Psychological services via the internet and other non-direct means: recommendations for ethical practice

These Recommendations were developed by the Board of Ethics. They are updated from the version of 2006.

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1. Introduction

There has been a substantial and increasing growth in the delivery of psychological services that are at a distance, particularly via the internet. This trend has been accelerated by covid-19, and is likely to continue. The rapid development of the internet 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 telephones 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 non-direct services. The first concerns the business element rather than the practice of psychology per se (e-commerce). The second concerns the psychological processes involved.

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 Non-direct Means'.

2. The Ethical Challenges Posed by Non-direct Psychological Services

Several challenges are considered in this guidance:

Impoverished communication. That is, nuances of facial expressions, speech and body language are all less available when working remotely. 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. Remote working also raises problems concerning the security of clinical data.

Competencies and evidence. Few, if any, psychologists have been trained to work via the internet and few have much experience of working in this way. Similarly, few clients are 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 legal obligations.

3. Recommendations

1. Each EFPPA member Association should produce a statement which addresses the ethical issues concerned with the provision of psychological services on the Internet or at a distance.
2. This statement should be related to the Association's Ethical Code.
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.
4. Each Association should publicise its guidance and review its operation at regular intervals.
5. Member associations should support research in this field and provide information on available evidence.

4. General Principles

1. The ethical dimensions of professional practice as a psychologist are the same whether such practice is in person or at a distance, whether via the Internet or some other non-direct means.

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

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. 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.

5. Each medium 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 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.

1. The psychologist should have a means to verify their identity, including specification of a physical location.
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.
3. Psychologists should be required to specify their membership of the Association, and any relevant statutory body.
4. Where a service is provided by more than one person, this should be specified, including the codes, professional backgrounds and identities of staff.

5.1.2 Identity of client / users

1. A clear identification of the user should normally be required.
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 the 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.
3. Psychologists should be cautious about the limits of the services that might be offered to anonymous clients.
4. Psychologists should take particular care to gain informed consent when working non-directly.
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.

5.1.3 Protection of the transaction

1. Psychologists should be advised on the security of transactions, including the choice of software for internet consultations, financial transactions and the sharing of psychological and personal information.
2. There should be maximum security on any internet site, telephone line or other medium, including the use of encrypted services.
3. There should be regular reviews and upgrading of levels of security.

5.2. Confidentiality

5.2.1 Recognition of limits

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

5.2.2 Maintenance of records

1. Associations should advise their members to maintain appropriate records (including backups) and that these be kept securely.
2. Psychologists should be aware when interacting electronically that registration and storage of information can be carried out by both parties.

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 practice at a distance.

Associations should advise their members to specify the following characteristics.

1. Whether services are provided in synchronous ('real time', e.g. online video consultations) or asynchronous (e.g. by e-mail).
2. That all services are under the supervision of a psychologist, whether by direct communication or by automated response.
3. Turnaround time e.g. by e-mail.
4. The country of location of the psychologist.
5. The implications, including potential disadvantages, of offering a service outside a national boundary.
6. Recommendations and/or arrangements for appropriate training on IT, security aspects, special handling and cautions and limits regarding new methods, such as virtual reality (VR) and artificial intelligence (AI) procedures and settings.
7. Requirements for psychologists ensuring sufficient CPD in new areas and recommendations on supervision and peer supervision/intervision.
8. The need to ensure suitable working environments and to protect against excessive screen time, both for the health of psychologists as for the quality of the services they are providing.
9. There are particular challenges for psychological assessment and for monitoring clients' progress. This is especially important, for risk assessment, especially where there are risks of self harm and suicide, and when working with children.
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.
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.
12. Member associations should consider supporting psychologists to be aware of relevant cross-national ethical issues and legal regulations when appropriate.
13. 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.
14. Psychologists should clearly separate private communication and accounts from professional communication in every aspect (accounts, computers or profiles, address book, storage and so on). They should never use public computers for their service.
15. Informed consent is needed for the storage and any recording of the service by the client or the psychologist.
16. Psychologists should consider the potential benefits of arranging face to face sessions at the beginning and on some occasions during the course of a series of non-direct contacts.

7. Appropriateness

7.1   Research evidence

There are a number of different media for practice at a distance. Research evidence is currently limited on the relative appropriateness and effectiveness of each medium relative either to other 'non-direct' or traditional 'face to face' methods.

1. Psychologists should develop their practice with caution where methods are new and consequently lacking a research basis.
2. Psychologists should be aware of the limitations of the reduced information available by such methods compared with direct face to face interaction.
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.
4. As with any advertising, psychologists should avoid exaggerated claims on the success of their service.

8. Further Considerations for Member Associations

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.
2. Associations should have their ethical codes and guidance available on the internet.
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.
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 and other matters.

This document was developed by a working group of the Board of Ethics and members of the Task Force on E-Health led by Fredi Lang (Germany).