries of the professional relationship. Consider the dichotomy of self-disclosure as described by Reamer (2011),

> *Clinician self-disclosure can blur boundaries, damage a client's trust, shift the focus of the relationship away from the client, and undermine the therapy. However, handled skillfully, judicious self-disclosure can enhance a clients' sense of reciprocity in the clinical relationship, strengthen the therapeutic alliance, facilitate client trust, contribute to a more collaborative worker-client relationship, provide the client with a powerful role model, demonstrate the universality of human frailty, and normalize the client's challenges* (p.1).

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Self-disclosure in social work practice raises several questions: Should social workers engage in self-disclosure? How will self-disclosure impact my social work practice? How do I manage self-disclosure in my social work practice? Is there a balance?

This edition of *Practice Matters* will consider these questions by defining self-disclosure, discussing the ethics of self-disclosure in practice and present how the internet and social media has collided with self-disclosure and the personal and professional selves of social workers.

Defining Self-Disclosure

Self-disclosure is simply defined as "the revelation of personal rather than professional information about the therapist to the client" (Zur et al, 2009, p. 22). When the exchange of information extends beyond the standard professional information, such as name, credentials, contact information program guidelines, etc, a self-disclosure has occurred. While self-disclosure has typically been understood as personal information, intentionally shared, verbally by a social worker to a client, it can also be viewed in a broader sense to include unintentional and non-verbal disclosures (Zur et al, 2009, p. 22). For example, self-disclosure includes accessible information about the social worker that is available on the internet.

There are five types of self-disclosures: deliberate, unavoidable, accidental, inappropriate and client-initiated. Here, I will review the types of disclosures and consider examples of each.

First, deliberate self-disclosures refer to the intentional disclosure of personal information by the social worker about themselves. This exchange can be a verbal sharing of personal information or a deliberate action, such as placing a family photo in your office.

Second, unavoidable disclosures are basically non-deliberate, harmless and encompass a wide range of possible information that a social worker reveals about themselves. For example, gender, age, a distinctive physical characteristic such as a visible tattoo or pregnancy, style of dress, jewelry such as a wedding ring and hair style are all sources of unavoidable self-disclosures. Non-verbal communication and body language such as a smile or a raised eye brow can also be a form of self-disclosure that can't be controlled. Social workers who practice in rural and remote areas face additional challenges. Zur (2010) concurs, "therapists who practice in small or rural communities…must all contend with extensive self-disclosure and significant transparency of their personal lives simply because many aspects are often displayed in clear view of their clients by virtue of the setting" (p.1).

Third, accidental self-disclosure occurs when there are spontaneous reactions or unplanned encounters outside of the office or agency that may lead to self-disclosure of personal information to

a client. For example, a social worker may meet a client while out with their family at a community event, or encounter a client in a waiting room at a medical clinic.

Fourth, inappropriate self-disclosures are the sharing of information to solely benefit the practitioner. The information shared is unnecessary and can burden the client. According to Zur (2010), one of the most cited examples of inappropriate self-disclosures are when practitioners discuss their own personal problems and hardships with their clients with no clinical rationale or purpose. This type of engagement would be considered unethical and could lead to a review of a social workers professional conduct (p. 2).

Lastly, client-initiated disclosures refer to clients actively seeking and searching out information about a social worker. Zur (2010) explains, “a therapist, in this case, may intentionally or unintentionally and wittingly or unwittingly reveal information about him or herself to clients who are conducting ‘online-searches’ for the specific purpose of gathering information about the therapist. (p. 2)” Information sought by clients in this manner consists of a wide range of personal information including family and friend connections, volunteer activity, religious affiliation, political affiliation, community involvement, legal/court documents, personal photo/video postings and much more. Online disclosures, particularly the use of social media sites such as Facebook, will be discussed further in this paper.

The Ethics of Self-Disclosure

The CASW Code of Ethics (2005) and the Guidelines for Ethical Practice (2005) provide values and principles intended to guide ethical social work practice. A social workers’ ethical responsibility to clients is addressed in value 1: *Respect for the Inherent Dignity and Worth of Persons*, value 3: *Service to Humanity* and value 4: *Integrity in Professional Practice*. By adhering to these values and the accompanying principles, social workers recognize the importance of respect of all persons and place professional service before one’s personal goals.

Self-disclosure occurs in varying practice situations and circumstances whereby its use is appropriate and deemed beneficial within the confines of the social worker-client relationship. Zur (2010) states, “appropriate and clinically driven self-disclosures are carried out for the clinical benefit of the clients” (p.1). However, it is most prudent for social workers to consider the ethical ramifications of self-disclosure, particularly on professional boundaries.

Given the nature of the social worker-client relationship, there is an inherent power imbalance that exists. Professional boundaries are warranted in every social worker-client relationship. According to Peterson (1992) in Dietz & Thompson (2004), boundaries are “the limits that allow for a safe connection based on the client’s needs” (p.2). The CASW Code of Ethics (2005) confirms the importance of professional boundaries in the social worker-client relationship in value 4 - principle 3,

which states, “social workers establish appropriate boundaries in relationships with clients and ensure that the relationship services the needs of clients” (p. 7).

Generally speaking, the act of self-disclosure is not always a boundary violation. When examining self-disclosure in psychotherapy, Zur (2011) differentiates between a boundary crossing and a boundary violation,

> *Appropriate and clinically driven self-disclosures that are carried out for the clinical benefit of the clients and unavoidable (non-harming) self-disclosure that takes place in the community are considered boundary crossings. Inappropriate self-disclosures, such as self-disclosure that is done for the benefit of the therapist, clinically counter-indicated, burdens the client with unnecessary information or creates a role reversal where a client, inappropriately, takes care of the therapist, are considered a boundary violation.* (p. 1).

The social worker has an ethical duty to act in the best interest of the client and is responsible for establishing and maintaining boundaries. Moreover, the social worker is accountable should a boundary violation occur. In support, Newman (2007) states,

> *The boundary framework places upon you both an obligation and a responsibility. You must know what conduct is expected of you by your employer, your regulatory authority, and by any pertinent superseding legislation. And you, the professional, are solely responsible for maintaining that safe connection regardless of who is pushing the boundary* (p. 9).

Considering this ethical duty and professional responsibility, how does a social worker maintain boundaries and prevent a violation from occurring? If the dynamic has shifted within the social worker-client relationship and you begin to feel uncomfortable that perhaps a boundary has been crossed or violated, Newman (2007) poses the following self-reflection questions:

- Whose needs are being met? Yours or the clients?
- Have you been clear with your client and defined the service parameters and your role?
- Do you make your client feel special?
- Do you enter into self-disclosure?
- Do you develop friendships with clients?
- Do you give your home number, email address, or include your clients as “friends” on Facebook?

- Does your action contravene any law, Act, professional standard, or organizational policy?
- Can you explain why you took a particular course of action? Would a reasonable person in your profession take the same or similar course of action if faced with the same dilemma? (p. 10).

In addition to reflecting on the client situation that has lead to a possible boundary crossing or violation, the following list of strategies can help to strengthen and maintain the ethical integrity of your social work practice.

- Consultation –Consult with your supervisor, a colleague, a social worker in another organization or your professional association. Discussing the dilemma with another professional will help to determine the parameters of the client relationship.
- Communication – Open communication with the client is critical. Discussing the nature of the client relationship will identify any potential conflict of interest and prevent any problems from developing. Talk to the client about goals for service, your role as social worker; identify services that can and cannot be provided, informed consent and confidentiality.
- Documentation – Maintain a current and accurate record. Document the steps taken to address your identified concerns with the client relationship. Document the steps taken to assist the client to obtain their goals.
- Consult the CASW Code of Ethics (2005) – Maintain your practice in keeping with the Code of Ethics. An excerpt of value 4: Integrity in Professional Practice states, “Social workers strive for impartiality in their professional practice…” and “It is the responsibility of social workers to establish the tenor of their professional relationship with clients, and others to whom they have a professional duty, and to maintain professional boundaries” (p. 6).

Online Disclosures

The Internet is a tool that is rapidly changing the common landscape of social work practice. With a plethora of information available at the click of mouse, online disclosures have been propelled to the forefront of every social workers attention. Essentially, significant amounts of information once considered private or personal, is now available in the public domain and easily accessible to clients. Moreover, clients can access personal information about a social worker without a practitioner’s awareness of the disclosure. In Zur (2009), Behnke (2008) notes, “there is no longer a clear line between the personal or private domain and the professional domain...In the space of a few years, the realm of what is private has receded significantly with a corresponding expansion in the domain of

what is public" (p.23). Recognizing this shift, coined "the Google Factor", it is important that social workers acknowledge the Google Factor and consider the implications on practice.

Online disclosures can be intentional or unintentional and includes a wide range of information, such as, a listing on your organization's staff directory, your personal telephone number, address and map of your house, any mentioning of you in a newspaper or magazine article, a blog post you've written or photos and video of you on vacation with your family.

The NLASW Standards for Technology Use in Social Work Practice (2012) aims to provide guidance to social workers in the "digital age". These standards observe that "technology use will continue to grow and expand in social work practice, and with this use comes unique opportunities and challenges. It is therefore necessary that social workers have the skills, knowledge and expertise to incorporate technology into ethical practice" (p. 4). Recognizing the incorporation of the internet and social media in social work practice, Standard 7 advises, "social workers consider issues relating to conflicts of interest, dual and multiple relationships and boundaries as it pertains to the use of technology in practice" (p. 10). Given the vast amount of information readily available online, practitioners should use their skills and knowledge to assess their own level of online transparency. In keeping with the standards, it's imperative and ethically responsible to know what information about you is available online.

To assess your own level of online transparency, the following are a few helpful tips:

- Assume that **everything** you post online, including blog posts, personal web pages, social networks (Facebook, Twitter, LinkedIn, etc) may be viewed by a client. (Zur, 2009, Zur, 2010).
- Google search yourself! Use different combinations of your name. For example, "Jane Smith" "Smith, Jane, MSW" "J. Smith". (Zur, 2009, Zur, 2010)
- Enter your telephone number in Google search engine or use another search engine to determine if such information as your home address or home telephone number is available. (Zur, 2009, Zur, 2010).
- If you find private information about yourself that you do not want to be public, or you find incorrect/misinformation, determine the source of the posting and take steps to have the information removed or corrected. (Zur, 2009, Zur, 2010).
- Review the privacy settings on your Facebook, MySpace, Twitter, LinkedIn accounts. You may determine that you need to change your settings to control who can access your information.

- Review the content of your Facebook, MySpace or Twitter account. Keeping in mind the following reflection: Does my personal online presence conflict with how I portray my professional self?

Conclusion

Self-disclosure poses a prominent challenge in finding a balance between a social workers' personal and professional life. The significance of the social worker-client relationship as the cornerstone of the profession requires social workers to diligently preserve professional boundaries. Social workers are reminded to exercise critical thinking and professional judgment when engaging in self-disclosure with clients. Social workers, who engage in self-disclosure, are urged to do so appropriately and for the clinical benefit of the client. Self-disclosure can occur in a variety of forms, including the Google Factor. Social workers need to embrace ethical responsibility by using their professional knowledge, skills and abilities to assess the use of self-disclosure in their individual practice. Finally, the CASW Code of Ethics (2005), the CASW Guidelines for Ethical Practice (2005) and the NLASW Standards for Technology Use in Social Work Practice (2012) will guide social workers to an ethically sound practice.

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