

APA GUIDELINES for the Optimal Use of Social Media in Professional Psychological Practice

APA COMMITTEE ON PROFESSIONAL PRACTICE AND STANDARDS

APPROVED BY APA COUNCIL OF REPRESENTATIVES
OCTOBER 2021



**AMERICAN
PSYCHOLOGICAL
ASSOCIATION**



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APA COPPS WG SMG Contributors

Andrea Barnes, JD, PhD
COPPS

Robin M. Deutsch, PhD, ABPP
Former COPPS

Scott J. Hunter, PhD
Former COPPS

Timothy P. Melchert, PhD
Work Group Chair

Michael E. Tansy, PhD, ABPP
COPPS

Femina P. Varghese, PhD
COPPS

APA Staff Contributors

Deborah C. Baker, JD
APA Director of Legal and Regulatory Policy

Mary G. Hardiman, MS
Director of Board Operations

TABLE OF CONTENTS

Introduction	3
The Guidelines	7
Importance and Relevance of Social Media	8
Ethical and Professional Issues	10
Education, Training, and Professional Development Issues	15
References	17

INTRODUCTION

Social media have become well established methods of communication for both personal and professional purposes. Many healthcare organizations and academic institutions now rely on social media to support their organizational goals, and some have implemented policies that govern employee, consultant, and trainee use of these media when engaged in professional activities. Many of these policies offer general guidelines for using social media when carrying out professional responsibilities but may not address specific situations commonly encountered by psychologists. In addition, few organizations have developed guidelines for employee use of social media outside of work (although there are important exceptions, including The New York Times and The Wall Street Journal; Stewart, 2017). Psychologists who work in private practice or for organizations that have not created their own policies also may have no policies or guidelines of any kind regarding the use of social media. Given the many benefits as well as the potential challenges and risks presented, guidance regarding the optimal use of social media by psychologists is needed.

The benefits of using social media and the internet to communicate with the public about physical and behavioral health issues can hardly be overstated. In 2019, an estimated 90% of the North American population had used the internet (Pew Research Center, 2019), and results from the Pew Internet and American Life Project indicate that eight in 10 internet users went online to obtain health information, making it the third most popular online activity among those included in the survey (Pew Research Center, 2014). Leading government agencies as well as health service providers are using social media to report on health issues and trends. The U.S. Centers for Disease Control (CDC) use social media to provide access to credible, science-based health information, reach new audiences, and build a communication infrastructure based on open information exchange. The Substance Abuse and Mental Health Services Administration (SAMHSA) has launched a social media program (“Connect with SAMHSA”) which uses social media tools such as Facebook, Twitter, the SAMHSA blog, and YouTube to share information about their behavioral health, substance abuse and mental illness resources, public education campaigns, and advocacy programs. In 2015, the U.S. Food and Drug Administration (FDA) began reviewing the growing number of mobile health applications (also known as *mHealth*) as digital health companies attempted to meet the growing demand for more sophisticated medical and public health applications that rely on mobile digital devices. The FDA has now approved hundreds of such products (FDA, 2018). The American Psychological Association (APA) uses social media to share research findings, psychology news, and other information with its members, policymakers, and the general public. Psychologists have also been increasingly active in their use of social media to communicate and educate on psychological topics, advance public health and well-being,

and optimize professional practice.

To take advantage of the new opportunities afforded by social media, many organizations employing psychologists encourage them to interact with the public using Facebook pages, Twitter accounts, Instagram, and other social media tools. Psychologists working in private practice often use social media in similar ways. However, there are a variety of risks and challenges associated with leveraging the power of social media. For example, the personal use of social media for communicating with friends, relatives, and social groups needs to be carefully distinguished from the professional use of social media because the responsibilities and risks incurred as a result of one's professional role as a psychologist are very different from those assumed by private citizens interacting on a social basis. It is also important to consider how clients, other professionals, public officials, and citizens in general view psychologists' use of social media. Despite the efforts psychologists might employ to distinguish between personal and professional uses of social media, internet users may not recognize those same distinctions nor interpret them in the manner intended.

It is critically important to recognize that the use of social media involves public communication that is normally quite distinct in nature and purpose from communication with patients and clients receiving health care and other professional psychology services. The delivery of health services is conducted through private, professional relationships that are legally and professionally regulated by a range of requirements involving confidentiality and the security of protected health information (e.g., see the Health Information Technology for Economic and Clinical Health [HITECH] Act, part of the American Recovery and Reinvestment Act of 2009; Health Insurance Portability and Accountability Act of 1996 [HIPAA, United States, 2004]; and APA Guidelines for the Practice of Telepsychology [APA, 2013]). Failing to differentiate professional communication within the context of health service delivery from public communication through social media can have significant consequences for both health care providers and their clients.

Psychologists seeking professional guidance on these issues turn to resources such as the APA "Ethical Principles and Psychologist's Code of Conduct" (hereafter referred to as the Ethics Code; APA, 2010), licensing laws, professional guidelines, and workplace policies. With the advent of social media, however, psychologists must address familiar ethical and professional issues (e.g., confidentiality, self-representation, advertising, making public statements supported by research, and dual relationships, among others) in an entirely new and constantly changing communications technology environment. The Association of State and Provincial Psychology Boards (ASPPB) has developed a resource on appropriate social media use by psychologists as guidance for its member boards (ASPPB, Social Media Task Force, 2020). Workplace policies tend to address professional aspects of social media use related to managing risk for the workplace. Few policies or guidelines are available, however, to help psychologists use social media to build their professional practice or increase their visibility or promote and optimize health service delivery, research, education, and advocacy while also managing the multiple roles and responsibilities that psychologists have with their clients, their profession, and the public at large. The guidelines described below are designed to educate psychologists

and provide a framework for the optimal use of social media in professional psychological practice.

Definitions

The World Wide Web (WWW) has evolved dramatically over recent decades, and defining "social media" precisely has been challenging. Prior to the development of Web 2.0 in the late 1990s and early 2000s, many static websites were created to convey content similarly to the way traditional print media conveys content in a unidirectional manner from author to reader (Cormode & Krishnamurthy, 2008). With the emergence of Web 2.0, however, technologies became available that allowed users to contribute to website content by commenting on published materials or otherwise participating in online discussions. These newer technologies, Facebook and Twitter being among the best known, are generally now referred to as "social media" (Obar & Wildman, 2015).

Some published definitions of social media are broader and include technologies that allow users to create and share content (e.g., by publishing webpages) as well as applications that allow users to actively participate in social networking through Facebook or Twitter (e.g., Oxford Dictionaries, 2018, define "social media" as "Websites and applications that enable users to create and share content or to participate in social networking"). Other definitions only emphasize social networking (e.g., Merriam-Webster, 2018, defined "social media" as "forms of electronic communication [such as websites for social networking and microblogging] through which users create online communities to share information, ideas, personal messages, and other content [such as videos]"). At the time of this writing, some of the most popular types of social media platforms include social networking sites such as Facebook, microblogging sites such as Twitter, content sharing platforms such as YouTube, blog publishing media (e.g., Blogger), open-source content management systems (e.g., WordPress), and livestreaming and livecasting programs (e.g., Facebook Live, Livestream, Periscope, YouTube livestreaming).

Electronic mailing lists or *listservs* have become a common means for professionals to communicate and network with colleagues. Listservs are usually not accessible to the public and are often intended to remain confidential among the listserv members, and consequently some experts do not consider them to be forms of social media. Regardless of the definitional issue, psychologists are aware that confidential listserv use should not be assumed, listservs are not HIPAA Privacy Rule compliant, and the membership on listservs may be quite large and difficult to ascertain. Although listservs do not provide ready public access in the same manner as many social media platforms, they also do not provide the security and confidentiality required when providing health services. Alternative platforms (also referred to as private social media networks, private online communities, and online networking services) do provide HIPAA-compliant communication for confidential discussions of clinical cases and other professional issues among a clearly identified group of colleagues (e.g., Doximity, Sermo). Although listservs may not fall clearly within common definitions of social media, psychologists are mindful that the limits of listserv security and confidentiality result in them sharing some similarities with public social media tools. Therefore, some of the guidelines discussed below also apply to psychologists' use of listservs.

Professional psychology practice encompasses a wide range of services across health service, educational, forensic, industrial-organizational, consulting psychology, and other settings. Most of the guidelines below are applicable for all psychologists, although some of them specifically address issues related to working with patients, clients, and students and thus will not be applicable to psychologists working in some research, policy, or other areas.

The guidelines discussed below are focused on psychologists' use of online social networking tools, including all the platforms discussed above with the possible exception of listservs (owing to the accessibility of listservs being limited to a specific list of members). Online communication technologies obviously continue to evolve, and sometimes very quickly, which also highlights the need to keep current and be thoughtful when considering the opportunities and risks they present.

Purpose of Guidelines and Guidelines Terminology

These guidelines are designed to educate psychologists and provide a framework for making decisions regarding optimal social media use in professional psychological practice. They were developed as a companion document to the APA Guidelines for the Practice of Telepsychology (APA, 2013), which serve to educate and guide psychologists on aspects of health service provision using telecommunications technology, often referred to as *telepsychology*. Health services offered through telepsychology occur in a very different context than social media which are, by definition, accessible to the public. Therefore, efforts have been made throughout this document to distinguish the optimal use of social media by psychologists from the practice of telepsychology.

Guidelines are statements that suggest or recommend specific professional behavior, endeavors, or conduct for psychologists. They differ from standards, which are mandatory and may be accompanied by an enforcement mechanism. Guidelines, on the other hand, are aspirational in intent. They are intended to facilitate the continued systematic development of the profession and to help facilitate a high level of practice by psychologists. Guidelines are not intended to be mandatory or exhaustive and may not be applicable to every professional situation. They also are not definitive and are not intended to take precedence over the judgment of psychologists (APA, 2015).

The guidelines described below are intended to provide a general framework for psychologists to make full and appropriate use of social media in their professional practice. Such use is, of course, always informed by the APA Ethics Code and legal and regulatory requirements. Ethical standards for psychologists' use of social media and all their work-related conduct require a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems (APA, 2010). Within these guidelines, more directive language is used when a particular guideline is based specifically on mandatory provisions of the Ethics Code or law. However, guidelines are not intended to be

enforceable rules but rather to help psychologists identify ways that the enforceable rules, such as the Ethics Code and legal and regulatory requirements, might be applied appropriately.

Interaction With State and Federal Laws

A variety of specific state and federal laws and regulations govern the practice of professional psychology with respect to social media. To the extent possible, this document attempts to provide guidelines that are consistent with those laws and regulations. In the event of a conflict between these guidelines and any state or federal law or regulation, the law or regulation in question supersedes these guidelines. It is anticipated that psychologists will use their education, skills, and training to identify the relevant issues and attempt to resolve conflicts in a way that conforms to lawful and ethical practice. Psychologists are aware that they should consult a qualified attorney when particularly difficult questions or concerns arise regarding usage of social media and professional practice.

Expiration

These guidelines are scheduled to expire 10 years from [insert the date of adoption by APA Council of Representatives]. After this date, users are encouraged to contact the APA Practice Directorate to determine whether this document remains in effect.

Guidelines for the Optimal Use of Social Media in Professional Psychological Practice

THE GUIDELINES

Overview of the Guidelines

IMPORTANCE AND RELEVANCE OF SOCIAL MEDIA

- Guideline 1.1: Psychologists are aware that social media can be highly useful for improving public access to information about behavioral health, psychological services, and the integration of behavioral health within primary, secondary, and tertiary health care.
- Guideline 1.2: Psychologists are mindful of social media's growing importance as a tool for communicating and engaging with interested groups of clients, students, peers, and other stakeholders around particular health issues, thereby adding value to health services, research, and education.

ETHICAL AND PROFESSIONAL ISSUES

- Guideline 2.1: Psychologists are mindful of the public nature of social media and that their privacy and confidentiality often are not protected nor expected on social media.
- Guideline 2.2: Psychologists are mindful of ethical and legal obligations to maintain client privacy and confidentiality at all times.
- Guideline 2.3: Psychologists consider the risks and implications of using social media and online searches to obtain information about their clients, students, trainees, consultees, and others with whom they work on a professional basis.
- Guideline 2.4: Psychologists consider the need to avoid contact with their current or past clients on social media, recognizing that it may blur boundaries of the professional relationship.
- Guideline 2.5: Psychologists are aware of the benefits of establishing a policy regarding their participation in social media and discussing this policy and their use of social media as part of the informed consent process with clients.

- Guideline 2.6: Psychologists are aware that social media provide many opportunities for investigating important research questions but are mindful of the need to guard against the misuse of research involving social media.
- Guideline 2.7: Psychologists strive to maintain accurate and truthful statements on social media about their own practice, colleagues, the profession of psychology, and other issues and give special attention to the scientific support and empirical basis for statements made and the limitations of available evidence regarding particular topics.

EDUCATION, TRAINING, AND PROFESSIONAL DEVELOPMENT ISSUES

- Guideline 3.1: Psychologists are mindful of the need to stay current regarding the benefits and limitations of social media technologies as they evolve and the ethical and professional implications of using these technologies.
- Guideline 3.2: Psychologists are aware of the need to educate and train students and staff under their supervision in the ethical and professional use of social media appropriate to their roles and responsibilities.
- Guideline 3.3: Psychologists consider the needs for education, training, and professional development among their professional colleagues and collaborators regarding the ethical and professional use of social media.

IMPORTANCE AND RELEVANCE OF SOCIAL MEDIA

GUIDELINE 1.1

Psychologists are aware that social media can be highly useful for improving public access to information about behavioral health, psychological services, and the integration of behavioral health within primary, secondary, and tertiary health care.

Rationale

Online social media platforms represent an important asset for psychologists. These communication tools provide opportunities for educating the public about behavioral health and psychological services as well as broader interrelated health issues. They can also be very useful for reaching individuals from underserved populations, disabled individuals without access to transportation, and those living in remote areas. Although many individuals do not use the internet (an estimated 10% of North American adults did not use the internet in 2019, with those older than 65 and those with less than a high school diploma using it the least; Pew Research Center, 2019), very large proportions of those with internet access use it to obtain information about behavioral and physical health. In fact, the Pew Research Center (2014) found that obtaining health information via the internet was the third most popular online activity, used by approximately eight in 10 internet users. Social media provide a valuable opportunity for psychologists to directly communicate with the wider public about health issues and psychological services.

Application

Psychologists are mindful of the major potential that social media and other online platforms have for promoting the health and well-being of the general public. A vari-

ety of online social media tools can be used to reach individuals across geographic and socioeconomic groups and from many different diagnostic and health status groups. These tools provide opportunities for psychologists to efficiently share reliable, research-based information that can help individuals prevent behavioral, physical, and other problems from occurring or from increasing in severity, access the health services they need, and promote health and well-being in general.

To effectively realize the potential of social media for these purposes, however, psychologists also need to be mindful of the many ethical, legal, and professional issues that arise when communicating with the public using these tools. Social media present the opportunity to easily engage in a variety of therapeutic and extra-therapeutic interactions with clients and others that can be problematic. Psychologists working and living in rural and other close communities are familiar with how easily professional boundaries can become blurred, and they strive to maintain awareness of potential boundary and role conflicts that can arise in personal and professional interactions. These same boundary and role conflicts can arise within the context of social media interactions. The guidelines discussed below highlight psychologists' obligations to protect the privacy and confidentiality of clients, ensure the accuracy of their communications, avoid communication with past or current clients that can compromise professional boundaries, and be aware of additional issues that are critical to the ethical and professional use of social media, such as a clear delineation between personal and professional usage. Psychologists also need to be aware that participating in social media opens a public record of their communications that is searchable by current and potential future clients, students, research participants, legal and regulatory professionals, employers, and others (Kolmes, 2012).

GUIDELINE 1.2

Psychologists are mindful of social media's growing importance as a tool for communicating and engaging with interested groups of clients, students, peers, and other stakeholders around particular health issues, thereby adding value to health services, research, and education.

Rationale

Social media comprise nearly instantaneous forms of communication that have great potential for public engagement in myriad aspects of health and healthcare. Psychologists are mindful of social media's growing importance in the public health arena, including applications that facilitate communication, collaboration, and sharing of information among groups of interested parties (Deloitte Center for Health Solutions, 2016). For example, it is estimated that one-third of Americans who go online to research their current health conditions also use social networks to find fellow consumers and discuss their conditions with them (Elkin, 2008; Korda & Itani, 2013). In addition, 36% of social network users consider other consumers' experience and knowledge before making health care decisions (Keckley & Hoffman, 2010).

Psychologists are also mindful of the potential for social media to add value in the provision of health services. For example, social media enable psychologists to connect with medical patients or family members of medical patients who are coping with particular medical conditions (Ferguson, 2007; Pew Internet and American Life Project, 2004). A prominent example of this is Crohnlology.com, which is one of the most closely watched experiments in the use of social media to facilitate treatment and promote health among clients with a particular condition. This

social network provides patients with Crohn's, colitis, and other inflammatory bowel conditions with a means to track symptoms, share information on nutrition, diet, and remedies, and provide support and encouragement to each other. These opportunities involving real-time interaction, support, and access to information serve to increase patients' efficacy in self-care and disease management and have the potential to improve the delivery and even the economics of health care. The participation of psychologists on these types of sites when they are patients or consumers themselves, either when they possess professional expertise in the subject matter or not, also raises questions involving multiple roles and relationships. The sections below address several issues to consider when pursuing these types of participation.

Social networks also hold considerable potential for health care research, policy, and advocacy because they can be used to reach stakeholders, aggregate information, and leverage collaboration (Keckley & Hoffman, 2010). For example, social media can be important tools for advancing the understanding of the epidemiology and etiology of a variety of behavioral and physical health conditions by facilitating the collection of very large datasets from individuals coping with particular conditions that can then be investigated through big data analytics. Hence, psychologists are, in fact, stakeholders in the use of social media for research on questions that are best addressed through big data analytics and related procedures. Marginalized groups have also benefitted from the communication and collaboration facilitated by social media, greatly enhancing their ability to advance priorities and participate in relevant national discussions.

Application

Psychologists who use social media are encouraged to maintain and update their working knowledge of social media for communicating with various audiences regarding health and psychological well-being. This may include seeking professional development opportunities or collaborating with a community of learners. Effective models are also being developed that exemplify how social media can responsibly reach and engage consumers. For example, the Mayo Clinic Center for Social Media

(MCCSM) is a first-of-its-kind social media center that aims to advance health globally by accelerating the application of social media tools across the Mayo Clinic system through broader and deeper engagement by hospitals, medical professionals, and clients. Mayo has also established a Social Media Health Network (SMHN) that provides tools, resources, and guidance for organizations as well as individuals who want to use social media for health education and health care. Johns Hopkins Hospital likewise has a wide range of social media resources for communicating with various client and other groups about issues of common interest (Malcomson, 2016).

It is also recommended that psychologists encourage the organizations they work for and/or support to develop and implement policies addressing the use of social media for sharing and discussing information and work products within relevant communities. Within professional psychology education, for example, social media are being used to support student education and mentorship (e.g., the Association of Psychology Postdoctoral and Internship Centers [APPIC] Intern-Network listserv facilitates the discussion of health service psychology internship issues among internship applicants and current interns as well as training directors and other psychology professionals). It is also common for the divisions of APA and other psychological organizations to use blogs and listservs for communication among their members. Such networks provide opportunities for psychologists to address a wider range of concerns and needs and within a much shorter time frame than was traditionally the case. Psychologists, students, and others using these networks need to keep in mind, however, the public or potentially public nature of most of these networks (see the next section below). Psychologists should also be aware of the various legal concerns pertaining to the use of listservs with respect to professional practice, including anticompetitive activity, privacy, and ethics. Psychologists working in educational, clinical, research, or any other type of setting are also mindful of the need to educate and train students and staff under their supervision in the appropriate use of social media (see Section 3 below).

SECTION 2

ETHICAL AND PROFESSIONAL ISSUES

GUIDELINE 2.1

Psychologists are mindful of the public nature of social media and that their privacy and confidentiality often are not protected nor expected on social media.

Rationale

In their commitment to increasing scientific and professional knowledge, psychologists strive to help the public develop informed judgment and choices concerning human behavior (APA Ethics Code: Preamble). This can occur through a variety of means, including social media. Although the use of social media may facilitate this goal, it may also pose an increased risk to practitioner privacy and confidentiality, revealing personal information that, in the past, has remained private. Online information about the psychologist allows greatly increased exposure to past, current, and prospective clients; other professionals, including supervisors, peers, and supervisees; as well as the public in general. Therefore, psychologists using social media are encouraged to become educated on how to protect their own privacy, the privacy of their family and friends, and the privacy of their clients. To address these concerns, psychologists are encouraged to learn how to develop social media use policies, how to monitor the accuracy of information about them on social media, and when and how to inform their clients about their social media practices and policies.

Application

Psychologists who use social media remain cognizant of the boundaries of their competence (Ethics Code 2.01) and take reasonable steps to ensure their competence in using new techniques and technologies (Ethics Code 201[c]). Before using social media, psychologists are encouraged to

become informed about the nature and technology of social networking sites, including the processes by which information is shared and stored as well as the circumstances under which it may be sold or otherwise displayed, distributed, or published by unknown parties. Similarly, inasmuch as some platforms (e.g., Facebook, LinkedIn) scan user contact files and display identity information to others as possible “friends” or connections, psychologists carefully consider the implications of granting access to these platforms when queried, periodically review the permissions they previously granted, and/or are careful to maintain separate contact files for personal versus professional pages.

In all circumstances, psychologists are encouraged to consider that privacy and protection of confidentiality are not to be expected when using social media. Psychologists should consider that all information posted on social media platforms is posted with the implicit understanding that it might be seen by clients, people involved in the lives of clients, colleagues, employers, students, or any member of the public.

Participating in social media can offer the semblance of anonymity and foster increased disclosure as a result (Ma et al., 2016; Qian & Scott, 2007). Therefore, psychologists are encouraged to take extra caution to avoid using speech that is potentially libelous or denigrates the reputation of psychology, and they are encouraged to refrain from posting direct or indirect references regarding clients, disparaging comments about colleagues or client groups, or opinions that denigrate the reputation of psychological practice, research, or education.

Psychologists also strive to become educated on the unintended but uncontrollable consequences of social media use for personal purposes. For example, some social media tools such as Snapchat hold

information only briefly, but screenshots can be made of posts on these ephemeral applications and distributed publicly. The same is true of Facebook pages that are intended to be limited to a private group of individuals (e.g., “Friends” or “Friends of Friends”). Indeed, the Library of Congress has preserved every single tweet ever posted on Twitter from its inception up through the end of 2017; even if an account is deleted, the archive may remain in perpetuity. The Library is continuing to save many tweets beyond 2017 but only those related to significant events and particular themes (Chokshi, 2017). Therefore, psychologists recognize that any post on any social media platform, even when it is intended to be an ephemeral or private posting, may potentially appear in the public domain.

GUIDELINE 2.2

Psychologists are mindful of ethical and legal obligations to maintain client privacy and confidentiality at all times.

Rationale

Participating in social media increases the risk of unintentionally exposing the psychologist–client relationship. Psychologists using social media must be mindful of these risks and legal obligations, considering and addressing them before as well as during their participation in social media. Although social media use can benefit psychology and the public, it creates new challenges to the psychologist–client relationship. Technological advances have altered and will continue to alter professional psychological practice. Nonetheless, psychologists must continue to maintain

the privacy and confidentiality of their relationships with clients.

Application

Psychologists remain mindful of ethical principles governing communications, interactions, confidentiality, privacy, and respect for others when using social media for personal or professional purposes. Similarly, psychologists strive to diligently maintain standards of client privacy and confidentiality that apply to all settings, comply with legal requirements, and make every reasonable effort to safeguard the privacy of clients. Psychologists are aware of the potential need to consult a qualified attorney should questions arise regarding legal privacy concerns and social media usage.

Psychologists carefully consider the risks and rewards that their online activity might pose for their clients. For example, careful and thorough effort is to be applied to camouflage discussions of client case studies, whether they occur in social media or traditional print media (APA Ethical Code 4.07). The same suggestion applies to psychologists who decide that it would be beneficial to consult regarding a client case on a listserv of professional colleagues. Listservs are not HIPAA compliant. Consequently, psychologists need to exercise great care in protecting client privacy if they decide to request consultative input via a listserv. In these cases, psychologists do not disclose personally identifiable information of any kind concerning their clients, students, research participants, organizational clients, or other recipients of their services unless they take reasonable steps to disguise the client, the client has consented in writing, and there is a legal authorization to do so (APA Ethical Code 4.07).

Psychologists also normally request clinical consultations from professionals who are known to possess competence and expertise with regard to their client's circumstances, and psychologists are aware that it may be very difficult to judge the competence of those who respond to a consultation request on a listserv. An alternative format for conducting clinical consultations online is through the use of private online communities that are specifically designed for this purpose, are HIPAA compliant, and where membership is carefully monitored (e.g., Doximity, Sermo).

Use of social media can also invite multiple relationships, and psychologists are encouraged to be prepared to respond appropriately (e.g., Facebook may suggest clients or therapists as "friends" simply because geolocation places them in the same clinic). Should breaches of confidentiality or inappropriate multiple relationships occur, psychologists are encouraged to be prepared to take appropriate steps to correct the problems.

Responding to negative comments posted on health care provider or course instructor review sites can be complicated. Psychologists are advised to refrain from attempting to influence such reviews by asking clients not to rate their services online (APA Practice Organization, 2015), nor should psychologists encourage clients to post positive reviews (see Ethics Code 5.05). Before considering any sort of online response to a negative review, psychologists need to recall that their relationships with clients, students, and research subjects are ordinarily protected by confidentiality and any reply should not imply any direct knowledge of or history with any individual with whom one has had a professional relationship protected by confidentiality (APA Practice Organization, 2015). If a psychologist suspects that a colleague or competitor posed as a former client and posted a negative review, however, the psychologist may have recourse by contacting the review website, by filing an ethics complaint, or through other avenues as they would in other situations when their practice is intentionally harmed.

GUIDELINE 2.3

Psychologists consider the risks and implications of using social media and online searches to obtain information about their clients, students, trainees, consultees, and others with whom they work on a professional basis.

Rationale

The emergence of social media and internet search capabilities affords psychologists the opportunity to easily obtain online informa-

tion about their clients, students, and consultees without their knowledge. Despite the public nature of information available on the internet and the potential usefulness of that information, conducting online searches involves ethical questions associated with privacy, informed consent, and self-determination (DiLillo & Gale, 2011). The APA Ethics Code General Principle E states "psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination." Although it is expected that clients disclose important information to psychologists during evaluation and treatment, it is also understood that the client generally determines the type, timing, and means by which personal information is to be disclosed (DeLillo & Gale, 2011). If psychologists seek personal information about psychotherapy clients without first obtaining informed consent for such a search, it might be considered an intrusion on privacy and a violation of their clients' right to self-determination (Barnett, 2008; Clinton et al., 2010; DeLillo & Gale, 2011; Lehavot et al., 2010; Tunick et al., 2011). These issues are particularly relevant in the context of clinical treatment, whereas additional considerations may weigh heavily in various forensic, correctional, school, consulting, industrial-organizational, and other contexts. The actual client in these contexts may be an organization or institution, a factor that has major implications for the confidentiality and privacy of all the parties involved (Fuqua et al., 2012; Pirelli et al., 2016).

A key element in evaluating whether an online search violates a client's privacy and self-determination is the question of informed consent. The APA Ethics Code 3.10(a) requires psychologists to obtain informed consent from clients (or surrogate decision makers as in the case of children) about the services to be provided. Although commonly known to involve other aspects of treatment (e.g., confidentiality, fees, payment), consent also encompasses informing clients about the nature and process of the psychotherapeutic relationship, including approaches and techniques that might be used (Fisher & Oransky, 2008). This could be viewed as including searches for online information involving the client.

Psychologists are also mindful of the unknown reliability of much information on

the internet. In addition, psychologists understand that prior information about an individual can bias a psychological evaluation and influence a professional relationship. Possessing information about new or prospective clients obtained online without their prior informed consent places psychologists in the position of deciding how to use unauthorized and potentially unreliable information in a therapeutic manner. Introducing such material in treatment sessions might have the effect of enhancing trust in the therapeutic relationship, but of course it could also harm the relationship as well, whereas keeping that information to one's self may also affect one's reactions to the client and approach to the professional relationship.

Application

To conform to APA Ethics Code General Principle E and respect clients' right to self-determination, psychologists typically refrain from conducting internet searches on or about psychotherapy clients unless it is needed to provide the service and the clients (or the clients' parents or guardians) provide informed consent to the searches. Should a psychologist believe internet searches about their client may be of therapeutic value, obtaining prior informed consent should be considered, including making clear when, why, and how an internet search will be conducted. Psychologists should consider developing and revising, as needed, a policy about this aspect of their practice, including clear principles guiding the decision and the circumstances under which the psychologist conducts internet searches about their client. Such a policy can be reviewed and signed by clients as part of the informed consent process before conducting such a search.

Although APA Ethics Code General Principle E suggests that a psychotherapy client's rights to privacy and self-determination might prevent therapists from conducting internet searches on clients without their consent, surveys nonetheless have found that many mental health providers routinely turn to the internet as a source of information about clients (Clinton et al., 2010; DiLillo & Gale, 2011). Kolmes and Taube (2014) surveyed 227 psychotherapists and found that 28% "accidentally" came across client information online (of those, 70% through Facebook), and 48%

reported searching for online information about their clients in non-crisis situations and without their clients' knowledge. Social networking and internet searching have become commonplace for many people, and many student therapists entering the profession, for example, may see little harm in conducting these types of searches. According to this view, information on the internet is publicly available and represents an appropriate and, at times, therapeutically useful source of information about clients (e.g., to check for prior criminal offenses committed by a client, to better understand how a client presents her- or himself socially, to help assess the presence of a thought disorder or other symptoms). One circumstance that may justify an online search without the client's consent involves emergency situations in which a client presents a danger to him- or herself or others, and information on a client's current whereabouts or the whereabouts of a potential target of the client may be important to preventing harm (Kolmes & Taube, 2014). Nonetheless, to respect the principle of clients' rights to privacy and self-determination, psychologists are encouraged to consider the ramifications of intentionally seeking out online information about clients and to refrain from conducting internet searches about clients without their informed consent unless circumstances warrant such a search.

GUIDELINE 2.4

Psychologists consider the need to avoid contact with their current or past clients on social media, recognizing that it may blur boundaries of the professional relationship.

Rationale

Within recent history, social media have become a routine aspect of life, dominating aspects of popular culture and transforming how people, including psychologists, communicate with family, friends, their communities, and the broader society. Unlike traditional forms of communication, social media may broadcast psychologists' per-

sonal and professional information to a much broader audience and thereby may be exchanged with individuals with whom psychologists have a therapeutic, supervisory, evaluative, or other type of relationship. This broader dissemination of information may increase psychologists' risk of blurred professional and personal boundaries (Kaslow et al., 2011; Zur et al., 2009).

Multiple relationships occur when a psychologist is in a professional role and at the same time is in another role with the same person or another person closely associated with the first person, or promises to engage in a personal role with the person or their close associate in the future (APA Ethics Code 3.05). Psychologists refrain from entering multiple relationships when the relationship could reasonably be expected to impair their objectivity, competence, or effectiveness in performing their functions as a psychologist or otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships may include individuals with whom the psychologist has had or may have a professional relationship, including those over whom they have supervisory, evaluative, or other authority, including clients, students, supervisees, research participants, and employees (Ethics Code 3.08). This guidance applies to all professional relationships, including those initiated or maintained through social media.

Application

Psychologists are mindful that the risk of engaging in multiple relationships can be increased through social media and hence consider how they will manage this risk. Psychologists who use social media are encouraged to develop self-monitoring strategies such as consulting with colleagues and supervisors (Gabbard et al., 2011). To manage and control the ease with which clients or prospective clients may access personal information, psychologists who pursue an online presence consider maintaining a professional website and social media accounts separate from their personal web presence and/or use a pseudonym for their personal account (American Medical Association, 2012; Myers et al., 2012). Psychologists are also encouraged to include only professional information on their professional social media profiles

(Bratt, 2010) and only personal information on their personal social media profiles.

Whether or not it is appropriate to interact with individuals on professional social media sites depends on the purpose and nature of those sites. For example, if psychologists maintain a Facebook page focused on their psychotherapy practice and “friend” individuals through that site (and particularly if psychologists encourage their clients to do so), it might be assumed that many of the individuals on the site are or were therapy clients. This could give the impression that these psychologists are encouraging clients to reveal the confidential information that they were in treatment. Therefore, psychologists maintaining a social media site focused on their professional practice consider whether it would be appropriate to not “friend” clients or past clients under any circumstances (Kolmes, 2010). In other cases, psychologists create social networking sites focused on particular mental health and other issues (e.g., to advocate for and support parents of children with particular behavioral, medical, or educational issues) and not their professional services. They may interact actively with individuals on these sites primarily from the perspective of public education and advocacy, and there may be no reason to suspect that the individuals participating on these sites are or were clients of the psychologist who created the site. Psychologists who use social media are encouraged to consider the specific risks of multiple relationships that their social media use creates and incorporate this issue into their informed consent policy and procedures (see Guideline 2.5 below).

GUIDELINE 2.5

Psychologists are aware of the benefits of establishing a policy regarding their participation in social media and discussing this policy and their use of social media as part of the informed consent process with clients.

Rationale

Psychologists who use social media should consider when it is important to adopt a policy that they can then communicate to their clients. Many psychologists work in agencies or institutions that have explicit policies on social media use. Some of these policies are far more detailed and comprehensive than others, and many agencies have no social media use policy. When considering the adequacy of particular social media policies, psychologists give attention to the Human Relations standards of the APA Ethics Code including multiple relationships (3.05), conflicts of interest (3.06), exploitative relationships (3.08), cooperation with other professionals (3.09), informed consent (3.10), and psychological services delivered to or through organizations (3.11). Additionally, their policies should attend to the APA Ethics Code Privacy and Confidentiality standards including maintaining confidentiality (4.01), discussing the limits of confidentiality (4.02), recording (4.03), minimizing intrusions on privacy (4.04), disclosures (4.05), and use of confidential information for didactic or other purposes (4.07). The present guidelines provide many useful suggestions for incorporating into one’s social media use policy.

Application

Psychologists are mindful of their role and responsibilities when providing professional services and when their involvement with a client may necessitate an informed consent agreement that specifies their approach to using social media. A particularly pertinent issue in this regard concerns multiple relationships (see Guideline 2.3 above). Many psychologists work in agencies where institutional informed consent procedures address these issues, but other psychologists must navigate these issues independently (for a sample policy, see Kolmes, 2010). When appropriate, psychologists inform their clients of their social media use policies at the outset of their relationship and throughout the course of their relationship as needed.

GUIDELINE 2.6

Psychologists are aware that social media provide many opportunities for investigating important research questions but are mindful of the need to guard against the misuse of research involving social media.

Rationale

Social media provide many opportunities to collect data and investigate important research questions into a wide range of topics across the social sciences and human service fields. But social media can also be used to develop tools that, like any other tool, can be used for purposes that undermine individual, community, and societal functioning. Recent controversies involving the use of psychological research and social media tools to promote particular political candidates or parties in U.S. elections (Cadwalladr, 2018) highlight the potential for tools created for research purposes to also be used to manipulate public opinion or elections. Such unconstructive purposes are inconsistent with the overarching purpose of the discipline of psychology. Psychologists are reminded that “The mission of the APA is to advance the creation, communication, and application of psychological knowledge to benefit society and improve people’s lives” (APA Mission Statement, 2018).

Application

Research that takes advantage of the great efficiency and reach of social media provides many important opportunities to advance the mission and goals of psychology. But social media also provide opportunities to collect and use personal information to target individuals and groups for purposes of manipulating their behavior in ways that do not support the mission and goals of the field. Social media clearly can be used for unconstructive as well as constructive purposes.

Although it is perhaps unlikely that psychologists would intentionally participate in inappropriate manipulative uses of social media, psychologists who are insufficiently diligent about learning the motivations and purposes of particular individuals or organizations could be asked to share their

expertise in ways that actively support unconstructive purposes. Therefore, psychologists need to remain mindful that their research and/or their research skills can be exploited for purposes that do not support the mission of the field. As noted in the APA Ethics Code *General Principle A: Beneficence and Nonmaleficence*, “Because psychologists’ scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence” (APA Ethics Code, 2010).

GUIDELINE 2.7

Psychologists strive to maintain accurate and truthful statements on social media about their own practice, colleagues, the profession of psychology, and other issues and give special attention to the scientific support and empirical basis for statements made and the limitations of available evidence regarding particular topics.

Rationale

The use of social media affords psychologists the opportunity to make public statements about themselves, their practice, and issues in the field of psychology that reach a broad population. As a result, the public has greatly increased access to valuable psychological information, serving purposes of general education as well as practice promotion. The extremely quick and easy distribution of this information to the public, however, also increases the potential for statements and information to be misinterpreted and/or be perceived as misleading, deceptive, or even fraudulent. As a result, psychologists are encouraged to carefully review statements concerning one’s practice, research, expertise, and issues in the field of psychology generally prior to posting them on social media or other online platforms (see APA Ethics Code 5.01 and 5.04).

Psychologists are governed by the same rights and limitations to public speech

that apply to all citizens, including both rights related to freedom of expression and restrictions related to defamation, falsehoods, and other types of damaging statements that may harm the reputation of an individual or the profession. Although psychologists are protected by the same rights and subjected to the same limitations as any non-governmental entity, psychologists should nonetheless be prudent not to exercise their speech in ways that are unethical or otherwise defamatory to individuals or the profession (e.g., through incivility or ad hominem attacks). They also use social media to present psychological research accurately and fairly, including both its strengths and limitations.

Application. According to the APA Ethics Codes Section 5, public statements and advertising by psychologists are permitted, and social media can provide powerful tools for doing so given their great reach and highly interactive capabilities. Psychologists are aware, however, that inappropriate online actions and posted content may negatively affect their reputations among clients and colleagues, may have consequences for their careers, and can undermine public trust in psychology.

Psychologists hold a position of trust and authority with the public. When using social media to educate the public, psychologists strive to present information that is relevant, valid, and reasonably current. Psychologists strive to present an accurate and balanced view of research, including both its strengths and limitations, and guard against the “cherry picking” of data that support a personal, political, or other agenda. When offering public advice or comment on social media, psychologists are obligated to make statements that are informed through their professional knowledge, training, and experience (APA Ethics Code 5.04). When sharing psychological information and advertising their services, psychologists make reasonable efforts to avoid giving specific advice, offering diagnoses, or otherwise behaving as if they were conducting treatment. Psychologists provide appropriate citations to the authors of any studies discussed and are diligent to avoid plagiarism. They also need to be careful about copyright infringement when using images or content in their social media posts that were generated by others.

Marketing materials on social media or other internet platforms should be developed with the same care as print advertisements or promotions. Just as with print or other media, psychologists are responsible for the accuracy of information about their training, experience, credentials, and qualifications (Ethics Code 5.01) and the accuracy of information included in online promotions of workshops and seminars (Ethics Code 5.03) and media-based presentations (Ethics Code 5.04). As in other forms of advertising and public statements, psychologists do not solicit testimonials from individuals who are vulnerable to undue influence, including current clients (Ethics Code 5.05), nor do they solicit business or clients, directly or indirectly, through another agent (Ethics Code 5.06).

To help fulfill these various standards, psychologists who use social media are encouraged to track and update their personal and professional websites, digital identity, profiles, and digital images. To the extent that is reasonable and practicable, psychologists can also monitor the online information that others have posted about them and verify its accuracy. If they discover inaccurate or inappropriate personal information online, they can consider whether contacting the person who posted the information and/or the website administrator would be appropriate. Students entering the profession may need to remove postings that are dated or no longer appropriate. Faculty and supervisors of students and staff should be aware of this concern as well and address it during training and supervision (see also Section 3 below). Owing to the complex skills required to maintain an online social media presence, many psychologists seek the assistance of technology professionals to help optimize their social media presence. Psychologists who use others to assist in their social media use and presence are nonetheless responsible for the content of the information (see also Guideline 3.3 below).

Psychologists also consider when it is appropriate to state whether they are or are not representing their employer, institution, or profession when posting particular types of online content. Psychologists strive to be clear when sharing personal opinions on social media versus the findings of empirical research or the positions of employers or

institutions and professional organizations with which they affiliate. This is also important when communicating personal support for or endorsement of individuals, groups, products, services, or activities.

Although psychologists frequently share their expertise about psychological topics with the general public, they are mindful of the limitations associated with offering professional opinions about public

figures in social or other forms of media. Psychologists offering opinions based on publicly available information need to ensure that there is appropriate and adequate information to substantiate their statements and conclusions (Ethics Code 5.04, 9.01; for further discussion of this issue, see also Martin-Joy, 2017).

Psychologists are also aware that many individuals do not have access to

social media (e.g., some individuals experiencing homelessness, as well as low-income, elderly, and disabled individuals; Pew Research Center, 2017, 2019). Psychologists are also mindful that the issues discussed above under this guideline apply when using conventional forms of communication with the public in addition to when using social media.

SECTION 3

EDUCATION, TRAINING, AND PROFESSIONAL DEVELOPMENT ISSUES

GUIDELINE 3.1

Psychologists are mindful of the need to stay current regarding the benefits and limitations of social media technologies as they evolve and the ethical and professional implications of using these technologies.

Rationale

The creation, development, and proliferation of social media technologies are evolving at a rapid rate, and each new social media technology carries with it new benefits and limitations. Therefore, the implications of using these tools in an ethical and professional manner for both personal and professional purposes are also evolving. When considering use of social media, psychologists strive to demonstrate due diligence in their appraisal of these factors to ensure that their use is in a manner consistent with best practices and ethical standards.

Application

To become and remain competent in the use of social media, psychologists receive training on appropriate and ethical uses of social media throughout their career, including graduate school, internship, post-doctoral training, and beyond, because the nature of social media is evolving at a rapid pace rel-

ative to many other aspects of psychological practice. This training often includes attention to the ways social media use impacts confidentiality, risks of blurred professional relationships, and impacts on the therapeutic relationship.

Social media tools are used for a variety of marketing, public education, and advocacy purposes, and their ability to easily target specific segments of the population makes them particularly useful for serving multiple purposes. Professionals can research which social media tools are best for reaching specific groups for particular purposes. Ratings and reviews are available for many social media tools, and psychologists can also consult with technical experts on issues related to their strengths and limitations, ways to avoid their misuse, and any related legal issues. Psychologists remain mindful, however, that advice from sources that advocate social media marketing tactics used in contexts other than professional psychology practice (e.g., retail sales, political campaigns) may not be in keeping with the ethical and professional practices of psychologists. Therefore, psychologists should consider consulting with technical experts and sources of information specifically related to professional psychology practice. They might also form their own learning communities around social media topics. Psychologists who use social media

strive to be familiar with reliable sources of education, training, and professional guidance that are relevant to their use within the context of professional psychology and behavioral health care.

GUIDELINE 3.2

Psychologists are aware of the need to educate and train students and staff under their supervision in the ethical and professional use of social media appropriate to their roles and responsibilities.

Rationale

Many organizations rely heavily on social media platforms to help advance the goals of the organization. Given the ethical and professional considerations discussed throughout these guidelines, psychologists are aware of the training and supervision needs of the students and staff under their supervision in how to use social media effectively, ethically, and professionally. Providing guidance and oversight are essential for ensuring that staff and students represent their organizations accurately, responsibly, and consistent with ethical and professional guidelines.

Application

Clear instructions and ongoing training on new social media tools should be part of one's organizational culture as well as procedures for correcting any unethical or unprofessional behavior that occurs. Distinctions between personal and professional uses of social media should be clarified as well as the benefits and risks to one's self, the organization, and its consumers. The guidelines discussed above should be helpful for addressing these issues. As social media platforms evolve, additional training and the updating of policies may also be appropriate. Training could also be considered regarding ways to safeguard the use of social media from viruses, malware, and hackers and procedures for handling these threats if they occur.

Some psychologists maintain blogs or Twitter accounts to help educate the public and attract potential clients, and the maintenance of these social media sites may be assigned to a supervisee. In these cases, it will be important to maintain clear guidance and perhaps also written policies about the types of content and information that can be posted on these platforms. Psychologists should also be aware that they may need to use "business associate agreements" with web designers, billing services, information technology support services, or others who have access to HIPAA-protected client information from their practices to ensure that the security and confidentiality of client information is protected (Health and Human Services, 2013).

GUIDELINE 3.3

Psychologists consider the needs for education, training, and professional development among their professional colleagues and collaborators regarding the ethical and professional use of social media.

Rationale

Psychologists frequently collaborate with colleagues in using social media for marketing, teaching, research, public education, advocacy, and other purposes. Psychologists naturally vary in their experience and knowl-

edge of social media and the risks and benefits associated with using particular social media tools. As a result, they may find that some of their collaborators use social media tools in a manner inconsistent with ethical and professional principles and guidelines. Clients, students, managers, administrators, as well as colleagues and the public generally may expect that psychologists should make attempts to notify collaborators of their problematic social media use and educate them in the appropriate use of these tools (see Ethics Code 1.04).

Application

The misuse of social media is perhaps frequently unintentional and may arise from a lack of understanding of how to use internet-based platforms and tools appropriately. For example, psychologists may unwittingly put themselves in compromising positions when they are included on a Twitter feed regarding ideas with which they do not agree or a client connects with them on a platform such as LinkedIn and leaves a message that reveals confidential information. Collaborators of the psychologist may want to enhance their social media presence to generate business and might describe work they did that is not accurately portrayed or they might post unprofessional or inappropriate content that represents an organization or the profession poorly. If psychologists notice their collaborators using social media in these ways, they should consider informing them of the potential ethical and professional issues involved so that the collaborators have a chance to change and rectify the behavior or additional measures can be taken if indicated (see Ethics Code 1.04).

Note: The authors of the above guidelines have no financial or other conflicts of interest related to potential benefits associated with developing or implementing these guidelines.

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