PSYCHOLOGICAL SERVICES VIA INTERNET AND OTHER DIGITAL MEANS: RECOMMENDATIONS FOR ETHICAL PRACTICE

Psychological services via the internet and other digital means: recommendations for ethical practice

These Recommendations were developed by the Board of Ethics and Project Group e-Health of the European Federation of Psychologists' Associations. They are updated from the version of 2006.

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1. Introduction

1.1 Scope of this guidance

These guidelines are recommendations to facilitate EFPA Member Associations in creating changes in their national ethical codes, developing specific ethical recommendations and guidance on this topic, providing information, and conducting training. They are not intended to provide detailed guidance for individual psychologists but instead present more general guidance for organisations on ethical principles, points for reflection and tasks deriving from digitally-conducted psychological services.

This document is explicitly practice-oriented and specifically intended to provide a framework within which all EFPA Member Associations can develop their own national guidance in this area of psychological practice. When referring to this document, important national points of attention may be highlighted by particular Member Associations to adapt it further to the local context. It covers special issues related only to technological means and should be read in conjunction with the Meta-Code of Ethics and other relevant frameworks that might be applicable, e.g., the EU's General Data Protection Regulation.

Specific guidelines in a number of areas are necessary, and this guidance will need to be supplemented at appropriate times. EFPA plans to take this next step and bring together experts from Member Associations together with the Project Group on e-Health and develop guidance on these specific topics.

1.2 Introduction to the field

There has been a substantial and increasing growth in the delivery of psychological services that are conducted digitally, particularly via the internet. This trend has been accelerated by COVID-19, and is likely to continue. There are different ways the internet can be used for remote practice. Examples might include online video chat, text-based messaging and collaborative cloud-based assessment methods. The rapid development of digital technology has accentuated the need to review professional practice with respect to ethical principles. The main question is whether these developments introduce fundamentally different ethical issues, or whether the existing ethical principles and standards, as formulated in the ethical codes of member associations, are appropriate in addressing professionals' behaviour.

Although the internet has been the main spur to action, it is important to recognise other types of communications. These include telephone and written communication. Furthermore, the practices covered include counselling and therapy, assessment, guidance and behavioural interventions.

There are at least two distinct strands within the issues around digital services. The first concerns the business element rather than the practice of psychology per se (e-commerce). The second concerns the psychological processes involved which are the primary focus of this guidance.

It should also be noted that digital technologies can be used in conjunction with psychological services that are delivered in person. While many of the points contained in this document are also relevant to this this type of hybrid approach, the primary focus is on circumstances where the internet or other digital means are the primary channel of communication/intervention.

There is no single acceptable term for the services under consideration here: e-commerce is appropriate when considering the former, but the term 'eHealth', while possibly appropriate for health issues does not adequately cover, for example, educational and occupational assessment. As a result, the preferred reference is 'Provision of Psychological Services via the Internet and other Digital Means'.

2. The Ethical Challenges Posed by Digital Psychological Services

Several challenges are considered in this guidance:

Impoverished communication. That is, to consider if nuances of interpersonal communication such as facial expressions, speech and body language are available when working remotely. If not, to consider how this might be mitigated by the choice of technology used: i.e. camera or microphone positioning or an emphasis placed on other available modes of communication. People with special needs may be more affected by this. This can affect the development of the client-therapist relationship and the psychologist's ability to assess the client, and particularly to assess risks.

Security considerations. Establishing the identity of both client and psychologist is different when working via the internet. It should be considered if remote working raises any additional concerns regarding the security of clinical data.

Competencies and evidence. Some psychologists may not have been trained to integrate technology into their practice or may not have much experience working in this way. Similarly, some clients may not be used to receiving services in this form, and so may be hesitant or anxious. Furthermore, it cannot be assumed that psychological assessment or therapy methods developed and evaluated for use in face-to-face settings are automatically applicable for use remotely. Member associations should consider the ethical benefits of supporting training on these issues for their members.

Cross-national issues. A potential benefit of internet-based services is the ability to provide services to clients who may be far away from the psychologist and perhaps in a different country. However, working across national boundaries raises possible questions concerning cultural differences and expectations, and possible differences in statutory obligations including legal and regulatory requirements related to the provision of services across national borders.

3. Recommendations

3.1. Each EFPA member Association should produce a statement which addresses the ethical issues concerned with the provision of psychological services on the internet or through other digital means.

3.2. This statement should be related to the Association's Ethical Code.

3.3. The statement should comprise the following principles and specific guidance; an Association may add to these but their guidance should not be in conflict with this statement.

3.4. Each Association should publicise its guidance and review its operation at regular intervals.

3.5. Member associations should support research in this field and provide information on available evidence.

4. General Principles

4.1. The ethical dimensions of professional practice as a psychologist are the same whether such practice is in person or digitally mediated, whether via the internet or other means.

4.2. The same ethical principles apply as are specified in the EFPA Meta-code apply, namely:

- Respect for a person's rights and dignity
- Competence
- Responsibility
- Integrity

4.3. Implementation of these principles, and adherence to the standards within the Meta-code requires reflection by the psychologist with respect to means of service delivery.

4.4. There is a particular requirement for careful reflection on ethical practice when the psychologist is engaging in a new means of delivery of a service, especially where experience is lacking on the specific ethical questions and dilemmas associated with that type of service delivery.

4.5. Each medium and communication setting poses its own specific profile of characteristics, and hence of ethical challenges, including the degree of appropriateness of any particular form of psychological practice.

5. Specific Guidance

Each Member Association should offer specific guidance as follows:

5.1 Security

5.1.1 Identity of the psychologist

The psychologist can make use of the internet and social media to establish an online presence and offer services. The threshold is however very low for anyone to do so, whether or not they are qualified. The psychologist should therefore make sure they are easily identified as a trained professional.

5.1.1.1. The psychologist should provide a means to verify their identity, such as a verified national register, including specification of a physical location if necessary in accordance with national requirements.

5.1.1.2. Member associations should develop web links to facilitate identification of websites as belonging to members registered with the Association and/or other official registers.

5.1.1.3. Psychologists should be required to specify their membership of the Association, and any relevant statutory body.

5.1.1.4. Where a service is provided by more than one person, this should be specified, including the codes, professional backgrounds and identities of staff. Any provision of Artificial Intelligence (AI) based services should be made clear.

5.1.1.5. Specific guidance on appropriate use of social media should be provided.

5.1.2 Identity of client / users

5.1.2.1.　　A clear identification of the user or client(s) and any other persons involved should normally be required.

5.1.2.2.　　Anonymity of the user may be appropriate in some circumstances, for example in some crisis services and some non-complex interventions like relaxation methods. But in such cases it is incumbent upon the psychologist to take extra care and recognise any increased difficulty in determining the user's vulnerability and legal status, particularly with children. Offering anonymity may sometimes be beneficial by reducing thresholds to seeking help from the psychologist. In those circumstances, special caution should be exerted.

5.1.2.3.　　Psychologists should be cautious about the limits of the services that might be offered to anonymous clients.

5.1.2.4.　　Psychologists should take particular care to gain informed consent when working digitally.

5.1.2.5.　　Psychologists working with children and other vulnerable clients should be cautious in ensuring that safeguards are no less than those normally required, e.g. ensuring that parental permission is clearly given and is verifiable.

5.1.2.6.　　Special caution is needed when working with groups and in general with ensuring privacy in the client setting.

5.1.2.7.　　Psychologists should be aware that they have the same responsibility whether working digitally or face to face.

5.1.3 Protection and security

5.1.3.1.　　Psychologists should be familiar with statutory requirements and best practice around data security, including the choice of software for internet consultations, financial transactions and the sharing of psychological and personal information.

5.1.3.2.　　Appropriate encryption methods should be used in all digitally mediated forms of interaction, to a standard that is equal or better than statutory requirements and best practice in the field.

5.1.3.3.　　There should be regular reviews and upgrading of levels of security.

5.1.3.4.　　Psychologists should have training in cybersecurity and share that it is good practice for clients to also take care with cybersecurity to make the setting more secure (For example: Encourage clients to use secure and private internet connections when engaging in online consultations).

5.1.3.5.　　Members Associations should encourage psychologists to implement best-practice security processes such as multi-factor authentication (MFA) for accessing sensitive client information, online consultation platforms, and financial transactions to ensure an additional layer of security and minimize unauthorized access.

5.1.3.6.　　Psychologists should establish a clear communication protocol for clients to follow in case of any suspected security breaches or concerns regarding privacy. This protocol should include the steps to report and address the issue promptly.

5.2. Confidentiality

5.2.1 Recognition of limits

5.2.1.1.   Psychologists should be advised to inform users of any relevant legislation on data protection, records, the communication of information and limits to confidentiality, e.g. where records are subpoenaed.

5.2.1.2.   They should clarify with users what records they are keeping, and the user's rights regarding these.

5.2.2 Maintenance of records

5.2.2.1.   Associations should advise their members to maintain appropriate records (including backups), to be kept securely in compliance with statutory retention periods.

5.2.2.2.   Psychologists should be aware when interacting electronically that registration and storage of information can be carried out by both parties. This should be discussed and agreed upon in advance.

5.2.2.3.   Psychologists should be aware that other people can be present in the room where the client is having the session. This possibility should be discussed with them in advance.

6. Dealing with the special characteristics of services via the internet

While these characteristics are largely specific to the internet, they may be shared in modified form with other means of digital practice.

Associations should advise their members to specify the following characteristics.

6.1. Whether services are provided in synchronous ('real time', e.g. online video consultations) or asynchronous (e.g. by messaging).

6.2. That all services are under the supervision of a psychologist, whether by direct communication or by artificial intelligence (AI) or automated response.

6.3. Turnaround time e.g. by messaging.

6.4. The country of location of the psychologist.

6.5. The implications, including potential disadvantages, of offering a service outside a national boundary.

6.6. Recommendations and/or arrangements for appropriate training on IT, security aspects, special handling and cautions and limits regarding newer methods, such as virtual reality (VR) and artificial intelligence (AI) procedures and settings.

6.7. Requirements for psychologists ensuring sufficient Continuing Professional Development (CPD) in new areas and recommendations on supervision and peer supervision/intervision.

6.8. The need to ensure suitable working environments and to protect against excessive screen time, both for the health of psychologists as well as for the quality of the services they are providing.

6.9. There are particular challenges for psychological assessment and for monitoring clients' progress. This is particularly important for risk assessment, especially where there are risks of self-harm and suicide, and when working with children.

6.10. There are further specific challenges in relation to the use of psychological tests when these have not been developed or evaluated for the intended medium or use. Psychological tests and application rules should be updated for online use in all countries.

6.11. Arrangements are needed for the secure holding and appropriate sharing of clinical data. Also, there should be secure and ethical procedures for the disposal of data when necessary.

6.12. Member Associations should consider supporting psychologists to be aware of relevant cross-national ethical issues and legal regulations when appropriate.

6.13. Member Associations should conduct regular security awareness training for psychologists to stay up-to-date on emerging threats, best practices for cybersecurity, and any changes to data protection regulations.

6.14. Psychologists should develop a data backup and recovery plan so that client information can be restored in case of data loss or a security breach. This plan should be reviewed and updated periodically.

6.15. Psychologists should be prepared to assist users/clients who may be reluctant or anxious about engaging with online services and should provide alternatives if possible.

6.16. Psychologists should clearly separate private and professional data (communications, accounts, computers, profiles, address books, storage and so on). They should ensure that there is no unauthorised third-party access.

6.17. Informed consent is needed for the recording and storage of the service by the client or the psychologist.

6.18. Psychologists should consider what format of support–whether online/offline, synchronous/asynchronous, psychologist-guided / AI-guided / self-guided etc. or some combination–will best suit the needs of each client. Consideration can be given to mixing digital and in person interventions, as appropriate, in order to achieve the benefits that each offers.

7. Appropriateness

Research evidence

7.1. Psychologists should develop their practice with caution where methods are new and consequently lacking a research base.

7.2. Psychologists should be aware of the varying affordances of different environments, whether physical or virtual, and assess suitability and adjust their practice accordingly.

7.3. It remains a primary requirement that psychologists practise within their range of competence, recognise their limits, and take appropriate action if the expected service goes beyond their competence.

7.4. As with any advertising, psychologists should avoid exaggerated claims on the success of their service.

8. Further Considerations for Member Associations

8.1. As this is a rapidly developing field, Member Associations should monitor practice in their own country and review their ethical codes and guidance at regular intervals.

8.2. Associations should have their ethical codes and guidance available on the internet.

8.3. Associations should ensure that there is a Register of qualified psychological service providers who meet the professional and ethical standards of the Association available on the internet, preferably with access from members' websites.

8.4. Associations should consider developing guidance for the public on psychological services and should make this available on the internet. This could include guidance on criteria to choose psychological and technical service providers, including factors like adherence to Human Rights, safety and content regulations, conflicts of interests, transparency best practice examples and other matters.

This document was developed by a working group of the Board of Ethics and members of the Project Group on e-Health.

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