

Self Disclosure

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... How much self-disclosure by therapists and counselors is appropriate? Some practitioners who get in trouble, often in cases involving allegations of an improper dual relationship, are vulnerable because they have disclosed too much personal information to the patient. Usually, such disclosures appear to have been made for the benefit of the licensee rather than for the benefit of the patient or client. While there are no hard and fast rules and reasonable minds can differ about this subject matter, one thing is clear - the disclosure should be made for the benefit of the patient and to aid in the patient's treatment.

A study was recently concluded with respect to physicians and the issue of self-disclosure, and the results disturbingly showed that much of the conversation between physician and patient was for the benefit of the doctor and was not reasonably related to the treatment of the patient. The study pointed out that one of the primary purposes of physician self-disclosure is to help to more quickly and closely connect with the patient, thus establishing a better doctor-patient relationship that is more likely to produce a better treatment outcome. This would seem to be especially true with respect to the relationship between a psychotherapist and a patient.

One must be careful in making self-disclosures that they are not made, either wittingly or unwittingly, for the purpose of satisfying the ego of the practitioner or for "taking care of" the practitioner. In many dual relationship cases, the nature of the disclosures made by the therapist will actually help the licensing board to establish the unethical dual relationship. For example, in cases involving alleged unethical sexual or romantic relationships between therapists/counselors and patients, they often involve evidence that the therapist or counselor had first made disclosures about his or her own sex life or fantasies. Such disclosures are hard to justify under any circumstances.

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