Hill and Knox (2002) note “self-disclosure can be broadly defined as statements that reveal something personal about therapists” (p. 255). Psychologists continue to wrestle with the ethics and effectiveness of using self-disclosure in the therapeutic process. Freud originally wrote that “The physician should be impenetrable to the patient, and like a mirror, reflect nothing but what is shown to him” despite his own use of self-disclosure (1912/2002, p. 18). Others have thought that self-disclosure would irrevocably contaminate and damage the therapeutic process, with many in the profession believing it has no place in the relationship at all (Peterson, 2002; Goldstein, 1997). It is no secret that Freud revealed many aspects of his personal life to his own patients. He shared his dreams and early childhood memories with his patients, not to mention cooking meals for them!

Although there has been considerable controversy about whether or not to disclose personal information, it is impossible to avoid all forms of self-disclosure simply by virtue of being a person in the room with the patient. For example, if one defines self-disclosure broadly as “a process by which the therapist reveals aspects of himself or herself to the client,” then it is impossible to avoid self-disclosure completely (Mahalik, van Ormer, & Simi, 2000). The therapist’s gender, ethnicity, style of dress, office décor and the like expose personal information about the therapist.

Effects of Therapist Self-Disclosure
Researchers have found that the typical therapist reported using the intervention of self-disclosure as a means of dealing with immediate therapeutic goals rather than achieving long-term goals. These studies have examined the immediate outcome of therapist self-disclosure, finding positive effects when done with thoughtfulness and caution. Authors conclude that those who choose to self-disclose “must be sure that their reasons for doing so are not related to their own unfulfilled needs in their private lives” (Gutheil & Gabbard, 1995, p. 222). It is unethical and exploitative to use self-disclosure to satisfy the therapist’s need rather than an appropriate and well-considered treatment intervention.

Clients reported several significant impacts from their therapist’s helpful self-disclosures. For example, therapist self-disclosures: (1) fostered client insight, (2) made the therapist seem more real and human, (3) improved the therapeutic relationship, (4) helped clients feel reassured and normal, and (5) served as a model for positive changes (Hill & Knox, 2002, p. 255).

When to Consider Self-Disclosures
In reviewing the literature on self-disclosure, Peterson (2002, p. 30) suggests the following questions for consideration prior to self-disclosing:

1. Is this information necessary to protect the client’s informed consent?
2. Is my purpose in disclosing this information to benefit the client or to benefit myself?
3. Will this particular client use this information in a way that is helpful?
4. Will disclosing this information interfere with our therapeutic progress, such as by contaminating the client’s therapeutic transference?

Because the opportunities for therapist disclosure occur unexpectedly, therapist’s must be ready and prepared in advance.

The Ethics of Therapist Self-Disclosure

APA 2.06 Personal Problems and Conflicts Psychologists must remain aware of their own personal and internal state when working with clients. Psychologists must know when to take time off, when to seek personal help via consultation, get personal therapy, or peer consultation. Self regulation during times of personal difficulty is imperative to avoid inappropriate or non-therapeutic self-disclosures.

APA 3.08 Exploitative Relationships Since the APA Ethics Codes do not specifically address self-disclosure, the APA instructs psychologists to use the most closely related standard. Eliminating all therapist self-disclosure is not possible. “Thus the question that must be addressed is not whether it is ethical to self-disclose to clients but rather what content, for what reasons, to whom, and under what circumstances should an ethical therapist disclose” (Peterson, 2002, p. 22).

Contemporary psychologists are not merely using reflection, or performing as blank slates during sessions. The professional literature on self-disclosure suggests sharing of personal information can be ethically appropriate, and in some cases, ethically necessary. However, the disclosure should not occur without thought and consideration regarding the consequences and ethical risks.

References


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